



# Engagement report

Should over the counter medicines for minor ailments be available on prescription?

February 2017

## Contents

1. Report Summary	3
2. Full report introduction	4
3. Background	5
4. Survey results	8
5. Key findings	14
6. Next steps	16

## Appendices

1. Equality and diversity data	18
2. Stakeholder responses	24
3. Communications resources	25

## Report Summary

On Monday 19 December 2016, a six-week engagement campaign was launched to invite patient, public and stakeholder feedback about proposals to limit prescriptions for over the counter (OTC) medicines for minor ailments. This report will detail the findings of that engagement.

The engagement was jointly led by the three South Nottinghamshire Clinical Commissioning Groups (CCGs) Nottingham North & East (NNE), Nottingham West (NW) and Rushcliffe CCG. Engagement included focus groups, paper and on-line surveys.



The campaign was promoted widely across patient groups, GP Practices, via partners and stakeholder, the media and social media.

We received 403 responses from patients, public and professionals across South Nottinghamshire. The majority of respondents on the online survey (351 responses), do not pay for their prescriptions (60%).

On the whole, the patient engagement responses indicate that patients are comfortable with this proposal. Where there are concerns, they are particularly focussed on the following:

- Vulnerable patients who may not be have access or be able to access or afford over the counter medicines
- Worry the plan will be extended to include patients with long-term conditions
- That the decision must be widely communicated and have GP support

Taking into consideration all the responses, the findings from this report are that respondents would broadly support a proposal to restrict over the counter medicines for minor illnesses as long as some issues were taken into consideration:

- The ultimate decision about whether to prescribe remains with the GP
- That it is enforced that this is for minor illness not long-term conditions
- This decision must be widely communicated and have GP support.
- More support is given to help patients self-care

Please read the full report and the prescribing policy for more details.

## 1. Introduction

In December 2016, a six-week engagement campaign was launched to invite patient, public and stakeholder feedback about CCG proposals to limit prescriptions for over the counter (OTC) medicines for short term conditions/minor ailments. This report will detail the findings of that engagement.

The engagement campaign ran from Monday 19 December 2016 to Friday 3 February 2017 and was jointly led by the three South Nottinghamshire Clinical Commissioning Groups (CCGs) Nottingham North & East (NNE) - population 150,299, Nottingham West (NW) - population 94,656 and Rushcliffe CCG - population 124,379.

The aim was to gather the views of patients, clinicians, partners and the wider public to understand the potential impact of the following proposal:

- **To limit prescriptions of over the counter medicines on prescription for minor ailments.**

An equality impact assessment was carried out and advice sought from a neighbouring CCG which had recently gone through a consultation process about over the counter medicines.

Engagement documents and information were distributed widely across South Nottinghamshire to gather views from a wide range of audiences - you can see our full communications plan in Appendix 3.

Six focus group discussions were also held across South Nottinghamshire, two in Rushcliffe, one in Broxtowe, two in Gedling and one in South Ashfield.

A total of **403** responses were received during the six week period. This included:

- 351 direct responses to the survey online or via return of paper surveys to the patient experience team
- 40 people attended one of the six focus group meetings
- 2 GPs fed back directly into the survey

- Ten people were interviewed on Arnold High Street and asked their views on video to support the communications plan.

The proposals were also presented at the NNE People's Council (representatives from all 20 practices in the NNE area), NNE Patient QIPP group, Rushcliffe Patient Cabinet and Active group (includes representatives of all GP Practices' PPGs) and Nottingham West's Patient Reference Group. All groups were supportive of the engagement campaign, its purpose and its process. The campaign was also promoted on social media sites such as Facebook and Twitter – Appendix 3 for full communications plan

## 2. Background

### **The rationale for this proposal**

The NHS is facing financial challenges which means we have to review the services we deliver.

We are involving patients in the conversations around these service reviews via 'The Big Health Debate' campaign across the three CCG areas. This campaign asks patients what they think about the health services they receive and about proposed service changes. Fundamentally, the campaign ensures that the patient voice is listened to as we plan services for the future.

As part of our review of services, the South Nottinghamshire NHS, which covers Rushcliffe, Nottingham North and East and Nottingham West Clinical Commissioning Groups, need to prioritise how they spend their prescribing budgets.

Approximately 20% of GP time and 40% of their total consultations are used for minor ailments and common conditions at an estimated cost of £2 billion per year to the NHS.

It is proven that individuals that care for themselves have better health and reduced demand for services. This in turn allows more time for health

professionals to see patients that require treatment for more complex conditions. Pharmacists are well placed to give patients advice on minor ailments.

Moreover, within NNE and NW areas there is also a minor ailment service, Pharmacy First, delivered through community pharmacies enabling patients who are exempt from prescription charges to receive treatment for minor ailments. It is suggested that in the short-term patients could be directed here if the proposals go ahead.

The proposal addresses two issues - one is to ensure the best use of NHS funds in a challenging financial climate and two to encourage people to self-care by empowering them to take responsibility for their own health and wellbeing.

### **Some facts and figures**

- Last year, the NHS in the South Nottinghamshire area spent over £880,000 a year on prescriptions for paracetamol and ibuprofen. £880,000 could pay for (approx):
  - 112 hip replacements OR
  - 19,733 GP appointments OR
  - 25,371 hours of community nursing.
- Nationally, seven million GP consultations every year are for minor ailments. This takes, on average, one hour per day of a GP's time and costs the NHS £2 billion per year.
- Paracetamol can cost as little as 20p per packet in some supermarkets – paracetamol on prescription costs the NHS a minimum of five times more than average supermarket costs.

Local GP and NNE CCG's Clinical Lead James Hopkinson says: *"The NHS, both locally and nationally, is facing unprecedented demand on services and significant financial challenges. In order to safeguard core services safely and effectively, the CCGs in South*

*Nottinghamshire have to review services to ensure efficiency and best value for the resources we have available.*

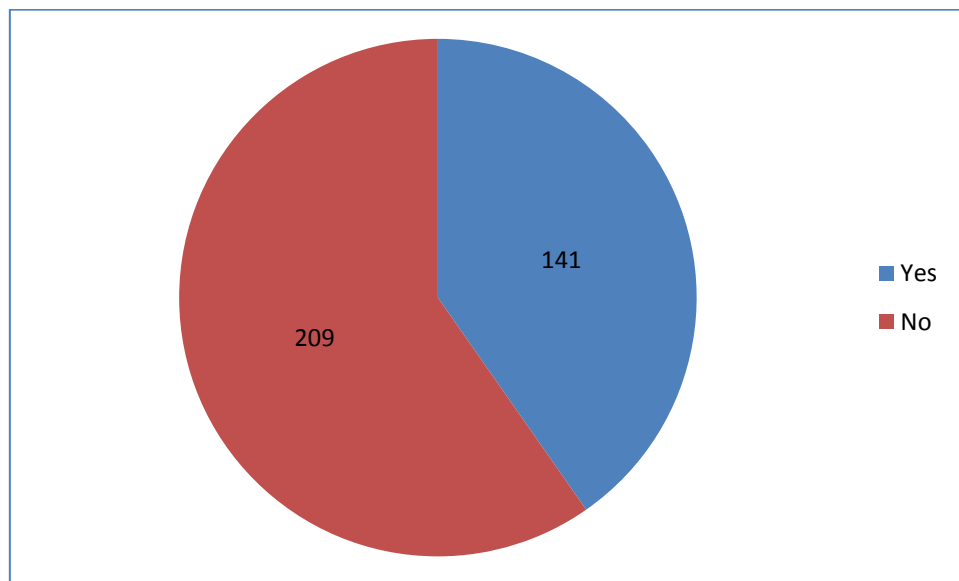
*"Providing small quantities of over the counter medicines on prescription for minor ailments is not an effective use of funds. When medicines are prescribed, the NHS incurs extra charges through pharmacy dispensing and administrative fees. If you include GP consultation time then the costs are higher."*



