GPPS 2007/08 frequently asked questions

Here is a list of frequently asked questions for the GPPS 2007/08.

What is the purpose of the survey?

The purpose of the GP Patient Survey is to measure how satisfied NHS patients feel about access to their GP and experience of being offered a choice of hospital on referral. The questionnaire is mailed directly to patients who have been selected at random from practices’ registered lists. It seeks to understand the ease with which patients are able to:

- consult a GP within 2 working days
- book ahead for non-urgent appointments
- contact the practice by phone
- make an appointment with a particular GP.

The survey was principally established to provide Primary Care Trusts (PCTs) with data to assess achievement of access standards by GP practices which are organised under the ‘Improved Access Scheme’ Directed Enhanced Services (DES).

Practices meeting the standards receive reward payments that are proportionate to the levels of experience reported by their patients in the survey. The access questionnaire also gauges satisfaction with GP practice opening hours and reasons for dissatisfaction.

Where PCTs find performance is poor, or could be improved, the Department of Health expects them to take local action to address problems, such as extending practice opening hours or improving capacity, both of which are supported under national initiatives.

How were patients selected to participate?

Patients were selected at random from GP registered patient lists. Participation was completely voluntary.

Children were excluded from the Survey following advice from researchers that aiming this type of question directly at children would be inappropriate. Ethics advice was that those under 18 years of age should only be included in surveys where necessary.

How many patients have taken part?

Ipsos MORI, who conducted the survey on behalf of the Department of Health, received a total of 1,999,523 valid responses from a total sample of 5 million people, a response rate of 41 per cent overall.

What timescales did the survey work to?
Patients were sent questionnaires in the week commencing 7 January 2008, with reminders sent out in February and March. The closing date for completed surveys was the 2 April 2008. Surveys returned after this date were not included in the results. The national results were published on 16 July 2008 by The NHS Information Centre.

How much did the survey cost?
The Department of Health budgeted around £10million for this year. This includes costs to conduct both the access and choice components of the survey.

What steps were put in place to ensure a strong response rate to the survey?
Ipsos Mori, put a number of procedures in place to minimise the number of non-responses. These included:

- sending the survey to a named individual rather than addressing it 'Dear Patient'
- providing a free helpline to support people whose mother tongue was not English and to support people with visual impairments, so that they could complete the questionnaire over the phone
- seeking advice from the Plain English Campaign, to ensure that the survey was communicated as clearly as possible.

Why were patients asked about their ethnic group?
This is a standard question used in social surveys.

The groupings are those used by the Office of National Statistics. People who did not feel they belong to any of the ethnic groups wrote their group in the box marked “other”.

Who was involved in developing the survey?
The core of the questionnaire, including the yes/no format was agreed in negotiations between NHS Employers (representing the Department of Health (DH) and the General Practitioners Committee, of the British Medical Association.

Ipsos MORI, who conducted the survey on behalf of DH, provided advice on methodology to make the questionnaire as effective as possible within stakeholder-agreed parameters. Ipsos MORI also subjected the questionnaire to a process of cognitive testing to ensure the questions were understood as clearly as possible.

What provision was made for individuals who were unable to complete the survey without additional assistance?
Helplines were available for individuals who were unable to complete the survey without additional assistance. These may have included people with a visual impairment, individuals who did not have
English as a first language, and anyone who had difficulty completing the questionnaire.

The helpline was available in 10 languages in addition to English. These were chosen on advice from NHS Direct as to the most common languages they provide advice in. They are: Urdu, Punjabi, Polish, Bengali, Arabic, French, Gujarati, Turkish, Somali and Portuguese.

What happens to the patient information once it is collected?

Once Ipsos MORI has carried out the survey and analysed the results, the terms of their contract require them to securely destroy all data.

Has ethics approval been sought from the Central Office of Research Ethics Committees (COREC)? Has there been clearance?

Ipsos Mori has been advised by COREC that following the criteria that COREC uses to deliberate on this issue, the survey is classified as “service evaluation”. The survey does not therefore require COREC review.

Has The Department of Health Caldicott Guardian been involved in the survey’s proposals?

Yes. The Department of Health’s (DH) Caldicott Guardian is content that arrangements put in place by DH to conduct the survey are sufficient to address the needs of the Data Protection Act 1998.

