

## Patient Participation Report for the year 2012-13

### History of how the Group was established

During the period 2011/2012, MyHealth (then Strensall Medical Practice) issued 3 surveys/questionnaires to our registered patients.

In April/May 2011 Strensall Medical Practice had already determined that we wished to engage more with our patients and our staff in order to understand who we were, what our patients and staff thought of us, and how we could further improve our services.

At this time we instigated our own survey/questionnaire in each of our 4 branch surgeries, which asked patients a total of 26 questions, including demographics and optional 'opt-in' contact details for those patients who were happy to enter into further dialogue with us at a later date.

These questionnaires were put in each branch waiting room and patients were encouraged to complete these forms voluntarily, by receptionists, by posters and use of the plasma screens in the branches. The majority of patients completed these forms whilst in the surgery, although, some chose to take these forms home and returned them to the Practice completed. A clearly marked, confidential box was provided in each waiting room, into which the completed forms were posted.

We also held an 'Away Day' session with all staff in April 2011, in order for them to have the opportunity to share their thoughts on the practice and our services.

Both of these strategies were very successful. The response from the patient questionnaire, in particular, provided almost 300 responses, which were collated during April and May 2011, using Survey Monkey.

Responses from the Patient questionnaire demonstrated clearly our strengths, our weaknesses and our core values. Additionally from this, we gained an understanding of what our objectives should be for future planning. All of this information was shared with our patients via notices boards in the surgery and also through our website.

In June 2011, we determined to set up a virtual Patient Reference Group (PRG), in order to ensure consistent engagement with patients and to provide them with the ability to 'talk' to the practice about any matters of importance or concern. We felt that by making it virtual, patients could air views without feeling inhibited when raising issues pertinent to them. Leaflets and a Frequently Asked Questions Sheet were advertised and made available and continue to be available in each of our branch surgeries; these are also advertised and made available electronically through our website. We also engaged with those patients who had previously indicated they would be happy to 'talk to us' again, through the original Practice

Questionnaire sent out in April/May and sent out letters and the FAQ sheets either electronically or through the post. Within this correspondence, we asked patients if they would be happy to be part of the PRG and whether yes or no; to let us know which areas they felt we should focus on. We provided patients with a list of areas, along with a box for 'other' in which they could stipulate any areas we had not mentioned.

The total number of members of this group currently stands at 170. This number has been maintained with new members joining last year, whilst 10 of our members moved away last year. This continues to compare favourably to the number that completed the Department of Health's GP Patient Survey, for our Practice in 2010-11, conducted by Ipsos Mori; this number being 128.

In the absence of the annual Department of Health's survey, as clearly we wish to continue to engage with our patients and understand their views, in July 2012 we issued a further annual patient survey to members of the PRG and also the patient population in general and the response was a fantastic 276. These results have been published on our website since September last year, and were also sent to the PPG in advance of these being published. Additionally, the information, has been highlighted in waiting rooms in each healthcare centre, and also mentioned in our practice quarterly newsletter.

### **Strategy for Patient Reference Group**

1. Communicate with the Patient Participation Group electronically and via the post in order to attract maximum numbers from each demographic.
2. Use annual (and ad hoc) electronic and paper based surveys within each healthcare centre, to capture the views of as many patients as possible from each demographic.
3. To provide patients with the opportunity to rate a response in order to determine feelings and opinions before action plans produced.
4. Also give patients the opportunity to provide comments and feedback to further understand questions and feelings.
5. To advertise the importance of these groups to patients within branches and via the website in order to continue to grow the base.
6. To provide patients with sufficient time to respond – i.e. keep the survey open for a specific period of time (6 weeks) but advertise the survey close date clearly.
7. Report back to patients annually on the views shared and the actions agreed via website, notice boards in branches and plasma screens.
8. Communicate with Patient Participation Group quarterly, to ensure that they are kept informed of progress and to give them the opportunity to provide feedback on actions and progress made and to identify any demographic not particularly well represented and share ideas of how to engage with that group.

**Practice Profile:**

Age	Practice Population	%age	PRG Profile	%age
Under 17's	3383	18.9	0	0.0
17 – 24's	1446	8.1	3	1.8
25 – 34's	1643	9.2	4	2.4
35 - 44's	2359	13.2	12	7.1
45 -54's	2700	15.1	18	10.6
55 – 64's	2446	13.7	32	18.8
65 -74's	2200	12.3	59	34.7
75 -84's	1085	6.1	38	22.4
Over 84's	613	3.4	4	2.4
<b>Ethnicity</b>				
White British	15153	84.77%	159	93.53%
Irish	8	0.04%		
White and Black Caribbean	5	0.03%		
White and Black African	6	0.03%		
White and Asian	17	0.10%		
Indian	23	0.13%		
Pakistani	12	0.07%		
Bangladeshi	2	0.01%		
Caribbean	2	0.01%		
African	11	0.06%		
Chinese	32	0.18%		
Any Other white	767	4.29%	10	5.88%
Other	278	1.56%		
Declined to Comment	1559	8.72%	1	0.59%
<b>GENDER</b>				
Male	8512	47.62%		
Female	9363	52.38%		

**Demographics by Practice/Branch for Patient Participation Representatives:**

MyHealth formerly Strensall Medical Practice comprises of 4 branch surgeries. We are a large semi rural practice, covering both sides of the A64 in the North East area of York.

**Dunnington:**

Largely comprises commuters and retired professionals.

37 representatives - 19:18 female: male ratio.

