

# Patient Participation Survey Report

Botesdale Health Centre

March 2012

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## Executive Summary

A Patient Reference Group (PRG) has been established at Botesdale Health Centre since 1982 and is known as The Friends of Botesdale Health Centre (see Appendix 1 for profile). This PRG comprises registered patients and is broadly representative. Members are nominated and elected annually by registered patients and live across the geographical area covered by the Health Centre. A wider PRG comprising 67 patients has been identified<sup>1</sup> and active measures have been taken to ensure that the PRG is representative.

On 19 September 2011 the PRG agreed with Botesdale Health Centre priority issues and a local patient survey<sup>2</sup>.

The local patient survey was completed by 202 out of 1609 (13%) patients attending Botesdale Health Centre between 26 September and 3 October 2011.

The responses were collated and analysed (see Appendix 2).

The findings of the survey were shared with the PRG on 7 November 2011, in the Friends Winter Newsletter distributed to all members and available in the Health Centre (Appendix 5) and on 5 March 2012 with patients attending the Annual General Meeting of the Friends of Botesdale Health Centre. At both meetings the results were discussed and improvements agreed (see minutes Appendix 3 and action plan).

The Local Patient Participation (LPP) report and progress updates are published on the Health Centre website at <http://www.botesdalehealthcentre.nhs.uk> and displayed in the Health Centre.

The Health Centre is open 8.00am – 6.30pm Monday to Friday and Saturday 8.00am to midday. Services are accessible 24 hours a day using the automated telephone system and Health Centre Website.

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<sup>1</sup> Patients in the wider PRG includes 11 carers, 8 with disabilities, 3 living in supported housing and one patient aged over 85 years see Appendix 1 for more information

<sup>2</sup> The short survey provided qualitative data; see Appendix 2 for the survey questions and Appendix 1 for the analysis

## Patient Reference Group (PRG)

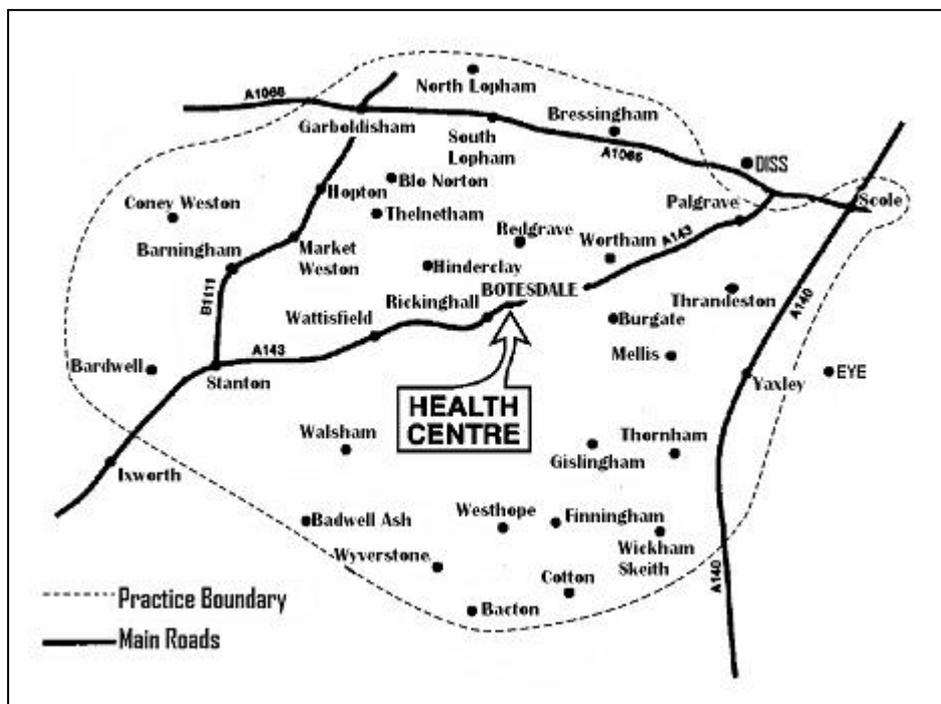
The PRG profile is broadly representative of the patient population and has been established as a group known as The Friends of Botesdale Health Centre since 1982. There are approximately 100 members. The annually elected committee form the main PRG. The constitution is available in appendix 3. An endeavour has been taken to broaden the participation in this main PRG but this has been met with reluctance on the part of patients to commit the time to attend quarterly meetings.

