

The Friends and Family Test

We would like you to think about your recent experience of our service. Gaining your feedback is essential for us. This ensures that we continually monitor and improve the services that we provide.

What is your sex?	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Prefer not to say		
What is your age?	<input type="checkbox"/> 0-20	<input type="checkbox"/> 20-40	<input type="checkbox"/> 40-60	<input type="checkbox"/> 60-80	<input type="checkbox"/> 80+

How likely are you to recommend Watlington Medical Centre to friends and family if they need similar care or treatment?

- Extremely likely
- Likely
- Neither likely nor unlikely
- Unlikely
- Extremely Unlikely
- Don't Know

What was good about your recent experience?

What would have made your recent experience better?

Can you tell us why you gave that response?

Right to Privacy	<input type="checkbox"/> I DO NOT wish my comments to be made public
	<input type="checkbox"/> I am happy if my comments are made public
Right to Anonymity	<input type="checkbox"/> I wish to remain anonymous
	<input type="checkbox"/> I DO NOT wish to remain anonymous
	Name:
	Date of Birth:
	Telephone Number:
Follow-Up	<input type="checkbox"/> I would like Watlington Medical Centre to follow this up with me (please ensure you have entered your details above)