

"Improving the Practice"

INTRODUCTION

We are asking patients to complete this questionnaire to help us in improving our services.

Are you seeing: (Please tick as appropriate?)

- Doctor
 Practice Nurse

Name of Doctor/Practice Nurse (if applicable):

PLEASE RATE EACH OF THE FOLLOWING AREAS BY TICKING ONCE ON EACH LINE:

	No experience	Poor	Fair	Good	Very Good	Excellent
Access to a Doctor or Nurse						
1. How satisfied are you with the appointment system		1	2	3	4	5
2. Length of time you had to wait for an appointment		1	2	3	4	5
3. Seeing the Doctor of your choice		1	2	3	4	5
4. Length of time waiting to see the Doctor or Nurse		1	2	3	4	5
5. Opportunity of speaking to a Doctor or Nurse on the telephone when necessary		1	2	3	4	5
6. Opportunity of obtaining a home visit when necessary		1	2	3	4	5
Obtaining a repeat prescription						
7. Prescription ready on time (after 48hr)		1	2	3	4	5
8. Handling of any prescription queries		1	2	3	4	5
Obtaining test results						
9. Were you told when to contact us for your results?		1	2	3	4	5
10. Were Results available when you contacted us		1	2	3	4	5

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Dr A M Botros
St George's Medical Centre

11. Level of satisfaction with the manner in which the result was given		1	2	3	4	5
About the staff						
12. How satisfied were you with the handling of the call by the receptionist						
13. The information provided by the Reception staff		1	2	3	4	5
14. The helpfulness of the Reception staff		1	2	3	4	5
And finally						
15. My overall satisfaction with this Practice		1	2	3	4	5

Are you aware of our Practice Web Site – www.stgeorgersmedicalcentre.co.uk

Yes

No

Are you aware that you can request repeat prescription online through our website?

Yes

No

Any further comments:

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The following questions provide us only with general information about the range of people who have responded to this survey. It will not be used to identify you, and will remain confidential.

How old are you?	
Are you male or female?	
How many years have you been attending this Practice?	

Thank you very much for your time and assistance

Please place your completed questionnaire in the box on the Reception desk