Carers and patients living in supported housing are represented in the wider PRG and many are members of The Friends of Botesdale Health Centre.

Demographic information of the 67 patients willing to participate in the wider PRG

- 11 carers
- 8 disabled
- 3 supported
- 1 over 85

The patients live across the Health Centre practice area:



B

Botesdale  
Walsham-le-Willows  
Gislingham  
Wortham  
Roydon  
Blo Norton  
Hinderclay  
Stuston  
Finningham  
Scole  
Little Green  
North Lopham

Rickinghall  
Palgrave  
Burgate  
South Lopham  
Gislingham  
Wattisfield  
Mellis  
Thelnetham  
Redgrave  
Hepworth  
Long Green  
Stuston

All patients can join The Friends of Botesdale Health Centre and all patients can attend the Annual General Meeting held in March whether they are members or not. A total of 23 people attended the latest AGM on 5 March 2012. The survey results were the main topic for the evening and all attendees received a written summary of the survey findings (appendix 4).

#### Identification of priority issues for the survey

Priority issues for the Health Centre were discussed in detail at the Friends' Committee Meeting on 19 September 2011.

A discussion was held about the range of services the Health Centre currently offers and perceived areas of importance and priority for patients which the Health Centre are keen to address. It was agreed that the collection of qualitative data was important in order to fully capture patients' views and needs.

The Health Centre wanted patients' views on the range of services currently offered and the services they would like available as well as general areas of concern and improvement.

The objectives were to:

- Identify patients from a cross section of the community (and in particular from under represented groups) willing to give feedback to the Health Centre on a regular basis (the wider PRG)
- Identify additional services patients would like offered at the Health Centre
- Identify aspects of the Health Centre provision which patients like
- Identify aspects of the Health Centre provision which patients dislike

Two members agreed to compile a survey questionnaire; the questionnaire was approved by Committee members and the Health Centre and distributed

to patients attending the Health Centre between 26 September and 3 October 2011.

### Survey methodology

The administration of the survey was managed by the PRG. Copies of the questionnaire were printed and distributed to 202 out of 1609 (13%) patients attending Botesdale Health Centre between 26 September and 3 October 2011. Care was taken to ensure that the sample was representative and patients attending in the morning, afternoon and early evening completed the survey.

The survey was completed alongside the CFEP Improving Practice Questionnaire.

Further patients' views were collected at the Friends of Botesdale Health Centre Annual General Meeting (AGM) held on 5 March 2012. The AGM was also used as an opportunity to discuss the survey results with patients

### Action Plan

Area for improvement	Specific Action	Expected Outcome	Key Milestones	Person responsible	Timescale	Monitoring arrangements
<b>Improve waiting time satisfaction rate</b>	Inform patients of current delays and expected waiting times	Waiting time satisfaction rate increased by 10%	Process to identify delays of over 15 minutes Procedure to notify patients established (use of Jayex, TV screen, check in screen, receptionist)	AY/KB	15/09/12	Annual Patient Survey On-going patient feedback
<b>Improve the availability of refreshments for patients</b>	Relocate water dispenser and cups to waiting area	Patients' request for refreshments met	Location for water dispenser and waste receptacle identified Process for monitoring water and cup availability established	AY/KB	31/03/12	Annual Patient Survey On-going patient feedback
<b>Improve the satisfaction rate for seeing GP of choice</b>	Publish GP profiles and attendance pattern on website, in local newsletters and in Health Centre	Patients have greater understanding of GP profiles and availability. Improved patient satisfaction rates for seeing GP of choice	Content of profiles agreed Profiles developed and published Procedure for updating profiles established	AY/KB	30/04/12 31/05/12 31/05/12	Annual Patient Survey On-going patient feedback
<b>Improve patient awareness of services and</b>	Publish concise accessible information on services	Patients have a greater awareness and understanding of the services	Information on services and health topics collated Publication media	AY/KB	30/04/12 30/04/12	Annual Patient Survey On-going patient feedback

