

2008

Health Panel-Access and Travel Time to Treatment Appointments



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COUNCILLOR FRANK HART (CHAIR)
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BASSETLAW
DISTRICT COUNCIL
NORTH NOTTINGHAMSHIRE

Bassetlaw District Council
30/11/2008

Introduction

I have had the pleasure of chairing this Health Panel reviewing access and travel time to treatment.

Everyone who has worked on this review has worked well together to make the whole experience a most informative and enjoyable one.

This has proven to be a most interesting review that has been a learning experience for all involved. It has also provided us with lots of information about the various groups involved in access and travel to treatment issues, such as the new Local Involvement Networks, Patient Transport Service and the pilot project Travel to Health.

The really good news is that overall Bassetlaw has good accessibility to treatment that offers choice of appointments in the main and good transport links.

This does not mean that we are in any way complacent and therefore have flagged up areas for improvement. Clearly an overarching theme has been the ripple effect caused by patients missing appointments. There is the significant cost element to be considered, but another important fact is that other patients miss out on the opportunity of an earlier or more convenient appointment.

I would like to take this opportunity to thank all the Members and Officers involved in this review and to all the witnesses who came and gave presentations.

Councillor Frank Hart (Chairman)

December 2008

CONTENTS PAGE

1. Recommendations	Page 4
2. Background	Page 5
3. Scope of the Review	Page 5
4. Method of Review	Page 6
5. Missed Appointments	Page 7
6. Patient Transport Service	Page 8
7. Local Involvement Networks (LINKs)	Page 11
8. Other Access Issues	Page 12
9. Follow up Issues	Page 14
10. Conclusions	Page 15
11. Appendices	Page 16
12. Bibliography	Page 19

1. Recommendations:

<p>1. That there should be an assessment of the resources wasted because of missed appointments. (BPCT)</p>
<p>2. That the Overview and Scrutiny Committee reviews the monetary value of missed appointments. (OSC)</p>
<p>3. That information regarding missed appointments is advertised in the Local press, radio and Bassetlaw News. (GP Services)</p>
<p>4. That the BPCT continues to delegate control to Doncaster & Bassetlaw Hospitals NHS Foundation Trust for the Patient Transport Service. (BPCT)</p>
<p>5. That patient transport is available in the evening/early morning and weekends to match up with the extended hours offered by GP's and hospitals. (BDH PCT)</p>
<p>6. That Doncaster & Bassetlaw Hospitals NHS Foundation Trust constantly reviews Staff car parking and Visitor car parking.</p>
<p>7. That there is a procedure used by General Practice Surgeries to remind patients with disabilities. (PCT)</p>
<p>8. That Overview and Scrutiny Committee monitors the development and budget of LINKs by inviting the new Bassetlaw representative to give a presentation to the Committee and compares it to other local Districts. (BDC)</p>
<p>9. That a six monthly review about the number of patients who are treated outside of the District and who is responsible for the cost of travel and treatment. (PCT)</p>
<p>10. That the County Council erects the proposed bus shelter outside Retford Hospital sooner than the planned date of eight months time. (NCC)</p>
<p>11. That it would be useful if GP Surgeries wrote to patients in Bassetlaw who missed appointments regarding the cost to the Practice and patients. (GP Services)</p>
<p>12. That the final report should be sent to all the GP Practices and that a sheet is attached for their comments. (GP Services)</p>

2. Background

- 2.1** Bassetlaw District Council's Health Panel was tasked to review the access and travel times to treatment appointments as part of its Annual Programme of Work for 2008/09.
- 2.2** As there were known accessibility issues around long journey times in order to access key services within the District, there was a query if this was taken into account by service providers when patients are late for appointments due to travel times and how much flexibility there was.
- 2.3** The key element of this Scrutiny Review would be to establish any differences in approach by service providers in the urban and rural areas.
- 2.4** There would also be an opportunity to scope a range of services.

