

# Dr I Rasib & Partners

## PPG Survey Questions 2020

673

 (psurvey.aspx?p=352352&xls=1)

 (psurvey.aspx?p=352352&xls=2)

**Number of Responses:** Dear Patient

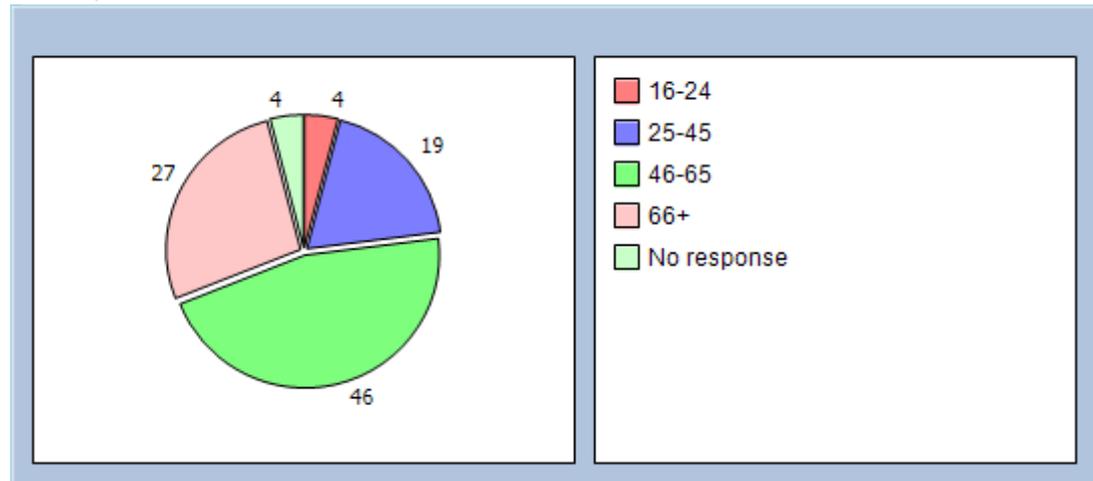
We would be grateful if you would complete this survey about the practice. **The practice will NOT be able to identify your individual responses.**

The practice wants to provide the highest standard of care. Feedback from this survey will enable us to identify areas that may need improvement. Your opinions are therefore very valuable.

Please answer ALL the questions that apply to you.