<b>facilities at Botesdale Health Centre</b>	available to patients	available at Botesdale Health Centre Increased use of services at Botesdale Health Centre	discussed and most appropriate methods agreed Information produced and procedure agreed for regular updating	31/05/12	
<b>Improve patient awareness of Pharmacy contact details and opening times</b>	Promote Pharmacy telephone number and opening times by printing details on repeat prescription request slips	Improved patient satisfaction rates Increased patient understanding	Feasibility for telephone number printed on repeat prescription request slips assessed Amendment made Other media investigated to promote awareness of opening times and contact details Information published	31/03/12  30/04/12 30/04/12	AY/KB/PM   Annual Patient Survey On-going patient feedback

The patient survey also revealed that patients would like more parking spaces available. Patient parking spaces are available including 2 spaces for disabled patients outside the main entrance with additional spaces accessed from The Drift. Free roadside parking is readily available in the immediate area. Health Centre staff have been reminded not to park in the patient parking area.

### Health Centre opening hours and access

The Health Centre is open as follows:

Monday to Friday (excluding bank and public holidays) 8.00am – 6.30 pm  
The Health Centre does not close for lunch.

Access to obtaining services can be made during opening hours in person, and over the telephone. Access to obtaining services outside opening hours can be made using the automated telephone service and through the Health Centre Website.

Botesdale Health Centre has entered into arrangements under an extended hours scheme. Registered patients have access to healthcare professionals (who attend on a rotational basis) on Saturdays from 8.00am to 12.00 mid day.

### Pharmacy Opening Hours and access

The Pharmacy is open as follows:

Monday to Friday 8.30am -1.00pm and 2.00pm – 6.30pm and Saturday 8.00am to 12.00 mid day.

## Appendix 1

### **Patient Survey Analysis**

202 out of 1609 (13%) patients attending Botesdale Health Centre between 26 September and 3 October 2011 completed a short survey.

The aim of the survey was to collect some additional information from patients during the 'Improving Practice Survey' (provided by CFEP UK Surveys) which was carried out at the same time.

The objectives were to:

- Identify patients from a cross section of the community (and in particular from under represented groups) willing to give feedback to the Health Centre on a regular basis
- Identify additional services patients would like offered at the Health Centre
- Identify aspects of the Health Centre provision which patients like
- Identify aspects of the Health Centre provision which patients dislike

Demographic information of patients completing the survey:

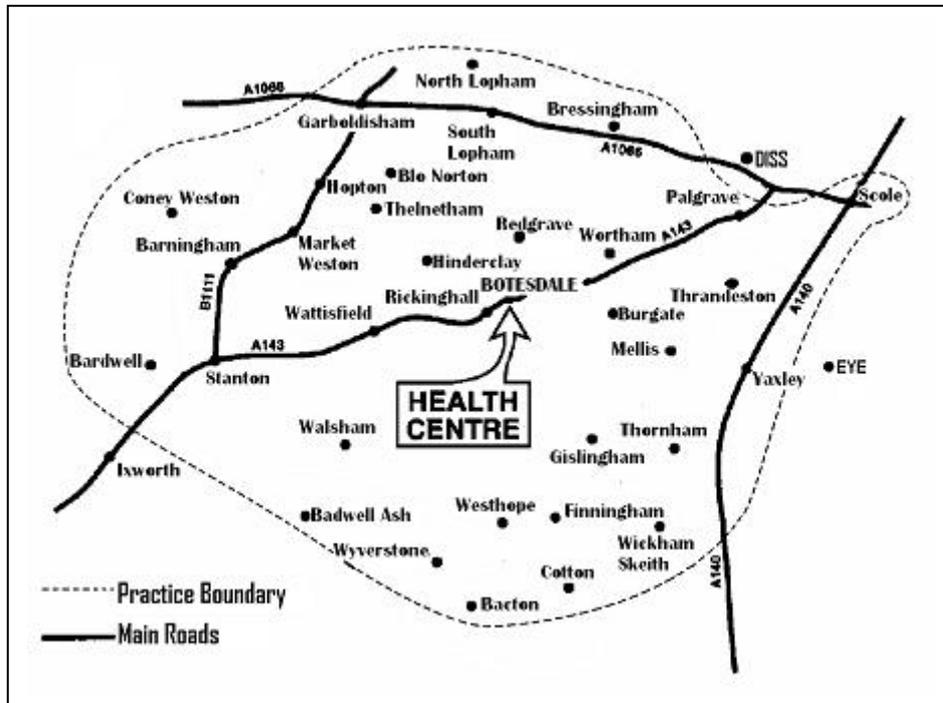
- 26 respondents are carers
- 14 respondents consider themselves disabled
- 3 respondents live in supported/sheltered accommodation
- 2 respondents are aged over 85
- 0 respondents are registered drug users
- 67 respondents are willing to give feedback to the Health Centre on a regular basis