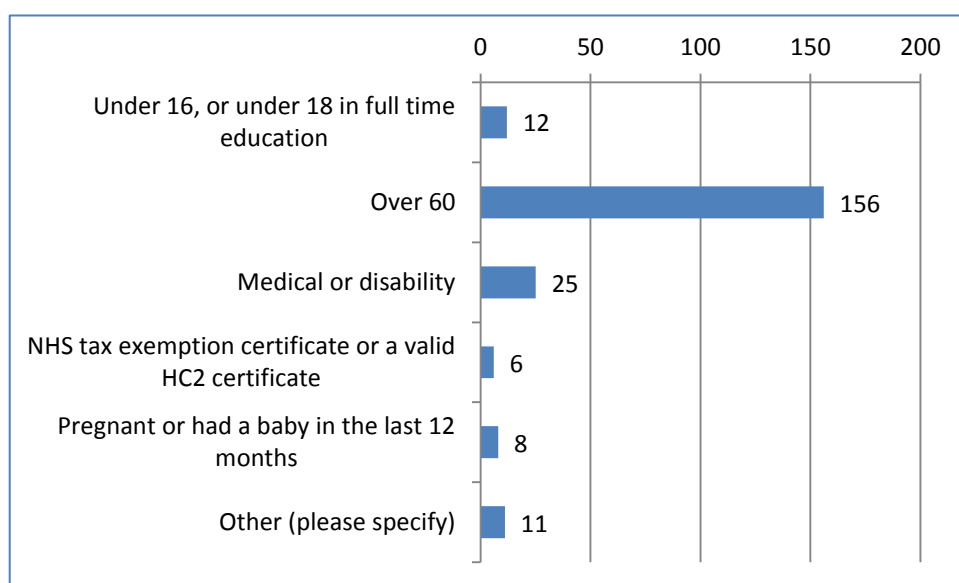
### 3. Survey results

There were **351** responses in total to the survey. Equality and diversity monitoring information can be found in Appendix 1.

#### Q1. Do you currently pay for prescriptions?

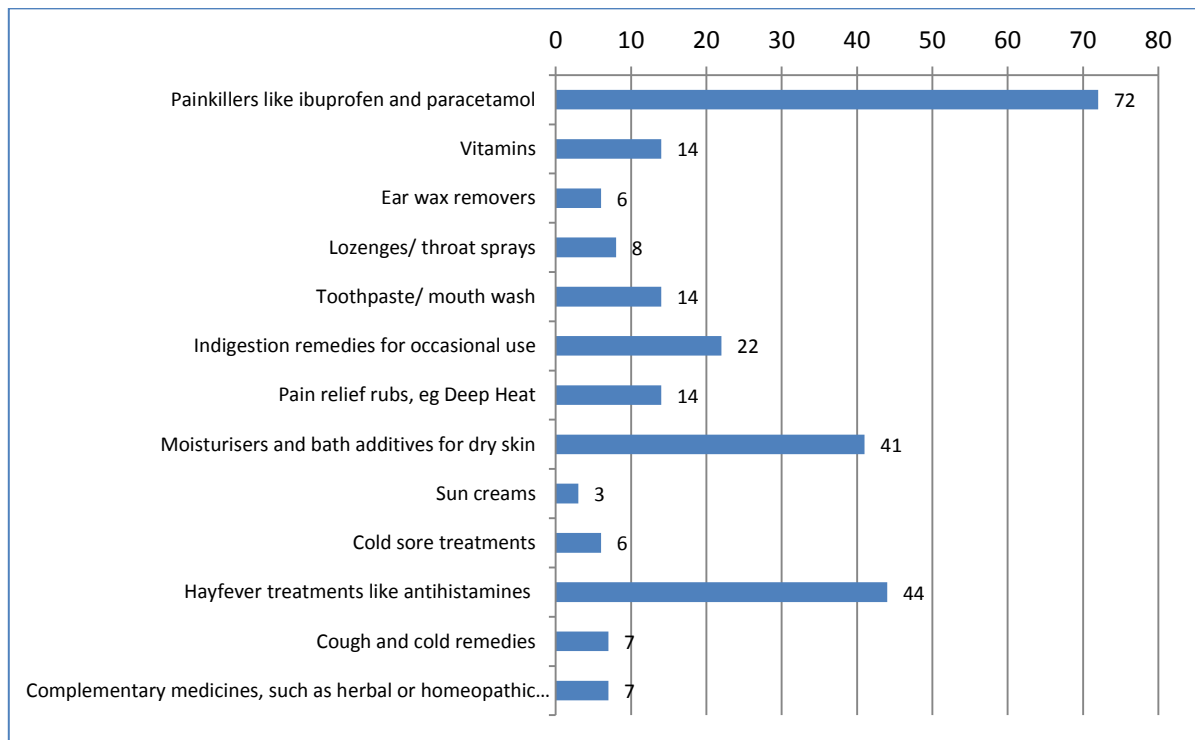


#### Q2. If no, why do you receive free prescriptions?

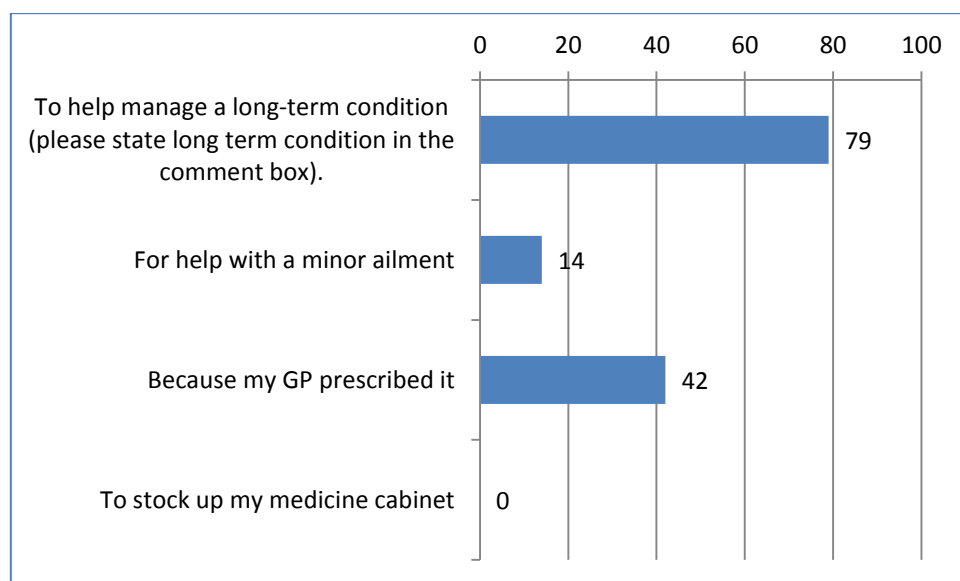




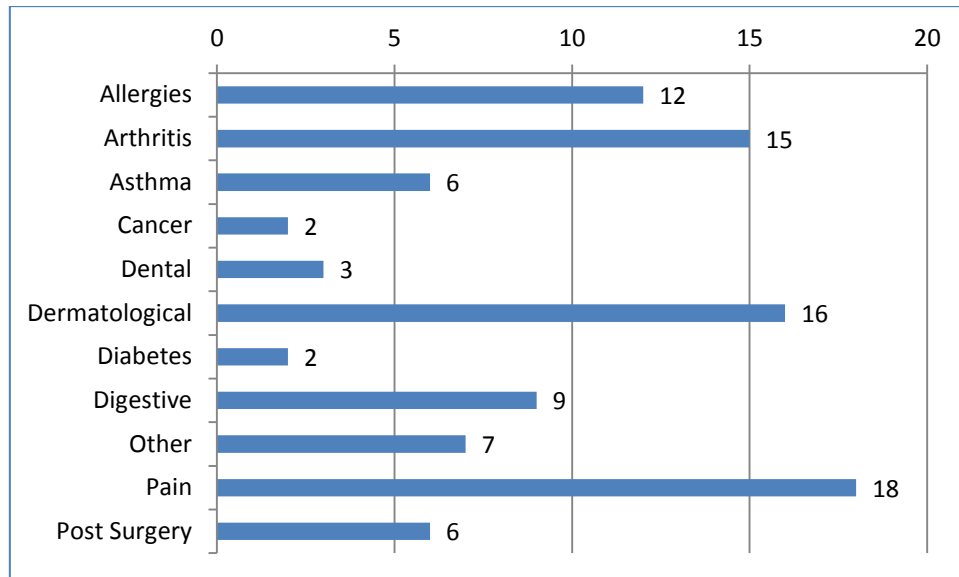
**Q3. Are you currently, or have you ever been, in receipt of any of the below over the counter medicines on prescription?**