How does the survey comply with requirements for patient confidentiality?

Primary Care Trusts (PCTs) have lawful access to patient details through their legal obligations to maintain registers of patients at each practice. Given that the survey is used to determine patients’ experiences of access to their GPs, which in turn determines payment made to practices, there are legitimate purposes for the survey to be conducted.

As there is no disclosure of confidential clinical information involved, there is no breach of confidentiality.

When do practices receive payment for taking part?

Payments were due to be made to practices who participate in the survey by the end of the first quarter of the 2008/09 financial year (June), based on the outcome of the survey.

Will practices get a copy of the resulting statistical analysis?

Each practice will have access to its own results – and individual Primary Care Trusts will have access to the results of all the GP practices in their area.

What payment will be made to practices that have not participated in the survey?
Practices that do not participate in the survey will not have any results for the Primary Care Trust to pay against and therefore will not receive any payment.

**What payment will be made to practices that have closed, split or merged during the 07/08 DES period?**

It will be up to the local Primary Care Trust to decide with the practice what awards will be made in respect of the Direct Enhanced Service based on advice set out in the SFE paragraphs 7E 34-38 (mergers) and 7E (40-43 splits). Directors of finance should ensure that appropriate arrangements are in place to consider challenges.

**Where can I learn about the results of my local area/practice?**

View the results of the GP Patient Survey.

**What were the 2007 Survey results?**

Last year, 2.5 million responses were received from the separate access and choice surveys, making it the largest ever survey of NHS patient survey. Overall, the results of the survey were:

- 87 per cent of patients were satisfied with the telephone access to their surgery
- 87 per cent of patients were able to consult a GP within 48 hours
- 77 per cent of patients were able to book ahead for a non-urgent appointment
- 88 per cent of patients were to make an appointment with a specific GP.

The 2007 results are available on the following DH website: [www.dh.gov.uk/en/Publicationsandstatistics/PublishedSurvey/GPpatientsurvey2007](http://www.dh.gov.uk/en/Publicationsandstatistics/PublishedSurvey/GPpatientsurvey2007)

**Why is my practice not shown in the results of the GP Patient Survey on hospital choice?**

The NHS Information Centre (IC) did not undertake the 2008 GP Patient Survey, but is responsible for publishing its results.

The survey was undertaken by Ipsos MORI on behalf of the Department of Health (DH). The GP Patient Survey consisted of two separate questionnaire surveys: an access survey that was mailed directly to a sample of patients by Ipsos MORI, and a choice survey that was issued to patients by their GPs, and then returned by patients to Ipsos MORI.

Regarding practices missing from the results of the choice questionnaire survey, nationally there are over 1,300 fewer practices in the choice survey results, compared with the access survey. The figures published by the IC have been verified as correct by Ipsos MORI.

The choice survey results include only practices for which choice questionnaires were completed and returned by patients to Ipsos Mori. This is not necessarily to suggest that these practices did not issue any choice survey forms to patients - simply that none were completed by patients and returned to Ipsos MORI for inclusion in the results.
More details of the methodology are in the choice survey technical report..

If you have any queries relating to how the choice survey was conducted, our Primary Care Contracting colleagues have a dedicated helpdesk at gppatientsurvey@pcc.nhs.uk

Alternatively you may contact the GP Patient Survey team at the DH, for example with queries relating the payment issues arising from the survey results.

**Why is my practice's hospital choice result so different from last year?**

The GP Patient Survey consists of two separate questionnaire surveys. The access survey was a centrally managed questionnaire that was posted to a sample of patients. The choice survey was a questionnaire form given to patients by GPs, and then returned by patients to the organisation that conducted the survey.

Question 12 of the GP Patient Survey Access questionnaire asked patients if their GP discussed choice of hospital for a referral. Nationally 52 per cent of patients said 'yes'. This question was not included in the 2007 version of the access survey.

The same question was the basis for the choice survey, which informed GP practice payments in respect of the ‘Choice and Booking’ Directed Enhanced Service. Nationally 93 per cent of respondents to the choice survey said that choice was discussed.

This survey was also conducted in 2007. In the 2008 published results, the online workbooks (Excel files) have separate 'tabs' (worksheets) containing the results of the Access and Choice surveys for 2008 (see the data tables).