

Patient Feedback Report

Based on Friends and Family Test responses

January – April 2026

The Oak Gables Partnership



Executive summary

This report analyses patient Friends and Family Test responses collected across four months from January to April 2026. A total of 1,061 responses were received.

The overall picture is strongly positive. Approximately 70% of all respondents indicated they had nothing to criticise and were satisfied with their visit. Nurses and reception staff received warm, consistent praise throughout all four months, with several individuals named explicitly by patients.

The dominant concern, raised in every month and accounting for approximately 16% of all responses, is appointment waiting times. Patients frequently acknowledged this is an NHS-wide issue, though this does not diminish its impact on their experience.

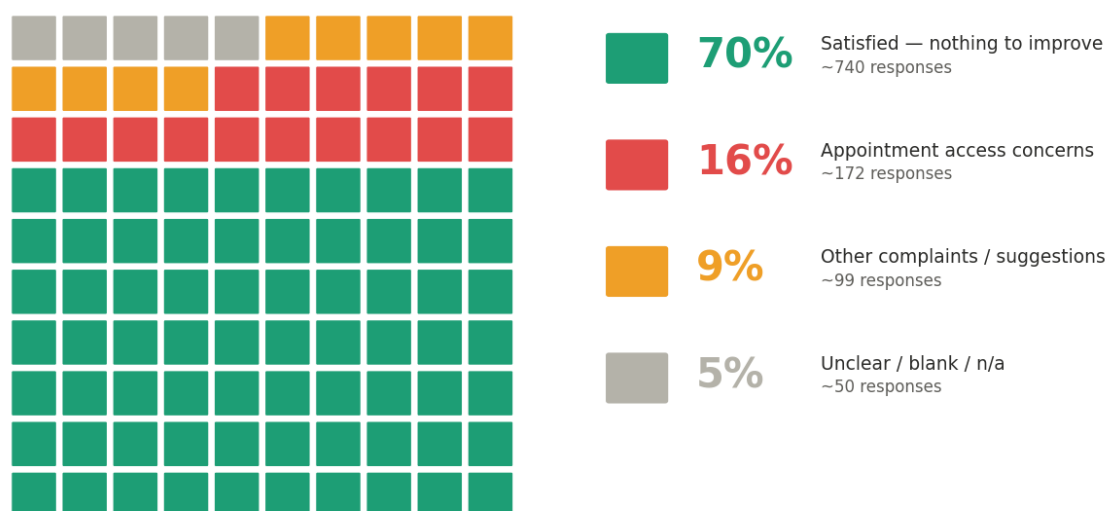
 1,061 patients gave feedback	 70% were happy with their visit	 4 months January to April 2026
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1,061 Total responses	294 January	314 February	281 March
172 April	~70% Overall satisfaction	~16% Appointment complaints	50+ Praised staff by name

Overall satisfaction

The gauge below illustrates the balance of feedback across all 1,061 responses. The needle reflects the 70% overall satisfaction rate — a strong baseline from which to consider the improvements raised by the remaining 30%.

Overall patient satisfaction — January to April 2026



Each square ≈ 11 patients | 100 squares = 1,061 responses

Figure 1: Overall patient satisfaction — Jan to Apr 2026 (each square ≈ 11 patients)

Complaints and improvement requests

The following table summarises the top ten themes identified from patient feedback. Percentages are calculated as a proportion of the total 1,061 responses received across all four months.

#	Issue	Count	% total	Notes
1	Appointment waiting times too long	~172	16.2%	Consistent #1 across all months. Many patients acknowledged this is NHS-wide.
2	Check-in screen / floor signage confusion	~22	2.1%	Every month since January. One patient waited over an hour due to check-in failure.
3	Doctor not listening / symptoms dismissed	~15	1.4%	3-minute appointments, symptoms dismissed, pain not taken seriously.
4	Blood test waiting times (3–4 weeks)	~14	1.3%	Also includes month-long waits for results to be communicated back.
5	No continuity of care / different doctors	~10	0.9%	Patients want to see the same GP for ongoing conditions.
6	Automatic entrance doors causing cold draughts	~8	0.8%	First raised in January. Automatic doors making waiting room cold.
7	Privacy concerns at reception desk	~7	0.7%	Conversations overheard; insufficient distance from other patients.
8	Upstairs waiting area — no receptionist	~7	0.7%	Patients felt unsafe/confused waiting alone upstairs with no staff visible.
9	Prescriptions not ready / delayed	~6	0.6%	Includes repeat prescriptions not processed correctly.

10	Rushed appointments / insufficient time	~6	0.5%	10-minute limit; patients felt treated as a number rather than a person.
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Positives and commendations

The following table summarises the five most prominent positive themes from the feedback period.

#	Theme	Count	% total	Notes
1	Overall satisfied / nothing to improve	~740	~70%	'Nothing', 'all good', 'perfect', 'spot on' etc.
2	Nurses praised (named and unnamed)	~50	4.7%	Gwyneth, Jackie, Anita Shuttleworth, Irma Klein, Sue and Joe praised by name.
3	Staff described as friendly / professional	~34	3.2%	General praise for the manner and professionalism of all staff groups.
4	Doctor praised — thorough knowledgeable	~20	1.9%	Dr Flanders, Dr Arnold named. Patients felt listened to.
5	Appointment on time / efficient service	~14	1.3%	Patients specifically noted punctuality and smooth running of appointments.