Female			Male		
Age group	Number	% age	Age group	Number	% age
Under 25's	273	23.3	Under 25's	299	27.7
25 – 34	75	6.4	25 – 34	80	7.4
35 – 44	161	13.7	35 – 44	140	13.0

45 – 54	156	13.3	45 – 54	149	13.8
55 – 64	158	13.5	55 – 64	138	12.8
65 – 74	189	16.1	65 – 74	171	15.9
75 – 84	97	8.3	75 – 84	71	6.6
84 +	64	5.5	84 +	30	2.8

In terms of ethnicity and following the criteria from the ethnic categories within the 2001 Census:

White British = 91.18%

Other White = 8.82%

### Huntington

Comprises a larger proportion of retired adults.

38 Representatives – 27:11 (female: male)

Female			Male		
Age group	Number	% age	Age group	Number	% age
Under 25's	216	17.2	Under 25's	334	26.6
25 – 34	96	7.7	25 – 34	136	10.8
35 – 44	147	11.7	35 – 44	140	11.2
45 – 54	203	16.2	45 – 54	173	13.8
55 – 64	217	17.3	55 – 64	190	15.2
65 – 74	181	14.4	65 – 74	172	13.7
75 – 84	130	10.4	75 – 84	84	6.7
84 +	63	5.0	84 +	25	2.0

White British = 94.74%

Other White = 5.26%

### Strensall

Largely comprises commuters and professionals with a number of nursing/residential homes.

55 Representatives – 26:29 (female: male)

Female			Male		
Age group	Number	% age	Age group	Number	% age
Under 25's	1134	27.9	Under 25's	1140	31.1
25 – 34	456	11.2	25 – 34	357	9.7
35 – 44	603	14.8	35 – 44	488	13.3
45 – 54	625	15.4	45 – 54	558	15.2
55 – 64	507	12.5	55 – 64	492	13.4
65 – 74	411	10.1	65 – 74	383	10.4
75 – 84	198	4.9	75 – 84	162	4.4
84 +	129	3.2	84 +	86	2.3

White British = 96.36%

Other White = 3.64%

## Stamford Bridge

A higher percentage of nursing/care homes.

40 Representatives – 25:15 (female: male)

Female			Male		
Age group	Number	% age	Age group	Number	% age
Under 25's	693	25.0	Under 25's	640	25.5
25 – 34	224	8.1	25 – 34	219	8.7
35 – 44	361	13.0	35 – 44	319	12.7
45 – 54	427	15.4	45 – 54	409	16.3
55 – 64	378	13.6	55 – 64	366	14.6
65 – 74	358	12.9	65 – 74	335	13.3
75 – 84	191	6.9	75 – 84	152	6.0
84 +	142	5.1	84 +	74	2.9

White British =90.7%

Other White = 6.98%

Declined to comment = 2.33%

### Demographics not adequately represented:

We continue to work to attract more young adults and have made some progress with this over the last 12 months, although we have increased the number of young adults in the 17 – 24 bracket from 1 to 3 representatives, we still have more work to do to engage with this demographic.

Our website is still being developed to host a dedicated area for teenagers and young adults (under 25's). Our plan remains to 'launch' this area in our next financial year, (1.4.13 to 31.3.14) but in order to do this we need more involvement from young adults, and as such we are trying to arrange sessions with local secondary school Headteachers to determine whether they would like to engage with us and run as a project with the practice. We are also in the process of migrating to a new clinical system, which offers the potential for text messaging and Facebook and Twitter links, which we anticipate will help us in the engagement of this group. The website and these tools, will be especially useful for providing advice on sexual health or drug and alcohol related issues.

With regard to the Care homes, we feel we have engaged well here, with each having dedicated GP's engaging with the staff, patients and carers. Our survey responses suggests that our patients, their carers and nursing home staff feel that they are adequately represented, although we continue to look for other areas where we can offer improved or additional services.

### How did we determine the priority areas to be addressed for the second year of the PPG?

In the original survey that we issued to patients in April/May 2011, we asked patients to let us know which areas they would like us to focus on. Additionally in the

following survey issued at the end of the summer, when we invited patients to join the Patient Reference Group, we asked again, which areas we should focus on.

The three most prevalent areas in both surveys were clearly identified as:

- 1) Clinical Care
- 2) Telephone answering and
- 3) Getting an appointment

These three areas also concurred with the Practice staff view.

Following the issue of the Annual PPG Report in 2012, patients also told us that they couldn't always attend the originally planned quarterly meetings, the reasons for this being:

- a) They didn't know about them – there appeared to be delivery issues with some email addresses, including some patients 'spam' filters rejecting our emails
- b) Not everyone reads the notice boards
- c) Not everyone happy to attend meetings

As a result of this feedback we determined that we would continue with the group in its original planned 'virtual' status.

So in May 2012, we issued a communication with questions based on the feedback of patients in terms of the focus areas identified in Year 1.

### **How did the Practice determine what the surveys/questionnaires should ask?**

From feedback from previous correspondence with patients, the questionnaires/surveys, Problem Reports (internal reports that staff complete to identify areas of improvement) and the suggestion boxes in each of the branches, we set about asking questions on each of the main focus areas.

In a change from the previous surveys issued, we did not ask for ratings on these areas, we asked specific questions and gave patients the opportunity to provide responses and views. From these responses, we then determined our next steps and actions. The questions asked were specifically:

#### *1) Website Development:*

We asked patients specifically what was important for them to see on the website. We also explained that whatever their feelings toward electronic communication and interaction, it is here to stay so we are trying to use it in a way that helps us as health professionals to better manage and provide their health care.