Demographic information of patients willing to give feedback on a regular basis:

- 11 carers
- 8 disabled
- 3 supported
- 1 over 85

The inclusion of all 67 patients in future requests for feedback will give a good representative sample of patients compared to the local demographics.

The 67 respondents who gave their home address live across the Health Centre practice area:



- |                    |              |
|--------------------|--------------|
| Botesdale          | Rickinghall  |
| Walsham-le-Willows | Palgrave     |
| Gislingham         | Burgate      |
| Wortham            | South Lopham |
| Roydon             | Gislingham   |
| Blo Norton         | Wattisfield  |
| Hinderclay         | Mellis       |
| Stuston            | Thelnetham   |
| Finningham         | Redgrave     |
| Scale              | Hepworth     |
| Little Green       | Long Green   |
| North Lopham       | Stuston      |

A total of 24 suggestions were made for extra services to be offered at the Health Centre. The top seven are shown here; the remaining 17 suggestions had one response each.

Top seven extra services suggestions

Topic	Number of responses	Percentage of all respondents
Physiotherapy	6	3%
Eye clinic	4	2%
Hearing clinic/hearing aid adjustment	4	2%
A & E/walk in clinic for minor injuries	3	1.5%
Any treatments to save trip to hospital	2	1%
More out patient clinics	2	1%
More x-ray/scan sessions	2	1%

Top ten “likes”

Topic	Number of responses	Percentage of all respondents
Friendliness	63	31%
Good doctors and nurses	24	12%
Convenient location	18	9%
Helpfulness	12	6%
Good service	12	6%
Efficiency	11	5%
Range of services	9	4%
Caring staff	9	4%
Pharmacy	8	4%
Availability of short notice appointments	7	3%

Top ten “dislikes”

Topic	Number of responses	Percentage of all respondents
Waiting time (length of time to wait after appointment time)	32	16%
Parking (includes narrow spaces/insufficient spaces/car park entrance)	31	15%
Cannot see regular GP easily	10	5%
Seating arrangement in waiting area	6	3%
Out of hours service not doctors from Health Centre	5	2%
Some abrupt reception staff	4	2%
Automated phone system	4	2%
Cannot get through on phone 8.30am - 9.00am	4	2%
No water available in waiting room	3	1%
Limited hours for requesting repeat prescriptions over phone	3	1%

Appendix 2

Botesdale Health Centre Additional Patient Survey Questions

Please answer the following questions:

1. As you know, in recent years the practice has added ultrasound, x-ray and a pharmacy to the services available to patients. Are there additional services you would like to see added to speed up treatment or avoid visits to local hospitals?

2. What is the thing that you like best about Botesdale Health Centre?

3. What is the thing that you like least about Botesdale Health Centre?

In order that we can better meet everyone's needs we are keen to ensure that we obtain feedback from a representative sample of patients registered at Botesdale Health Centre. Currently the views from some patient groups are under represented.

Please read through the following questions and tick the box/es that apply to you:

- I have caring responsibilities at home
- I am disabled   
(please state nature of disability) \_\_\_\_\_
- I live in supported/sheltered accommodation
- I am over 85 years of age
- I am a registered drug user
- None of the above applies to me

If you would like to be consulted regularly (likely to be no more than four times a year) to give your feedback, please tick this box  and provide your contact details and preferred method of contact below:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Telephone (land line) \_\_\_\_\_ Telephone (mobile) \_\_\_\_\_

Please contact me by:

- Letter  Land line telephone
- Email  Mobile telephone

THE FRIENDS OF THE BOTESDALE HEALTH CENTRE

**Constitution** adopted at general meeting 15<sup>th</sup> September 1982

1. The name of the Association is "The Friends of the Botesdale Health Centre" (hereinafter called "The Society")
2. The Society is established for the relief of sickness of patients attending the Botesdale Health Centre in the County of Suffolk by the provision of equipment and other amenities and generally to support the charitable work of the said Centre