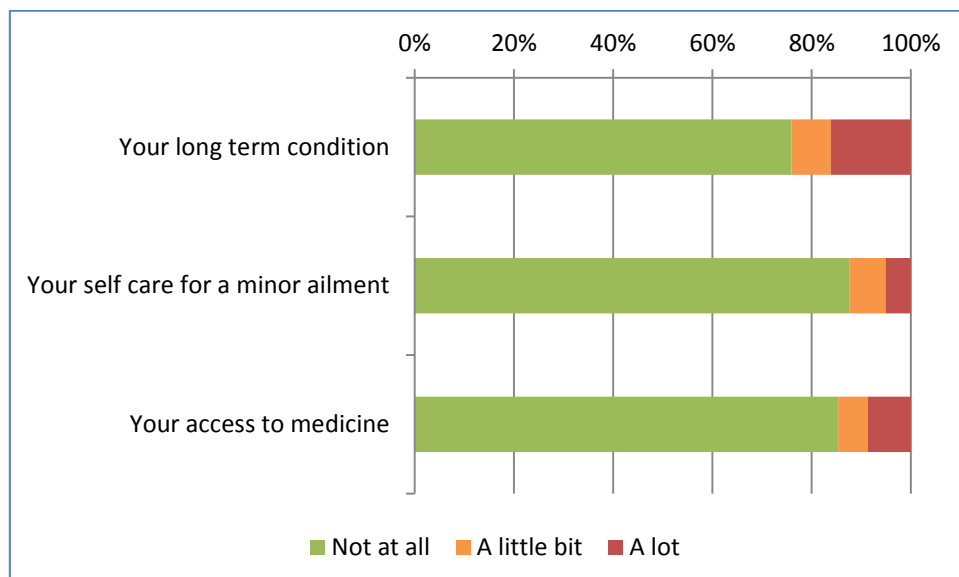
**Q4. If you answered yes to Question 3, why do you receive this medicine(s) on prescription?**



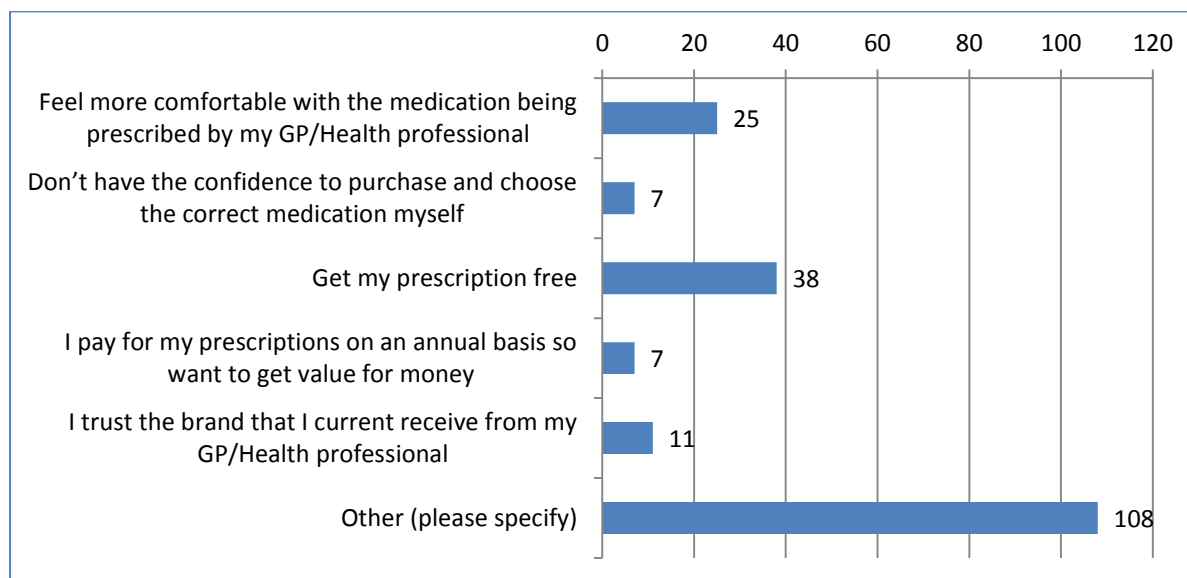
## Long Term Conditions identified in Q4:



## Q5. If medicines like those listed in Question 3 were no longer available on prescription, how would it affect:



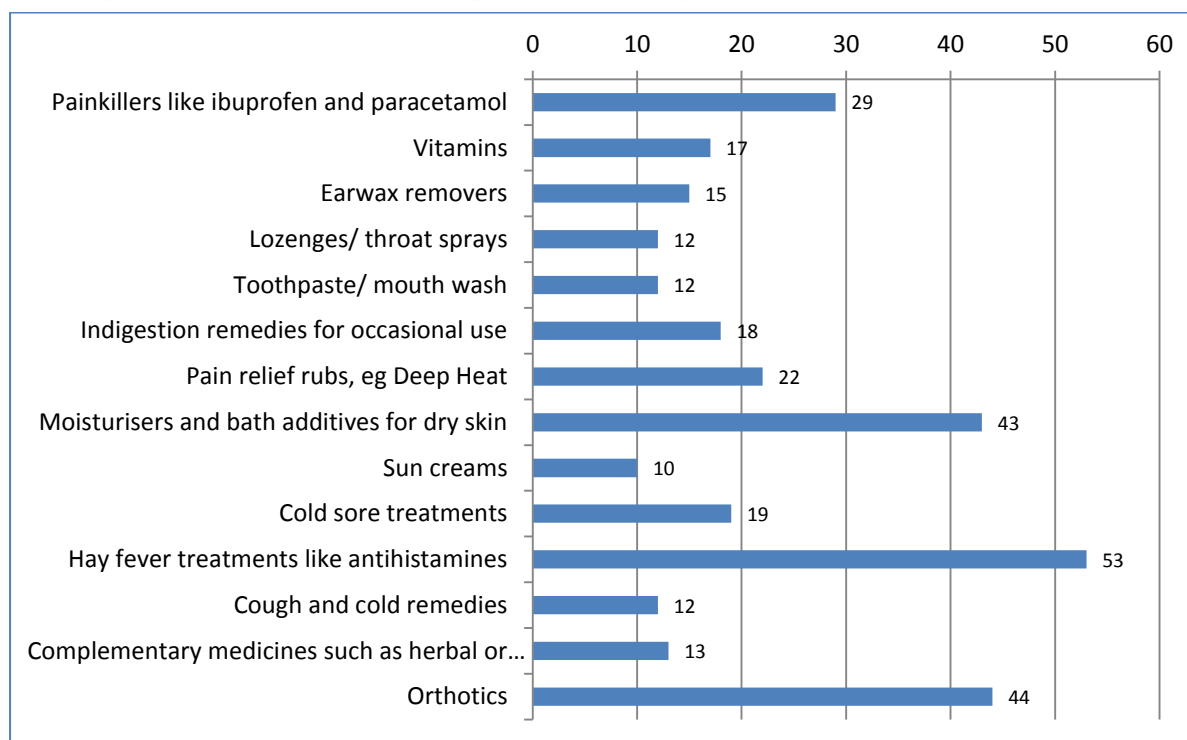
## Q6. Please tell us why you obtain medication on prescription that can be purchased over the counter:



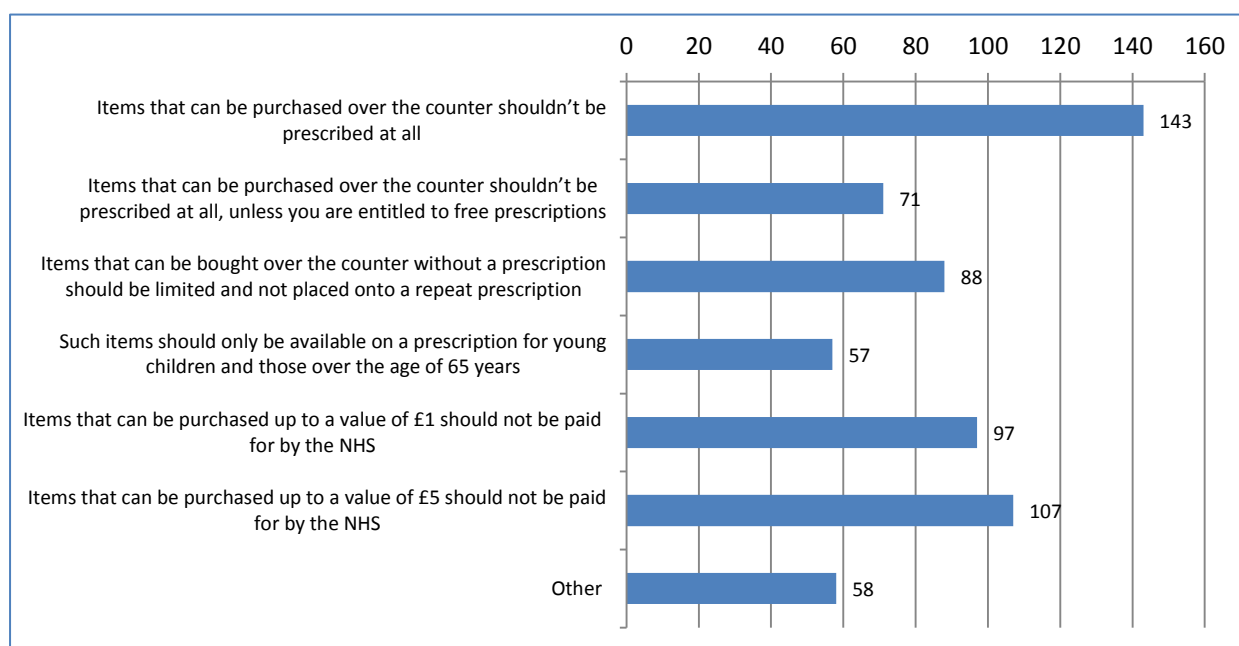
Other themes - five most common answers to the 'other answer'

- I don't receive OTC medicines on prescription at all
- My GP prescribed it
- So my GP can monitor my usage
- To get a larger quantity that can be bought on prescription
- The cost

**Q7. Do you think the following medications should be prescribed by your doctor for minor ailments? (Please tick all that you feel should be prescribed)**



**Q8. What do you think about medicines being prescribed for minor ailments when they can be purchased over the counter?**



## Q9. Do you have any further comments on the prescribing of over the counter medications?

Theme	Number
<p>People with low income or in receipt of benefits should receive free prescriptions</p> <p><i>"This seems fairly straightforward - if on benefits there should be an entitlement otherwise not..."</i></p>	19
<p>Patients should receive better advice</p> <p><i>"I think it would help if the cost to the NHS was explained clearly to people plus the alternatives that could be provided instead."</i></p>	10
<p>A change in criteria of who should receive free prescriptions is needed</p> <p><i>"NHS provision is important and if some people are entitled to free prescriptions that is important but we need to find a better way."</i></p>	17
<p>Only those who require large volumes should receive free prescriptions</p> <p><i>"It is purely the volume that matters"</i></p>	7
<p>Just patients with Long Term Conditions should receive free prescriptions</p> <p><i>"Need to stop all except for those essential to chronic condition. NHS needs to prioritise services and reduce spend."</i></p>	11
<p>Input from a GP is important in the prescribing process</p> <p><i>"I worry about not getting proper advice from a pharmacist"</i></p> <p><i>"Prescribing is a safe way of ensuring people get the treatment appropriate to their needs, rather than people incorrectly self-medicating, which they possibly do so when it is difficult to get an appointment, or so as "not to bother the doctor""</i></p>	22
<p>Patients need to take more responsibility</p>	13

<i>"People who go to the GP for a cold or a cold sore should learn to look after themselves and not waste the time and money."</i>	
General support for prescribing medicines available over the counter  <i>"The idea of removing these medicines is appalling..."</i>	7
General support for not prescribing medicines available over the counter  <i>"Strongly agree that over the counter medicines should be brought over the counter and not prescribed."</i>	53
Pharmacists should be utilised more  <i>"It's all about educating the public that the pharmacy is the place to go first and not the doctors"</i>	15

## 4. Key findings from the focus groups

Along with the survey results and stakeholder feedback (see Appendix 2), six public drop-in sessions were held during the consultation period. Three in NNE – Calverton, Hucknall and Arnold, one in NW – Beeston and two in Rushcliffe – West Bridgford and Bingham.

### Key themes:

#### ❖ Surely GPs don't prescribe OTC meds for short term conditions?

- If people only need the medicine for a few days then it shouldn't be on prescription - it should be for long-term conditions
- Nobody at Whyburn gets a prescription for OTC meds for short term conditions
- It will free up GP time for people who really need it, people with the long-term conditions so it's a good thing.
- It will mean more appointments available
- Reasonable request to ask patients to purchase their own.

- Why do we have to have a prescription issued when a cheaper alternative is available over the counter?

### ❖ **Short-term vs long-term conditions**

- While it's fine for short-term ailments, it shouldn't be extended to those who have long-term conditions and need to purchase in bulk.
- It will free up clinician time for those patients who really need it and who are living with long-term conditions.

### ❖ **Patient responsibility, ownership & self-care:**

- It is important that patients take ownership, where they can, of their health.
- Understand the market / be a consumer – do your research and find out the supermarket/pharmacy which offers the lowest prices. There is major variability on OTC medicines.
- Make it become a 'way of life' for purchasing OTC.
- Patients need to understand the pressure the NHS is under, a culture change is needed, lots of education and information.

### ❖ **Targeting vulnerable patients:**

- Those over 65 should be protected. What about children, the elderly, low income?
- What about those who are just above the benefit level?
- If someone is on benefits or low income they might skip buying vitamins.

### ❖ **GP pressure**

- Where does the GP fit in? It needs to have GP support and they need to have the final say on particular patients' needs.
- Pressure always going to come back to the GP. Patients need to back the doctor to have the conversation
- CCG needs to support the GPs to deliver this plan

### ❖ **Pharmacies to play a bigger role:**



- Patients should use pharmacists for reassurance rather than GP.
- Pharmacists should be used, and promoted, more.
- Local pharmacies should know their local patients – think customer service ethos.
- We need our pharmacies on board to make this a success.

#### ❖ **Pharmacy First:**

- How does it work? More explanation needed.
- Where pharmacy first is available can this be promoted as an alternative?
- However, if prescribing of OTC medicines for short-term ailments is not appropriate surely Pharmacy First also wastes NHS resources?

#### ❖ **Wider NHS costs and cuts**

- Merge the CCGs - that will save more money
- Pharmacy vs. cost for GP Practice to know whether it is reasonable.
- Bulk buying power of the NHS - why do the NHS pay so much for certain medication?
- Can we save money by stop offering patients to choose where they get their treatment?

#### ❖ **Communications**

- You need to write to every patient
- Needs to be a national campaign which is patient-led.
- Feels more comfortable to do it as an opt-in for patients.
- Key messages for posters – why queue at GPs when pharmacist is nearby?

## 5. Next steps

The majority of respondents (87 per cent) said the proposal wouldn't affect their self care of a minor ailment at all. Eighty five percent said it wouldn't affect their access at all and 75 per cent even said it wouldn't even affect their long-term condition.

Taking into consideration the survey results, focus groups, GP responses, Facebook feedback and the video interviews in Arnold, the findings from this report are that respondents would broadly support a proposal to restrict over the counter medicines for minor illnesses as long as some issues were taken into consideration:

- The ultimate decision about whether to prescribe remains with the GP
- That it is enforced that this is for minor illness not long-term conditions
- This decision must be widely communicated and have GP support.
- More support is given to help patients self care
- Work to be carried out with care homes

It should be noted, however, that out of all the medications listed available over the counter, it was antihistamines (53 people), Orthotics (44) and dry skin treatments (43) that had the most support for their continuation on prescription (out of 351 survey respondents).

This engagement report will be made available on all South Nottinghamshire CCG websites and will be sent directly to respondents who requested a copy. This engagement will form part of the consideration of the CCGs when making a final decision.

This report will now, with the proposals to limit prescribing of OTC medicines for minor ailments, go the CCG's Governing Body (Rushcliffe and Nottingham West) or Clinical Cabinet (NNE) for a final decision based on clinician advice and patient feedback.