We also reiterated our interest in engaging further with young adults (17- 24year olds) and asked if anyone in their household would be interested in helping us.

#### *2) Improvement of Notice Boards in Branches*

We did have some feedback from one patient who expressed an interest in helping us with this area; specifically from an older person's perspective and so we asked how patients would like us to use the notice boards. We have also recently asked for volunteers to manage the notice boards within each of the healthcare centres.

### *3) Review of how we manage DNA's; Did Not Attend appointments*

For many services within the health sector, 'did not attend' appointments is a significant problem.

Although, the Practice enjoys a high percentage of attended appointments, we can still improve. In order to raise awareness of this, we felt a positive approach would be appropriate. So we asked patients if they felt we should communicate the number of appointments attended correctly. We felt that NHS campaigns are often 'aggressive' in their style and approach, using 'scare tactics' to encourage awareness and action. However, the success of these campaigns is open to interpretation, and so we felt for our community, we would attempt to encourage patients to cancel in timely manner, by letting them know, how many people do actually cancel appropriately.

### *4) How to improve our telephony system*

Our telephony system is currently provided through the York Hospital Foundation Trust. This is a 'one size fits all' solution; this has proven to be a challenge for us to manage effectively, to ensure that a patient can get through timely and without being kept on hold. Last year, we started to review alternative suppliers and asked what was important to patients. These questions are provided below

- a) Although, the feedback provided in the recent surveys said that you would expect the phone to be answered within 3 rings, it would seem that the current system for answering and placing you on hold, until a person becomes available is unacceptable to some, giving them cause for concern over the phone call costs. Is speaking to a live operator the moment you get through, more important than having your call answered within 3 rings? (The ideal is for us to handle your call within 3 rings without you being placed on hold and we will continue to aim for this – but circumstances sometimes prevent this).
- b) Would you like us to report to you the number/percentage of calls that are answered within a specific agreed time frame (service level agreement)?
- c) Would you be happy for your call to be handled centrally, through one of our branches?
- d) Did you know that any receptionist in any branch can book appointments for any clinician in any branch?
- e) When our lines are busy, do you prefer the engaged tone rather than an on hold message, reassuring you, you will shortly be through to an available receptionist?
- f) When our lines are busy would you prefer the option of being put through to an automated service that could book an appointment for you?

- g) Would you like to be able to order repeat prescriptions via the phone?
- h) If you are a dispensing patient who currently receives medication through a community pharmacy, would having the ability to request medication on the phone, rather than dropping off your repeat slip, result in you allowing the practice to dispense to you?
- i) Would you prefer your calls to be triaged eg: Press 1 to make an appointment, Press 2 for results or hold to speak to an operator (we would never have any more than 3 options)

#### 5) *Launch of Patient Survey*

We intend to launch the patient survey in August this year (2012) and have agreed that we will follow the Ipsos Mori Annual GP Survey questions that have historically been issued annually by the Department of Health. This survey will be issued electronically, to those whose email addresses we have, (and through the post for those members of the group, who do not have access to email) but for all others this will be advertised in the branches and patients encouraged to complete.

#### 6) *Practice Name*

Additionally, patients in previous surveys had said to us that the name of Strensall was only valid to those patients living in Strensall and so the process to rename the practice to be reflective of the whole practice and our ethos toward healthcare began.

### **Survey Findings and Actions**

The survey findings were collated and shared with the PRG along with the proposed action plan.

The action points from this were agreed as:

- 1) A new name was rolled out for the practice and on 23 July 2012 the practice changed its name officially to MyHealth.
- 2) With the launch of the MyHealth name, the branch surgeries were renamed Health Care Centres.
- 3) Again with the new name, came a new look website and the feedback from patients was very positive. We also had some new members to the group, whose parents had encouraged them to join the PPG.
- 4) Although, we have clearly defined notice boards in each of the Health care centres we have recently asked for volunteers to manage the content and the focus of these boards for the benefit of all.
- 5) There were mixed responses regarding the DNA proposal. Many felt that patients should be 'named and shamed', others felt that patients should be charged a fee for non attendance, however on the whole, most agreed that the positive approach was a good starting point.
- 6) The question of how to improve our telephony, confirmed that patients wanted a 'real' person answering their call and not automated systems.

Patients clearly wanted their call answering relatively quickly; many indicating that to be answered within a certain number of 'rings' was not important because they realised that if we didn't answer it, they felt it was because there was a higher priority patient being dealt with. Very few patients were interested in the number of calls being answered within a specific time frame. The vast majority of patients understood that any health care centre could book an appointment at any branch and again the vast majority of patients were not interested in where their call was answered i.e a Huntington patient's call could be answered and dealt with by a Stamford Bridge receptionist.

- 7) The launch of the new patient survey was positively responded to by patients. The results of this annual patient survey are available on our website still – this information has been published and available here since September last year although below we have highlighted just some of the responses provided.

The results from the electronic and paper based surveys were all collated via Survey Monkey and an excel spreadsheet. Pivot tables were used to produce graphs and analyse the data that was subsequently published to patients, via the website and on a specially designated Notice Board in each of the practice branch surgery waiting rooms.

## **Annual Patient Survey 2012 Analysis of Responses**

276 patients completed our 2012 survey, 220 by filling in a paper questionnaire and 56 responded online. By running and managing this survey in house, we have noticed a significant uplift in responses received compared to the last Department of Health survey in which 172 patients responded.

