





# **GP Patient Survey –**

2 July 2015

**Ipsos MORI** 



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Introduction

### **1** Introduction

This technical annex provides details of the 2014-2015 GP Patient Survey (GPPS) conducted by Ipsos MORI. The survey was conducted on behalf of NHS England.

This is the ninth year that the GPPS has been conducted in England. Since 2011 the survey has been undertaken twice a year, having previously been conducted on a quarterly basis (April 2009 - March 2011) and annually (January 2007 - March 2009).

The survey uses a quantitative postal methodology with questionnaires sent to around 2.6 million patients across two waves, from July to September and January to March. In July 2014, around 1.32 million adult patients registered with a GP in England were sent a questionnaire, with reminder mailings to non-responders sent in August and September. In January 2015, a further 1.32 million adult patients were sent the questionnaire, with reminders again sent in the two months following the initial mailing.

A purple-coloured questionnaire was sent out in the July-September 2014 wave and a blue questionnaire was sent in the January-March 2015 wave in order to easily distinguish between the two unique sets of patients invited to take part.

Published results for GPPS are based on aggregated data collected across two separate waves of fieldwork. Table 1.1 outlines the timings for the mailings within 2014-2015, along with the dates when results were first published using responses from these specific fieldwork periods.

#### Table 1.1 – Survey mailout and publication dates

	Wave 1	Wave 2
Initial survey sent	1 July 2014	5 January 2015
First reminder sent	4 August 2014	2 February 2015
Second reminder sent	1 September 2014	2 March 2015
Colour	Purple	Blue
First results published	8 January 2015 (based on Jan-Mar 2014 and Jul-Sep 2014 fieldwork combined)	2 July 2015 (based on Jul-Sep 2014 and Jan-Mar 2015 fieldwork combined)

The questions were the same in both waves and asked patients about when they last saw a GP or nurse at their practice, how easy or difficult it is to make an appointment at their surgery, waiting times, satisfaction with Number of patients who were sent the survey over the last year.

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opening hours, the quality of care received from their GP and practice nurses, out-of-hours care, and NHS dentistry; as well as their current health circumstances. This year of the questionnaire also included questions about patients' awareness and use of online services at their GP practice such as booking appointments and ordering repeat prescriptions online.

Experiments to test alternative mailing strategies were conducted in the January-March 2015 fieldwork. More details can be found in the Appendix. Please also see the Appendix for copies of the questionnaires sent in 2014-15.

#### **1.1 Survey Governance**

Since February 2014, the governance of the survey has involved input from a steering group, meeting regularly to provide a forum in which stakeholders of the GPPS could be kept informed of the progress of the survey. The group provide advice to the research team and debate key issues such as questionnaire content, inclusion of practices, analysis and reporting; review the findings of the survey as they emerge; consider the need for any further research and analysis to be undertaken; and raise any questions about the GPPS project with Ipsos MORI and NHS England.

The group consists of representatives from a range of stakeholders, including the following:

- NHS England
- Ipsos MORI
- Care Quality Commission
- Healthwatch England
- National Association for Patient Participation
- General Practitioners Committee
- British Medical Association
- Community, Primary & Integrated Care, Nursing Directorate
- Patient Representative to the Quality Board
- Royal College of General Practitioner's Patient Partnership Group
- Department of Health

The technical details of the survey are presented in this volume, with all survey documentation provided in the Appendix.

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## Questionnaire design

### 2 Questionnaire design

### 2.1 Questionnaire development for the 2014-2015 survey

For the most part, the questionnaire in 2014-2015 remained the same as the one used for the 2013-2014 survey. Two new questions relating to online services offered by GP surgeries were added:

- Awareness of online services offered by GP surgery
- Use of online services at GP surgery in past 6 months

These new questions were developed purposively for inclusion in the GPPS; they were cognitively tested in a number of rounds, with interim feedback provided by Ipsos MORI to NHS England together with suggested revisions to the questions. A total of 17 cognitive interviews were conducted in May 2014 to test and develop these two questions. Where possible, the whole questionnaire was tested, however the primary focus of the cognitive interviews was on these new questions. Quotas were set to ensure that interviews were carried out with a range of patients with respect to gender, age, ethnicity, social grade, and GP surgery. A further quota ensured that at least two people had used online services at their GP practice in each round of testing.

#### 2.2 The final questionnaire

Below is a complete list of all the topics covered in the 2014-2015 questionnaire.

#### Accessing your GP Services

- When patients last saw a GP
- When patients last saw a nurse
- How easy patients find it to get through to someone at their surgery on the phone
- Helpfulness of receptionists
- How patients normally book an appointment
- Awareness of online services offered by GP surgery
- Use of online services at GP surgery in past 6 months
- Having and seeing a preferred GP

#### Making an appointment

- Last time patients wanted to see or speak to a GP or nurse from their GP surgery what did they want to do
- When they wanted to see or speak to the GP/ nurse
- Able to get an appointment to see or speak to someone
- What type of appointment they got
- Time between initially contacting the surgery and seeing and speaking to someone
- Convenience of the appointment they were able to get
- Reasons for not being able to get an appointment or the appointment offered wasn't convenient
- What they did on that occasion (if unable to get an appointment/appointment not convenient)
- Overall experience of making an appointment

#### Waiting times

- How long after their appointment time patients normally wait to be seen
- How patients feel about how long they normally have to wait to be seen

#### Last GP appointment

- How good was the GP at giving enough time, listening, explaining test results and treatments, involving the patient in decisions about their care, treating patients with care and concern
- Confidence and trust in GP

#### Last nurse appointment

- How good was the nurse at giving enough time, listening, explaining test results and treatments, involving the patient in decisions about their care, treating patients with care and concern
- Confidence and trust in nurse



Number of questions in the current survey.

#### **Opening hours**

- Satisfaction with opening hours
- Is the GP surgery open at times that are convenient to patients
- Opening at additional times

#### **Overall experience**

- How patients describe their overall experience of their GP surgery
- Recommending the GP surgery to someone who has just moved into the area

#### Managing your health

- Long-standing health condition
- Medical condition (if any)
- Enough support from local services or organisations to help manage long-term health condition(s)
- Confidence in managing own health

#### State of health today

- State of health today: mobility; self-care; usual activities; pain/ discomfort; anxiety/ depression
- Activities limited today because of recent illness (unwell) or injury

#### Planning your care

- Whether patients have a written care plan
- Whether they helped to put their written care plan together
- Using their written care plan to manage their health day-to-day
- Reviewing their written care plan with their GP or health professional

#### **Out-of-hours**

- Knowing how to contact out-of-hours services
- Whether contacted out-of-hours service in the last 6 months and past experience with the out of hours service including: ease of contacting, speed of care, confidence and trust in clinician; overall rating of care received by out-of-hours service

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#### **NHS Dentistry**

- When last tried to make an NHS dental appointment
- Whether or not the patient had visited the dental practice before
- Whether or not the patient was successful in getting an appointment
- Overall experience of NHS Dental services
- Reason for not making an appointment in last two years, if applicable

#### **Demographics**

- Gender, age, ethnicity
- Work status, journey time to work, seeing a GP during working hours
- Parent or legal guardian
- Deaf and sign language user
- Smoking habits
- Carer responsibilities
- Sexual orientation
- Religion

## Sampling

### **3** Sampling

#### 3.1 Sample overview

For GPPS 2014-2015, an issued sample size was set to try and ensure that questionnaires were sent out to around 1.32 million patients every six months. The sample has been designed to ensure that, as far as possible, these cases are distributed across practices such that the confidence intervals will be of the same magnitude for each practice for any one question – calculations have been based on the assumption that the estimate will be the same across all practices and based on a 50/50 question (a 'worst case' scenario in terms of the magnitude of the confidence interval, for example where 50% of respondents at Q28 answer "good"). This method ensures that confidence intervals are as consistent as possible between practices and that none have particularly wide intervals.

Patient samples are obtained for each practice using registration records held on the HSCIC (Health and Social Care Information Centre, formerly NHAIS) database. The data provided from HSCIC databases consists of patient name, address, NHS ID number, month/year of birth, and gender.

The sampling procedure is split into two distinct stages. Initially, HSCIC provides an anonymous list of patients for final sample size determination and individual patient selection. After the selected anonymous records are returned to HSCIC, a second file containing the contact details of the selected patients is provided.

Patients are eligible for inclusion in the survey if they have a valid NHS number, have been registered with a GP practice continuously for at least six months before being selected, and are 18 years of age or over.

An additional eligibility criterion was added in 2009-2010 and continues to be in place for the 2014-2015 survey; patients cannot receive more than one GPPS questionnaire in any 12 month period. This selection rule was put in place in order to minimise survey fatigue.

#### 3.1.1 HSCIC population extraction procedure

As in previous years, HSCIC provides a file of anonymous patient data for all eligible patients who reside in England or Wales and are registered with a practice in England. The file contains a unique reference number, practice code, patient gender, patient age band, and patient postcode.

This data is then analysed at practice level and a sample is drawn, as detailed below).

Patients who are eligible for GPPS...

#### Valid NHS number

Registered with GP practice for 6 months or more

Aged 18 and over

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#### 3.1.2 Practices included in the survey

The list of practices to be included was provided from the HSCIC system, and comprised all practices that had eligible patients as defined above. The list of potential practices was reviewed each wave with the following number taking part over the course of the year:

#### Table 3.1 – Number of practices with eligible patients per wave

	Number of practices with eligible patients
Wave 1	7,935
Wave 2	7,860

In total, patients in 7,928 different practices were sent questionnaires over the course of the year. At least one completed questionnaire was received from patients in 7,918 practices. A total of 7,850 practices were included in both waves of the survey.

#### 3.2 Sample size calculation

The sample size is determined for each practice to deliver a likely confidence interval of  $\pm 8.9$  percentage points (two-tailed, at the 95% level) in the majority of practices on a question where it is assumed that 50% of the respondents will respond one way and 50% will respond another. This confidence interval was determined iteratively to ensure a total annual issued sample size of c.2.64 million (1.32 million in wave 1, 1.32 million in wave 2). While this confidence interval can never be achieved in all practices, every effort is made to ensure that it is achieved in the majority of practices.

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A total of **7,850** practices were included in both waves of the survey.

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The sample design is relatively simple: a proportionately stratified, unclustered sample is drawn for each practice. There are, however, some complications around the calculation of the practice sample sizes required to deliver set confidence intervals. These complications arise because account has to be taken of:

- Practice population sizes as these are relatively small (accounted for through the finite population correction);
- 2 Newly eligible patients and those who were eligible for the last wave of the survey; and
- **3** The effect of the eligibility criterion introduced in 2009-2010 (patients cannot have received a GPPS questionnaire in the past 12 months).

These three factors affect sample size and therefore confidence intervals, and inform the calculations used.