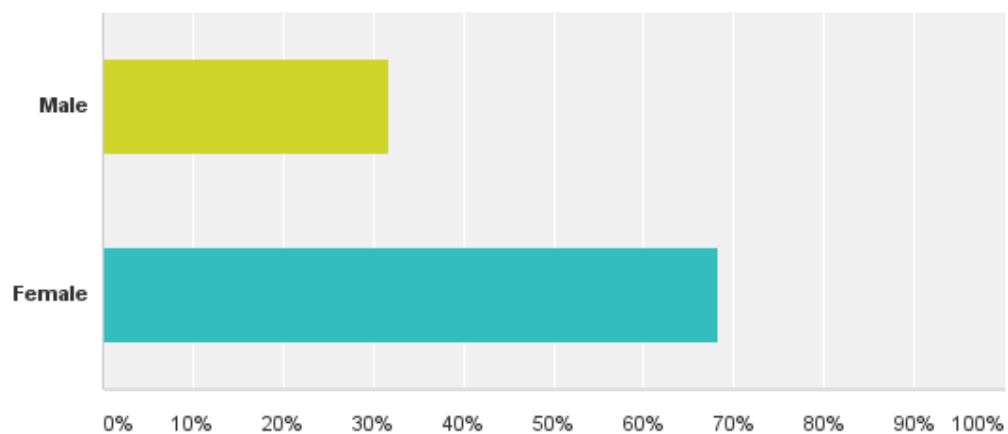
Thank you to everyone who took part in this engagement.

## Appendix 1

The following questions were optional.

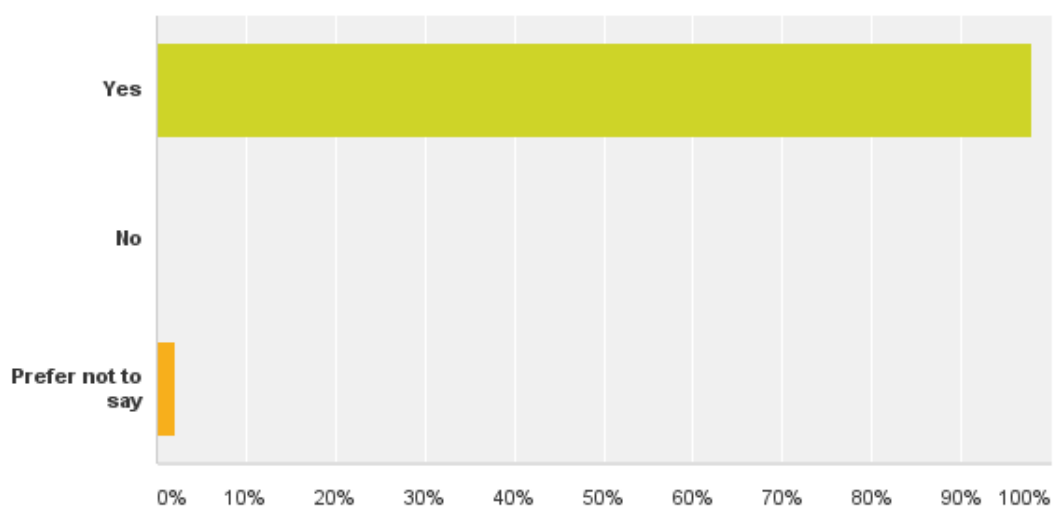
### Q11 Gender:

Answered: 346 Skipped: 5



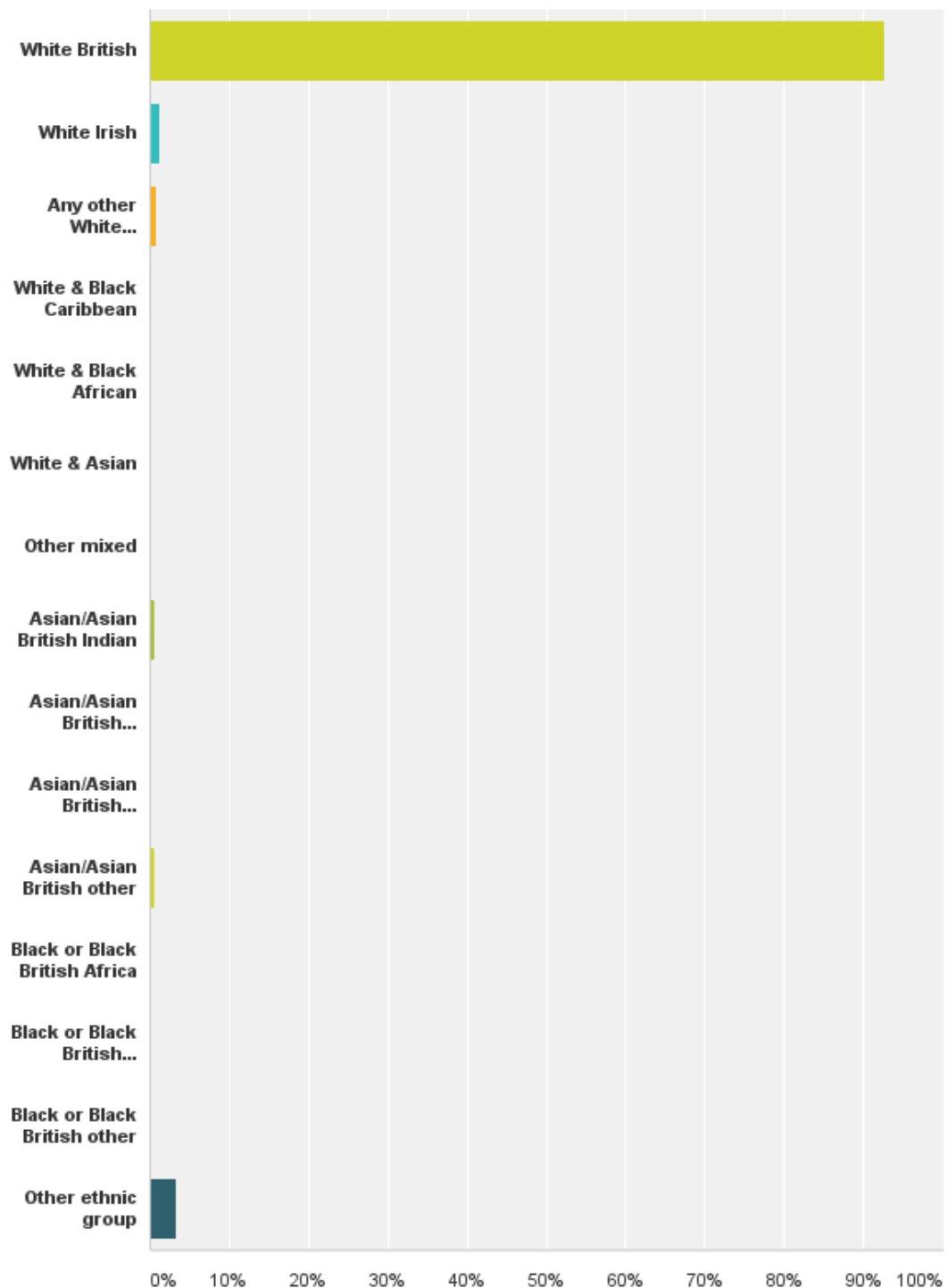
### Q12 Is your gender the same as the gender you were originally assigned at birth?