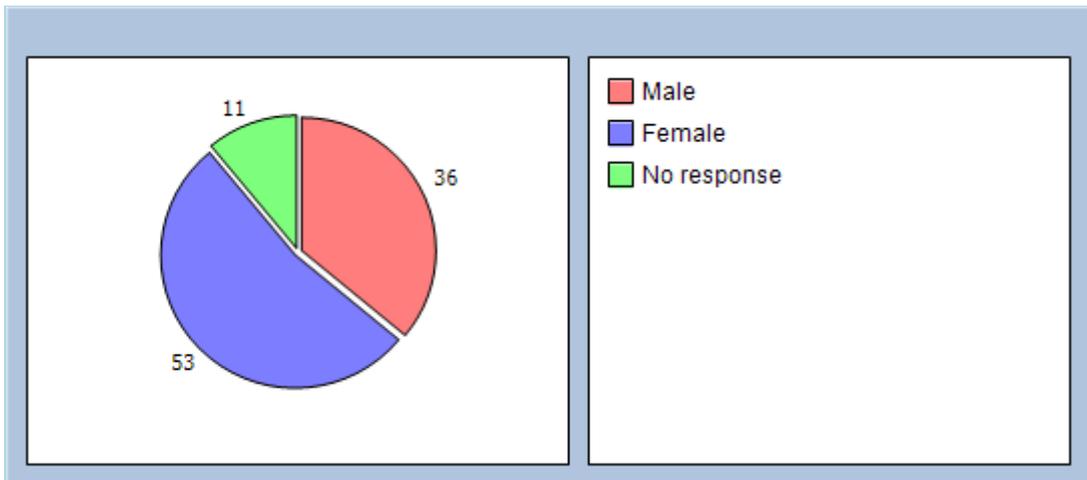
**Age**

16-24	4%
25-45	19%
46-65	46%
66+	27%
No response	4%



**Gender**

Male	36%
Female	53%
No response	11%

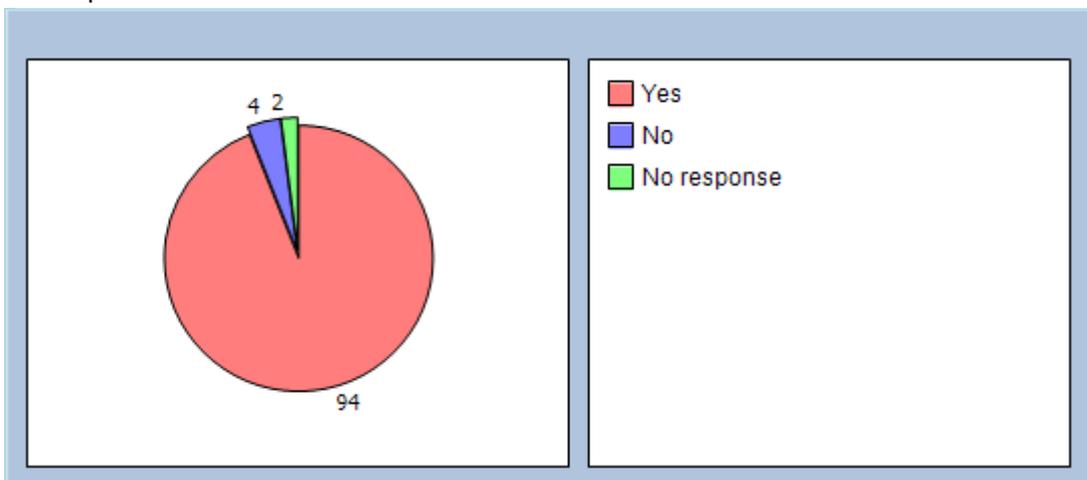


**1. Based on the information provided by the Government and Public Health, which of the following symptoms do you understand to be present in someone with COVID-19?**

Sore throat	34%
Fever	78%
Persistent Cough	90%
Runny Nose	12%
Loss of Appetite	38%
Headache	46%

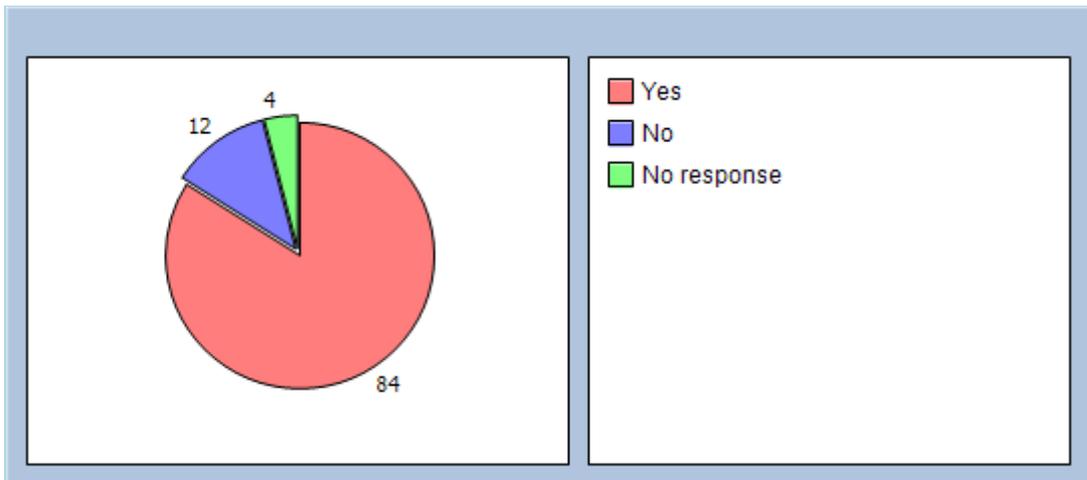
**2. Are you confident that you know what to do if you experience COVID symptoms?**

Yes	94%
No	4%
No response	2%



**3. Although the Practice has had to continue operating using different methods, have you been able to access GP services throughout the pandemic when needed (including via Patient Access)?**

