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Out-of-Hours Quality in Care

November 2009





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23 November 2009

Dear Miss Berbar

Please find enclosed your report outlining your patient feedback from the Out-of-Hours Quality in Care Questionnaire. Data for this survey was collated in September 2009. 30 patient questionnaires were sent out and 25 completed questionnaires were returned giving a response rate of 83.33%.

The results have been illustrated in tables and graphs with associated benchmarks where applicable. Supporting documents have been included to help you with the interpretation and understanding of your results.

I hope that this report provides you with useful feedback about your services. Please contact Matthew Taylor on 01392 252740 or matthew.taylor@cfep.co.uk if you require further information about your results.

Yours sincerely

A handwritten signature in black ink, appearing to read "Helen Powell".

Helen Powell
Data Manager

OOH Quality in Care

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Question Q1a Please tick which type of service you received most recently from your Out-of-Hours' provider.

Table 1: Number and percentage of responses

	Number of responses	% total of responses
Telephone advice	10	40%
Treatment centre (phoning the service)	9	36%
Treatment centre (without phoning the service)	1	4%
Home visit	5	20%
Blank	0	0%

% total of responses may not equal 100 due to rounding

Question Q1b Were you satisfied with the service you were directed to?

Table 2: Number and percentage of responses

	Number of responses	% total of responses
Yes, I was satisfied	16	64%
No, should have had telephone advice	6	24%
No, should have had home visit	2	8%
No, should have been seen at treatment centre	1	4%
Blank	0	0%

% total of responses may not equal 100 due to rounding

Table 3: Number of responses by service type (from Q1a)

	Home visit	Telephone advice	Treatment Centre
Yes, I was satisfied	5	7	4
No, should have had home visit	0	1	1
No, should have had telephone advice	0	1	5
No, should have been seen at treatment centre	0	1	0

Blank = Patients that did not specify the service type received in Q1a

OOH Quality in Care

Patient responses: 25

Question Q2 About your first telephone contact (initial call) with this service

Table 4: Distribution and frequency of ratings

	Blank	Poor	Fair	Good	Very Good	Excellent
Q2a Call answering time	4	3	3	7	4	4
Q2b Treated on phone	4	5	3	6	3	4

Blank responses are not included in the score calculation

Table 5: Mean percentage scores and benchmarks

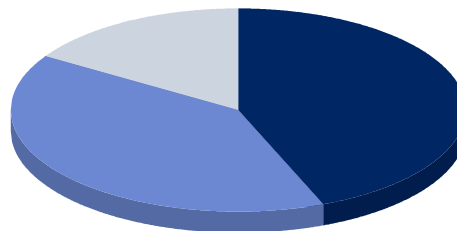
	Your mean score (%)	Deviation from the national mean%	National mean and quartiles (%)*					
			National mean (%)	Min	Lower quartile	Median	Upper quartile	Max
Q2a Call answering time	54	-12	66	49	64	65	67	79
Q2b Treated on phone	48	-23	71	51	69	70	72	80

*Benchmarks are based on data from 81 practices surveyed between March 2009 and October 2009 with more than 40 returned questionnaires.

Question Q3a Were you told how long it would be before a health professional would ring you back?

Graph 1: Number and percentage of responses

■ Yes	11	44.0%
■ No	10	40.0%
■ Blank	4	16.0%
Total:		25 100.0%



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Patient responses: 25

Question Q3b & Q3c After your initial call, how many times were you rung back by the service? How do you rate this?

Graph 2: Number and percentage of responses

None	8	32.0%
Once	7	28.0%
Twice	5	20.0%
Three	0	0.0%
Four times or more	1	4.0%
Blank	4	16.0%
Total:	25	100.0%

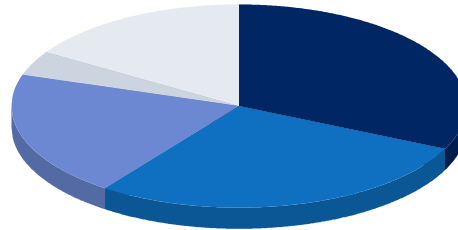


Table 6: Distribution and frequency of ratings

	Blank	Poor	Fair	Good	Very Good	Excellent
Q3c Rate number of calls	4	3	5	5	4	4

Blank responses are not included in the score calculation

Table 7: Mean percentage score and benchmarks

	Your mean score (%)	Deviation from the national mean%	National mean and quartiles (%)*					
			National mean (%)	Min	Lower quartile	Median	Upper quartile	Max
Q3c Rate number of calls	51	-11	62	39	60	62	63	77

*Benchmarks are based on data from 81 practices surveyed between March 2009 and October 2009 with more than 40 returned questionnaires.