3. Scope of the Review

3.1 Terms of reference:

- Which specific medical area to review, e.g. GP, dentist or outpatient appointments
- Could there be possible transport problems, e.g. car parking, public transport?
- How does Bassetlaw Primary Care Trust compare with the national average with regards to missed appointments?
- Is there a correlation between location of patients, i.e. demographic factors and transport available?
- Communication – do patients receive letters/texts/telephone calls as reminders?
- What choice there is to book appointments?
- Do patients receive transport information, i.e. bus timetables – are these sent with reminder letters?
- Are there concessionary fares for some patients?
- Possible survey of GP practices/Research by the Panel to see whether the surgeries are located on a bus route; do they have an out of hours service? How do you book an appointment? Website?
- Consequences of missed appointments
 - People not receiving medical care they need
 - Other patients have to wait longer
 - Waste of time and money.

3.2 Panel members discussed some of the difficulties accessing medical appointments. The main points raised were transport, flexible appointments and car park charges.

4. Method of Review

4.1 The following Councillors were appointed to be members of the Health Panel:

<p>Councillor F. Hart (Chairman) Councillor W. Barker (Vice-Chairman) Councillor D. Challinor Councillor B. Jones Councillor Mrs. M.W. Quigley Councillor Miss M. Stokes Councillor Mrs C. Troop Councillor Mrs. E.M. Yates Councillor Mrs J. Smith</p>

4.2 The Panel scheduled meetings with witnesses on the occasions detailed below.

Date	Objective	Witnesses
18 August 2008	Access to Primary Care Services	Director of Primary Care and Modernisation, Bassetlaw Primary Care Trust (BPCT) Primary Care Manager BPCT
4 September 2008	Local involvement Networks (LINKs)	Barney Gerrard and Christine Precious
15 September 2008	Patient Transport Service	Commercial Manager, Bassetlaw Hospital Out Patient Co-ordinator Bassetlaw Hospital
1 October 2008	To gain an insight into General Practices	Practice Manager, Riverside Health Centre

4.3 The Panel sent out a survey to all the General Practices and a questionnaire was sent to Bassetlaw Primary Care Trust. The Panel also discussed information highlighted in the Service Users Survey January to May 2008 and National Survey of Local Health Services 2008.

- 4.4** There has since been further investigation carried out by the Policy and Scrutiny Team into the updated Government guidance for non-emergency transport. In the light of the 2006 White Paper: *Our Health, Our Care, Our Say*, and the introduction of extended choice and the increase range and geographic choice, it was necessary to give guidance on who is responsible for the financing of such trips. The PCT is responsible for securing the provision of Patient Transport Services, but it is envisaged that the PCT will take on the responsibility for PTS contracts and commissioning. The accessibility strategy also highlighted health access issues and the perceived difficulty of getting to health facilities.

5. Missed Appointments

Evidence for Recommendation

Missed appointments were a recurring topic that ran throughout the discussions. The Director of Bassetlaw Primary Care Trust first raised it when she reported that there were no national or local targets in place with regard to missed appointments. The national estimate for each missed GP appointment was £21.

The Practice Manager from Riverside provided information about the numbers of missed appointments in her Practice and these amounted to 13 percent of all GP appointments. Interestingly the appointments that were most likely to be missed were those made for the same day. A subsequent survey was sent out to all GP surgeries and six of the eleven practices completed the survey. The results showed that in the month of September the cost of missed GP appointments in Bassetlaw was £7,224. Practice Nurses also suffer a similar number of missed appointments although this depends on the clinic as some clinics such as diabetes and coronary heart disease fare much better. Some of the Practices reported that they advertise the numbers of missed appointments in an attempt to educate patients. On further investigation it was found that in some other areas GP Surgeries write to patients who miss appointments. The matter of recouping the costs for missed appointments from patients or setting a penalty charge similar to the practice of dentist surgeries was mentioned. However GP surgeries are not permitted to charge patients for missed appointments.

The effect of missed hospital appointments was raised by the Commercial Manager from Bassetlaw Hospital with regard to the number of wasted journeys carried out by the Patient Transport Service (PTS). He quoted 8-9 percent of all journeys were aborted and that a high proportion was due to appointments being cancelled without cancelling the transport arrangements. This would be overcome in the future by the compatibility of IT systems. The Doncaster and Bassetlaw Hospitals NHS Foundation Trust reported that around 9% of appointments were cancelled by the hospital. This was due to booking appointments months in advance when it was not possible to gauge

staffing or the number of emergency appointments necessary in a particular clinic. The other problem faced by hospitals is the number of unfilled vacancies for doctors. This has been due to the change in training young doctors leaving a gap in the middle level and this was cited as a main cause of cancellation of appointments. The Trust is concentrating on lowering this figure as it has done with the result that the number of cancelled operations is now extremely low.

