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| **De Beauvoir Surgery** | New Image CCG |

Please take a few minutes to fill out this survey on your experience of the services provided by De BeauvoirSurgery. We welcome your feedback and your response will be kept confidential. Thank you for your participation.

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|  |

Date:

## Quality of consultation

Last time you saw or spoke to a GP or nurse from your GP surgery, how good was that GP or nurse at the following?

### Giving you enough time

Very good  Good  Neither good nor poor

Poor  Very poor  Doesn’t apply

### Listening to you

Very good  Good  Neither good nor poor

Poor  Very poor  Doesn’t apply

### Explaining tests and treatments

Very good  Good  Neither good nor poor

Poor  Very poor  Doesn’t apply

### Involving you in decisions about your care

Very good  Good  Neither good nor poor

Poor  Very poor  Doesn’t apply

### Treating you with care and concern

Very good  Good  Neither good nor poor

Poor  Very poor  Doesn’t apply

### Did you have confidence and trust in the GP or nurse you saw or spoke to?

Yes, definitely  Yes, to some extent  No, not at all

Don’t know / can’t say

## Accessing your GP services and making an appointment

### How satisfied are you with the hours your GP surgery is open?

Very satisfied  Fairly satisfied  Neither satisfied nor dissatisfied

Fairly dissatisfied  Very dissatisfied  Not sure when my GP surgery is open

### Generally, how easy is it to get through to someone at your GP surgery on the phone?

Very easy  Fairly easy  Not very easy

Not at all easy  Haven’t tried

### Last time you wanted to see or speak to a GP or nurse from your GP surgery, when did you want to speak to see or speak to them?

On the same day  On the next working day  A few days later

A week or more later  Didn’t have a specific day in mind  Can’t remember

### Were you able to get an appointment to see or speak to someone?

Yes  Yes, but I had to call back closer to or on the day I wanted the appointment  No  Can’t remember

### Overall, how would you describe your experience of making an appointment?

Very good  Fairly good  Neither good nor poor

Fairly poor  Very poor

## Managing your health

### Do you have a long-standing health condition?

Yes (Go to next question)  No (Skip next question)  Don’t know / Can’t say

### In the last 6 months, have you had enough support from local services or organisations to manage your long-term health condition(s)?

Yes, definitely  Yes, to some extent  No

I haven’t needed such support  Don’t know / can’t say

### How confident are you that you can manage your own health?

Very confident  Fairly confident

Not very confident  Not at all confident

## Overall experience

### Overall, how would you describe your experience of your GP surgery?

Very good  Fairly good  Neither good nor poor

Fairly poor  Very poor

## Would you recommend your GP surgery to someone who has just moved to your local area?

Yes, would definitely recommend  Yes, would probably recommend  Not sure

No, would probably not recommend  No, would definitely not recommend  Don’t know

**Additional Feedback, please share any additional comments:**

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