Answered: 341 Skipped: 10



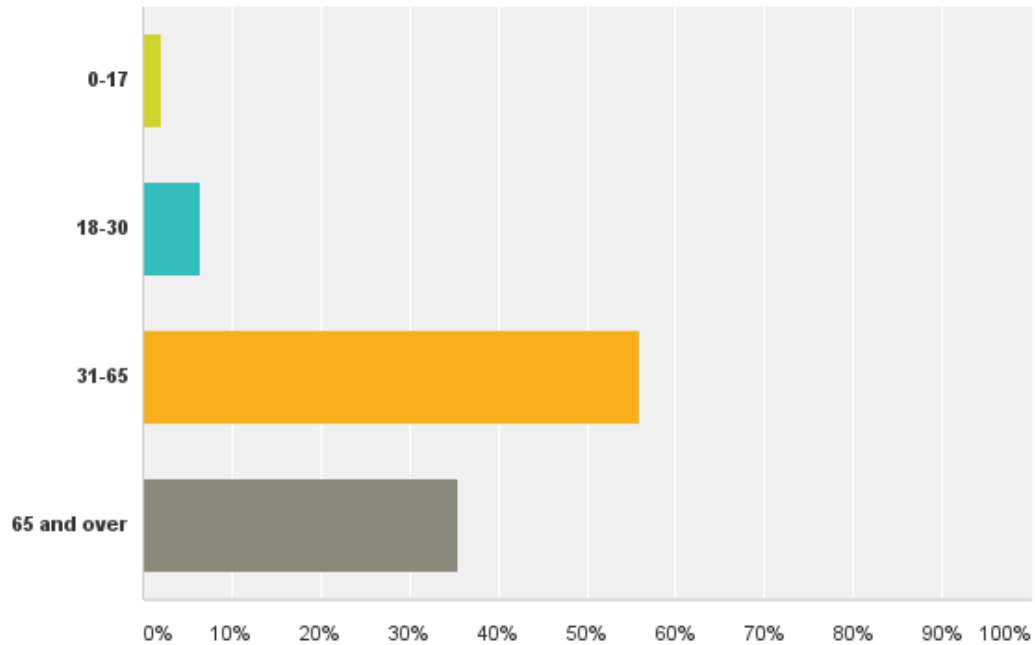
## Q13 Ethnic Origin

Answered: 339 Skipped: 12



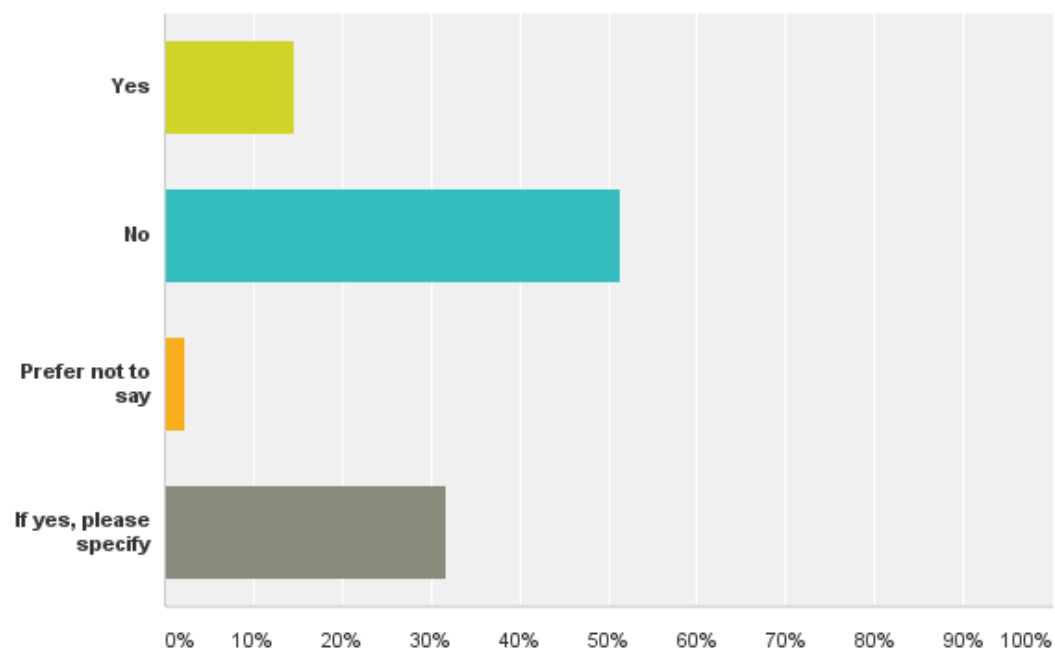
## Q14 Age:

Answered: 343 Skipped: 8



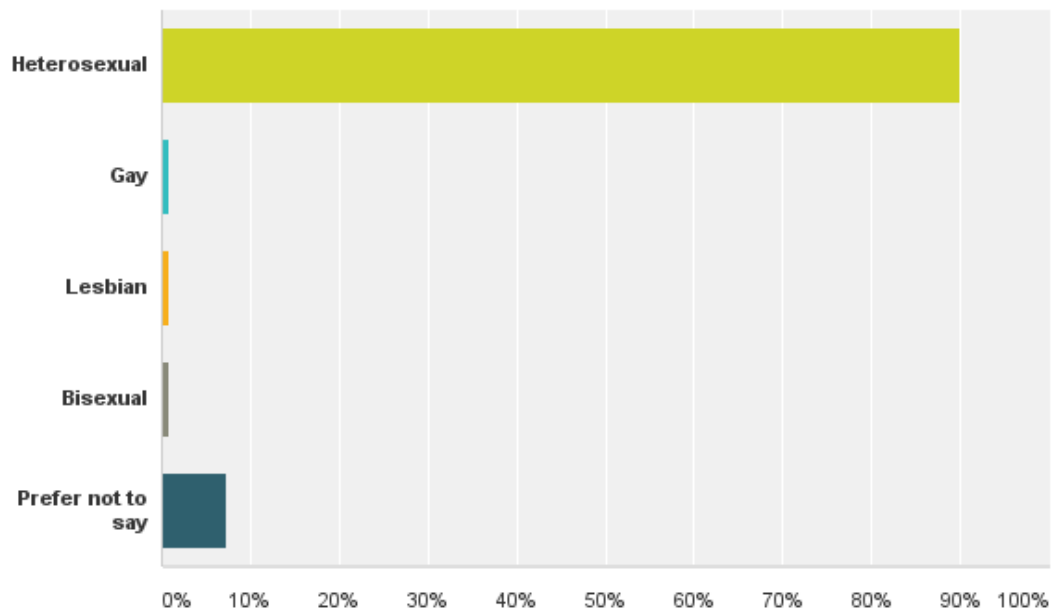
## Q15 Do you consider yourself to have a disability or long term condition?