At Bassetlaw District Hospital for the month of September the hospital cancelled 1186 appointments at a cost of £94,880. The number of missed appointments at Bassetlaw hospital in September was 871 at a cost of £69,680, the majority of DNA (Did Not Arrive) were follow up patients, with paediatric clinics being one of the most affected clinics. The Trust stated that the number of DNA's had dropped since Choose and Book had been introduced and that they were trialling text message reminders. At present the hospitals overbook clinics because of the large percentage of DNA's to ensure that patients are seen and that clinics are not run below capacity. The hospital has a strict policy for those who miss appointments; if two concurrent appointments are missed the patient is discharged immediately.

Parking issues also have some bearing on patients missing their appointment time. Retford Hospital Site houses three Practices and parking has become an important issue as there is limited parking results in patients being late for their appointments.

The total cost for September in Bassetlaw for missed appointments alone was around £76,904.

Recommendations

- That there should be an assessment of the resources wasted because of missed appointments.
- That the Performance Improvement Scrutiny Committee calculates the monetary value of missed appointments.
- That information regarding missed appointments is advertised in the Local press, radio and Bassetlaw News.
- It would be useful if GP Surgeries write to patients who miss appointments.

6. Patient Transport Service

Evidence for Recommendation

The Commercial General Manager at Bassetlaw District Hospital (BDH) presented information about the Patient Transport Service. The East Midlands Ambulance Service (EMAS) is the largest service provider and Doncaster & Bassetlaw Hospitals NHS Foundation Trust oversees the contract. EMAS carried out 45,000 journeys per year. For patients to access PTS a clinical assessment is required to determine eligibility. The Trust pays for every journey even those aborted as a result of cancelled appointments. The average cost of each trip is £10.

The Commercial General Manager at Bassetlaw Hospital was able to provide information of the other transport available, such as the courtesy cab service, the shuttle service between hospitals and the patient transfer vehicle. Other service providers are Medicar and the voluntary Car Service. The shuttle is free to patients and staff and runs throughout the day between Bassetlaw and Doncaster Royal infirmary Monday to Friday 8am to 4.30pm excluding Bank holidays. The Trust operates an in-house Courtesy Car service to transport patients, staff and equipment in and around the local community.

Patient Choice is likely to increase the range and geographic location of care providers from whom PCTs will commission services with increasing out-of-area provision. This will increase the length of journeys for some PTS. The cost of these journeys lies with the home PCT.

The efficiency and effectiveness of the service provided by EMAS is measured on a monthly basis. Performance targets are set by BDH and as the table below shows EMAS is in most cases achieving those targets. There is at present no financial penalty for EMAS if they fail to achieve the targets set.

EMAS Targets

Category	Time Allowed	Target Set	Target Achieved in July
Travelling within a 5 mile radius to Hospital	No longer than 60 minutes	85%	99%
Travelling outside a 5 mile radius to Hospital	No longer than 90 minutes	90%	100%
Arrival to Hospital	15 minutes before appointment time	50%	44%
Arrival to Hospital	10 minutes later than the appointment time	95%	93%
Departure from Hospital	Within 30 minutes	75%	76%
Departure from Hospital	Within 60 minutes	90%	95%
Travelling within a 5 mile radius from Hospital	No longer than 60 minutes	85%	100%
Travelling outside a 5 mile radius from Hospital	No longer than 90 minutes	90%	100%

The Commercial General Manager asked if the members would support BDH in remaining in control of PTS as the Government's new guidance stated that local PCTS would be responsible for future PTS requirements¹. However, on further investigation the PCT is able to delegate provision to acute trusts. There are implications to be considered if private ambulance services are to be commissioned to administer the PTS. A recent example in Birmingham discovered that there had been no training, or CRB checks of staff. This has highlighted the need for a robust performance management system to be in place to ensure that the identified failures in Birmingham do not recur.

¹ Guidance on non-emergency patient transport services: response to consultation; Available at : http://www.dh.gov.uk/en/Consultations/Responsestoconsultations/DH_078374?IdcService=GET_FILE&dID=157199&Rendition=Web

The PCT is also working with Retford Action Centre and has provided funding to expand the volunteer drivers scheme. The Transport for Health initiative helps people with a medical problem to travel to GP surgeries, pharmacies and hospitals. The one stop contact number provides information and personalised travel plans, community transport dial-a-ride as well as advice on public transport and taxis.