Overall, the responses were positive about the services and the care provided by MyHealth at all four of its branches.

Our survey asked patients questions in 8 sections. These comprised:

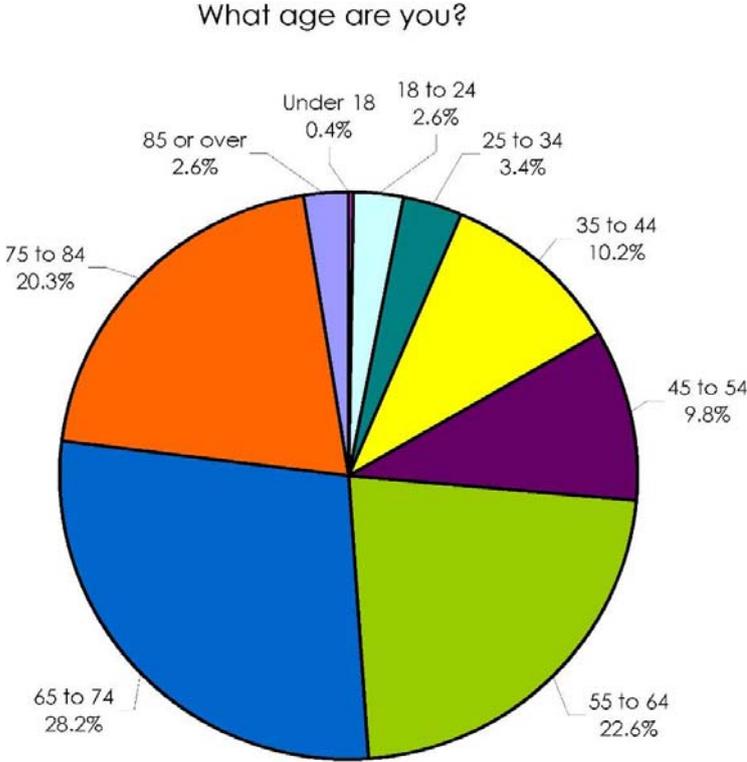
- General questions about the respondent
- Accessing GP services
- Making an appointment
- Waiting times
- Views about your last GP appointment
- Views about your last Nurse appointment
- Opening Hours
- Overall Experience of MyHealth

### **General demographic questions:**

Of the 276 respondents, 40% were male and 60% were female, with the majority of the respondents aged between 55 and 84 (71%). Patients under 35 years of age were not well represented, but this reflects the general pattern of attendance at the health care centres, so this group of people were less likely to pick up a survey and respond.

We are hoping to engage more young people (especially teenagers) in helping us to provide appropriate health care for their age group.

The graph below shows the age distribution of the survey respondents:

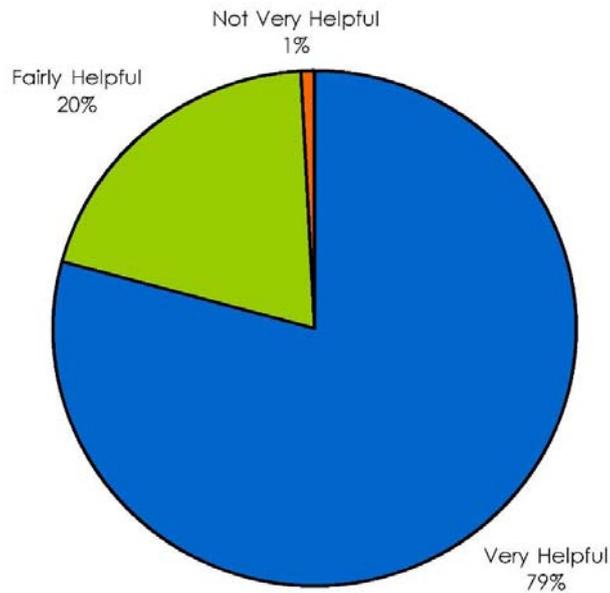


Of the responses received, 39% attended Strensall Health Care Centre with 22%, 21% and 18% attending Stamford Bridge, Huntington and Dunnington Health Care Centres respectively.

**Accessing GP Services and Making an Appointment**

We asked patients if they found the receptionists to be helpful at MyHealth. The responses we received showed that 79% of patients found our receptionists to be very helpful and 20% found them fairly helpful. Only 1% of patients thought our receptionists were not very helpful and 0% found our receptionists to be 'not at all helpful'.

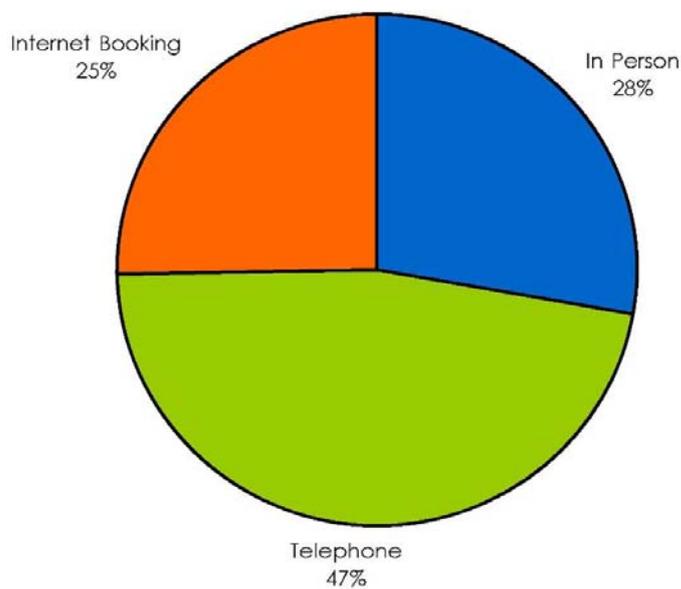
### How helpful do you find the receptionists at MyHealth?



