

Promenade Medical Centre Patient Survey

Please could you spend a few minutes completing our survey? If you have trouble completing the survey, please ask at reception and they will be happy to assist you. You only need to complete the survey once.

Access - In the past 6 months how many times have you used the following?

Please put a tick in one circle for each row

	Haven't tried	Once or Twice	Three or four times	Five or six times	Seven times or more	Don't know
Getting through on the phone	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Speaking to a Doctor on the phone	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Speaking to a Nurse on the phone	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Obtaining test results by phone	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Trying to see a Doctor urgently	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Attending reception with Query	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How do you rate this?

	Very Poor	Poor	Fair	Good	Very Good	Excellent
Getting through on the phone	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Speaking to a Doctor on the phone	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Speaking to a Nurse on the phone	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Obtaining test results by phone	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Trying to see a Doctor urgently	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Attending reception with Query	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Appointments - How do you rate the hours that the Practice is open for appointments?

Very Poor	Poor	Fair	Good	Very Good	Excellent
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

If we could offer an early morning or evening clinic would you be interested?

Yes / No

If yes please tick

Early Morning	<input type="radio"/>	Evening	<input type="radio"/>
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If we could remind you about your appointment by text would you find this helpful?

Yes / No

Please could you enter the date of your appointment

Thinking about today's appointment.

a) how quickly did you get the appointment you requested for today?

Same Day/ Urgent	Next working day	Within 2 – 3 working days	Within 3 - 5 working days	Within 5 – 7 working days	Within 7 - 10 working days	Longer 10 working days
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

b) how do you rate this?

Very Poor	Poor	Fair	Good	Very Good	Excellent
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Who was your appointment with today?

Dr Hillas	Dr Greig	Dr Kelly	Dr Jones	Nurse Norrey	Nurse Mylchreest	Midwife	Health Visitor
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Did you want a particular Doctor/ Nurse?

Yes / No

For future appointments do you prefer to see a specific GP?

Yes / No

How long do you usually have to wait at the Practice for your consultation to begin?

5 minutes or less	6-10 minutes	11-20 minutes	21-30 minutes	More than 30 minutes
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How do you rate this?

Very Poor	Poor	Fair	Good	Very Good	Excellent
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How do you rate the way you were treated by our Receptionist at the Practice ?

Very Poor	Poor	Fair	Good	Very Good	Excellent
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please could we have your views on patients who do not attend for their appointments?

In general, how satisfied are you with the Practice?

Completely satisfied	Very satisfied	Fairly satisfied	Neutral	Fairly dissatisfied	Very dissatisfied	Completely dissatisfied
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Do you have any other comments or suggestions you would like to make?

Finally, it will help us understand your answers if you could tell us a little about yourself

Male	<input type="radio"/>	Female	<input type="radio"/>						
Under 18	<input type="radio"/>	18 – 24	<input type="radio"/>	25 – 34	<input type="radio"/>	35 - 44	<input type="radio"/>		
45 - 54	<input type="radio"/>	55 - 64	<input type="radio"/>	65 – 74	<input type="radio"/>	74 - 84	<input type="radio"/>	85 + over	<input type="radio"/>

Thank you for taking the time to complete this survey.

The results will be displayed in the Practice once completed.