The PCT also commissioned Retford Action Centre to undertake car-parking surveys as part of the commissioning for the new Primary Care Centre at the Retford site.

Car parking issues at Bassetlaw Hospital were raised; it discussed the staff car parking facility and the Commercial General Manager informed the Select Panel that staff who parked on site paid to park, whilst there was free parking provided for staff further away. All the monies collected in lieu of parking from both staff and visitors are reinvested. The query was raised if; at weekends and evenings some of the staff car park could be offered to visitors, as there are often spaces.

Car Parking at Retford Hospital was raised, as there is a severe lack of parking for patients at the site causing congestion on North Road and the adjacent residential streets. The Bassetlaw Local Strategic Partnership Transport and Accessibility Sub-Committee were aware of the difficulties and have secured a location for parking.

Recommendations

- That the BPCT continues to delegate control to Doncaster & Bassetlaw Hospitals NHS Foundation Trust for the Patient Transport Service.
- That patient transport is available in the evening /early morning and weekends to match up with the extended hours offered by GPs and hospitals.
- That a six-monthly review is done about the number of patients who are treated outside of the District and who is responsible for the cost of travel and treatment. (New guidance states home PCT is responsible for cross-border travel)
- That Bassetlaw Hospital Trust constantly reviews Staff car parking and Visitor car parking arrangements.

7. Local Involvement Networks (LINKs)

Evidence for Recommendation

Local Involvement Networks have replaced the Patient and Public Involvement Forums (PPI). LINKs has been established, as central government wants local communities to have a say in local health and social

care issues. The PPI that previously existed was health based and did not include social care within their remit.

There are 150 LINKs nationally hosted by a range of organisations. In Nottinghamshire the Carers Federation was appointed in March 2008 to be the LINKs host, as it was seen to be representative of its community. As the host, they provide support, assistance, communication and research. Bassetlaw has a newly recruited representative, Kerry Flynn who will be working in Bassetlaw in the new year.

The LINKs service was not meant to be online until the 10 October 2008, however the Department of Health have extended the deadline until the 30 December 2008 if necessary. They are currently working on the structure, code of conduct, declarations of interest, etc. LINKs will be a facility to which local people may refer health and social care issues. LINKs may investigate the complaint and have certain powers to enter and view, for example, investigate and review a complaint concerning a care home. LINKs would also have contact with other complaints services as part of their role. Some of these issues will then be passed to the Overview and Scrutiny Committee in Nottinghamshire County Council. The Team Leader was currently working with the County on joint working and the interrelationship to be able to refer issues to each other. There will be accountability within this structure and the Committee will have to formally recognise/acknowledge the issue referred to them by LINKs within ten working days.

Concerns were raised regarding budgets and funding. However the host organisation, the Carers Federation, will ensure that budgets are stringently managed to avoid any overspend and in fact at present there is an underspend which will be carried over. The Government has provided three years funding and it is hoped that six months before the end of that funding period a decision will be made about who will continue the funding.

Recommendation

- That Overview and Scrutiny Committee monitors the development and budgets of LINKs by inviting the new Bassetlaw representative to make a presentation to the committee and compares it to other local Districts.

8. Issues of Access

Evidence for Recommendation

The PCT is working in partnership with Stagecoach to provide transport to the Primary Care Centre at Retford Hospital. A full evaluation will take place to

ensure the service is cost effective. There is currently no bus shelter outside the centre and a letter was drafted to request a shelter. The reply stated that the northbound side of the carriageway is suitable for a shelter, unlike the southbound side, which is too narrow. It is currently in the consultation process, which ended on 26 November 2008. There is currently one complaint by the residents, which will be assessed.

Seven of the eleven Practices in Bassetlaw now offer extended-hours appointments; however, there is a range of appointments to access these services with Practices using differing methods, such as triage. While there are some practices offering pre-bookable appointments on a Saturday and one other that has an emergency clinic, there is still room for more flexibility across the District.

Following the survey of GP surgeries it became evident that there is no one set procedure to remind patients with learning difficulties of appointments, there seemed to be some Practices which had some procedures in place but this was not consistent across the services. Further investigation found a web-based toolkit had been devised called Easy Health which uses sounds and pictures to assist people with disabilities with access to health.