Question Q3b & Q3c After your initial call, how many times were you rung back by the service? How do you rate this?

Table 8: Distribution and frequency of ratings by number of ring backs

	Total	Poor	Fair	Good	Very good	Excellent	Blank
Total	25	3	5	5	4	4	4
None	8	2	1	2	3	0	0
Once	7	1	4	2	0	0	0
Two or more	6	0	0	1	1	4	0
Blank	4	0	0	0	0	0	4

Blank responses are not included in the score calculation

Table 9: Number and percentage of responses and mean scores by number of ring backs

	Number of responses	% total of responses	Mean score (%)
None	8	32%	44
Once	7	28%	29
Two or more	6	24%	88
Blank	4	16%	

% total of responses may not equal 100 due to rounding

*For completeness, details of 'blank' responses are recorded in table 9. If a 'blank' score is displayed, this relates to those respondents who did not answer Q3b 'After your initial call, how many times were you rung back by this service?', but rated the service in Q3c. Please see table 8 for reference.

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Patient responses: 25

Question Q3d & Q3e How long did you have to wait before the telephone consultation with the health professional?

Graph 3: Number and percentage of responses

None	2	8.0%
0-20 mins	7	28.0%
21-40 mins	3	12.0%
41-60 mins	3	12.0%
1 hour +	3	12.0%
Blank	7	28.0%
Total:	25	100.0%

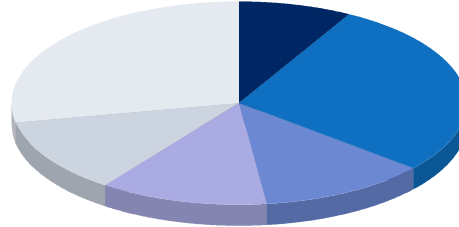


Table 10: Distribution and frequency of ratings

	Blank	Poor	Fair	Good	Very Good	Excellent
Q3e Rate time to call back	4	4	4	4	5	4

Blank responses are not included in the score calculation

Table 11: Mean percentage score and benchmarks

	Your mean score (%)	Deviation from the national mean%	National mean and quartiles (%)*					
			National mean (%)	Min	Lower quartile	Median	Upper quartile	Max
Q3e Rate time to call back	51	-5	56	27	51	55	57	72

*Benchmarks are based on data from 81 practices surveyed between March 2009 and October 2009 with more than 40 returned questionnaires.

Question Q3d & Q3e How long did you have to wait before the telephone consultation with the health professional?

Table 12: Distribution and frequency of ratings by length of time waiting

	Total	Poor	Fair	Good	Very good	Excellent	Blank
Total	25	4	4	4	5	4	4
None	2	0	0	2	0	0	0
0-20 mins	7	1	0	0	3	3	0
21-60 mins	6	0	3	2	1	0	0
1 hour +	3	1	1	0	0	1	0
Blank	7	2	0	0	1	0	4

Blank responses are not included in the score calculation

Table 13: Number and percentage of responses and mean scores by length of time waiting

	Number of responses	% total of responses	Mean score (%)
None	2	8%	50
0-20 mins	7	28%	75
21-60 mins	6	24%	42
1 hour +	3	12%	42
Blank	7	28%	25

% total of responses may not equal 100 due to rounding

*For completeness, details of 'blank' responses are recorded in table 13. If a 'blank' score is displayed, this relates to those respondents who did not answer Q3d 'How long did you have to wait before the telephone consultation with the health professional?', but rated the service in Q3c. Please see table 12 for reference.