Staff recognition

The following members of staff were named positively by patients across the four-month period. The visual below is designed to be shared with the team directly.

Name	Role	Months	Patient comment
Gwyneth	Nurse	Mentioned every month	"First class. Always happy to see her if need be."
Jackie	Nurse	Jan, Mar	"An amazing member of your team. Nothing is too much trouble. Special person."
Anita Shuttleworth	Diabetic Nurse	Jan, Feb	"Calming and easy to be around. Very thorough and explained things very well."
Irma Klein	Nurse	Feb	"Ask Ms Irma Klein to train other nurses in her style and manner."
Joe	Nurse	Feb	"Saved me from added worry by explaining how I should adjust my sugar intake."
Sue	Nurse	Feb	Named positively in context of ongoing patient care and nurse support.
Dr Flanders	GP	Jan	"Always thorough and professional."
Dr Arnold	GP	Mar	"Nothing whatsoever to improve — Dr Arnold was great."
Gwen	Nurse	Apr	"Service by Gwen was excellent."

Other notable feedback

Patient suggestions for improvement

The following suggestions were offered by patients and may be worth considering for future service development:

- Phone or messaging triage to reduce unnecessary in-person appointments and shorten wait times
- Proactive contact from the surgery when test results are available, rather than patients chasing
- Blood tests taken at the same appointment where they are requested
- Printed summary notes provided after nurse consultations to aid patient recall
- Continued use of text appointment reminders — explicitly valued by multiple patients
- Double appointment slots for patients with complex mental health needs or multiple conditions
- Saturday morning surgery provision (January)
- Urgency triage at point of booking so acute needs are seen more quickly
- Tools and resources for non-English speaking patients (January)
- More female doctors available for patients who prefer them (April)
- Video appointments offered more routinely — well received where used (March)

Individual concerns requiring separate attention

The following concerns were raised individually and may warrant direct follow-up or monitoring:

- A GP provided incorrect medication instructions and was unable to locate the patient's notes during the appointment (January)
- An appointment confirmation was sent to the wrong patient, resulting in a wasted visit (January)
- A receptionist was reportedly dismissive and showed no understanding of autism when dealing with a patient who needed additional explanation (March)
- A patient reported feeling uncomfortable under the physical scrutiny of a GP at the start of an appointment (February)
- A patient reported being advised to 'go private' in a manner they felt was inappropriate (April)
- A patient with alcohol dependency reported feeling judged rather than supported (January)
- Safeguarding procedures were flagged by one patient as appearing out of date (February)
- A patient waited 17 weeks for X-ray results to be communicated (January)
- The self check-in system was noted as not being accessible for patients with visual impairment (January)

Recommended actions

Immediate / low-cost actions

- Fix the check-in screen to display correct floor directions — raised every month since January
- Ensure a staff member is visible or accessible to patients in the upstairs waiting area at all times
- Address the automatic entrance door issue causing the waiting room to become cold
- Share named staff commendations formally with the individuals concerned
- Review the process for communicating test results proactively to patients

Medium-term actions for discussion

- Review the appointment booking system with a focus on urgency triage
- Explore phone and messaging triage to reduce in-person demand for straightforward queries
- Investigate whether blood tests can be conducted at the point of referral
- Consider accessibility improvements to the self check-in system
- Conduct a staff awareness session on communicating with neurodivergent patients

Areas for ongoing monitoring

- Appointment waiting times — continue tracking month by month
- Clinical communication quality — patients feeling dismissed, while not numerically dominant, is clinically significant
- Prescription processing reliability — repeat prescription failures raised across multiple months

You said, we did — action tracker

The tracker below pairs the top patient concerns with actions taken or planned by the practice. This is designed to be updated after each PPG meeting and shared with patients to demonstrate that feedback leads to real change.

You said, we did — patient feedback action tracker | April 2026

You said...	We did / we plan to...	Status
Direct to collect floor	Signage updated with clear floor directions. Signage added above check-in station.	Completed
Upstairs waiting area feels isolated — no staff visible	Rota updated: staff checks upstairs waiting area during all clinic hours.	In progress
Automatic doors cause cold draughts	Facilities team reviewing door sensor timing and draught lobby solution.	In progress
Appointment waiting times too long	Capacity data to be shared at PPG. Phone triage under exploration.	For discussion
Blood tests take 3-4 weeks to book	Reviewing nursing capacity. Target: reduce wait to 2 weeks next quarter.	Planned
Test results on NHS app but no appointment available	Admin team to proactively contact patients when significant results are ready.	Planned
Prescriptions not processed correctly	Prescription workflow reviewed. Patients advised to resubmit if not actioned in 48h.	Completed
Patients feel rushed in appointments	Double-appointment option for complex patients to be discussed at clinical meeting.	For discussion
Reception conversations can be overheard	Privacy screen added at reception desk. Staff reminded of privacy protocols.	Completed
No continuity — seeing a different doctor each time	Long-term condition patients can now request a named GP preference when booking.	Planned

Methodology and notes

This report is based on patient Friends and Family Test free-text responses collected between January and April 2026. Responses were coded thematically. Counts are approximate due to the open-ended nature of the responses. Percentages are calculated against the total number of responses in each period.

Responses that were blank, illegible, or contained only a punctuation mark were excluded from analysis but are included in the total response count. Named individuals are referenced where they appear in the feedback verbatim.

This report was prepared for internal use by The Oak Gables Partnership and is intended to support practice improvement and PPG discussions.