We asked how easy you found it to get through to us on the phone. Mostly patients reported that it was very easy (46%) or fairly easy (46%).

Most people said they used the phone to book their appointment (47%) with 28% preferring to book appointments in person and 25% using the internet and our on-line appointment booking service.

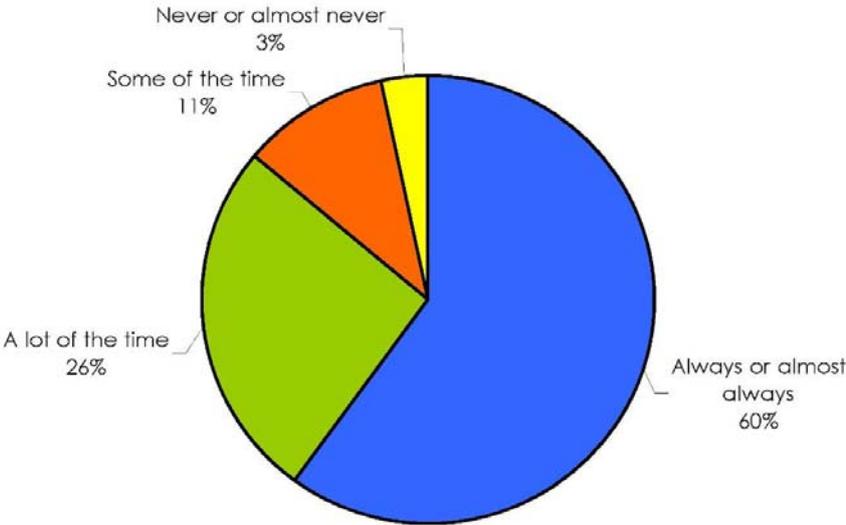
### How do you normally book your appointments?



We did ask how patients would *prefer* to book their appointments, and unremarkably 41% wanted to use the telephone, 26% wanted to make their appointments in person and 26% wanted to use the internet. A resounding 0% wanted to use an automated telephone booking system!

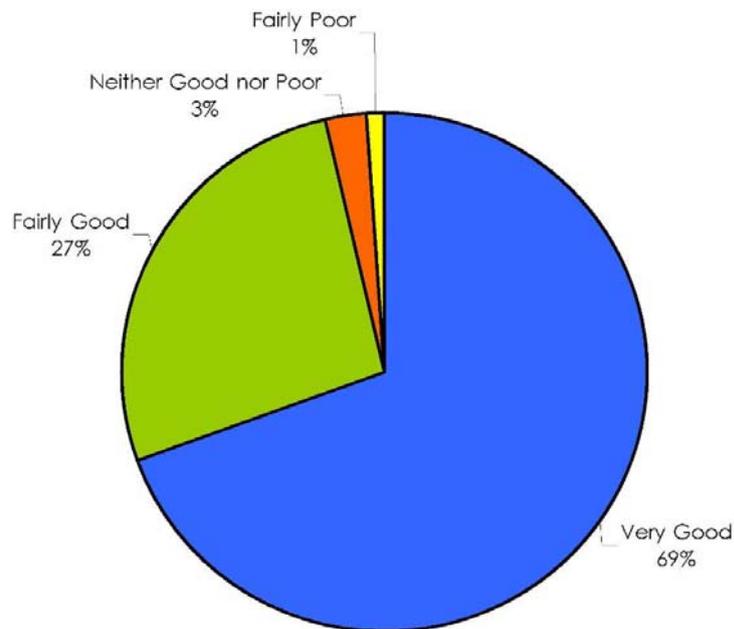
We asked how often patients were able to see or speak to their preferred GP. 60% reported that they were able to do this always or almost always. 26% said they were able to do this a lot of the time and 11% some of the time. Only 3% reported that they could never or almost never see or speak to their preferred GP.

How often do you get to see/speak to your preferred GP?



In general, 69% people found their experience of making an appointment to be very good and 27% fairly good.

How would you describe your experience of making an appointment?

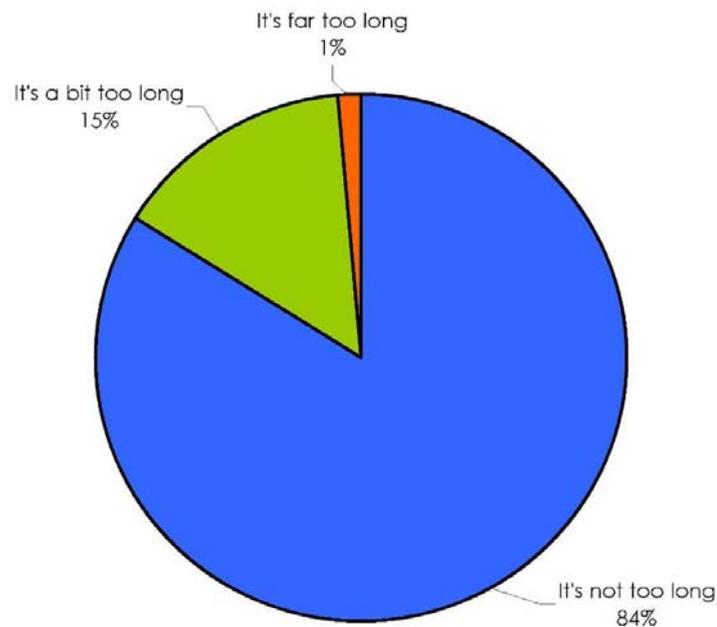


Only 3% found it to be neither good nor poor and 1% found their experience to be fairly poor

### Waiting Times

We asked patients if they had to wait beyond their appointment times and whether this was too long.