The number of patients initially selected for inclusion (the 'issued sample') in the sample for each practice is, therefore, determined by the following components:

- The number of cases required in order to deliver 95% confidence intervals of ±8.9 on a 50/50 question; and
- The proportion of patients included in the issued sample who respond to the survey – taking into account both the number of sampled patients found to be ineligible for the survey (i.e. those who were sampled in the previous wave of the survey or are newly registered with the practice) and the number who are eligible but do not respond.

These components are combined to determine the issued sample size in each practice as follows:

Issued sample =  $\frac{\text{number required to deliver required confidence interval}}{\text{proportion of issued sample predicted to respond}}$ 

Both of the components involved in the above calculation need to be estimated for each practice. It is assumed that simple random sampling will be applied in each practice. On this basis, an estimate is arrived at for the number of responses required to deliver set confidence intervals around the estimate of a proportion.

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It should be noted that the required issued sample size depends upon:

- The number of eligible patients in the population practice size counts are used to give an estimate of the practice population and an estimate of the newly eligible / eligible patient split;
- **2** The proportion being estimated assuming a "worst case scenario" of 50% for the proportion to be estimated, that is, 50% of respondents answering a given question "yes"; and
- 3 The magnitude of the required confidence interval which is known to be ±8.9%.

The sample size required to deliver the target confidence interval is estimated using the actual response rate for those practices who took part in the 2013-2014 GPPS, and is set at 30% for practices new to the survey or to whom fewer than 100 surveys were issued in the 2013-2014 GPPS. This is to prevent unrealistically high or low response rates being used for new and very small practices.

#### 3.2.1 Adjustments to response rate estimates

To prevent issuing very large numbers of questionnaires in practices which had very low response rates in 2013-2014, a minimum response rate of 25.4% was assumed. This meant that no practice had more than 240 questionnaires issued in any given wave. The mean mailout size per practice was 168 in wave 1 and 171 in wave 2. In order to ensure that a reasonable number of questionnaires were sent to practices with very high response rates, on the other hand, a maximum assumed response rate of 46.3% was set.

#### 3.3 Patient sample selection

### 3.3.1 Splitting the selection between newly eligible and eligible patients

The new eligibility criterion introduced in 2009-2010 means patients are excluded if they have been selected in the previous 12 months. This is to reduce respondent fatigue and to prevent patients in small practices receiving a survey every wave. However, this suppression affects the probability of selection of new patients. For sampling purposes, eligible patients are then defined as those who were eligible for the survey in the previous wave and that are still eligible now. Newly eligible patients are those that are new to the practice; they have become eligible for the survey since the previous wave so are 'new' to the anonymous population.

Because the final issued sample must be drawn from patients who are not excluded, this gives a greater chance of selection to newly eligible patients. As an example:

Practice X has a population of 897 patients:

- 256 of them were registered last wave and 73 have already received a survey in the last 12 months so are not eligible for this wave. This leaves 183 eligible patients.
- 641 of them are newly eligible.
- This means that of the 897 registered patients at the practice, there are 824 patients to draw our sample from.

If randomly selecting patients from the total, they would be drawn in proportion to the total of 824. So, if we want 100 patients from this surgery to receive surveys:

- 22 of them would come from the list of eligible patients (because 183 eligible patients make up 22% of the total); and
- 78 of them would be newly eligible (because 641 makes up 78% of the total)

When selecting patients this way the resulting sample is representative of the population that is eligible for the survey, but not representative of the population of the practice when it comes to length of registration.

The actual method used takes this into account, and instead draws the sample from each group in proportion to their true presence in the practice. So, if we want 100 patients from this surgery to receive surveys:

- 29 of them would be eligible (256 is 29% of the total number of patients in the surgery 897); and
- 71 of them would be newly eligible (641 is 71% of the total number of patients in the surgery 897).

This means that in almost all cases the number of newly eligible patients selected is proportionate to the actual population. The exceptions are very small practices (pop < 10) where the eligible patients have already all (or nearly all) received a survey in the last 12 months and are, therefore, suppressed.

Within each practice, patients were sorted by gender then age band. The required number of patients is then selected on a '1 in n' basis and the unique reference numbers returned to HSCIC.

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#### 3.3.2 Personal Data Extraction

On receipt of the selected records, HSCIC then extracted the contact details for each of the sampled patients. The extracted file contained each patient's name, address, month and year of birth, gender, and NHS ID number.

#### 3.3.3 Sample Cleaning and Exclusions

A number of checks were made on the supplied names and addresses to remove inappropriate records. These checks included:

- Invalid NHS ID numbers
- Duplicates between practices (identified by NHS ID number). Where duplicates existed, both were removed as we could not confirm which practice they belong to
- Duplicates within practice
- Non-address details or other inappropriate information contained in address. These can include:
  - o Key safe numbers, telephone numbers and other numeric codes
  - Unexpected words or phrases in the name or address (including "unknown", "homeless", "deceased", "test", etc.)
  - o Incomplete addresses

All sampled patients from all practices were then randomly sorted before being allocated sequential reference numbers (to ensure there was no link between reference numbers and practices). A "mod-10" check digit was added to the end of the reference numbers to ensure processing integrity during data capture.

For the experiments conducted in the January-March 2015 fieldwork, sampled patients were randomly assigned to either the main sample or one of the experiment groups. More details on this can be found in the Appendix.

#### 3.3.4 Total number of questionnaires sent per wave

Table 3.2 shows the final number of patients to whom questionnaires were sent after all sample cleaning had been finished.

#### Table 3.2 – Number of questionnaires sent per wave

	Number sent
Wave 1	1,319,045
Wave 2	1,320,972
Total	2,640,017

# Communications with patients and practices

### 4 Communications with patients and practices

In order to raise the profile of GPPS and provide patients and practices with information about the survey, a series of communication activities are undertaken, such as hosting a survey website, and providing a survey helpline to respond to frequently asked questions. These are described in more detail below.

#### 4.1 Information for display in GP practices

A poster is made available for GP practices to display in their surgeries in English and 13 other languages. Copies of the poster are available on the GPPS website for download and printing. A version for electronic notice boards is also available for download.

#### 4.2 2014-2015 survey website

A dedicated survey website is maintained and hosted by Ipsos MORI. The advertised web address is <u>www.gp-patient.co.uk</u>, although the site can also be accessed at www.gp-patient.com. The 2014-2015 site was designed to reflect the branding of the questionnaire and all other related material (see Figure 4.1 for the website home page).

#### Figure 4.1 – The www.gp-patient.co.uk homepage



13

Other languages the survey is translated into (in addition to English)

The 2014-2015 website was updated on the first day of each wave of fieldwork, as the first questionnaires are delivered to patients, and was arranged around the following headings.

- About, covering the aims of the survey, ways to take part and information about accessibility. Also included within this is a link to videos that welcome British Sign Language (BSL) users to the website, explain the survey, and provide responses to a selection of FAQs. The page also linked to an online BSL version of the questionnaire;
- Received a survey in the post? providing information about the online version and links to complete it in either English, BSL or another language. Also provided is a link to previous survey results;
- Frequently Asked Questions (FAQs), including information about how patients are selected, help with completing the survey, and data protection;
- Languages, providing information in the 13 languages. These are Arabic, Bengali, Czech, French, Gujarati, Mandarin, Polish, Portuguese, Punjabi, Slovak, Somali, Turkish and Urdu. The FAQs, questionnaire, and covering letter are all translated into these languages in order to make the survey as widely accessible as possible;
- Promote the survey, a page that contains the poster in English and in 13 other languages;
- Compare a practice, takes users to the practice report tool, which allows users to view practice results and compare them to results of other practices;
- Analysis tool, a link which sends the user through to the analysis tool website which allows them to interrogate the GPPS data further;
- Surveys and reports, an archive of all previous datasets, reports, questionnaires and letters which were sent out;
- For GP staff, a page that contains information for GPs about the benefits of the survey;
- Why use the survey data? providing information about the GP Patient Survey, what information can be found in the survey results, and how the GP Patient Survey site can help the user. It also includes a GP Handbook developed by academic partners giving practices advice on how to use their survey results to improve patient care; and

• Contact Us, telephone and email details for the GPPS team at Ipsos MORI.

#### 4.3 Helplines

Ipsos MORI set up freephone helplines for patients who wanted more information about the survey. Separate numbers are set up for the English and foreign language helplines. In total, over 6,000 calls were handled by the helplines over the course of the year.

#### 4.3.1 English language telephone helpline

The English helpline was staffed by a fully trained Ipsos MORI team between 9am and 9pm on weekdays and 10am to 5pm on Saturdays from 2 July to 29 September 2014 and 6 January to 30 March 2015. A voicemail system is used during quieter periods (see details below). In order for call handlers to answer patients' queries, they are provided with a manual containing a complete list of over 200 FAQs. These are updated regularly to ensure that an answer could be provided for any questions which were not originally included. Where the call handlers cannot answer a caller's query, the details are passed on to the GPPS research team, a member of which then responds to the query.

During quieter periods (generally 10 days after each mailing), a voicemail message briefly explains the purpose of the survey and asks the caller to leave a message and telephone number if they wish to be called back. Interviewers then try to return the calls within two working days. Up to eight attempts are made to return the call.

As well as being a source of information for patients, the helpline also enables patients with valid reference numbers to complete the survey on the telephone.

Patients can also opt out of the survey by providing their reference number to helpline staff or in a voicemail message.

#### 4.3.2 Foreign language telephone helpline

In order to make the survey as accessible as possible, there are separate helplines for each of the 13 foreign languages. Each language has its own freephone number which is connected to a voicemail message in the different languages. As with the English language voicemail, a message briefly explains the purpose of the survey and asks the caller to leave a message and telephone number if they wish to be called back. Interviewers in Ipsos MORI's International CATI Centre then return the calls within two working days. Up to eight attempts are made to return the call. As with the English language helpline, patients are able to complete the survey over the phone or opt out of taking part.





Calls to the GPPS helpline over the year.

#### 4.3.3 Email helpline

As well as using the telephone helpline, patients are also able to email the GPPS team at Ipsos MORI with any queries about completing the survey or accessing the survey online. In total, approximately 600 email queries were received across both waves of the 2014-2015 survey.

**Data collection** 

### **5** Data collection

The GP Patient Survey is predominantly a postal survey. However, patients also have the opportunity to complete the survey online or by telephone. These options are discussed in greater detail below.

#### 5.1 Postal survey

#### 5.1.1 Processing the sample

Each wave, the sample was delivered in person, encrypted, on DVD to the printing house where it was cleaned using the Postcode Address File (PAF). This process ensures that the questionnaires are sent to the correct postal address and that the mailing is eligible for postage discounts. A downstream access provider was used for processing the questionnaire packs, with items then handed over to Royal Mail for 'final mile' delivery.

#### 5.1.2 Printing

All questionnaires, letterhead, C5 Business Return envelopes, and C5 outer envelopes were printed in advance of the survey. Once the sample was made available, the questionnaires were then personalised with a unique reference number and online password. The letters were also personalised with name, address, and the same unique reference number as appears on the questionnaire.

A single questionnaire, letter, and Business Return envelope were then packed into an outer envelope by machine, and sorted into Walksort batches, ready for collection by the downstream access provider.