In furtherance of the said objects, but not otherwise, the Society may:-

- (a) Raise funds and invite and receive contributions from any person or persons whatsoever by way of loan, subscription, donation or otherwise, providing the Society shall not indulge in any permanent trading activities in raising funds for its primary objective.
- (b) Co-operate and collaborate with voluntary bodies and statutory authorities operating in a similar charitable field and exchange information and advice
- (c) Invest the monies of the society not immediately required for the said objects in or upon such investments, securities or property as may be thought fit, subject nevertheless to such conditions (if any) as may be imposed or required by law
- (d) Do all such other lawful things as are necessary for the attainment of the said objects

3. Membership of the Society shall be open to all patients of the Health Centre and their families, and to all staff working in or for the Health Centre, and to all others interested in furthering the work of the Society. Members are those eligible for membership who have paid the annual subscription of £10, £5 or £1 at their choice. Notwithstanding the foregoing the Committee may admit to membership persons who, at the time in question, have paid a lesser amount, provided that payment of the lesser amount is regularly maintained.

4. There shall be an executive Committee consisting of a Chairperson, Secretary, Treasurer, a representative of the doctors using the Health Centre, a representative of the relevant health authority and at least three, and not more than six, other members. Except for the two representatives, the members of the Committee shall be elected annually by the Annual General Meeting. Members of the Committee may stand for re-election and will be honorary.

The Committee shall administer the provisions of the Society's Constitution and, between Annual General Meetings, shall manage the Society's affairs.

(4 continued)

The Committee may elect a replacement for a Committee Member retiring during the year and any such replacement shall hold office until the following Annual General Meeting. Committee Members may only be elected from members of the Society. Other members of the Society may be co-opted by the Committee as required. The Committee may delegate responsibility to co-opted members or to other members of the Society, but all acts and proceedings shall be reported back to the Committee as soon as possible.

The Committee will meet as often as it deems necessary to manage the affairs of the Society. At such meetings a quorum will be four.

The proceedings of the Committee shall not be invalidated by any failure to elect or any defect in the election, appointment, co-option or qualification of any member.

Minutes shall be kept by the Committee and the Secretary shall enter therein a record of all proceedings and resolutions.

The Committee shall have power to adopt and issue standing orders for the Society. Such standing orders must be consistent with the provisions of the Constitution.

5. The Annual General Meeting of the Society shall be held in each calendar year at a date no later than fifteen months after the previous Annual General Meeting. The Committee may call an Extraordinary General Meeting at any time and must do so if requested in writing by not less than six members of the Society.

General Meetings shall be chaired by the Chairperson of the Committee or in his/her absence by a Committee Member. Twenty one and fourteen days notice shall be given for an Annual and Extraordinary General Meeting respectively.

At all general meetings members of the Society shall each have one vote. The Chairperson shall have a casting vote and his/her decision shall be final. A quorum at general meetings shall be twelve. Failure to achieve a quorum by 30 minutes after the due commencement time shall result in a further meeting being called with fourteen days notice. At this further meeting business essential to the further functioning of the Society may be dealt with whether or not a quorum is present.

6. Audited statements of accounts shall be prepared and presented at Annual General Meetings.

A bank account shall be opened in the name of the Society and cheques drawn on behalf of the Society shall be signed by any two of : Chairperson, Treasurer, Secretary

All monies raised by or on behalf of the Society shall be applied to further the objects of the Society and for no other purpose, provided that this does not preclude the payment in good faith of reasonable out-of-pocket expenses.

7. No action or decision of the Committee or of any meeting of the Society shall be invalidated by reason only of any irregularity or neglect in any service of notices or in any matter or matters of procedure, unless in the opinion of the Committee such irregularity or neglect has resulted in a situation which is unjust.

8. The Committee shall appoint (and may pay proper remuneration to) Auditors.

9. The Society may by a majority of not less than two thirds of the members present at an Annual or Extraordinary General Meeting alter this constitution, provided that notice of intention to propose such alteration and details thereof are served upon each member with the notice required to be given by Clause 5 hereof, and provided also that no alteration shall be made which would have the effect of causing the Society to cease to be a charity at law.