How do you feel about how long you normally have to wait?



Although patients generally had to wait a few minutes, 84% felt that this was not too long, with only 15% thinking it was a bit too long and 1% thinking it was far too long.

*Patient Participation Report for 2012-13*

## Views about your last GP appointment

We asked patients to think about their last GP appointment and how good the GP they saw was at each of the following:

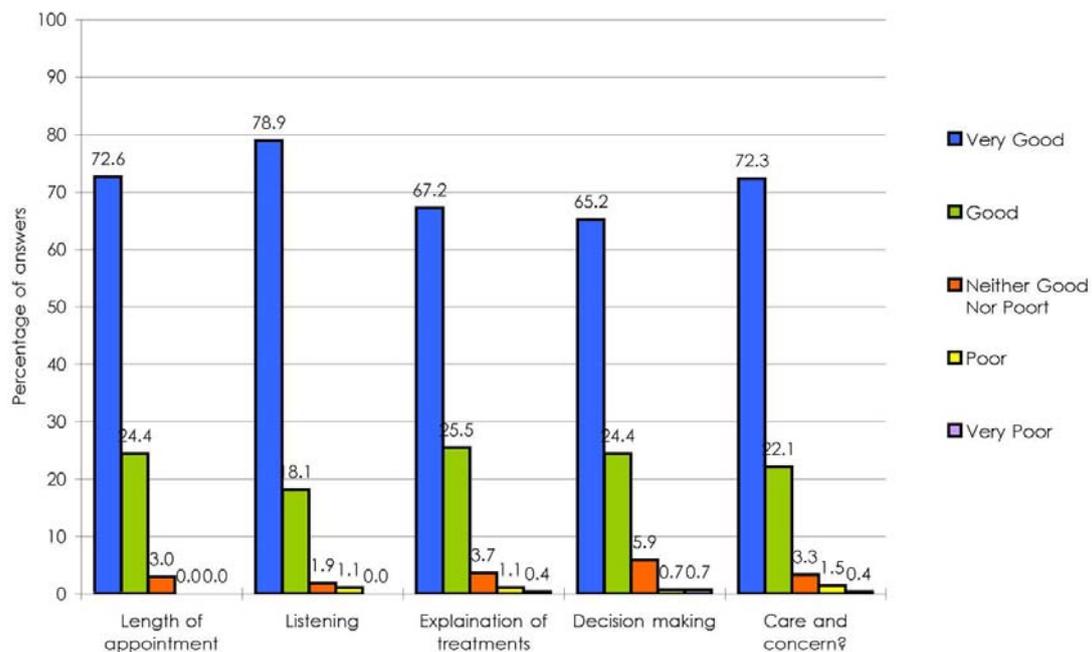
- Giving you enough time
- Listening to you
- Explaining tests and treatments
- Involving you in decisions about your care
- Treating you with care and concern

As the graphs below demonstrate, an overwhelming majority thought the GP they saw was 'very good' or 'good' at all of the above.

Only a small number of patients found their GP appointment to be poor or very poor. These patients also submitted some helpful comments on their questionnaire stating why they felt their experience was so poor.

Such honest remarks are always welcome as they allow us to investigate problems and implement changes where necessary.

How good was your GP appointment?

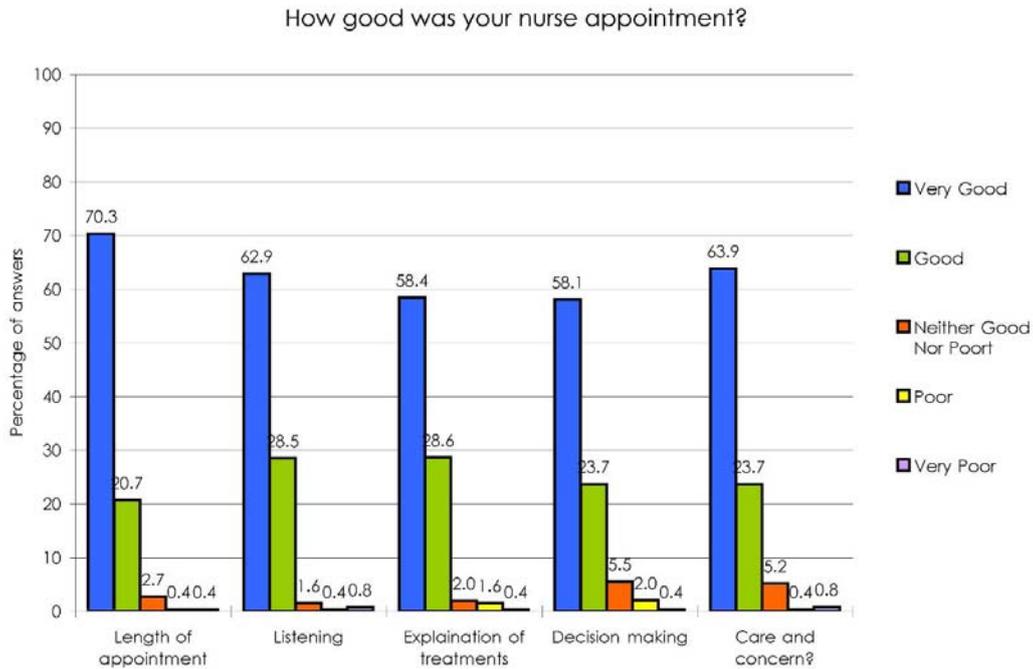


## Views about your last Nurse appointment

We also asked the same questions about patients' last Nurse appointment, asking them to rate how good the nurse they saw was at the following:

- Giving you enough time
- Listening to you
- Explaining tests and treatments
- Involving you in decisions about your care
- Treating you with care and concern

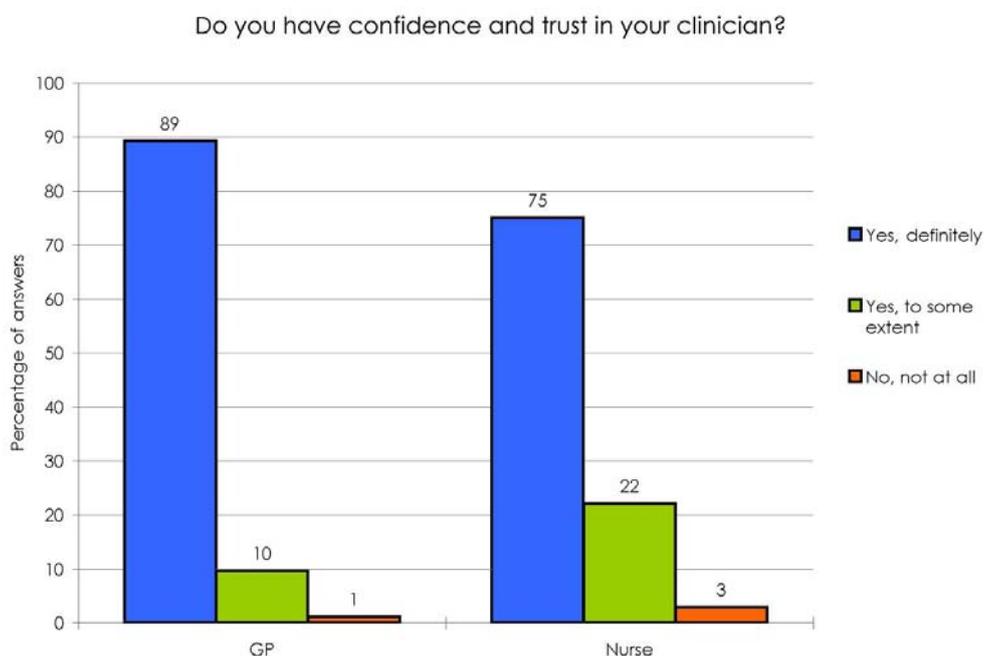
Again, the majority of patients rated their nurse as very good or good at all of the above, as shown in the graphs below. We will further investigate the small number of poorly rated statistics to ensure our service can be improved.



### Confidence in your clinician

For the final questions relating to appointments, we wanted to find out whether patients had confidence and trust in their clinician.

The results below show that our patients feel that they definitely, or to some extent, had confidence and trust in the GP (99%) or the Nurse (97%) that they saw at their last appointment.



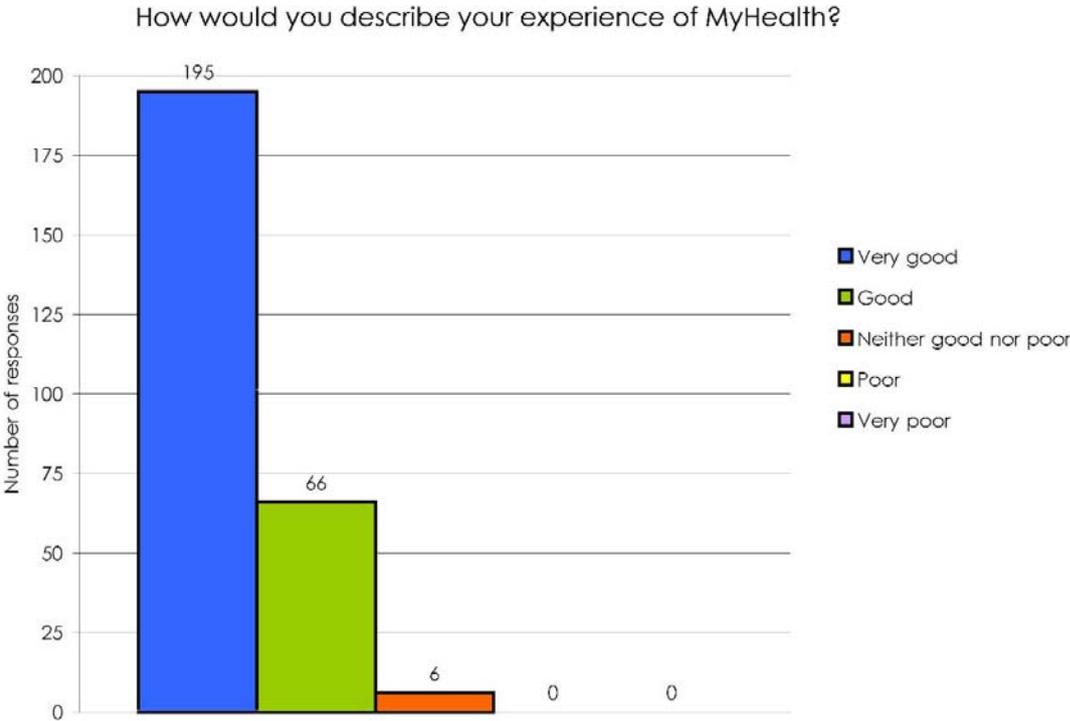
We are aware of a small number of incidences where patients felt they had no confidence in their GP or Nurse. This is reflected in the small 4% of patients who gave a rating of 'No, not at all'.