For the experiments conducted in the January-March 2015 fieldwork, different variants of the survey materials were sent to a random sub-sample of patients. More details on this can be found in the Appendix.

#### 5.1.3 Posting the questionnaires

Initial letters and questionnaires were sent to patients on the dates in Table 5.1, and then followed up with two reminder letters and additional copies of the questionnaire. These additional mailings were only sent to patients for whom no recorded response was received by the printing deadline. Copies of all letters can be found in the Appendix.

Patients who were not sent a reminder included:

- those who had returned their questionnaire to Ipsos MORI and it was processed before the deadline;
- those who had completed the questionnaire online;

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Patients can complete the survey by **post**, **online** or by **telephone**.

- those who had completed the survey via the helpline;
- those who had telephoned or emailed the helpline and opted out of the survey;
- those who replied via letter indicating they wished to opt out of the survey;
- those who had opted out via NHS England;
- those whose questionnaires were returned to sender; and
- those recorded as deceased on the HSCIC database.

#### Table 5.1 – Survey mailout dates by wave

	Wave 1	Wave 2
Initial mailing sent	1 July 2014	5 January 2015
1st reminder mailing sent	4 August 2014	2 February 2015
2nd reminder mailing sent	1 September 2014	2 March 2015

#### 5.2 Alternative methods of completion

Although patients were offered several methods of completion, only one response per patient was included in the final data.

#### 5.2.1 Online completion

Patients were offered the option to complete the survey online via the GPPS website in English, one of the 13 other languages offered, or in BSL. These different versions of the survey were accessible from different pages on the website. The online survey page of the website gave those invited to take part the opportunity to choose the language in which they wished to complete the survey (English, Arabic, Bengali, French, Czech, Gujarati, Mandarin, Polish, Portuguese, Punjabi, Slovak, Somali, Turkish or Urdu).

Likewise, there was also the option for patients who access a BSL version via the pages dedicated to supporting BSL users. This involved showing video clips of a BSL user signing the instructions, questions, and options available (see Figure 5.1).

Figure 5.1 – Viewing the questionnaire in BSL



Regardless of the language chosen, each patient in the sample was assigned a unique reference number and password (printed on the front page of the paper questionnaire) that would allow them to access the online versions of the questionnaire. In order to complete the survey online, patients were required to enter these details on a first login screen (see Figure 5.2 below).

#### Figure 5.2 – Login screen for online survey

HE	GP	PAT	ENT	SURVEY
Please pr the surve		eference and Pas	sword to partici	pate in
Reference				
Password				
	Your login deta	aile can be found on	the front name of th	
		e to see where to fin		

For all versions of the online survey, the questions were identical to those on the paper questionnaire in terms of wording and simple design.

#### Figure 5.3 – Question from the online survey



Only one online response per patient was accepted. If patients tried to complete it more than once online, a message appeared letting them know they had already completed the survey. If they failed to complete the survey in one sitting, their reference number and password returned them to where they had left off.

#### 5.2.2 Telephone completion

Patients were also able to complete the GPPS questionnaire on the telephone (including in the 13 foreign English languages) by calling the freephone helplines. Patients were asked for their reference number before they could complete the survey and there was an automatic check on the reference number to ensure that it was valid for the live survey. Helpline staff entered callers' answers to the survey questions directly into the online version of the survey.

#### 5.2.3 Braille and Large Print versions

Braille users were offered the opportunity to receive the questionnaire and letter in Braille, and large print was again made available for those who requested a copy of the letter and questionnaire in this format.

#### 5.2.4 Total number of online returns

Table 5.2 shows that the annual survey results include 34,613 survey questionnaires completed online.

#### Table 5.2 – Number of online completes per wave

	Number completed online
Wave 1	15,750
Wave 2	18,863
Total	34,613

Of these 34,613 online completes, Table 5.3 details how many patients completed the survey in each available foreign language and British Sign Language.

#### Table 5.3 – Completes per language

	Wave 1	Wave 2	Total
Arabic	10	22	32
Bengali	2	4	6
Czech	8	13	21
French	3	3	6
Gujarati	7	6	13
Mandarin	19	25	44
Polish	268	318	586
Portuguese	10	28	38
Punjabi	2	4	6
Slovak	14	21	35
Somali	2	2	4
Turkish	10	19	29
Urdu	6	6	12
Total	361	471	832
BSL	9	10	19

Data analysis

### 6 Data analysis

#### 6.1 Questionnaire processing

As in previous years, questionnaires were returned in supplied Business Reply Envelopes (2nd class) to the scanning house.

Envelopes were guillotined and questionnaires collated and prepared for scanning. Any other items of correspondence were set aside for review and response by Ipsos MORI or NHS England, as appropriate.

Questionnaires were scanned and processed using barcode recognition and Optical Mark Recognition technology, with operator verification of uncertain entries. All marks on the forms were recognised at this stage, regardless of whether they were in accordance with the questionnaire instructions.

Questionnaire data collected online were logically prevented from containing data contrary to the questionnaire instructions (such as multiple responses to a question requiring a single answer).

Questionnaires were accepted and included each wave if they were received by the following dates:

#### Table 6.1 – Cut off dates for returns

	Cut off for returns
Wave 1	9 October 2014
Wave 2	3 April 2015

#### 6.2 Inclusions and exclusions

The rules and protocols used for delivering the data for the 2014-2015 reports were as follows:

- All questionnaires received with identifiable reference numbers allowing linkage to GP practice, along with all completed online responses, were eligible for inclusion.
- Returned questionnaire figures were based only on those qualifying for inclusion in the dataset as described in this document.
- The calculated response rates were based on all completed questionnaires returned and all questionnaires sent. They have not

been adjusted to exclude questionnaires which never reached the patient, e.g. where envelopes have been returned undelivered etc.

The following were excluded from the reports:

- All questionnaires marked as completed by under-18s;
- All questionnaires where there is only data for a limited number of questions (e.g. only the first page was completed).
- All questionnaires where the barcode number was not in the valid range for the live wave of the survey.
- All questionnaires without a valid practice code.
- All blank questionnaires.

Questionnaire data were combined from scanned and online data sources. Where duplicates between mode of completion existed, the data used were selected according to the case that was the most complete (i.e. with the fewest amount of unanswered questions). If there was no difference in completeness, the data used were then selected according to a priority order with online data having precedence. Where duplicates existed within a completion mode, the earliest return was included.

#### 6.3 Editing the data

As the majority of the completed questionnaires were on paper, this means that there was a degree of completion error that occurred (e.g. ticking more than one box when only one response was required, answering a question not relevant to them, or missing questions out altogether). Therefore, it was necessary to undertake a certain amount of editing of the data to ensure the data was logical. For example:

- If a patient ticked more than one box where only one answer was required, then their reply for that question was excluded.
- Where patients were allowed to select more than one box for a particular question, the reply for that question was excluded if they selected two conflicting answers for example, at Q5 ('How do you normally book appointments to see a GP or nurse at your GP surgery?'), if a patient ticked any of the first four options as well as 'Doesn't apply', then their response for that question was excluded. The following list shows the questions this applied to, as well as the response options that were treated as single code only:
  - Q5 'Doesn't apply'
  - Q6 'None of these' and 'Don't know'

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- o Q7 'None of these'
- o Q27 'None of these'
- o Q31 'None of these conditions' and 'I would prefer not to say'
- There were also some questions for which patients were allowed to select more than one response option, although this was not specified on the questionnaire itself:
  - o Q10
  - o Q13
  - Q17 (except for 'Didn't see or speak to anyone' which was treated as a single code only)
  - Q41 (except for 'No', which was treated as a single code only)
- If all boxes were left blank the reply for that question was excluded.
- If a patient failed to tick the relevant answer for a filter question then any responses were excluded from the subsequent questions relating to the filter question. For example, if a patient responds to Q9 without having first responded 'Yes' at Q8, their response to Q9 is removed.
- For the question on whether they were able to get an appointment to see or speak to someone (Q12), any patients who selected 'Yes' and 'Yes, but I had to call back closer to or on the day I wanted the appointment' had their answer edited to just 'Yes, but I had to call back closer to or on the day I wanted the appointment'.
- For the question on whether they have a long-standing health condition (Q30), patients who initially answered other than 'Yes' had their answer recoded to 'Yes' if they went on to select any medical conditions at Q31.
- Where the ethnicity question (Q53) was multi-coded, patients were included in the 'White English / Welsh / Scottish / Northern Irish / British' group if this was selected alongside any other response. If someone selected more than one response under any of the ethnic groups ('Mixed / multiple ethnic groups', 'Asian / Asian British', 'Black / African / Caribbean / Black British', and 'Other ethnic group') then they would be recoded into the 'other' response within that grouping; for example, a patient selecting Indian and Pakistani would be coded into 'Any other Asian background'. The same rule applied to multiple responses in the 'White' section in cases where 'White English / Welsh / Scottish / Northern Irish / British' was not selected. If someone selected two or more responses which were not in the same section,

they would be coded into the 'Any other ethnic group' category (again with the exception of cases where 'White English / Welsh / Scottish / Northern Irish / British' was selected).

#### 6.4 Weighting strategy

The weighting scheme for 2014-2015 followed the same weighting strategy used in the 2013-2014 survey. The weighting strategy incorporated the following three elements:

- 1 A design weight to account for the unequal probability of selection;
- **2** A non-response weight to account for differences in the characteristics of responders and non-responders; and
- **3** A calibration weight to ensure that:
  - The distribution of the weighted responding sample across practices resembles that of the population of eligible patients; and
  - The age and gender distribution within each Clinical Commissioning Group (CCG) resembles the population of eligible patients within the CCG.

Design weights were computed to account for the design of the survey (e.g. disproportionate stratified random sample by practice and length of time the patient has been registered with the practice). Design weights were calculated for each patient as the inverse of the probability of selection. The probability of selection was calculated separately for newly registered / previously registered patients. For each group this was generated by dividing the number of selected patients over the total number of eligible patients in the practice at the time of sampling for wave two (excluding those patients who had been issued a questionnaire in the previous wave of the survey). This weight gives you the number of patients from the practice represented by each individual who is sampled for GPPS from said practice.

Non-response weights were constructed using a model based approach to estimate the probability of responding. This model estimates the probability of responding based on socio-economic and demographic characteristics of the patient and the neighbourhood in which the patient lives. This strategy aims to reduce demographic and socio-economic differences between respondents and non-respondents.

Data from the GPPS sampling frame (patient's age, gender and Government Office Region) was linked to external data using the home postcode of the patient. External data was obtained from the Office of National Statistics aggregated at the Output Area (OA), and the Classification of Residential Neighbourhoods (ACORN) system. OA

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variables included: deprivation indicators, crime scores, ethnicity, marital status, overcrowding, household tenure and employment status. The OA variables are based on the 2001 Census data, except for the Index of Multiple Deprivation (IMD) which is based on the 2010 mid-year estimates. The ACORN system categorises all postcodes in UK into various types based on Census data and lifestyle surveys.