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Patient responses: 25

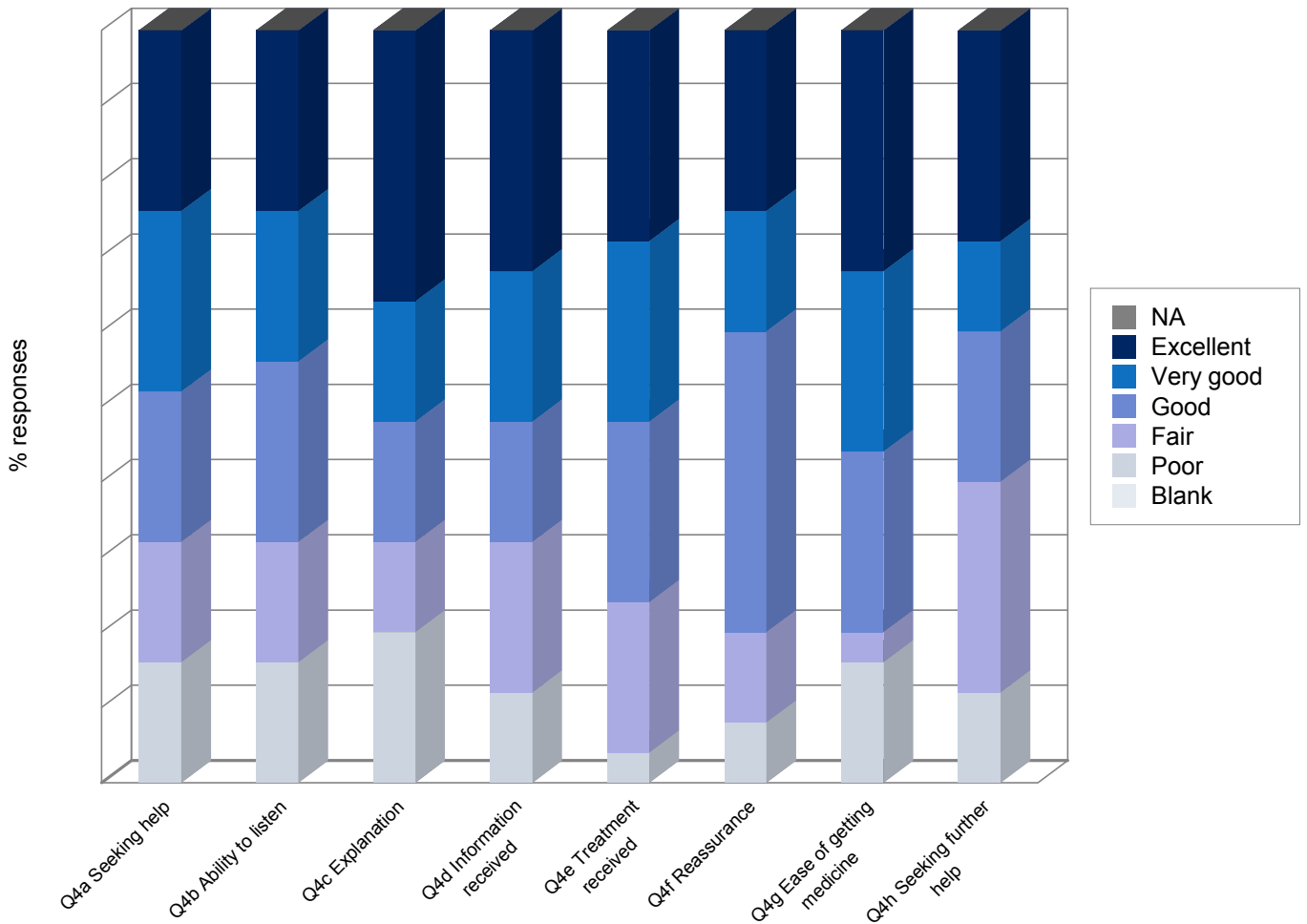
Question Q4 About the overall help you received, from one or more health professionals

Table 14: Distribution and frequency of ratings

	Blank	Poor	Fair	Good	Very Good	Excellent
Q4a Seeking help	0	4	4	5	6	6
Q4b Ability to listen	0	4	4	6	5	6
Q4c Explanation	0	5	3	4	4	9
Q4d Information received	0	3	5	4	5	8
Q4e Treatment received	0	1	5	6	6	7
Q4f Reassurance	0	2	3	10	4	6
Q4g Ease of getting medicine	0	4	1	6	6	8
Q4h Seeking further help	0	3	7	5	3	7