10. If the Committee by a simple majority decides at any time that it is necessary or advisable to dissolve the Society, it shall call a meeting of all members of the Society, giving not less than twenty one days notice (stating the terms of the Resolution to be proposed). If such decision shall be confirmed by a two-thirds majority of those present and voting the Committee shall have power to dispose of any assets held by or on behalf of the Society. Any assets remaining after the satisfaction of any proper debts and liabilities shall be given or transferred to such other charitable institution or institutions having objects similar to the objects of the Society as the Committee may determine.

11. If a member has given to the Secretary an address within the British Isles for the giving of notices to him (and not otherwise) he shall be entitled to receive notices of all meetings of the Society. The notice may be given by the Society to any member either by delivering it by hand to him or to his said address or by sending it by post to such address. Where a notice is sent by post service of the notice shall be deemed to be effected by properly addressing, prepaying and posting the letter containing the notice, and to have been effected, in the case of a notice of a meeting, at the expiry of seventy two hours after the letter containing the notice is posted, and in any other case at the time at which the letter would be delivered in the ordinary course of post.

Appendix 4

**Botesdale Health Centre - Improving Practice**

Background

Patients completed two surveys in September/October 2011; the CFEP Improving Practice Questionnaire the results of which are benchmarked against other practices of similar size and the Botesdale Health Centre questionnaire. The Botesdale Health Centre survey asked questions about the services provided and additional services patients would like to see and provided some useful quantitative and qualitative data.

When compared to the other 390 practices surveyed by CFEP, Botesdale Health Centre's overall score was 1% above the national average. The table below shows the comparison results:

High scoring	Average scoring	Low scoring
Opening hours	Phone accessibility	See practitioner of choice
Seen within 48 hrs	Appointment satisfaction	Waiting time
Speak with practitioner on phone	Waiting room	Reminder systems
Time for visit	Reception staff	Self care recommendations
	Respect	Explanations
	Information services	
	Illness prevention	
	2 <sup>nd</sup> opinion/comp. therapy	
	Reassurance	
	Warmth of welcome	
	Practitioner concern	

Botesdale Health Centre did not take part in the CFEP surveys in 2009 and 2010 but did take part in 2006, 2007 and 2008. The satisfaction rate results from the survey in 2011 compared with 2008 show:

Improvement	Remained same	Decline
Opening hours	Appointment satisfaction	See practitioner of choice
Telephone access	Speak to practitioner on phone	Comfort of waiting room
Explanations	Satisfaction with visit	Waiting time
Reassurance	Ability to listen	Warmth of greeting
Confidence in ability	Consideration	Reception staff
Express concerns/fears	Concern for patient	
Respect shown	Recommendation	
Time for visit	Information of services	
Complaint handling	Illness prevention	
Second opinion	Reminder systems	
Overall score		
See practitioner within 48 hrs		

The most significant improvements were in the time for visit and opening hours satisfaction which both increased by 8 percentage points. The most significant decline was in the “see practitioner of choice” which declined by 6 percentage points.

### **Botesdale Health Centre Internal Survey**

202 out of 1609 (13%) patients attending Botesdale Health Centre between 26th September and 3rd October 2011 completed a short survey.

The aim of the survey was to collect some additional information from patients during the ‘Improving Practice Survey’ (provided by CFEP UK Surveys) which was carried out at the same time.

The objectives were to:

- Identify patients from a cross section of the community (and in particular from under represented groups) willing to give feedback to the Health Centre on a regular basis

- Identify additional services patients would like offered at the Health Centre

- Identify aspects of the Health Centre provision which patients like

- Identify aspects of the Health Centre provision which patients dislike

Demographic information of patients completing the survey:

- 26 respondents are carers

- 14 respondents consider themselves disabled

- 3 respondents live in supported/sheltered accommodation

- 2 respondents are aged over 85

- 0 respondents are registered drug users

- 67 respondents are willing to give feedback to the Health Centre on a regular basis

A total of 24 suggestions were made for extra services to be offered at the Health Centre. The top seven are shown here; the remaining 17 suggestions had one response each.