Some of the selected patients did not have a valid postcode or their postcode was missing. These patients were assigned the practice modal OA (the OA that most of the patients had within the practice). If there was more than one modal OA, the OA was selected randomly among the modal OAs. There was complete information for most of the patients except in IMD score/crime; the IMD score/crime for these patients was imputed using the average IMD for the practice that they attended.

The probability of response was estimated using a logistic regression model. Standardised design weights were applied when running the model to obtain unbiased estimates for the coefficients. The model showed that non-response was higher among younger patients and males. Furthermore, there was a significant interaction between age and gender which showed that younger males were less likely to respond than younger females; but in the highest age group (95 years or over), males were slightly more likely to respond than females. Response was lower in the North East and North West than other regions and in ACORN groups P ('Struggling Estates'), K ('Student Life') and R ('Other'). Response also decreased in the following:

- OAs with higher deprivation and crime scores;
- OAs with an increasing proportion of non-white people;
- OAs with an increasing proportion of single, separated or divorced people;
- OAs with an increasing proportion of households with three or more people;
- OAs with an increasing proportion of privately rented households.

In contrast, response increased with an increasing proportion of employees.

The non-response pre-weights were calculated as the reciprocal of the predicted probability of response. The pre-weights were capped after using standardised weighting to determine this level. Capping can introduce some bias into the survey estimates; however in this case it will be minimal given the number of respondents with capped weights represented less than 0.3% of the total respondent sample. The pre-weights were multiplied by the design weight to obtain the non-response weight.

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The non-response weight was calibrated to produce a final weight that makes the weighted sample of respondents resemble the eligible population by practice and age/gender within CCG. Calibration can lead to very variable weights if applied to small cells. In GPPS, small cells can typically arise in any CCG which has only a small number of responders in a particular age-sex band, or in practices with a low response rate. To overcome these issues, the age-sex bands were combined into six categories, and a small amount of additional capping was performed. In particular, practices with fewer than ten respondents had their weights capped. Finally, the weights were standardised to sum to the sample size.

Design weights and non-response weights were calculated separately within each wave. Within each wave, the non-response weights were standardised by practice. Then, the standardised non-response weights were combined in a single dataset. The calibration factor (as described above) was applied to the combined dataset. The practice population totals used for the calibration were based on the average practice population from both waves. The resulting weight was standardised to obtain the final weight.

#### 6.5 Weighting strategy for wave 2 dentistry data

Separate weights were calculated for reporting NHS dentistry results (which were based on one wave of data only), while all other questions were reported based on combined wave 1 and wave 2 data. The calculation of weights for wave 2 dentistry data followed the same procedure as outlined above in the weighting strategy for the two waves combined.

# **Response rates**

# 7 Response rates

The overall response rate for England over both waves was 33%, based on 2,640,017 questionnaires sent out and 858,381 returned. This is based on the following figures for each individual wave:

#### Table 7.1 – Surveys sent, returned and response rates

	Number sent	Number returned	Response rate
Wave 1	1,319,045	424,959	32.2%
Wave 2	1,320,972	433,422	32.8%
Total	2,640,017	858,381	32.5%

#### Table 7.2 – Response rates by gender

	Wave 1	Wave 2
Women	37.0%	37.2%
Men	27.5%	28.5%

#### Table 7.3 – Response rates by age

	Wave 1	Wave 2
18-24	12.0%	11.8%
25-34	15.0%	15.2%
35-44	21.5%	22.4%
45-54	30.2%	30.8%
55-64	47.1%	48.1%
65-74	63.3%	64.3%
75-84	64.8%	64.4%
85+	59.4%	50.9%

### Figure 7.1 – Number of practices within each response rate band over time



Number of practices within each response rate band over time

	Practi 14/		Practic 13/		Practic 12/1		Practic 11/		Practic 10/		Practic 09/		Practic 08/		Practic 07/		Practic 06/0	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
0-9%	94	1%	66	1%	64	1%	56	1%	52	1%	37	*	32	*	20	*	17	*
10-19%	665	8%	487	6%	406	5%	292	4%	417	5%	241	3%	187	2%	147	2%	87	1%
<b>20-29%</b>	1,949	25%	1,727	22%	1,636	20%	1,331	16%	1,410	17%	1,122	13%	1,126	14%	918	11%	584	7%
30-39%	2,563	32%	2,492	31%	2,374	29%	2.265	27%	2,299	27%	2,036	24%	2,097	25%	1,875	23%	1,423	17%
40-49%	2,144	27%	2,556	32%	2,641	32%	2,809	34%	2,884	34%	3,047	36%	3,231	39%	3,063	37%	2,561	31%
50-59%	501	6%	667	8%	982	12%	1,424	17%	1,273	15%	1,806	22%	1,540	19%	2,135	26%	2,847	35%
<b>60-69%</b>	12	*	10	*	25	*	81	1%	50	1%	69	1%	60	1%	149	2%	703	9%
<b>70-79</b> %	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	10	*
80- 100%	0	0%	0	0%	1	*	0	0%	1	*	4	*	0	0%	0	0%	0	0%
Total	7,928	100	8,005	100	8,129	100	8,258	100	8,386	100	8,362	100	8,273	100	8,307	100	8,232	100

#### Table 7.4 – Number and proportion of practices within each response rate band

\*indicates less than 0.5%

# Reporting

# 8 Reporting

#### 8.1 Deliverables

The survey reporting specifications were created by Ipsos MORI in collaboration with NHS England. The specifications detailed the content and layout of each of the Excel and PDF reports required, as well as the SPSS datasets.

All data and reports were encrypted and supplied to NHS England via a secure FTP (File Transfer Protocol) site.

Tables 8.1 to 8.4 describe the reports and datasets which are produced.

## Table 8.1 – Weighted reports (wave 1 and 2 – published via the website)

	Detail/purpose	Date published
National Summary report	National headline results of the survey	
NationaHevel CSV file	One file in CSV (Comma- separated value) format that contains all the national-level data within the Excel based reports	
Area Team-level report	One Excel report containing survey results for every Area Team and the national results	
Area Team-level CSV file	One file in CSV format that contains all the Area Team- level data within the Excel based reports	
Region-level <sup>1</sup>	One Excel report containing survey results for every Region and national results.	<b>Wave 1</b> : 8 January 2014
Region-level CSV file	One file in CSV format that contains all the Region-level data within the Excel based reports	Wave 2: 2 July 2015
CCG-level report	One Excel report containing survey results for every CCG and the national results	
CCG-level CSV file	One file in CSV format that contains all the CCG-level data within the Excel based reports	
Practice-level report	One Excel report containing survey results for every practice and the national results	
Practice-level CSV file	One file in CSV format that contains all the practice- level data within the Excel based reports	

<sup>&</sup>lt;sup>1</sup> NHS England made changes to its internal structure as part of its Organisational Change Programme 2014/15. These changes came into effect in April 2015. As part of this process NHS England's Area Teams were integrated into the existing regional structure. As Area Teams were still in being at the time of fieldwork both the Area Team and Regional aggregations have been reported.

<sup>14-008280-01 |</sup> Version 1 | Public | This work was carried out in accordance with the requirements of the international quality standard for Market Research, ISO 20252:2012, and with the Ipsos MORI Terms and Conditions which can be found at http://www.ipsos-mori.com/terms. © Ipsos MORI 2015.

# Table 8.2 – Weighted datasets provided to NHS England (not published)

	Detail/purpose	Date provided
Person dataset	Person level dataset (SPSS) to allow for a range of ad hoc analyses	
Practice dataset	Practice level dataset (SPSS) to allow for a range of ad hoc analyses	Wave 1: 28 November 2014 Wave 2: 29 May
Dentistry person dataset	Person level dataset (SPSS) to allow for a range of ad hoc analyses around the dentistry questions	2015

## Table 8.3 – Unweighted reports (wave 1 and 2 – published via the website)

	Detail/purpose	Date published
NationaHevel CSV file	One file in CSV format that contains all the national- level data within the Excel based reports	
Area Team-level report	One Excel report containing survey results for every Area Team and the national results	
Area Team-level CSV file	One file in CSV format that contains all the Area Team-level data within the Excel based reports	
Region-level	One Excel report containing survey results for every Region and national results.	
Region-level CSV file	One file in CSV format that contains all the Region- level data within the Excel based reports	Wave 1: 8 January 2014 Wave 2: 2 July 2015
CCG-level report	One Excel report containing survey results for every CCG and the national results	
CCG-level CSV file	One file in CSV format that contains all the CCG-level data within the Excel based reports	
Practice-level report	One Excel report containing survey results for every practice and the national results	
Practice-level CSV file	One file in CSV format that contains all the practice- level data within the Excel based reports	

#### Table 8.4 – Annual reports (published via the website)

	Detail/purpose	Date published
Technical annex	Communicate operational details of survey	2 July 2015

#### 8.2 The GPPS 'Surveys and reports' link

In 2014-2015 the GPPS website went through a redesign. Part of this included incorporating the 'Survey Results' site into the main survey website via the 'Surveys and reports' link. This link has been designed to allow users to view and analyse the results of the survey in a user-friendly and accessible way. The link allows visitors to access all published current and archived reports.

#### Figure 8.5 – Survey and reports link on the GPPS website

(GP PATIENT SURVEY)			
Surveys and reports	5		
What's on this page?			
Questionnaires and letters from each per Recent reports including practice reports Older reports including PCT reports, NHS A yearly technical annex detailing how th	, CCG reports and national I S dentistry reports and care	planning reports	
Find survey materials and reports by y	ear published		
2015 2014 2013 2012	2011		
Older surveys and reports by year pub			
Older surveys and reports by year pub	lished		
Older surveys and reports by year pub 2010 2009 2008 2007 Latest survey and reports Jan	lished		
Older surveys and reports by year pub	lished	July - Septemb	ar 2014
Older surveys and reports by year pub 2010 2009 2008 2007 Latest survey and reports Jan Survey fieldwork dates and materials	lished	July - Septemb Questionn:	
Older surveys and reports by year pub 2010 2009 2008 2007 Latest survey and reports Jan Survey fieldwork dates and materials January - March 2014	lished		
Older surveys and reports by year pub 2010 2009 2008 2007 Latest survey and reports Jan Survey fieldwork dates and materials January - March 2014 Questionnaire	lished	Questionn	

At the top of the 'Survey and reports' page are a number of links which provide quick access to the current and archived reports.

All current reports for practices, CCGs, Regions and Area Teams are accessible through this page (in weighted and unweighted data), along with the other published reports as detailed in tables 8.1 to 8.4:

Also available on the 'Survey and reports' page is a link to the <u>CCG</u> <u>slidepacks</u> page of the website for each relevant publication. This link takes users to an A-Z tool bar which allows easy access to each of the weighted PowerPoint reports for individual CCGs (see figure 8.7). These slidepacks are available for January 2015 and July 2015 data.





#### 8.3 The Analysis Tool website

The GPPS <u>Analysis Tool</u> is available for users to analyse the latest results, compare them to the results for every other practice in England and analyse any trend data which is available.