Blank responses are not included in the score calculation

Graph 4: Percentage distribution of ratings



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Patient responses: 25

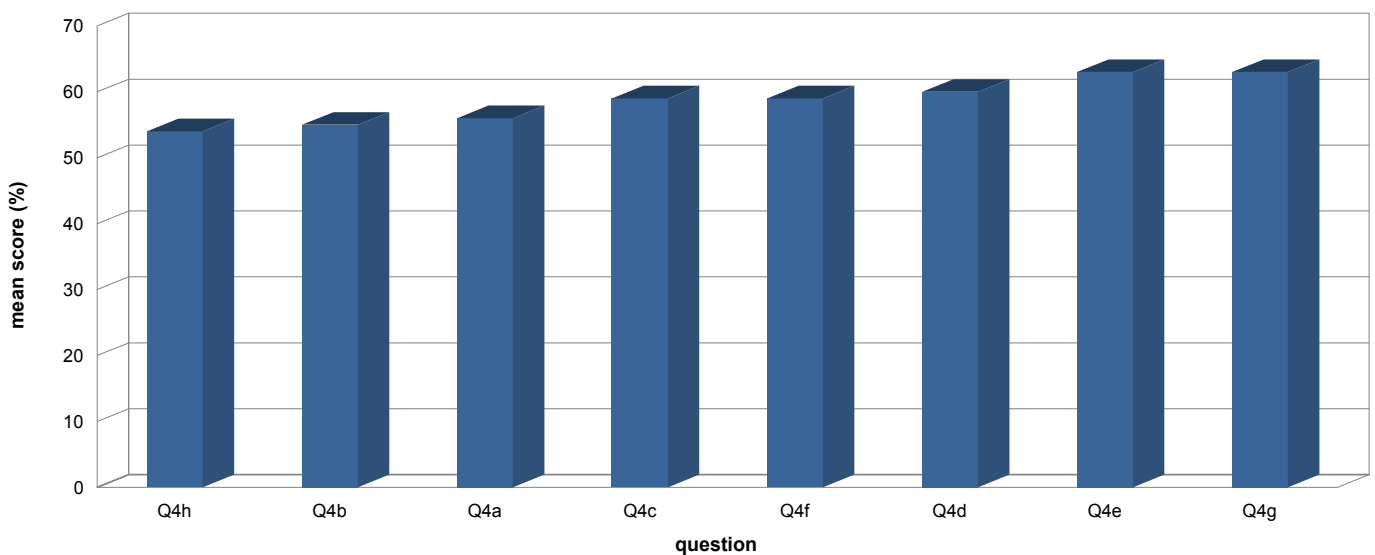
Question Q4 About the overall help you received, from one or more health professionals

Table 15: Mean percentage scores and benchmarks

	Your mean score (%)	Deviation from the national mean%	National mean and quartiles (%)*					
			National mean (%)	Min	Lower quartile	Median	Upper quartile	Max
Q4a Seeking help	56	-13	69	52	67	69	70	79
Q4b Ability to listen	55	-15	70	52	68	70	72	79
Q4c Explanation	59	-9	68	52	66	67	70	78
Q4d Information received	60	-8	68	51	66	68	70	78
Q4e Treatment received	63	-7	70	52	67	69	71	80
Q4f Reassurance	59	-7	66	49	63	66	68	75
Q4g Ease of getting medicine	63	-2	65	51	63	65	66	79
Q4h Seeking further help	54	-13	67	44	64	66	69	78

*Benchmarks are based on data from 81 practices surveyed between March 2009 and October 2009 with more than 40 returned questionnaires.

