

**Friends and Family Test Q3 2024 (October, November, December) “You said, we did”.**

Nationally the FFT question - “Thinking about our Practice – Overall, how was your experience of our service?” gives all patients the opportunity to provide us with their feedback.

We are still seeing an increase in responses, receiving over five hundred each month via Mjog, PATCHS, the website and paper forms. The more responses we have results in more feedback for us to listen too. Not all patients leave written feedback, some only leave a score (1-6).

Month on month we receive a considerable number of positive scores and written feedback, detailing what patients think about their overall experience at BHC.

**The chart below shows the percentage of patients rating their experience as the total numbers for Q3 2024.**

**Very Good/Good was 95.3% with only 1.8% advising their experience was Poor/Very Poor. This is from a total of 2,293 patient responses.**

Month	Q3 2024	
Very Good	1981	86.4%
Good	204	8.9%
Neither good nor poor	60	2.6%
Poor	17	0.7%
Very poor ***	24	1.1%
Don't Know	6	0.3%
<b>Total No. of Responses</b>	<b>2292</b>	

The survey also gives patients the opportunity to suggest areas for improvement, raise concerns or make recommendations. Each quarter we will let you know what we have done/are doing about these comments/feedback.

Suggested areas for improvements	So, we did the following:
<p><b>Practice Signage – confusing different zones –</b></p> <p><b>5 Comments</b></p>	<p>As a practice we are always looking at ways to improve the care and service we can provide to our patients. One way in which we have done this is by increasing our clinical workforce, by employing various new roles such as Clinical Pharmacists, Paramedics and Musculo-skeletal Practitioners. As our clinical team expanded, it became apparent that we needed to use areas of the Practice that had been previously used by Community Services. This created a need to “zone” the practice into Green and Yellow Zones.</p> <p>Temporary signs were in place until we confirmed where the clinicians would be consulting from on a permanent basis. More recently we have had new signage designed and is in-situ in the Practice, hopefully making it easier for patients to navigate around the building.</p>

	<p>The check in screen also directs patients to the correct waiting room for the person they have an appointment with. The medical administrators will also assist with any zone/room questions/directions as we are aware that the changes we have made will take time for patients to get used to.</p>
<p><b>Appointments not running to time –</b>  <b>7 comments</b></p>	<p>It is part of the medical administrator role to pro-actively manage the waiting room and keep patients up to date with any delays. The management team have reminded the admin team of the importance of providing regular verbal updates to patients. Communication has also gone to all staff to ensure patients are booked in for the correct appointment duration in accordance with their problems and history – this will also help keep wait times down.</p> <p>Appointment allocation is 15 minutes per patient per problem. If a patient has multiple problems to discuss and only a single appointment is allocated this can cause delays for other patients.</p> <p>At times, unforeseen medical emergencies such as patients needing to be admitted to hospital can also cause delays with being seen.</p>
<p><b>Paying for the car park –</b>  <b>3 Comments</b></p>	<p>In 2003 the carpark barrier was introduced with a £1 charge to discourage non-patients from parking near to the city and heading to work or the nearby shops, as this was reducing the parking capacity for patients attending the practice. The minimal charge for the car park has stayed at £1 for twenty-two years. The money received from the car park is not only used for the upkeep of the car park barrier but also as clinical capacity back into the practice.</p> <p>Any patients who hold a “blue badge” are exempt from the charge.</p>