Answered: 347 Skipped: 4



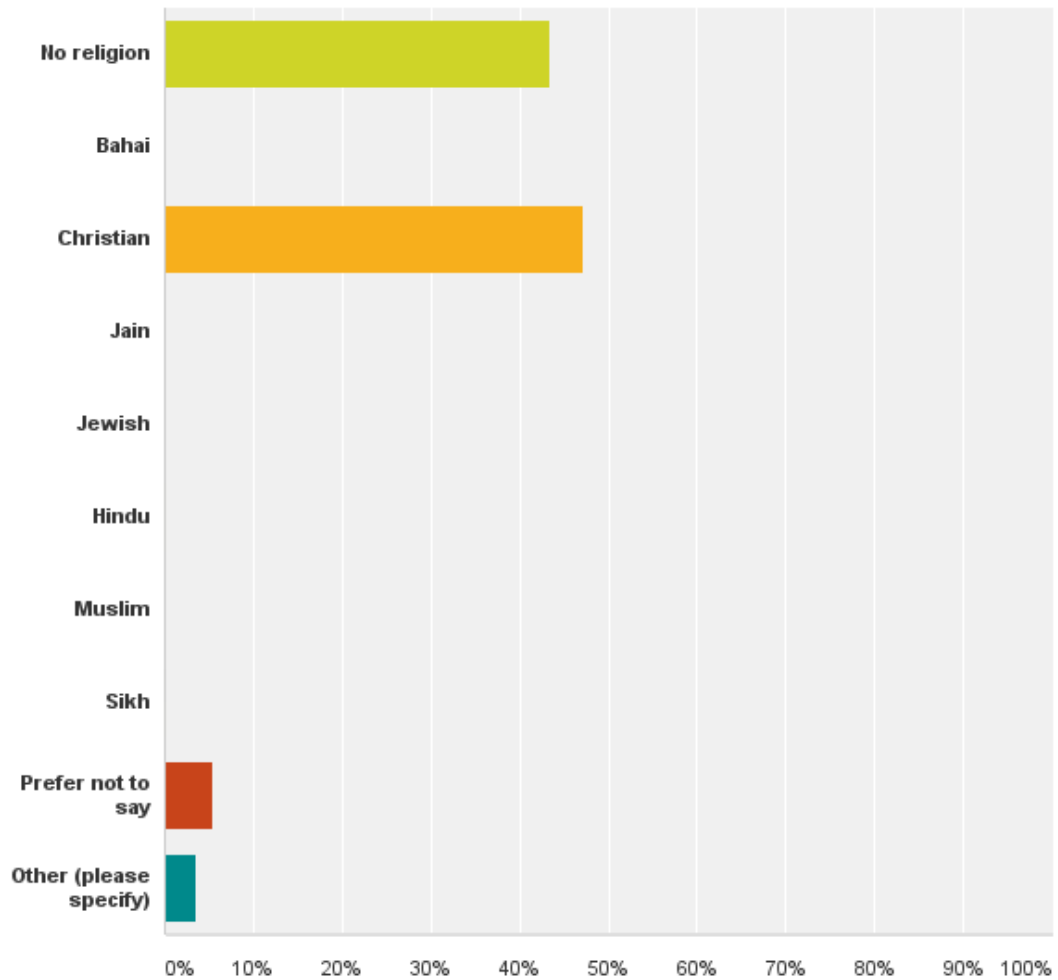
## Q16 Sexual Orientation

Answered: 338 Skipped: 13



## Q17 Religion or Belief

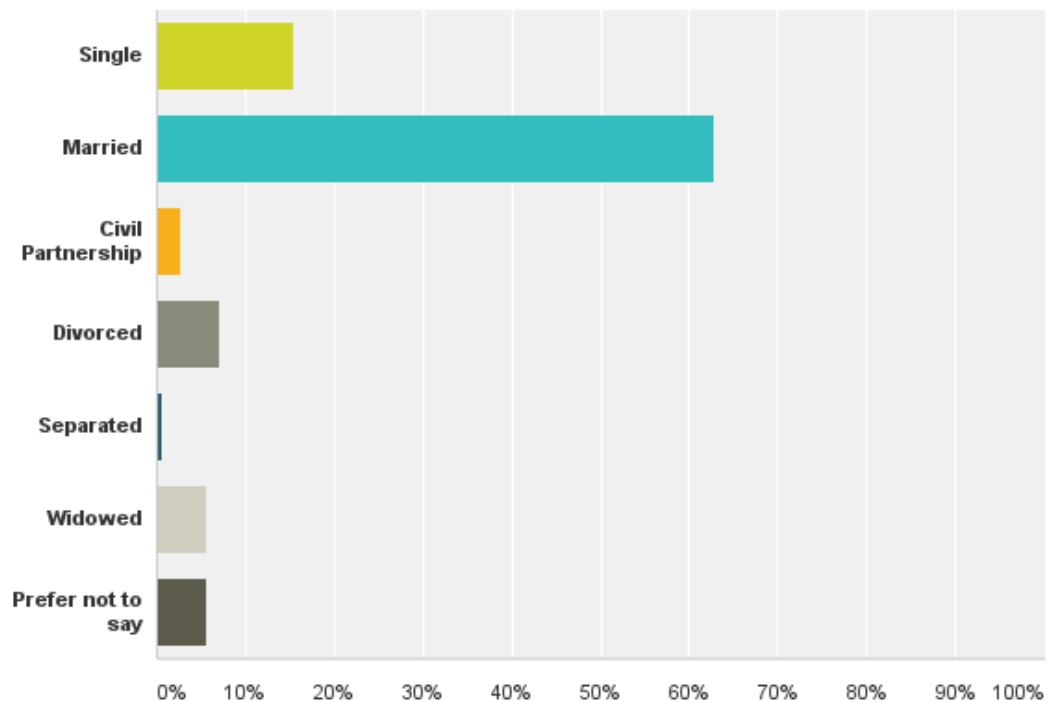
Answered: 337 Skipped: 14





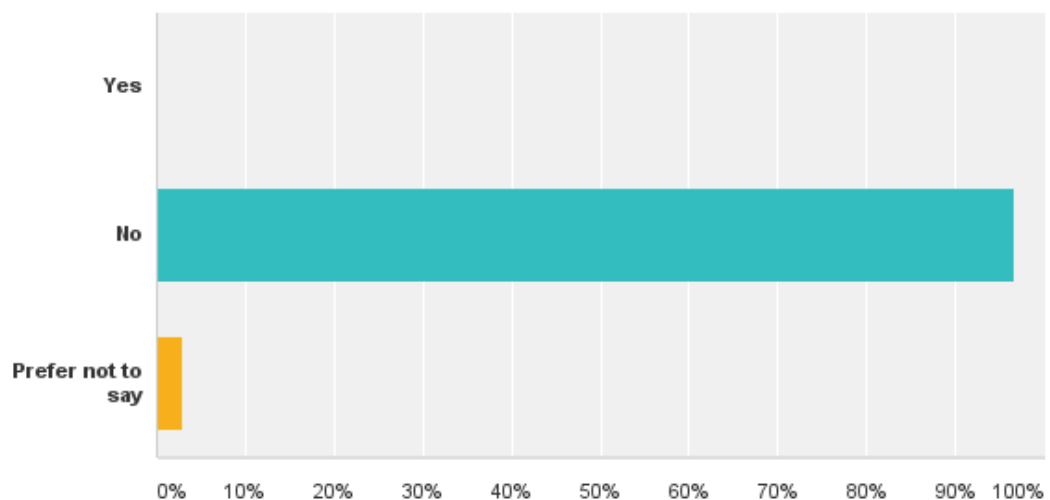
## Q18 Marital/Civil Partnership Status

Answered: 337 Skipped: 14



## Q19 Are you currently pregnant?

Answered: 333 Skipped: 18



## Appendix 2

### Stakeholder feedback –

The proposals were presented at the NNE People's Council (representatives from all 20 practices in the NNE area), NNE Patient QIPP group, Rushcliffe Patient Cabinet and Active group (includes representatives of all GP Practices' PPGs) and Nottingham West's Patient Reference Group. GPs were supportive of the proposal to limit OTC medicines on prescription for minor illness.

Some Practices reported that they already ask people not to request over the counter medications on prescription. For example Trentside Medical Practice in a recent message on Facebook asked patients '*When it comes to simple over the counter remedies such as Paracetamol, Co-codamol, Ibuprofen, simple creams etc., we ask that you consider purchasing such items over the counter. (Pharmacies have discretion to sell up to 96 Paracetamol)*'.

Two GPs also responded via the online survey

*A few thoughts off the top of my head..... I've just received a message from a local care home asking me to prescribe paracetamol because a resident had a temp. They were not concerned about the patient but had a 'no homely remedies' policy which means it has to be prescribed- this seems odd.*

*I wonder if care home patients have paracetamol (and the prescriptions) regularly without the care home asking the pt whether they continue to need/require it. As a general rule I try never to prescribe paracetamol or ibuprofen for self-limiting illness. 'It should be in the first aid box at home', I say.*

*A recurring problem is that patients feel it is their right to have it on prescription if it can be prescribed (so some ccg literature for the patient may be helpful). Medications this relates to includes because cough syrups, anti-histamines etc.*

*Sometimes patients say that diclofenac helps them more than ibuprofen and I don't think diclofenac is otc*

*Thank you for all this.*

*I strongly feel however that we should go further and discuss not just minor illness but also all kinds of drugs that are available OTC and could be bought instead of prescribed.*

*Many patients I believe would be prepared to help in this way.*

## Appendix 3 – communications resources

### Appendix 1 - poster



The poster features a background image of a hand holding several white, oval-shaped pills. In the top right corner, the NHS logo is displayed. A pink speech bubble on the left contains the text 'THE BIG HEALTH DEBATE'. The main title, 'Should over the counter medicines for minor illnesses be available on prescription?', is written in white on a blue background. Below the title, there are three columns of text. The first column explains what over-the-counter medicines are and lists examples like paracetamol, cough medicines, ibuprofen, and antihistamines. The second column states that currently, these medicines are available on prescription for all conditions, including minor illnesses like colds and headaches. The third column mentions that across South Nottinghamshire, over £880,000 is spent per year on prescribing paracetamol and ibuprofen alone. To the right of this, there is a proposal to limit over-the-counter medicines to prescription for minor illnesses and a request for public input. Below this, it provides instructions on how to have your say, including a website link (www.surveymonkey.com/r/OTC-meds) and a phone number (0800 028 3693, option 2). A white box at the bottom right specifies the survey period: from Monday 19 December 2016 to Friday 3 February 2017. At the bottom of the poster, the NHS logos for Nottingham North and East, Nottingham West, and Rushcliffe Clinical Commissioning Groups are shown.