#### Figure 8.8. – Main page on the Analysis tool website



From the main page users can select the following to analyse their results in more detail:

**Topline practice results**: after selecting a practice, this section of the website allows the user to download an Excel spreadsheet of the results for that practice or view the results of each question on a chart. Overarching Region, Region, CCG and the national results are also available to add to the chart for comparison. These charts are available to view weighted or unweighted.

**Topline CCG results**: after selecting a CCG, this section of the website allows the user to download an Excel spreadsheet of the results for that CCG or view the results of each question on a chart. Overarching Region, Region and the national results are again also available to add to the chart for comparison. These charts are available to view weighted or unweighted.

**Profile analysis:** the profile analysis tool allows users to interrogate the data further by examining the responses collected from different respondent groups. These profile groups can contain any required combination of Overarching Region, Region, CCG, GP practice or demographic information.

**Cross tabulation**: the cross tabulation tool allows visitors to examine the results by looking at the responses to specific questions as answered by specific groups. This tool allows the survey data to be broken down by patient demographics, as well as by all of the survey questions in up to three different levels to produce detailed tabular results.

**Trend analysis**: Where a question has been asked in more than one 12month period, visitors can see how responses from different groups of individuals and at different levels (practice, CCG, Region, Overarching Region, or national) have changed over time. The trend data for surveys from January 2009 to March 2011 are available separately to data from June 2011 onwards.

#### 8.4 Practice comparison tool

Since June 2015, the main GPPS website also allows users to compare results across practices, CCGs, and at the national level. This tool is available either through the 'Compare a practice' link on the GP Patient Survey main page or via the practice search function.

The practice comparison tool allows users to:

- view the results for a particular practice, and compare these results to CCG and national results;
- compare results to another local practice (within a 5 mile radius); and
- compare results to any other practice in the country.

Results are available in either weighted or unweighted data.

# Appendix

# **9** Appendix

# 9.1 January – March 2015 fieldwork: response rate experiments

As part of the fieldwork for January to March 2015 of GPPS, Ipsos MORI and NHS England undertook a review of the survey with the intention of finding ways of increasing response rates. The decision of the review was to trial experiments on a sub-sample of GPPS respondents, testing the impact of using:

- a pre-notice letter;
- a postcard;
- redesigned cover letters; and
- a shorter questionnaire (four pages rather than eight).

Two experiments were designed:

- one experiment embedded within the main GPPS survey to test the effect of the pre-notice letter, postcard, and redesigned cover letters (along with combinations of these three changes as detailed in table 9.1); and
- a second experiment using additional sample to test the effect of the shorter questionnaire (along with its impact in combination with the changes tested in experiment one).

#### 9.1.1 Allocation of sample to treatment groups for both experiments

To maintain the overall sample size of the survey, the shorter version of the questionnaire (experiment two) was issued to an additional sample of cases. The issued sample size for the main survey (including the first experiment group) remained at 1.32m – this gave a total sample for January to March fieldwork of 1.326m cases.

With the total sample of 1.326m, 27,000 cases were systematically (using the method of random start and fixed interval) selected to take part in the various experiments. The sample was stratified by CCG and by practice, with a 1 in n random selection. The 27,000 cases were randomly allocated to each of the nine treatment groups.

#### 9.1.2 Response rates for experiment one

Table 9.1 details the seven different treatment groups within experiment one and the response rate for each.

#### Table 9.1 – Response rates for experiment one

	issued sample	Response rate
Treatment Group	Ν	%
Treatment A: pre-notice letter	3,000	32.9
Treatment B: postcard	3,000	37.8
Treatment C: redesigned cover letters	3,000	34.4
Treatment AB: pre-notice letter & postcard	3,000	38.6
Treatment AC: pre-notice letter & redesigned cover letters	3,000	34.9
Treatment BC: postcard & redesigned cover letters	3,000	41.5
Treatment ABC: pre-notice letter & postcard & redesigned cover letters	3,000	40.3

Analysis was carried out to look at the differences in results between the nine treatment groups and the main survey across a range of key survey estimates and demographic profiles. The analysis found no discernible or meaningful pattern in differences, likely because the additional respondents who responded as a result of the experiment still represent a small proportion of the overall sample, and would all need to answer significantly differently to have an impact on the results.

Results for responses to experiment one were therefore included within published results for July 2015; they equate to 0.9% of the total number of returned questionnaires across the two waves of fieldwork.

#### 9.2 Results of experiment 2 (shortened questionnaire)

Table 9.2 details the response rates within experiment two.

#### Table 9.2 – Response rates for experiment two

	lssued sample	Response rate
Treatment Group	Ν	
Treatment 1: shorter version of the questionnaire	3,000	34.6
Treatment 2: shorter version of the questionnaire and all three of proposed changes previously described (pre-notice letter & postcard reminder & redesigned covering letter)	3,000	43.6

The following pages detail the results of the second experiment, along with the published results from July 2015 for those questions which were included within the shorter questionnaire. The data for the second experiment were not included within the published results due to the complexities it would introduce to the weighting scheme, alongside the possibility of question order effects impacting on responses. An additional set of weights would have been required as about half of the GPPS questions were not administered to this group. Further analysis will also be carried out to explore in greater detail the implications of the changes to the order of questions and the length of the questionnaire.

#### **Accessing your GP services**

#### Q1. When did you last see or speak to a GP from your GP surgery? Base: All patients who answered question

	Shortened questionnaire results	Published results – July 2015
	(2,337)	(853,552)
	%	%
In the past 3 months	54.3	53.4
Between 3 and 6 months ago	19.0	17.6
Between 6 and 12 months ago	13.9	14.0
More than 12 months ago	12.0	13.5
I have never seen a GP from my GP surgery	0.8	1.4
In the past 6 months (total)	73.3	71.0

#### Q2. When did you last see or speak to a nurse from your GP surgery? Base: All patients who answered question

	Shortened questionnaire results	Published results – July 2015
	(2,326)	(849,509)
	%	%
In the past 3 months	37.7	35.9
Between 3 and 6 months ago	18.1	17.9
Between 6 and 12 months ago	15.3	16.9
More than 12 months ago	22.8	22.1
I have never seen a nurse from my GP surgery	6.1	7.2
In the past 6 months (total)	55.8	53.8

Q3. Generally, how easy is it to get through to someone at your GP surgery on the phone? Base: All patients who answered question

	Shortened questionnaire results	Published results – July 2015
	(2,337)	(854,501)
	%	%
Very easy	26.1	24.6
Fairly easy	45.6	46.0
Not very easy	17.3	17.1
Not at all easy	8.0	8.6
Haven't tried	3.1	3.7
Easy (total)	71.6	70.6

#### Q4. How helpful do you find the receptionists at your GP surgery?

Base: All patients who answered question

	Shortened questionnaire results	Published results – July 2015
	(2,333)	(853,740)
	%	%
Very helpful	46.8	44.1
Fairly helpful	41.2	42.7
Not very helpful	8.1	8.1
Not at all helpful	2.7	2.9
Don't know	1.2	2.2
Helpful (total)	88.0	86.8

# Q5. As far as you know, which of the following online services does your GP surgery offer? (multiple responses allowed) $% \left( \mathcal{A}_{1}^{2}\right) =0$

Base: All patients who answered question

	Shortened questionnaire results	Published results – July 2015
	(2,277)	(832,820)
	%	%
Booking appointments online	28.5	27.0
Ordering repeat prescriptions online	29.1	27.9
Accessing my medical records online	3.8	2.4
None of these	11.6	10.4
Don't know	49.2	52.6

## Q6. And in the past 6 months, which of the following online services have you used at your GP surgery? (multiple responses allowed)

Base: All patients who answered question

Shortened questionnaire results	Published results – July 2015
(2,303)	(834,118)
%	%
7.6	6.4
11.7	10.1
*	*
84.9	86.4
	questionnaire results (2,303) % 7.6 11.7 *

#### Making an appointment

#### Q7. Last time you wanted to see or speak to a GP or nurse from your GP surgery:

What did you want to do? (multiple responses allowed)

Base: All patients who answered question

	Shortened questionnaire results	Published results – July 2015
	(2,324)	(835,103)
	%	%
See a GP at the surgery	73.6	75.7
See a nurse at the surgery	19.9	18.0
Speak to a GP on the phone	8.2	6.5
Speak to a nurse on the phone	1.1	1.0
Have someone visit me at my home	1.5	1.3
I didn't mind / wasn't sure what I wanted	2.7	3.0

#### Q8. And when did you want to see or speak to them?

Base: All patients who answered question

	Shortened questionnaire results	Published results – July 2015
	(2,271)	(819,789)
	%	%
On the same day	42.1	40.3
On the next working day	10.3	10.1
A few days later	22.5	23.3
A week or more later	6.9	7.3
I didn't have a specific day in mind	16.0	15.4
Can't remember	2.2	3.6

#### Q9. Were you able to get an appointment to see or speak to someone?

Base: All patients who answered question

	Shortened questionnaire results	Published results – July 2015
	(2,306)	(830,142)
	%	%
Yes	73.8	73.1
Yes, but I had to call back closer to or on the day I wanted the appointment	11.8	12.1
No	11.9	10.9
Can't remember	2.6	3.9
Yes (total)	85.6	85.2

## Q10. Overall, how would you describe your experience of <u>making</u> an appointment?

Base: All patients who answered question

	Shortened questionnaire results	Published results – July 2015
	(2,318)	(824,865)
	%	%
Very good	37.2	33.7
Fairly good	37.5	39.6
Neither good nor poor	11.4	14.3
Fairly poor	9.6	7.7
Very poor	4.3	4.7
Good (total)	74.7	73.3

#### **Opening hours**

#### Q11. How satisfied are you with the hours that your GP surgery is open?

Base: All patients who answered question

Shortened questionnaire results	Published results – July 2015
(2,320)	(842,965)
%	%
36.6	35.1
37.2	39.8
10.9	10.5
7.1	6.8
2.9	3.2
5.3	4.6
73.8	74.9
	questionnaire results (2,320) % 36.6 37.2 10.9 7.1 2.9 5.3

#### Last GP appointment

Q12. Last time you saw or spoke to a <u>GP</u> from your GP surgery, how good was that GP at each of the following?

Base: All patients who answered question

#### a. Giving you enough time

.