Yes	84%
No	12%
No response	4%

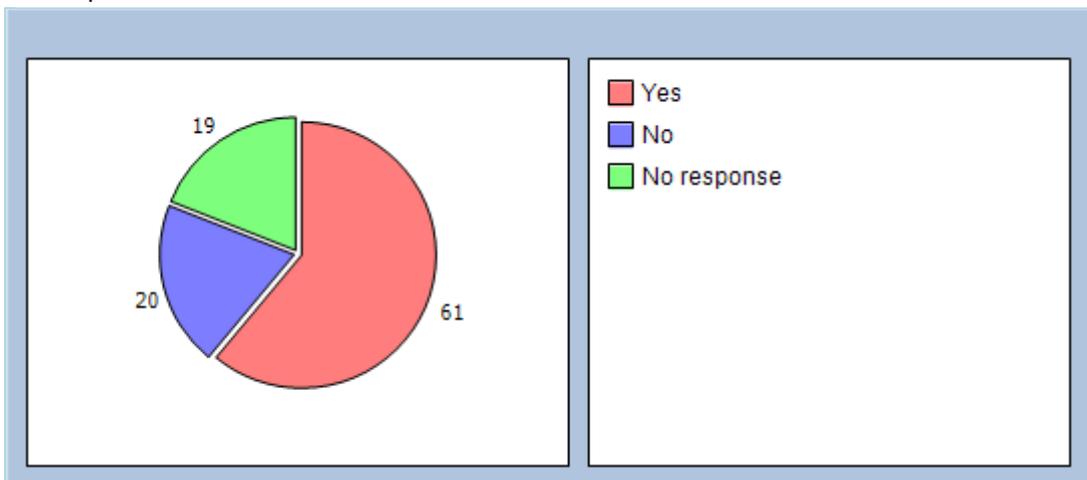


**4. What kind of support would you personally find useful to be offered at the Practice as a result of COVID-19?**



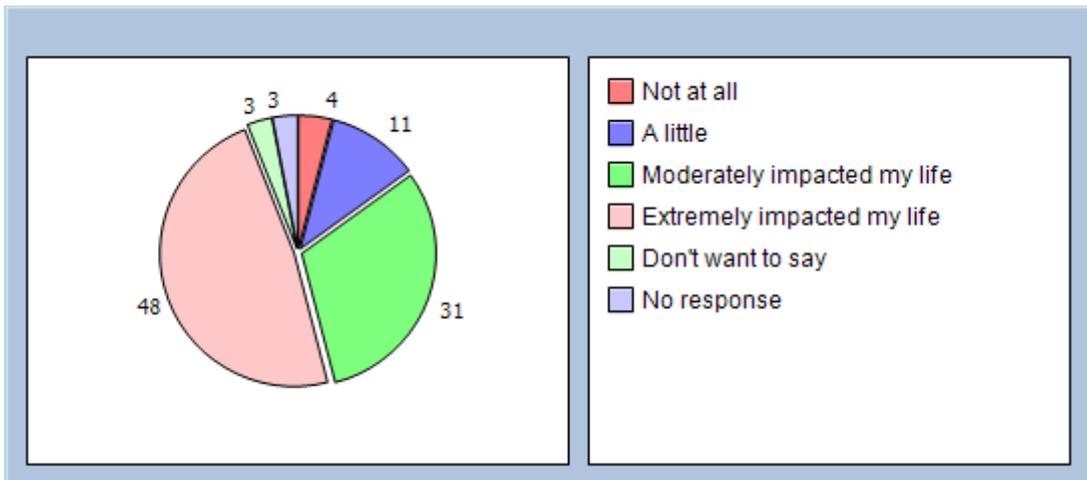
**5. The Practice has recently introduced a new system for dealing with prescription re-ordering. If you have signed up for this, has this been helpful and would it save you time moving forward?**

Yes	<b>61%</b>
No	<b>20%</b>
No response	<b>19%</b>



**6. How much has COVID-19 pandemic impacted your day-to-day life?**

Not at all	<b>4%</b>
A little	<b>11%</b>
Moderately impacted my life	<b>31%</b>
Extremely impacted my life	<b>48%</b>
Don't want to say	<b>3%</b>
No response	<b>3%</b>



Thank you for taking the time to complete this questionnaire. Please click the button below to send your response.

 Delete Responses