

## 2018 Patient Survey

This survey is produced in conjunction with the Patient Participation Group (PPG). We appreciate and value taking the time to complete this survey.

Your answers and comments will help to improve the service the practice provides. We are interested in finding out your views about how we perform and the services we offer, and we would appreciate you completing as many of the questions that are relevant to you as possible. The survey is printed on both sides of the paper to minimise paper usage. Please place a tick or cross in the boxes provided to indicate your answers where appropriate.

In this survey we ask your opinions about staff at Richmond Medical Centre. We have tried to keep the survey short, at the end of the survey there is a general comments section where you can add any other comments you may have.

All answers to questions you enter are anonymous. You need only complete this survey once even if you receive multiple invitations. Please return completed surveys to us and either post through our letterbox at the surgery or hand in to reception.

The cut-off date for this survey is Saturday 31<sup>st</sup> March 2018, which means that we will be unable to accept any response received after this date (we will include any surveys we receive via our letterbox that day when we open on Monday 2<sup>nd</sup> April).

The results of the survey will be published online at our website <http://www.richmondmc.co.uk> by the end of April 2018.

Please note this survey is only open to current patients of Richmond Medical Centre. Please do not complete this survey if you are not registered at the surgery.

**Thank you for your time in completing this survey.**

## About You

### 1) Are you?

- Male
- Female
- Other
- Prefer not to say

### 2) How old are you?

- 16 years or under
- 17 – 34 years
- 35 – 49 years
- 50 – 64 years
- 65 – 74 years
- 75 years or over

### 3) Do you consider yourself to suffer from a disability?

- Yes
- No
- I do not wish to specify

### 4) What do you consider your ethnic group to be?

- White – British/English
- White – Irish
- White – Any other background
- Mixed – White & Black Caribbean
- Mixed – White & Black African
- Mixed – White & Asian
- Mixed – Any other background
- Asian or Asian British
- Asian or Asian British – Pakistani
- Asian or Asian British – Bangladeshi
- Asian or Asian British – Any other background

- Black or Black British – Caribbean
- Black or Black British – African
- Black or British – Any other background
- Chinese
- I do not wish to specify
- Other (Please specify below)

## How do you feel about our staff?

### 5) The last time you saw or spoke to a doctor from the surgery, how good were they at each of the following?

Very Good	Good	Average	Poor	Very Poor
<b>Giving you enough time</b>				
<b>Listening to you</b>				
<b>Explaining things</b>				
<b>Involving you in your care</b>				
<b>Treating you with care and concern</b>				
<b>Seeing you on time (excluding emergency appointment)</b>				

6) The last time you saw or spoke to a nurse or healthcare assistant from the surgery, how good were they at each of the following?

Very Good	Good	Average	Poor	Very Poor
<b>Giving you enough time</b>				
<b>Listening to you</b>				
<b>Explaining things</b>				
<b>Involving you in your care</b>				
<b>Treating you with care and concern</b>				
<b>Seeing you on time (excluding emergency appointment)</b>				

7) How helpful do you find our staff at the main reception desk?

- Very helpful
- Helpful
- Satisfactory
- Unhelpful
- Very unhelpful
- Don't know

8) If you wanted to discuss something confidentially – were you offered the opportunity to discuss this away from the main reception desk?

- Yes
- No
- Not applicable

## Telephones & Appointments

9) If you have contacted the practice in the past 3 months, how easy have you found to get in contact with the surgery by telephone?

- Very easy
- Easy
- Neither easy or difficult
- Difficult
- Very Difficult
- Haven't tried/not contacted in the last 3 months.

10) How easy is it to speak to a doctor or nurse on the same day you are ill?

- Very Easy
- Easy
- Neither easy or difficult
- Difficult
- Very Difficult
- I haven't needed an urgent appointment

**11) How easy is it to book routine or follow up appointments with clinician several weeks in advance?**

- Very Easy
- Easy
- Neither easy or difficult
- Difficult
- Very difficult
- I haven't needed to book an appointment in advance

**12) How satisfied are you with the surgery opening hours?**

- Very satisfied
- Satisfied
- Neither satisfied or dissatisfied
- Dissatisfied
- Very dissatisfied

### **Repeat Prescriptions**

**13) Have you ordered a repeat prescription from the surgery for medicines or any other items in the last six months?**

- Yes
- No

**If you answered "No" to question 12 please skip to question 17.**

**14) What method did you use to order the repeat prescription?**

- Dropped a repeat slip into the surgery
- Posted a repeat slip to the surgery
- Asked the Doctor/Nurse at a routine appointment
- Made an appointment on the day to request it
- Ordered online
- Asked a local chemist to order it

**15) How easy was it for you to order a repeat prescription?**

- Very Easy
- Easy
- Neither easy or difficult
- Difficult
- Very Difficult
- Haven't tried

**16) How satisfied are you with the repeat prescription service?**

- Very satisfied
- Satisfied
- Neither satisfied or dissatisfied
- Dissatisfied
- Very dissatisfied

## Our Premises

### 17) How easy is it to access and move around the surgery and facilities?

- Very easy
- Easy
- Neither easy or difficult
- Difficult
- Very Difficult

Please provide any comments or suggestions you think would help improve access in the box below

### 18) How clean do you consider our facilities to be?

- Very Clean
- Clean
- Neither clean nor unclean
- Unclean
- Very unclean

### 19) Please provide any comments on the cleanliness of our facilities in the box below.

## Patient Participation Group (PPG)

The role of the PPG is to represent the views of the patient and to talk to the practice about any issues raised; these could include ideas on how to improve existing services or suggestion for the new service

### 20) Are you aware the surgery has a patient participation group (PPG)?

- Yes
- No

### 21) Would you like to join the PPG?

- Yes
- No

If you answered "Yes" to question 21 please leave your email address and full name.

Name: \_\_\_\_\_

Email: \_\_\_\_\_

**22) Would you recommend us to someone who just moved into the area and is looking to register with a GP practice?**

- Yes
- No
- Not sure

**23) Any other comments?**

Please use the rest of this page to add any additional comments or suggestion you feel relevant, and anything we can do to improve our service.