	Shortened questionnaire results	Published results – July 2015
	(2,334)	(837,532)
	%	%
Very good	50.6	47.5
Good	36.5	37.4
Neither good nor poor	8.2	9.5
Poor	2.1	2.5
Very poor	1.4	1.2
Doesn't apply	1.1	1.9
Good (total)	87.2	85.0

#### Q12 continued...

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#### b. Listening to you

	Shortened questionnaire results	Published results – July 2015
	(2,330)	(835,249)
	%	%
Very good	51.9	50.4
Good	35.6	36.6
Neither good nor poor	7.0	7.5
Poor	3.3	2.5
Very poor	1.2	1.2
Doesn't apply	0.9	1.7
Good (total)	87.6	87.0

#### c. Explaining tests and treatments

	Shortened questionnaire results	Published results – July 2015
	(2,313)	(830,419)
	%	%
Very good	47.1	45.5
Good	35.6	35.9
Neither good nor poor	10.1	10.1
Poor	2.2	2.1
Very poor	0.6	1.0
Doesn't apply	4.3	5.4
Good (total)	82.7	81.4

#### d. Involving you in decisions about your care

	Shortened questionnaire results	Published results – July 2015
	(2,317)	(833,064)
	%	%
Very good	39.1	39.2
Good	35.0	34.9
Neither good nor poor	11.0	12.5
Poor	3.0	2.9
Very poor	1.0	1.4
Doesn't apply	10.9	9.1
Good (total)	74.1	74.1

#### Q12 continued...

#### e. Treating you with care and concern

	Shortened questionnaire results	Published results – July 2015
	(2,323)	(832,996)
	%	%
Very good	47.4	46.2
Good	36.9	36.3
Neither good nor poor	9.4	10.3
Poor	2.5	2.7
Very poor	1.6	1.5
Doesn't apply	2.3	3.0
Good (total)	84.3	82.5

#### Q13. Did you have confidence and trust in the GP you saw or spoke to?

Base: All patients who answered question

	Shortened questionnaire results	Published results – July 2015
	(2,319)	(834,817)
	%	%
Yes, definitely	65.4	63.5
Yes, to some extent	27.6	28.5
No, not at all	5.0	4.6
Don't know / can't say	2.0	3.4
Yes (total)	93.0	92.0

#### Last nurse appointment

## Q14. Last time you saw or spoke to a <u>nurse</u> from your GP surgery, how good was that nurse at each of the following?

Base: All patients who answered question

#### a. Giving you enough time

	Shortened questionnaire results	Published results – July 2015
	(2,301)	(824,201)
	%	%
Very good	49.7	47.3
Good	31.0	32.1
Neither good nor poor	5.2	5.4
Poor	1.0	1.1
Very poor	0.8	0.5
Doesn't apply	12.3	13.6
Good (total)	80.7	79.4

#### b. Listening to you

-

	Shortened questionnaire results	Published results – July 2015
	(2,291)	(818,825)
	%	%
Very good	47.2	46.0
Good	32.0	32.4
Neither good nor poor	6.3	6.0
Poor	1.0	1.2
Very poor	*	0.5
Doesn't apply	13.1	13.8
Good (total)	79.2	78.4

#### c. Explaining tests and treatments

	Shortened questionnaire results	Published results – July 2015
	(2,267)	(810,622)
	%	%
Very good	43.7	44.3
Good	31.0	31.5
Neither good nor poor	7.7	7.2
Poor	0.8	1.0
Very poor	*	0.5
Doesn't apply	16.3	15.4
Good (total)	74.8	75.9

#### Q14 continued...

#### d. Involving you in decisions about your care

	Shortened questionnaire results	Published results – July 2015
	(2,286)	(815,741)
	%	%
Very good	34.2	36.3
Good	27.4	29.0
Neither good nor poor	11.6	9.6
Poor	1.1	1.4
Very poor	0.5	0.7
Doesn't apply	25.0	23.1
Good (total)	61.7	65.3

#### e. Treating you with care and concern

	Shortened questionnaire results	Published results – July 2015
	(2,276)	(815,343)
	%	%
Very good	46.3	45.2
Good	30.2	32.1
Neither good nor poor	6.7	6.2
Poor	1.4	1.3
Very poor	0.6	0.7
Doesn't apply	14.9	14.5
Good (total)	76.4	77.3

#### Q15. Did you have confidence and trust in the <u>nurse</u> you saw or spoke to?

Base: All patients who answered question

	Shortened questionnaire results	Published results – July 2015
	(2,263)	(803,954)
	%	%
Yes, definitely	63.6	62.0
Yes, to some extent	22.2	22.7
No, not at all	2.5	2.6
Don't know / can't say	11.7	12.7
Yes (total)	85.8	84.7

#### **Overall experience**

Q16. Overall, how would you describe your experience of your GP surgery?

Base: All patients who answered question

	Shortened questionnaire results	Published results – July 2015
	(2,323)	(841,444)
	%	%
Very good	45.9	42.7
Fairly good	38.8	42.1
Neither good nor poor	10.0	9.9
Fairly poor	4.0	3.9
Very poor	1.2	1.4
Good (total)	84.8	84.8

#### Q17. Would you recommend your GP surgery to someone who has just moved to your local area?

Base: All patients who answered question

	Shortened questionnaire results	Published results – July 2015
	(2,332)	(843,091)
	%	%
Yes, would definitely recommend	48.9	46.9
Yes, would probably recommend	31.1	30.6
Not sure	9.8	11.8
No, would probably not recommend	5.1	5.7
No, would definitely not recommend	3.5	3.2
Don't know	1.7	1.8
Would recommend (total)	79.9	77.5

### Q18. Overall, how would you describe your experience of NHS dental services in the last two years?

Shortened questionnaire results base: All patients who answered question, excluding those who said they hadn't tried to make an appointment in the last 2 years

Published results July 2015 base: All patients who tried to get an NHS dental appointment in the last 2 years and answered question

	Shortened questionnaire results	Published results – July 2015
	(1,606)	(250,003)
	%	%
Very good	46.0	49.0
Fairly good	33.8	35.6
Neither good nor poor	10.1	8.7
Fairly poor	5.0	3.8
Very poor	5.1	2.9
Good (total)	79.8	84.6

#### Some questions about you

#### Q19. Are you male or female?

Base: All patients who answered question

	Shortened questionnaire results	Published results – July 2015
	(2,333)	(847,356)
	%	%
Male	48.7	48.9
Female	51.3	51.1

#### Q20. How old are you?

Base: All patients who answered question

	Shortened questionnaire results	Published results – July 2015
	(2,337)	(847,258)
	%	%
18 to 24	7.4	9.5
25 to 34	17.9	17.1
35 to 44	18.4	17.2
45 to 54	18.7	18.5
55 to 64	14.2	14.9
65 to 74	12.8	12.4
75 to 84	8.3	7.4
85 and over	2.3	3.0

#### Q21. Do you have a long-standing health condition?

Base: All patients who answered question<sup>2</sup>

	Shortened questionnaire results	July 2015 results
	(2,323) %	(841,802) %
Yes	41.8	44.3
No	53.6	51.5
Don't know / can't say	4.6	4.1

#### Q22. What is your ethnic group?

Base: All patients who answered question

	Shortened questionnaire results	Published results – July 2015
	(2,307)	(844,263)
A. White	%	%
English / Welsh / Scottish / Northern Irish / British	79.2	80.2
Irish	0.6	0.8
Gypsy or Irish Traveller	-	*
Any other White background	6.4	5.7
B. Mixed / multiple ethnic groups		
White and Black Caribbean	*	*
White and Black African	*	*
White and Asian	*	*
Any other Mixed / multiple ethnic background	*	*
C. Asian / Asian British		
Indian	3.3	2.4
Pakistani	1.3	1.5
Bangladeshi	*	0.6
Chinese	*	0.7
Any other Asian background	1.3	1.4
D. Black / African / Caribbean / Black British		
African	1.8	1.5
Caribbean	1.1	0.7
Any other Black / African / Caribbean background	0.5	*
E. Other ethnic group		
Arab	*	*
Any other ethnic group	2.8	2.7

<sup>2</sup> Results published elsewhere are normally based on a recoded version of this question. Anyone who initially answered anything other than 'Yes' or did not provide a response is recoded to 'Yes' if they went on to select any medical conditions at the following question in the longer questionnaire. However, given the follow-up question was not included in the shortened questionnaire, the results as presented here for July 2015 have not been re-coded and are based on the original responses to this question.

#### Q23. Which of these best describes what you are doing at present?

Base: All patients who answered question

	Shortened questionnaire results	Published results – July 2015
	(2,126)	(826,233)
	%	%
Full-time paid work (30 hours or more each week)	44.1	44.2
Part-time paid work (under 30 hours each week)	14.3	13.9
Full-time education at school, college or university	2.2	3.4
Unemployed	3.5	4.9
Permanently sick or disabled	5.1	4.3
Fully retired from work	22.9	21.6
Looking after the home	5.1	5.0
Doing something else	2.7	2.6

#### Q24. Are you a parent or legal guardian for any children aged under 16 living in your home?

Base: All patients who answered question

	Shortened questionnaire results	Published results – July 2015
	(2,292)	(818,193)
	%	%
Yes	26.8	25.9
No	73.2	74.1

Q25. Do you look after, or give any help or support to family members, friends, neighbours or others because of either: long-term physical or mental ill-health / disability or problems related to old age?

Base: All patients who answered question

	Shortened questionnaire results	Published results – July 2015
	(2,153)	(817,696)
	%	%
No	82.3	81.8
Yes, 1-9 hours a week	9.5	10.4
Yes, 10-19 hours a week	2.4	2.1
Yes, 20-34 hours a week	1.5	1.3
Yes 35-49 hours a week	0.8	1.0
Yes, 50+ hours a week	3.6	3.4

#### Q26. Which of the following best describes how you think of yourself?

Base: All patients who answered question

	Shortened questionnaire results	Published results – July 2015
	(2,250)	(823,603)
	%	%
Heterosexual / straight	92.3	92.5
Gay / Lesbian	2.0	1.6
Bisexual	0.5	0.7
Other	0.6	0.6
I would prefer not to say	4.7	4.7

#### Q27. Which, if any, of the following best describes your religion?

Base: All patients who answered question

	Shortened questionnaire results	Published results – July 2015
	(2,279)	(842,214)
	%	%
No religion	27.8	28.7
Buddhist	0.5	0.7
Christian (including Church of England, Catholic, Protestant, and other Christian denominations)	60.6	58.6
Hindu	2.2	1.7
Jewish	*	*
Muslim	4.2	4.8
Sikh	1.0	0.7
Other	1.3	1.2
I would prefer not to say	2.1	3.0

#### 9.3 Questionnaire



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# GP PATIENT SURVEY

Please answer the questions below by putting an **X** in ONE BOX for each question unless more than one answer is allowed (these questions are clearly marked). We will keep your answers completely confidential.