Graph 5: Mean percentage scores in ascending order of performance



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Patient responses: 25

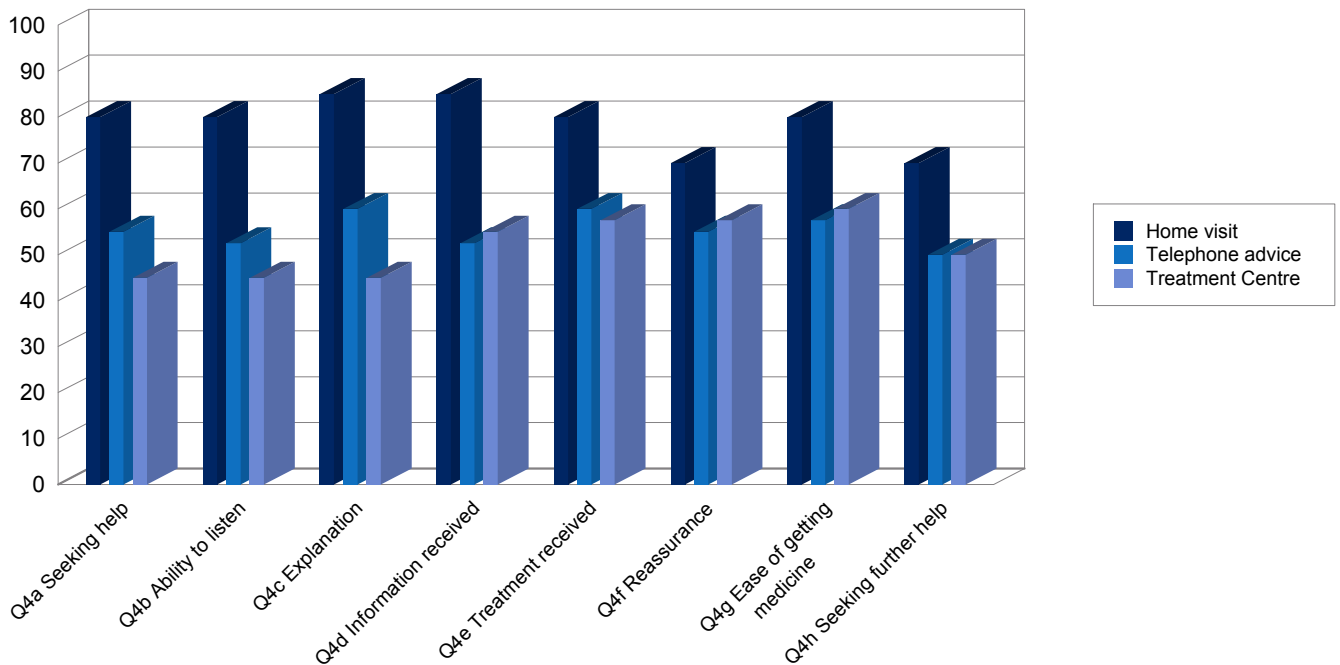
Question Q4 About the overall help you received, from one or more health professionals

Table 16: Mean percentage scores by service type (from Q1a)

	Home visit	Telephone advice	Treatment Centre
Q4a Seeking help	80	55	45
Q4b Ability to listen	80	53	45
Q4c Explanation	85	60	45
Q4d Information received	85	53	55
Q4e Treatment received	80	60	58
Q4f Reassurance	70	55	58
Q4g Ease of getting medicine	80	58	60
Q4h Seeking further help	70	50	50

Blank = Patients that did not specify the service type received in Q1a

Graph 6: Mean percentage scores by service type (from Q1a)



Benchmark scores (combined scores from Q2b, Q4a, Q4b, Q4c, Q4d, Q4e, Q4f and Q4h)

Table 17: Overall benchmark score and benchmark scores by service type (from Q1a)

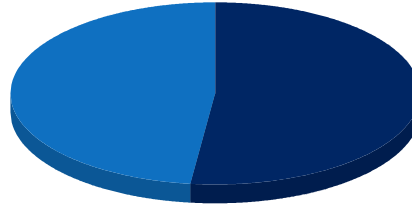
	Home visit	Telephone advice	Treatment Centre	Overall	National benchmark mean
Overall mean score (%)	79	55	51	58	67

Blank = Patients that did not specify the service type received in Q1a

Questions Q5 - Q7 Patient demographics

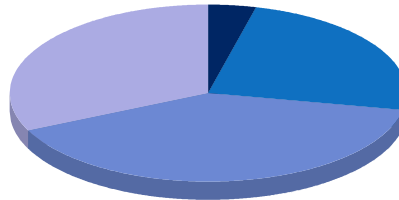
Graph 7: Patient gender: number and percentage of responses

Female	13	52.0%
Male	12	48.0%
Blank	0	0.0%
Total:	25	100.0%



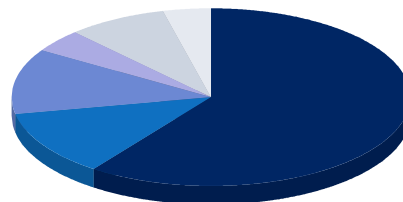
Graph 8: Patient age: number and percentage of responses

Under 16	1	4.0%
16-24	6	24.0%
25-59	10	40.0%
60 or over	8	32.0%
Blank	0	0.0%
Total:	25	100.0%



Graph 9: Patient ethnic group: number and percentage of responses

White	15	60.0%
Black or Black British	3	12.0%
Asian or Asian British	3	12.0%
Mixed	1	4.0%
Chinese	2	8.0%
Other ethnic group	1	4.0%
Blank	0	0.0%
Total:	25	100.0%



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Patient responses: 25

Score Explanation

Each individual score for the evaluation questions is expressed as an average (mean) for all patients who completed the question. They are expressed as a percentage of the maximum possible score, so the best possible score in each case is 100%. *Not specified responses (*items left blank*) are not used in the score calculations.

