

Patient Questionnaire Survey: Action Plan to be taken as priorities for 2025/26

Action	Responsibility of:	To be completed by (date)	Date completed
Patient Education Further development of health educational material and practice information – Review of material in alternative languages and format of delivery i.e. audio visual recordings for patient waiting room.	Obaid Siddiq, PPG members & Clinicians with interest	Patient Information screens & content implemented in Sept 19. Content to be periodically reviewed and updated. Clinicians will potentially develop short webinars for online content.	Ongoing
Improving Access to practice services Reduction of DNA Rate - Implementation of robust policies - raise patient awareness - Implementation of mobile text reminder system - Reception staff - appointment 'call reminder' Monitor New Telephone system - Utilise telephone audit data to determine demand upon system through any one day. Implementation of relevant new technologies - Online appointment booking & Prescription service - AccuRx – e – Consult Service (as part of GP Triage service) Promotion of Pharmacy First/CPCS scheme & Extended Access Hub usage	Obaid Siddiq & GP Partners Obaid Siddiq/ GP Partner/ Reception team/Telephony providers Obaid Siddiq Obaid Siddiq/ Reception Team	Review after 12 months (Audit GPAD/APEX data for reduction in DNA rates for GP/nurse appt's compared to previous year) 3 rd Party Telephony support company providing audit/activity data to monitor call demand. Online system is being implemented (Uptake >2028 users 1356 active users). Review capacity of online appointments. EPS consents: 4060 (79.9%) Review after 12 months Reception team to promote CPCS scheme and sign post extended access service (Pharmacy First scheme uptake currently 1738 users)	On-going monitoring System Upgrade - Nov 24. On-going monitoring upon implementation On-going monitoring On-going monitoring and review OurNet apt data On-going monitoring

Designated Clinics ('fast track') for identified patient groups. Increase appt capacity and reduce A/E attendance. For example: Mental Health Assessment clinics, Learning Disability assessment and Frailty service for identified patients. 'Minor ailments clinics' for children during Winter period. Develop Dementia clinics run by Clinical Pharmacist (PhD) to develop new care approaches.	Obaid Siddiq/ GP Partners	On-going & dependent upon funding sources and PCN staff recruitment with appropriate skills	
Multi Skilled Team - Building capacity Identifying appropriate training needs for clinical and non-clinical staff. Develop skills mix. For example Clinical Pharmacists undertaking ACP course & admin staff member trained as Phlebotomist to free up nurse/HCA time.	Obaid Siddiq/ GP Partners/ Training providers	Review after 12 months (Protected learning time/ Individual staff targets). Dependent upon funding sources	On-going monitoring of GPAD/APEX data

The findings of the survey will be communicated to patients by;

- 1) Information posters displayed in waiting rooms
- 2) Presentation of findings to Practice Patient Group

Review Date: 15.5.25

Review Undertaken by: Dr A Ahmed & Mr O Siddiq