If you would prefer to **complete the survey online**, please go to **www.gp-patient.co.uk/survey** 

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**Ipsos MORI** 

Doesn't apply

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Reference: <b>1234567890</b>	Online password: <b>ABCDE</b>
ACCESSING	G YOUR GP SERVICES
Q1       When did you last see or speak to a G your GP surgery?         In the past 3 months         Between 3 and 6 months ago         Between 6 and 12 months ago         More than 12 months ago         I have never seen a GP from my GP s         When did you last see or speak to a month         from your GP surgery?         In the past 3 months         Between 3 and 6 months ago         I have never seen a GP from my GP s         When did you last see or speak to a month         Between 3 and 6 months ago         In the past 3 months         Between 6 and 12 months ago         I have never seen a nurse from my GP s         Generally, how easy is it to get througe	Q6       online services does your GP surgery offer?         By 'online' we mean on a website or smartphone app         Please X all the boxes that apply to you         Booking appointments online         Ordering repeat prescriptions online         Accessing my medical records online         None of these         Don't know         Q7         And in the past 6 months, which of the following online services have you used at your GP surgery?         Surgery
Q3       someone at your GP surgery on the plant         Very easy         Fairly easy         Not very easy         Not at all easy         Haven't tried	hone?
Q4       How helpful do you find the reception your GP surgery?         Q4       Very helpful         Q5       Fairly helpful helpful         Q5       How do you normally book appointments see a GP or nurse at your GP surgery?	A lot of the time Some of the time
<ul> <li>In person</li> <li>By phone</li> <li>By fax machine</li> <li>Online</li> </ul>	□ Not tried at this GP surgery

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MAKING AN APPOINTMENT	Q15 How convenient was the appointment you were able to get?
Q10       Last time you wanted to see or speak to a GP or nurse from your GP surgery:         What did you want to do?         See a GP at the surgery         See a nurse at the surgery         Speak to a GP on the phone         Speak to a nurse on the phone         Have someone visit me at my home         I didn't mind / wasn't sure what I wanted         Q11         And when did you want to see or speak to them?         On the same day         On the next working day         A few days later         A week or more later         I didn't have a specific day in mind         Can't remember         Q12         Were you able to get an appointment to see or speak to someone?	<ul> <li>Very convenient</li></ul>
Yes, but I had to call back closer to or on the day I wanted the appointment No	<ul> <li>Didn't see or speak to anyone</li> <li>Overall, how would you describe your experience of making an appointment?</li> <li>Very good</li> <li>Fairly good</li> </ul>
Q13 I got an appointment to see a GP at the surgery to see a nurse at the surgery to speak to a GP on the phone to speak to a nurse on the phone	<ul> <li>Neither good nor poor</li> <li>Fairly poor</li> <li>Very poor</li> </ul> WAITING TIMES
<ul> <li>Lfor someone to visit me at my home</li> <li>How long after initially contacting the surgery did you actually see or speak to them?</li> <li>On the same day</li> <li>On the next working day</li> <li>A few days later</li> <li>A week or more later</li> <li>Can't remember</li> </ul>	<ul> <li>Q19 How long after your appointment time do you normally wait to be seen?</li> <li>I don't normally have appointments at a particular time</li> <li>Less than 5 minutes</li> <li>5 to 15 minutes</li> <li>More than 15 minutes</li> <li>Can't remember</li> <li>How do you feel about how long you</li> </ul>
+ page	Q20 normally have to wait to be seen? I don't normally have to wait too long I have to wait a bit too long I have to wait far too long No opinion / doesn't apply
LAST GP APPOINTMENT	
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Q21 Last time you saw or spoke to a <u>GP</u> from your GP surgery, how good was that GP at each of the following?	Q23 Last time you saw or spoke to a <u>nurse</u> from your GP surgery, how good was that nurse at each of the following?
Giving you enough time	Giving you enough time
<ul> <li>Very good</li> <li>Good</li> <li>Neither good nor poor</li> <li>Poor</li> <li>Very poor</li> <li>Doesn't apply</li> </ul>	<ul> <li>Very good</li> <li>Good</li> <li>Neither good nor poor</li> <li>Poor</li> <li>Very poor</li> <li>Doesn't apply</li> </ul>
Listening to you	Listening to you
<ul> <li>Very good</li> <li>Good</li> <li>Neither good nor poor</li> <li>Poor</li> <li>Very poor</li> <li>Doesn't apply</li> </ul>	<ul> <li>Very good</li> <li>Good</li> <li>Neither good nor poor</li> <li>Poor</li> <li>Very poor</li> <li>Doesn't apply</li> </ul>
Explaining tests and treatments	Explaining tests and treatments
<ul> <li>Very good</li> <li>Good</li> <li>Neither good nor poor</li> </ul>	<ul> <li>Very good</li> <li>Good</li> <li>Neither good nor poor</li> </ul>
<ul> <li>Poor</li> <li>Very poor</li> <li>Doesn't apply</li> </ul>	<ul> <li>Poor</li> <li>Very poor</li> <li>Doesn't apply</li> </ul>
Involving you in decisions about your care	Involving you in decisions about your care
<ul> <li>Very good</li> <li>Good</li> <li>Neither good nor poor</li> <li>Poor</li> <li>Very poor</li> <li>Doesn't apply</li> </ul>	<ul> <li>Very good</li> <li>Good</li> <li>Neither good nor poor</li> <li>Poor</li> <li>Very poor</li> <li>Doesn't apply</li> </ul>
Treating you with care and concern	Treating you with care and concern
<ul> <li>Very good</li> <li>Good</li> <li>Neither good nor poor</li> <li>Poor</li> <li>Very poor</li> <li>Doesn't apply</li> </ul>	<ul> <li>Very good</li> <li>Good</li> <li>Neither good nor poor</li> <li>Poor</li> <li>Very poor</li> <li>Doesn't apply</li> </ul>
Did you have confidence and trust in the <u>Q22</u> <u>GP</u> you saw or spoke to?	Did you have confidence and trust in the <u>nurse</u> you saw or spoke to?
Yes, definitely Yes, to some extent No, not at all Don't know / can't say	Yes, definitely Yes, to some extent No, not at all Don't know / can't say
	Please turn over 🖙

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LAST NURSE APPOINTMENT

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OPENING HOURS	MANAGING YOUR HEALTH
Q25       How satisfied are you with the hours that your GP surgery is open?         Q25       Very satisfied         Q26       Fairly satisfied         Q26       I'm not sure when my GP surgery is open         Q26       Is your GP surgery currently open at times that are convenient for you?         Q27       Yes         Q27       Which of the following additional opening times would make it easier for you to see or speak to someone?         Please X all the boxes that apply to you         Q27       Before 8am         Q27       After 6.30pm         Q1       On a Saturday         Q2       On a Sunday	Do you have a long-standing health condition?         Yes         No         Don't know / can't say         Which, if any, of the following medical conditions do you have?         Please X all the boxes that apply to you         Alzheimer's disease or dementia         Angina or long-term heart problem         Asthma or long-term chest problem         Blindness or severe visual impairment         Cancer in the last 5 years         Deafness or severe hearing impairment         Diabetes         Epilepsy         High blood pressure         Kidney or liver disease         Learning difficulty         Long-term mental health problem         Long-term neurological problem
Overall, how would you describe your experience of your GP surgery?         Overall, how would you describe your experience of your GP surgery?         Overall, how would of your GP surgery?         Overall, how would you describe your experience of your GP surgery?         Overall, how would on poor         Fairly good         Neither good nor poor         Fairly poor         Very poor         Overall, how would definitely recommend         Sector of your GP surgery to someone who has just moved to your local area?         Yes, would definitely recommend         Not sure         No, would probably not recommend         No, would definitely not recommend         Don't know	<ul> <li>Another long-term condition</li> <li>None of these conditionsGo to Q33</li> <li>I would prefer not to sayGo to Q33</li> <li>I would prefer not to sayGo to Q33</li> <li>In the last 6 months, have you had enough support from local services or organisations to help you to manage your long-term health condition(s)?</li> <li>Please think about all services and organisations, not just health services</li> <li>Yes, definitely</li> <li>Yes, to some extent</li> <li>No</li> <li>I haven't needed such support</li> <li>Don't know / can't say</li> <li>How confident are you that you can manage your own health?</li> <li>Very confident</li> <li>Fairly confident</li> <li>Not very confident</li> <li>Not very confident</li> <li>Not at all confident</li> </ul>

page 4

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By placing an <b>X</b> in one box in each group below, please indicate which statements best descril your own health state <u>today</u> .
Mobility
<ul> <li>I have no problems in walking about</li> <li>I have slight problems in walking about</li> <li>I have moderate problems in walking about</li> <li>I have severe problems in walking about</li> <li>I am unable to walk about</li> </ul>
Self-Care
<ul> <li>I have no problems washing or dressing myself</li> <li>I have slight problems washing or dressing myself</li> <li>I have moderate problems washing or dressing myself</li> <li>I have severe problems washing or dressing myself</li> <li>I have severe problems washing or dressing myself</li> <li>I am unable to wash or dress myself</li> </ul>
Usual Activities (e.g. work, study, housework, family or leisure activities)
<ul> <li>I have no problems doing my usual activities</li> <li>I have slight problems doing my usual activities</li> <li>I have moderate problems doing my usual activities</li> <li>I have severe problems doing my usual activities</li> <li>I have numble to do my usual activities</li> </ul>
Pain / Discomfort
<ul> <li>I have no pain or discomfort</li> <li>I have slight pain or discomfort</li> <li>I have moderate pain or discomfort</li> <li>I have severe pain or discomfort</li> <li>I have extreme pain or discomfort</li> </ul>
Anxiety / Depression
<ul> <li>I am not anxious or depressed</li> <li>I am slightly anxious or depressed</li> <li>I am moderately anxious or depressed</li> <li>I am severely anxious or depressed</li> <li>I am extremely anxious or depressed</li> </ul>

By 'unwell or injured' we mean anything that only lasts for a few days or weeks, e.g. a bad cold or broken leg

		limited		
		limited	а	little
	No			

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I. I.
OUT OF HOURS
Description of the contacting an out-of- burs GP service when your GP surgery is closed.          on't include NHS walk-in centres or A&E.         Do you know how to contact an out-of- hours GP service when the surgery is closed?         Yes         No         In the past 6 months, have you tried to call an out-of-hours GP service when the surgery was closed?         Yes, for myself         Yes, for someone else         No
<ul> <li>How easy was it to contact the out-of-hours</li> <li>GP service by telephone?</li> <li>Very easy</li> <li>Fairly easy</li> <li>Not very easy</li> <li>Not very easy</li> <li>Don't know / didn't make contact</li> <li>How do you feel about how quickly you received care from the out-of-hours GP service?</li> <li>It was about right</li> <li>It took too long</li> <li>Don't know / doesn't apply</li> <li>Did you have confidence and trust in the out-of-hours clinician you saw or spoke to?</li> <li>Yes, definitely</li> <li>Yes, to some extent</li> <li>No, not at all</li> <li>Don't know / can't say</li> <li>Overall, how would you describe your experience of out-of-hours GP services?</li> <li>Very good</li> <li>Fairly good</li> <li>Neither good nor poor</li> <li>Fairly poor</li> <li>Very poor</li> </ul>