The survey also showed that GPs were not aware of the number of patients using PTS even though they are able to assess patients on referral to hospital services. GP awareness of this service and their ability to assess need for PTS should be increased.

Nottinghamshire County Council launched a pilot project in Bassetlaw called "Transport to Health" in 2007. This pilot provided residents with a telephone number for travel information on accessing health services in and around the area. This project involves a range of transport services from all sectors and has since been extended to include the facility to book transport when necessary. This highlighted the needs of the rural community and those without personal transport, many of which are elderly. Kath Hobart reported that Dial-a-trip had carried out 525 trips in the last year.

Further investigation found that in Doncaster patients' are offered a service that allows them to book their appointments via email, digital television or mobile. It allows the patients to see the availability of appointments and to see the appointments they have booked at any time. The e@SY Connects partnership offers citizens and businesses from across South Yorkshire access to services from a broad range of agencies over the web, digital TV and mobile telephones. Partners include four local authorities, the local PCTs, the emergency services and the voluntary sector. Customers can book an appointment with a GP and check local transport information. Tuxford Medical Centre offers an online service for patients to book appointments, order repeat prescriptions and to send messages to the practice via their website. A few of the other Practices in Bassetlaw offer an online prescription service and are looking into online booking for appointments.

The panel received an email from the Bridgegate Surgery Patient Participation Group asking for comments on a letter they had received regarding their request for a bench between Bridgegate and the surgery on North Road.

Patients who walked to the surgery who were unwell reported the need to have somewhere on route to rest. The letter from Nottinghamshire County Council said that they could not grant permission for a bench to be placed on this section of the highway because of the pavement width and the number of properties that front this section of North Road. The panel has written to the local County and District Councillors to see if they can try to find a solution with the NCC and has put the Bridgegate Surgery patient Participation group in touch with LINKs.

A recent survey carried out by Retford practice revealed that 81% of patients travel by car whilst 12% walk to appointments and 2% used the bus service. Of the patients surveyed 69% lived in Retford area with 31% outside of the area. The PCT also carried out a survey in April 2008 on 574 patients, which had similar findings 470 people travelled by car (81%) and 74 (13%) walked.

Language barriers to access were touched upon when Gillian Wainwright Practice Manager for Riverside said that there had been an increase in migrant workers and the obvious problems with language barriers. As a result the officer was able to provide Gillian with the migrant workers guide which is available in Polish and English on the Bassetlaw District Council website.

Recommendations

- That the County Council erect the proposed bus shelter outside Retford Hospital.
- That there is a procedure used by General Practice surgeries to remind patients with learning difficulties.
- It was also suggested that the final report should be sent to all the GP Practices and that a sheet is attached for their comments.

9. Follow up issues

There were a few items that this Panel did not have time to cover and could be followed up on future Health Panels. The subject of referrals and patient access to treatment is one such area. In particular the availability of a range of services provided in house by General Practices especially those in rural areas. By December 2008, patients who want it, and for whom it is clinically appropriate, can expect to start their treatment within a maximum of 18 weeks from referral. There is now a system called “the Choose and Book” scheme available for patients to choose their appointments and hospital when being referred to a specialist. The availability and scope of choice and the effect on referral times and distance travelled are all worthy of scrutiny. Patient Choice also has resulted

in the number of patients choosing to use Private hospitals increasing from 300 to 3000 referrals per month nationally and has implications for the economy of the NHS with monies going outside of the organisation.

Another topic that could be looked at is the number of migrants in the area; the recent number of differing nationalities in Bassetlaw reported by the Bassetlaw Local Strategic Partnership (BLSP) Sub Group New Communities Group was 24. Language barriers can prevent access to treatment and health services.

10. Conclusions

The overall picture was that Bassetlaw is doing well; the recent Ipsos Mori Survey for Listen Nottinghamshire partnership showed Bassetlaw residents as the most satisfied in the District, and the recent National Survey of Local Health Services 2008 revealed the Bassetlaw PCT is in the best performing 20% of trusts and at 7% are the best PCT for providing appointments three or more days in advance compared to the remaining 151 PCT's surveyed. The members were especially pleased with the examples of good practice in GP surgeries that had been presented by the witnesses. There has been an increase in the choice of appointments with many of the Practices in Bassetlaw offering extended hours. However there are still gaps with only emergency appointments being available on a Saturday at those Practices that open.