### Opening Hours

We wanted to find out if MyHealth was open at convenient times for our patients. 59% of patients said they were very satisfied and 36% were fairly satisfied with our opening hours. Only 3% were neither satisfied nor dissatisfied and 2% fairly dissatisfied.

### Overall Experience of MyHealth

Finally we asked patients how they would describe their experience of MyHealth. We are delighted to say 98% of patients who responded to our survey said that their experience of MyHealth was either very good or good!



This positive view of MyHealth was supported by the comments we received on the returned survey forms. A small selection is given below:

- "Your service to me has always been second to none"*
- "I consider myself very fortunate to have such an excellent GP"*
- "Reception staff are helpful and professional"*
- "Your reception staff are marvellous, they deserve a medal!"*
- "Having been with the practice since 1961, I find that over the years the changes have been positive"*
- "Having worked in three surgeries (and one hospital) you come very high on the list"*
- "I have been with this surgery for around thirty years now and have never had any reason to fault neither mine nor my family's care. Thank you to you all"*

*"We are so fortunate to have such an excellent service"*  
*"It is a really good set up and absolutely brilliant staff and service"*  
*"The whole team is first class"*  
*"I love you guys, I cannot fault the service that I am given"*  
*"The practice has a good reputation, including in the local hospital"*  
*"I can't understand why every GP surgery isn't run the same! You are outstanding!"*

In summary, the majority of our patients who responded to our survey were happy with the care and services they receive from MyHealth. The small percentage of replies which identified areas where we could do better have been analysed and remedial actions taken where possible and where appropriate. MyHealth will continue to undertake a patient survey on an annual basis and we will monitor our improvements carefully.

The agreed action points for the forthcoming year are:

- 1) Roll out of new clinical system to improve online bookings and repeat prescription requests, plus enabling SMS messaging to patients for appointment reminders.
- 2) Continued development of the website in particular with engagement with young adults.
- 3) The PCT indicated last summer that a new bespoke telephone system would be made available to all practices in the York and Selby area, which resulted in our plans to provide a new telephone system being placed on hold. It has subsequently been agreed that this will not now happen. MyHealth Group will recommence our investigations into other alternative options with a view to implement in 2014.
- 4) During the summer of 2012 as a result of feedback from patients and some anomalies in telephone answering, MyHealth Group restructured our admin, reception and dispensary staff in our main branch at Strensall. We now have a group of multi-skilled staff who can be deployed in any area. In fact all staff are now part of a central 'hub', with the vast majority of calls being handled away from reception, within the admin area, therefore allowing Reception staff to focus on patients at the desk and concentrating on dispensing. We have already started to take calls from other branches into this area at certain times of the week and we will continue to develop this area so that in time the majority of calls to branches will be handled by this 'central team'.
- 5) We will continue to report to patients on the number of appointments attended successfully, the last reported month's figures showing that 98.3% of appointments were attended appropriately.
- 6) We have invited volunteers to manage the patient notice boards in branches. We would like you to decide what is important in terms of notices and information.
- 7) We will continue to undertake the annual patient survey.
- 8) We have already communicated to you about the changes ahead with the demise of PCT's and the move to Commissioning Groups, plus we have advised of the changes ahead with the planned introduction of NHS111.

- 9) We will continue to issue quarterly newsletters to patients on our PRG and make them available in each of our health care centres.

## **Thank you**

Thank you to our patients for your responses and your continued support. If you have any queries or comments about this survey, please contact Joanne Rowe (Practice Manager) or Dr Ian Lyall (Senior Partner).

## **Practice Opening Hours:**

### ***Strensall Health Care Centre:***

- Monday: 8am till 7.30pm
- Tuesday to Friday: 8am till 6pm
- Saturday: 8:30am till 10:30am

(NB the Strensall Health Care Centre Reception and Dispensary remain open over the lunchtime period)

### ***Stamford Bridge Health Care Centre:***

- Monday to Wednesday: 8.30am till 6pm
- Thursday: 8:30am till 7:30pm
- Friday: 8.30am till 6pm

(NB Stamford Bridge Health Care Centre is closed 12:15pm till 1:45pm every day)

### ***Huntington Health Care Centre:***

Monday to Friday: 8:30am till 6pm

(NB Huntington Health Care Centre is closed 12:15pm till 1:45pm every day)

### ***Dunnington Health Care Centre:***

- Monday, Tuesday and Thursday: 8:30am till 6pm
- Wednesday and Friday: 8:30am till 12midday

(NB Dunnington Branch Surgery is closed 12:15 till 1:45pm Monday, Tuesday and Thursday)

## **Extended Opening Hours:**

As some of our patients find it difficult to attend daytime sessions during the working week, we provide a number of **pre-bookable appointments** on Monday evenings and Saturday mornings at Strensall Health Care Centre and Thursday evenings at Stamford Bridge Health Care Centre. (Please see opening times above.) These appointments can be booked by contacting the surgery during normal working hours.