page 6

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NHS DENTISTRY	SOME QUESTIONS ABOUT YOU
When did you last try to get an NHS dental appointment for yourself?	The following questions will help us to see how experiences vary between different groups of the population. We will keep your answers completely
<ul> <li>In the last 3 months</li> <li>Between 3 and 6 months ago</li> <li>Between 6 months and a year ago</li> <li>Between 1 and 2 years ago</li> <li>More than 2 years agoGo to Q50</li> <li>I have never tried to get an NHS dental appointmentGo to Q50</li> <li>Last time you tried to get an NHS dental appointment, was it with a dental practice you had been to before for NHS dental care?</li> </ul>	confidential.Q51Are you male or female? $\square$ Male $\square$ FemaleQ52How old are you?Q52 $\square$ Under 18 $\square$ 55 to 64 $\square$ 18 to 24 $\square$ 65 to 74 $\square$ 25 to 34 $\square$ 75 to 84 $\square$ 35 to 44 $\square$ 85 or over $\square$ 45 to 54
☐ Yes ☐ No ☐ Can't remember	Q53 What is your ethnic group? A. White English / Welsh / Scottish / Northern Irish /
Q48 Were you successful in getting an NHS dental appointment?	British Gypsy or Irish Traveller Any other White background
No Can't remember	→Please write in
Q49Overall, how would you describe your experience of NHS dental services?Userve good Fairly good Neither good nor poor Fairly poor Very poorPlease go to Q51	<ul> <li>B. Mixed / multiple ethnic groups</li> <li>White and Black Caribbean</li> <li>White and Black African</li> <li>White and Asian</li> <li>Any other Mixed / multiple ethnic background</li> <li>Please write in</li> </ul>
Why haven't you tried to get an NHS dental appointment in the last two years? If more than one of these applies to you, please × the main ONE only I haven't needed to visit a dentist I no longer have any natural teeth I haven't had time to visit a dentist I don't like going to the dentist I don't like going to the dentist I didn't think I could get an NHS dentist I didn't think I could get an NHS dentist I stayed with my dentist when they changed from NHS to private I prefer to go to a private dentist NHS dental care is too expensive Another reason	C. Asian / Asian British <ul> <li>Indian</li> <li>Pakistani</li> <li>Bangladeshi</li> <li>Chinese</li> <li>Any other Asian background</li> <li>Please write in</li> </ul> <li>D. Black / African / Caribbean / Black British <ul> <li>African</li> <li>Caribbean</li> <li>Any other Black / African / Caribbean</li> <li>background</li> <li>Please write in</li> </ul> </li> <li>E. Other ethnic group <ul> <li>Any other ethnic group</li> <li>Any other ethnic group</li> </ul> </li>
	→Please write in

+					+
Q54	Which of these best describes wildoing at present?         If more than one of these applies please × the main ONE only         Full-time paid work (30 hours or week)         Part-time paid work (under 30 howeek)         Part-time paid work (under 30 howeek)         Full-time education at school, college or university         Unemployed         Permanently sick or disabled         Fully retired from work         Looking after the home         Doing something else         In general, how long does your jour from home to work (door to door)         Up to 30 minutes         31 minutes to 1 hour         More than 1 hour         I live on site         If you need to see a GP at your Great the time away from your work to         Yes         No         Are you a parent or a legal guardiany children aged under 16 living home?         Yes         No	to you, more each ours each Please go to Q57 urney take ? P surgery s, can you do this?	Q60 s n [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [	Do you look after, or give any hereighbours or others because of   bigport to family members, frienteighbours or others because of   long-term physical or mental disability, or   • problems related to old age?   Don't count anything you do as prevent to the second of t	ds, either: ill health / part of your ribes how
	home? Yes No Are you a deaf person who uses a language? Yes			 Jewish	
	<ul> <li>No</li> <li>Which of the following best descreases and the sector smoking habits?</li> <li>Never smoked</li> <li>Former smoker</li> <li>Occasional smoker</li> <li>Regular smoker</li> </ul>	ribes your			
	Please return this questionnair		paid (		
	Developed with	EXETERISCH	DICAL 100L	UNIVERSITY OF CAMBRIDGE	
+		page	8		+

## 9.4 Initial letter





<<TITLE>> <<FIRST NAME>> <<SURNAME> <<ADDRESS 1>> <<ADDRESS 2>> <<ADDRESS 3>> <<ADDRESS 4>> <<ADDRESS 5>> <<POSTCODE>>

Reference: 1234567890

January 2015

Dear <<Title>> <<Surname>>

## Your opportunity to shape local GP and dental services

I am writing to you to ask for feedback to help improve local healthcare and other services. The enclosed survey asks about your experiences of your local GP surgery and other local NHS services, and includes questions about your general health.

To take part in this survey please fill in the enclosed questionnaire and return it in the envelope provided. You do not need a stamp. You can help cut costs by completing and sending back the questionnaire as soon as possible as we'll send a reminder if people don't reply to this initial letter.

Even if you have filled in a questionnaire before, or you haven't visited your GP surgery recently, your views are still important to us.

Your answers will be kept completely confidential. NHS England will only see anonymous statistical results. We will not see any individual patient views or information.

There is more information about the survey over the page. If you have more questions or need help filling in the questionnaire, please visit **www.gp-patient.co.uk** where you can also fill in the survey online, or call Ipsos MORI on freephone **0808 238 5385** (Monday to Friday, 9am to 9pm; Saturday 10am to 5pm).

Thank you very much for your time.

Yours sincerely

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Giles Wilmore Director for Patient and Public Voice and Information NHS England

Please turn over 🗇

## Some questions & answers

## Why are we carrying out this survey?

The NHS is working to improve patient experiences of GP surgeries. Your surgery can use the survey results to assess how services are currently being delivered and make changes so they better meet your needs.

## Will we be able to see your individual results?

No. NHS England will only see anonymous statistical results. If you would prefer not to answer individual questions please leave them blank but complete the rest of the questionnaire.

#### How did we get your name and address?

Your name was selected randomly from the NHS list of patients registered with a GP. Ipsos MORI will keep your contact details confidential and, once the survey is finished, will destroy them. Ipsos MORI have not been given any information about your health.

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## Čeština

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## Français

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gp-patient.co.uk/mandarin 0808 238 5475

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## Türkçe

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For help filling out the survey, or to request it in Braille or large print, call freephone **0808 238 5385**. To learn more about the survey, please visit **www.gp-patient.co.uk/FAQ** 



#### 9.5 First reminder letter





<<TITLE>> <<FIRST NAME>> <<SURNAME> <<ADDRESS 1>> <<ADDRESS 2>> <<ADDRESS 3>> <<ADDRESS 4>> <<ADDRESS 5>> <<POSTCODE>>

Reference: 1234567890

February 2015

Dear <<Title>> <<Surname>>

# Your opportunity to shape local GP and dental services: we need your views

I recently sent you a letter asking for your feedback to help improve local healthcare and other services. If you have already responded, thank you very much for your time; there is no need to do anything further.

If you have not already responded, I would be grateful if you could take the time to give us your views about your experiences of your GP surgery and other local NHS services – we want to hear from as many people as possible. Even if you have filled in a questionnaire before, or you haven't visited your GP surgery recently, your views are very important to us.

Please fill in the enclosed questionnaire, and return it in the freepost envelope provided, as soon as possible – you do not need a stamp.

Your answers will be kept completely confidential. NHS England will only see anonymous statistical results. We will not see any individual patient views or information.

There is more information about the survey over the page. If you have any questions or need help filling in the questionnaire, please visit **www.gp-patient.co.uk** where you can also fill in the survey online, or call Ipsos MORI on freephone **0808 238 5385** (Monday to Friday, 9am to 9pm; Saturday 10am to 5pm).

Thank you very much for your time.

Yours sincerely

Gelevilmore

Giles Wilmore Director for Patient and Public Voice and Information NHS England

Please turn over 🗇

## Some questions & answers

## Why are we carrying out this survey?

The NHS is working to improve patient experiences of GP surgeries. Your surgery can use the survey results to assess how services are currently being delivered and make changes so they better meet your needs.

## Will we be able to see your individual results?

No. NHS England will only see anonymous statistical results. If you would prefer not to answer individual questions please leave them blank but complete the rest of the questionnaire.

#### How did we get your name and address?

Your name was selected randomly from the NHS list of patients registered with a GP. Ipsos MORI will keep your contact details confidential and, once the survey is finished, will destroy them. Ipsos MORI have not been given any information about your health.

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## 9.6 Second reminder letter





<<TITLE>> <<FIRST NAME>> <<SURNAME> <<ADDRESS 1>> <<ADDRESS 2>> <<ADDRESS 3>> <<ADDRESS 4>> <<ADDRESS 5>> <<POSTCODE>>

Reference: 1234567890

March 2015

Dear <<Title>> <<Surname>>

# Your opportunity to shape local GP and dental services: we need your views

I recently sent you a letter asking for your feedback to help improve local healthcare and other services. If you have already responded, thank you very much for your time; there is no need to do anything further.

If you have not already responded, I would be grateful if you could take the time to give us your views about your experiences of your GP surgery and other local NHS services - we want to hear from as many people as possible. Even if you have filled in a questionnaire before, or you haven't visited your GP surgery recently, your views are very important to us.

Please fill in the enclosed questionnaire, and return it in the freepost envelope provided, by 27th March – you do not need a stamp.

<u>Please note that this is your final opportunity to take part in the survey – there will be no further reminders.</u>

Your answers will be kept completely confidential. NHS England will only see anonymous statistical results. We will not see any individual patient views or information.

There is more information about the survey over the page. If you have any questions or need help filling in the questionnaire, please visit **www.gp-patient.co.uk** where you can also fill in the survey online, or call Ipsos MORI on freephone **0808 238 5385** (Monday to Friday, 9am to 9pm; Saturday 10am to 5pm).

Thank you very much for your time.

Ghlesdinore

Giles Wilmore Director for Patient and Public Voice and Information NHS England

Please turn over 🗁

## Some questions & answers

## Why are we carrying out this survey?

The NHS is working to improve patient experiences of GP surgeries. Your surgery can use the survey results to assess how services are currently being delivered and make changes so they better meet your needs.

## Will we be able to see your individual results?

No. NHS England will only see anonymous statistical results. If you would prefer not to answer individual questions please leave them blank but complete the rest of the questionnaire.

#### How did we get your name and address?

Your name was selected randomly from the NHS list of patients registered with a GP. Ipsos MORI will keep your contact details confidential and, once the survey is finished, will destroy them. Ipsos MORI have not been given any information about your health.

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## Türkçe

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#### اردو

gp-patient.co.uk/urdu 0808 238 5379

For help filling out the survey, or to request it in Braille or large print, call freephone **0808 238 5385**. To learn more about the survey, please visit **www.gp-patient.co.uk/FAQ** 



## For more information

Ipsos MORI 79-81 Borough Road London SE1 1FY

t: +44 (0)20 7347 3000 f: +44 (0)20 7347 3800

## www.ipsos-mori.com www.twitter.com/IpsosMORI

#### About Ipsos MORI's Social Research Institute

The Social Research Institute works closely with national governments, local public services and the not-for-profit sector. Its c.200 research staff focus on public service and policy issues. Each has expertise in a particular part of the public sector, ensuring we have a detailed understanding of specific sectors and policy challenges. This, combined with our methodological and communications expertise, helps ensure that our research makes a difference for decision makers and communities.