Throughout the review the issue of missed appointments was highlighted. The cost to services and the loss of appointment time has an effect on patients and services. At present there are no targets set regarding missed appointments and public awareness of this issue is patchy. The cost is significantly higher when transport services are included.

Whilst there is a good bus service to Bassetlaw and Retford Hospitals, there is still the issue of public transport in the rural areas, especially for appointments that are early morning or late afternoon, as there was a concern that buses to rural areas are less frequent.

Local Involvement Networks is going to be an avenue for the Public to bring suggestions as well as complaints and needs to be publicised once up and running. It is hoped that once the recruitment of the representative has been completed that there will be more information available as to the full extent of their role.

Car parking was again another prominent issue in this review and the ability to be able to get to health services and park within a reasonable distance is crucial. These matters in Worksop and Retford will need to be constantly reviewed.

Appendices

Results of Access and Travel Time to Treatment Appointments Survey

A survey was sent to all of the General Practices in Bassetlaw. We received back 6 completed surveys out of the eleven sent out. Of those who responded the following information was gleaned.

- They all offered a variety of flexible appointments, with the option to see a preferred gender, however in the majority of cases this could mean the patient would have to wait longer.
- The majority of the Practices reported missed appointments with the total for September being over 343 missed appointments. A common thread was that it was many of the same day appointments that were missed. Three of the Practices do inform the patients about the number of missed appointments.
- All of the Practices were on a bus route and the majority provided travel information. None of the Practices were able to supply information on the mode of transport or distance travelled or the number of referral patients who needed Patient Transport Services. However one Practice noted that they were in the process of doing a survey on transport.
- Three of the Practices had Patient's Forums and one was in the process of setting one up. Issues raised were access and parking, one forum undertook a waiting room survey to see how long patients waited to see a specific doctor and 48-hour access.

Access and Travel Time to Treatment Appointments

	Survey 1	Survey 2	Survey 3	Survey 4	Survey 5	Survey 6
Flexibility of Appt	Yes	Yes	Yes	Yes	Yes	other
Website	No	Yes	Yes	No	No	No
Triage	No	Yes	No	No	Yes	Yes
Mechanisms of information	Yes	N/A	N/A	N/A	Yes	Yes
Reminders	Yes	No	No	No	No	Other
Gender option	Yes	Yes	Yes	Yes	Yes	Other
Missed Appointments	18/per week	N/A	59	157 Sept	25 in Sept	38 in Sept
Cost of missed appointments	N/A	N/A	N/A	N/A	N/A	N/A
Publicise missed appointments and cost	No	Yes	Yes	Yes	No	Yes
On a bus route	Yes	Yes	Yes	Yes	Yes	Yes
Travel information	Yes	Yes	No	Yes	Yes	Yes
Mode of transport	N/A	N/A	No	No	No	No
Distance	N/A	N/A	No	No	No	No
Hospital referrals who use PTS	N/A	No	No	No	No	No
Patient Forum	Yes	No	No	Yes	No	Yes

Dear Ms. Whittle,

I am contacting you on behalf of the Bridgegate Surgery Patient Participation Group.

For some time now we have seen the need for a seat between the roundabout at the top and Bridgegate and the surgery on North Road. If a person is not feeling 100% well, then the walk can feel very long and people need a place, part way along, to rest. I have raised the matter with Miss E. Noble, and I have copied her reply to the end of this email.

Our next meeting is on the 18th November 2008 and I was wondering if you would be able to give me your thoughts on the matter to take to the meeting. Any advice that you can offer in helping to have a seat put on North road would be every much appreciated.

With thanks,

Anna Sewell

Dear Mrs Sewell

I refer to our telephone conversation on the 23rd June 2008 regarding your enquiry for a seat to be placed on North Road, Retford between the Roundabout and Retford Hospital.

Unfortunately, the County Council cannot grant permission for a bench to be placed along this section of North Road because there is insufficient width within the public highway and no suitable location due to the large number of properties that front this section of North Road.

Yours sincerely

Miss E Noble

Technical Services Officer

Nottinghamshire County Council

Highways (North)

Bassetlaw Area Office

Communities Department

Bolham Lane

Retford

Notts

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