All questions follow a five point rating scale ranging from 0% to 100%.

	Poor	Fair	Good	Very Good	Excellent	Blank
Percentage Score (%)	0	25	50	75	100	n/a

See example below from question Q2a

Number of Patients Surveyed:25

Questions	Rating					
	Poor	Fair	Good	Very Good	Excellent	Blank
Q2a Call answering time	3	3	7	4	4	4

$$(3 \times 0) + (3 \times 25) + (7 \times 50) + (4 \times 75) + (4 \times 100)$$

$$25 - 4$$

=54% mean percentage score

Explanation of Quartiles

In statistics a quartile is any one of the three values that divide data into four equal parts, each part represents ¼ of the sampled population.

Quartiles comprise:

Lower quartile, below which lies the lowest 25% of the data

The median, cuts the data set in half

Upper quartile, above which lies the top 25%.

	Your mean score (%)
Q2a Call answering time	54

National means and quartiles (%)					
National mean	Min	Lower quartile	Median	Upper quartile	Max
66	49	64	65	67	79

Based on our most current national benchmarks, your mean score of 54% falls between the Minimum and the lower quartile which is the lowest 25% of all means

■ Out-of-Hours Quality in Care



Provider Name?

You can help {provider name} improve its care by giving your honest feedback. Your responses will remain anonymous

Please mark the box like this with a ballpoint pen. If you change your mind just cross out your old response and make your new choice.

! If you were not the patient, e.g. parent/carer, please answer the following questions, as best you can, from your experience with the last time you used the out-of-hours' service on their behalf.

1a Please tick which type of service you received **most recently** from your Out-of-hours' provider.

- Telephone advice
 Treatment centre (after phoning the service)
 I went to the treatment centre straight away (without phoning)
 Home visit

b Were you satisfied with the service you were directed to? (i.e. home visit, treatment centre or telephone advice) *Please tick one box only*

- Yes, I was satisfied
 No, I should have had a home visit
 No, I should have been given advice on the telephone
 No, I should have been seen at the treatment centre

! If you telephoned the service please answer Q2. If you went to the treatment centre straight away please move directly to Q4.

2 About your first telephone contact (initial call) with this service

Please rate...	Poor	Fair	Good	Very good	Excellent
a Your satisfaction with the time it took for the receptionist to answer the phone (after any pre-recorded message)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b The manner in which you were treated on the phone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Sample only
Not to be copied**

! If a health professional (doctor, nurse, paramedic etc.) spoke to you on the phone please answer all the remaining questions. If the call-handler arranged a face-to-face consultation (at home or at a treatment centre), go straight to question 4.

3a	Were you told how long it would be before a health professional would ring you back?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No		
		None, phone contact ended with my first call	Once	Twice	Three times	Four times or more	
b	After your initial call, how many times were you rung back by the service?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c	How do you rate this?	<input type="checkbox"/>	Poor	Fair	Good	Very good	Excellent
d	How long did you have to wait before the telephone consultation with the health professional?	<input type="checkbox"/>	No time, the call was transferred	Up to 20	21 to 40	41 to 60	More than 1 hour
e	How do you rate this?	<input type="checkbox"/>	Poor	Fair	Good	Very good	Excellent



Please turn over

Version 2.5
24-01-2009

Survey provided by



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4 About the overall help you received, from one or more health professionals. *Important: this is about your most recent contact and includes telephone advice as well as consultations at a treatment centre or home visits.*

Please rate...	Poor	Fair	Good	Very good	Excellent	N/A
a Their understanding of why you were seeking help	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b Their ability to listen to you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c Their explanation of things to you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d The advice and information you received	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e The treatment you received	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f The extent to which you felt reassured by them	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g The ease of getting any necessary medicines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h The advice given about seeking further help	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Sample only
Not to be copied**

! The following questions about the patient provide us with general information about the range of people who have used this service

5 Are you?

Male Female

6 How old are you in years?

Under 16 16-24 25-59 60 or over

7 Which ethnic group do you belong to?

White Black or Black British Asian or Asian British
 Mixed Chinese Other ethnic group

The service would appreciate any comments you would like to add about your experience. Please write these on an **additional piece of paper** and return them to us with this questionnaire in the envelope provided. This feedback will be forwarded directly onto the provider. **Please only write your name on it if you wish to be identified.**

Thank you for your time and assistance



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