### Top seven extra services suggestions

<b>Topic</b>	<b>Number of responses</b>	<b>Percentage of all respondents</b>
Physiotherapy	6	3%
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More out patient clinics	2	1%
More x-ray/scan sessions	2	1%

### Top ten "likes"

<b>Topic</b>	<b>Number of responses</b>	<b>Percentage of all respondents</b>
Friendliness	63	31%
Good doctors and nurses	24	12%
Convenient location	18	9%
Helpfulness	12	6%
Good service	12	6%
Efficiency	11	5%
Range of services	9	4%
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Pharmacy	8	4%
Availability of short notice appointments	7	3%

Top ten “dislikes”

<b>Topic</b>	<b>Number of responses</b>	<b>Percentage of all respondents</b>
Waiting time (length of time to wait after appointment time)	32	16%
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Some abrupt reception staff	4	2%
Automated phone system	4	2%
Cannot get through on phone 8.30am - 9.00am	4	2%
No water available in waiting room	3	1%
Limited hours for requesting repeat prescriptions over phone	3	1%

## Appendix 6



### The Friends of Botesdale Health Centre – Reg Charity 285606

#### Minutes of the Annual General Meeting on Monday 5<sup>th</sup> March 2012 at The Health Centre, Botesdale

Present: Mrs P Button (Chairman)  
Mrs Jo Meekings (Treasurer), Mrs K Gunn, Mr T Quinn,  
Mrs J Tate  
Dr T Cooke, Dr L Fennelow, Dr D MacEachern, Dr A Yager,  
Mr K Bernard  
13 Members

Apologies: Miss M Aslett, Mrs P Cornell, Mrs C Fitt (Committee) Dr L Bate

Mrs Button welcomed everyone to the meeting.

1. Minutes of the Annual General Meeting held on Monday 21<sup>st</sup> March 2012  
The Minutes were read and approved unanimously on a proposal by Mrs J Sharp, seconded by Dr Yager.
2. Report by the Committee for the Year 2011  
The Report was approved unanimously on a proposal by Dr Cooke, seconded by Mrs J Tate.
3. Treasurers Report and Accounts for the Year 2011  
Mrs Meekings presented the audited accounts as an accurate record of the financial position of the Friends. The income was £18,391.67, expenditure £20,440.59 and a final balance at 31<sup>st</sup> December 2011 of £44,577.96.

The Accounts were approved on a proposal by Mr K Bryant and seconded by Dr Cooke.

4. Election of Officers and Committee

The nomination of Mrs Button as chairperson was proposed by Mr T Quinn and seconded by Dr Yager. The nomination of Mrs Fitt for the post of Secretary was proposed by Dr Cooke and seconded by Dr Yager. Mrs Meekings was nominated as Treasurer by Dr Yager and seconded by Dr Donald MacEachern.

Dr Cooke proposed that the Committee Members be re-elected en bloc as listed below:

Committee Member	Miss M Aslett
Committee Member	Mrs P Cornell
Committee Member	Mrs B Green (new)
Committee Member	Mrs K Gunn
Committee Member	Mr T Quinn
Committee Member	Mrs J Tate
GP Representative	Dr A Yager

The proposal was seconded by Mr J Haldane and unanimously agreed.

The Chairman thanked those present for coming out on such a wet and windy evening.

The official AGM closed at 7.50 pm.

Subsequent to the above, one of the members, Mr Neil Lanham spoke briefly about the DVD he had produced relating to Mr Arthur Bryant and the history of Rickinghall/Botesdale since the 1930s. He felt it was important that recordings like this were important for future generations. The DVDs had been sold at the Health Centre, Post Office, Farmers' markets and other venues and he was pleased to be able to present the Friends with a magnificent cheque for £1280. Mrs Button thanked him on behalf of the Health Centre and Friends and assured him that the money would be put to good use.

Copies of a report on patient surveys were distributed to everyone and Mr T Quinn reviewed the highlights. Although Botesdale Health Centre had a 1% advantage over the average, a comparison with a 2008 survey showed improvements in 12 criteria, 10 unchanged and a decline in 5.

The main problems (waiting time, ability to see clinician of choice and car parking) were then discussed and members were assured that all these were under constant review for possible solutions. Another topic discussed was the continual change in medication provided to patients by the Pharmacy – a result of keeping within budget and 'stockpiling' by some manufacturers in order to keep the prices high.

There were some practical suggestions which were noted by Dr Yager for future discussion.

The meeting closed at 8.40 pm.