**THE BIG HEALTH DEBATE**

## Should over the counter medicines for minor illnesses be available on prescription?

Over the counter medicines are those that can be bought easily at shops, supermarkets and pharmacies like paracetamol, cough medicines, ibuprofen and antihistamines.

Currently, these medicines are available on prescription for all conditions including minor illnesses like colds and headaches.

Across South Nottinghamshire, we spend over **£880,000 per year on prescribing paracetamol and ibuprofen alone.**

We are proposing to limit over the counter medicines on prescription for minor illnesses and want to know what you think.

### How to have your say:

Go to: [www.surveymonkey.com/r/OTC-meds](http://www.surveymonkey.com/r/OTC-meds)

Or call: **0800 028 3693 (option 2)** to get a printed copy or complete over the phone

**You can have your say any time from Monday 19 December 2016 to Friday 3 February 2017**

## Communications statements

### GP Communications

#### Have your say on the future of over the counter medications on prescription for minor ailments

Dear all,

Today, Monday 19 December, we are launching a public engagement campaign to ask people to share their views about purchasing over the counter medicines and vitamins.

We, along with Nottingham West and Rushcliffe CCGs, are recommending that patients with minor ailments and/or using medicines and vitamins of low clinical priority are provided with information to purchase these over the counter.

The proposal aims to reduce the costs of prescriptions/FP10s for over the counter medicines (OTC) and is in line with what has been implemented by other CCGs nationally.

Currently, across South Nottinghamshire (excluding City), we spend more than £880,000 a year on prescribing paracetamol and ibuprofen alone.

The total cost of prescribing OTC medicines for Nottingham North and East (NNE), Rushcliffe and Nottingham West CCGs in 2015 was £1,508,792. For NNE the total costs were £659,652 with costs per practice ranging from £7,165 to £72,374 per year. For Nottingham West the total costs were £414,190 ranging from £10,934 to £69,279 and Rushcliffe were £434,950 ranging from £11,881 to £87,904. The first half of 2016 indicates an average reduction of 11% across the CCGs and this has been factored into the potential savings. Estimated savings across the three south CCGs are £478,487.

You can read more about the proposals in this [briefing document](#).

**Please note** - This engagement is about minor ailments only. It is not about people living with long-term conditions who receive over the counter medicines on prescription to help them manage their condition. For example, patients who use large volumes 4-6 hourly for the management of chronic pain conditions will continue to receive paracetamol or ibuprofen on prescription.

**We'd really like to hear your views and those of your patients.**

If you want to share your views on this, please email the patient experience team:  
[pet@nottinghamnortheastccg.nhs.uk](mailto:pet@nottinghamnortheastccg.nhs.uk)

Please encourage your patients to fill in the survey. Attached to this email are documents to promote the engagement exercise.

Patients can share their views:

- [Online](#)
- Or call: [0800 028 3693](tel:0800 028 3693) (option 2) and fill in the questionnaire over the phone
- Email the [Patient Experience Team](#) for a questionnaire

The engagement exercise will run over a seven-week period from Monday 19 December 2016 to Friday 3 February 2017.

Please can you print off the attached poster and leaflets and display at your practices.

[Posters](#)  
[Leaflets](#)

Thanks for your help with this.

## **Press release - draft**

### **Health commissioners ask for patient's views on over the counter medicines on prescription**

People in South Nottinghamshire are being asked to share their views about whether over the counter medicines for minor illnesses, such as cough medicines and paracetamol, should be provided on prescription.

Health commissioners from three South Nottinghamshire NHS Clinical Commissioning Groups (CCGs - Nottingham North and East, Nottingham West and Rushcliffe) have today launched a patient engagement campaign to ask people whether these medicines should be prescribed for minor ailments.

Minor ailments are those which can be treated with self-care and over the counter medicines, which are medicines you can buy in a supermarket, shop or pharmacy. A minor ailment might be a cold, headache, sore throat, hay fever etc.

The local NHS in South Nottinghamshire is proposing, in the first instance, to limit prescriptions for over the counter medicines for minor ailments.

Currently, across South Nottinghamshire (excluding City) the local NHS spends more than £880,000 on prescribing paracetamol and ibuprofen alone.

The engagement exercise will run over a six-week period from Monday 19 December 2016 to Friday 3 February 2017.

Local GP and Nottingham North and East CCG's Clinical Lead James Hopkinson says: "The NHS, both locally and nationally, is facing unprecedented demand and financial challenge. In order to safeguard core services safely and effectively, the CCGs in South Nottinghamshire have had to review some services to ensure efficiency and best value for the resources we have available.

Providing small quantities of over the counter medicines on prescription for minor ailments is not an effective use of funds. When medicines are prescribed, we incur extra charges through dispensing and administrative fees. If you include GP time then the costs are higher.

"Paracetamol on prescription costs at least five times that of the average over the counter cost. Both medicines can be bought cheaply at shops, supermarkets and pharmacies."

People can complete the survey online at: [www.surveymonkey.com/r/OTC-meds](http://www.surveymonkey.com/r/OTC-meds)

or call [0800 028 3693](tel:0800 028 3693) (option 2) to request a printed version.

## Web copy

### Health commissioners ask for patients' views on over the counter medicines on prescription

#### *Should we limit over the counter medicine on prescription?*

The NHS in South Nottinghamshire has today launched an engagement exercise to get people's views about whether over the counter medicines should be on prescription for minor ailments.

People can comment on proposals to initially limit prescriptions for medicines for minor ailments from Monday 19 December 2016 to Friday 3 February 2017.

Minor ailments are those which can be treated with self-care and over the counter medicines, which are medicines you can buy in a supermarket, shop or pharmacy.

#### **Why are we doing this?**

The NHS is facing financial challenges which means we have to review the services we deliver. The Big Health Debate asks patients what they think and ensures the patient voice is heard as we plan services for the future.

As part of this, the South Nottinghamshire NHS, which covers Rushcliffe, Nottingham North and East and Nottingham West, need to prioritise how they spend their prescribing budgets.

#### **Some facts and figures**



1. Last year, the NHS in the South Nottinghamshire area spent over £880,000 a year on prescriptions for paracetamol and ibuprofen. £880,000 could pay for (approx):
  - 112 hip replacements OR
  - 19733 GP appointments OR
  - 25371 hours of community nursing
2. Nationally, seven million GP consultations every year are for minor ailments that could be self-treated at home. This takes, on average, one hour per day of GP's time and costs the NHS £2 billion per year.
3. Paracetamol can cost as little as 20p per packet in some supermarkets - paracetamol on prescription costs the NHS a minimum of FIVE times more than average supermarket costs.

## Our proposals

We are proposing to limit prescriptions for over the counter medicines for minor ailments.

We'd like to know what impact this proposal might have for local patients, so we are running six weeks of engagement activity (Monday 19 December 2016 to Friday 3 February 2017) to seek your views.

Please fill in this survey and tell us what you think about this proposal and also about whether other over the counter medicines should be available on prescription for minor illnesses.

## How to share your opinion

- [Online](#)
- Or call: [0800 028 3693](tel:0800 028 3693) (option 2) and fill in the questionnaire over the phone
- Email the [Patient Experience Team](#) for a questionnaire

## Email communication - patients

### Have your say on the future of over the counter medications on prescription

The NHS in South Nottinghamshire has today launched an engagement exercise to get people's views about whether over the counter medicines should be on prescription for minor ailments.

Over the counter medicines are those that can be bought easily at shops, supermarkets and pharmacies.

Currently, over the counter medicines are available on prescription for all conditions including minor (or self-limiting) ailments like colds, headaches or sore throats.



Across South Nottinghamshire, each year we spend over £880,000 on prescribing paracetamol and ibuprofen alone.

We are proposing to limit prescribing of over the counter medicines for minor ailments and want to know what you think...

To take part in our patient engagement campaign:

- [Online](#)
- Or call: 0800 028 3693 (option 2) and fill in the questionnaire over the phone
- Email the [Patient Experience Team](#) for a questionnaire
- Look out for questionnaires at your GP Practice

This engagement exercise will take place from Monday 19 December 2016 to Friday 3 February 2017.