  
**2019 PATIENT SATISFACTION SURVEY**

1. **Are you an Elm House or Cator Medical Centre patient?**

|  |  |
| --- | --- |
| Elm House |  |
| Cator Medical Centre |  |

1. **When did you last see a doctor at the surgery?**

|  |  |
| --- | --- |
| Within the last month |  |
| Within the last 6 months |  |
| Within the last year |  |
| More than a year ago |  |

**3. Which methods would you prefer to use to book an appointment?**

|  |  |
| --- | --- |
| In person |  |
| telephone |  |
| online |  |
|  |  |

1. **In the past 6 months how easy have you found**

|  |  |
| --- | --- |
|  |  |

**Getting through on the phone?**

|  |  |
| --- | --- |
| Very easy |  |
| acceptable |  |
| somewhat difficult  very difficult  impossible |  |
|  |  |

**Speaking to a nurse on the phone?**

|  |  |
| --- | --- |
| Very easy |  |
| acceptable |  |
| somewhat difficult  very difficult  impossible |  |
|  |  |

**Speaking to a doctor on the phone?**

|  |  |
| --- | --- |
| Very easy |  |
| acceptable |  |
| somewhat difficult  very difficult  impossible |  |
|  |  |

1. **In the past 6 months how often were you able to see a doctor for a problem you considered urgent on the same day?**

|  |  |
| --- | --- |
| Always |  |
| Mostly |  |
| Sometimes |  |
| Never |  |

**6. In the reception area are you concerned you may be overheard by other members of the public?**

|  |  |
| --- | --- |
| Yes |  |
| No |  |

**7. How helpful do you find the receptionists in the surgery?**

|  |  |
| --- | --- |
| Very helpful |  |
| Somewhat helpful |  |
| Somewhat unhelpful |  |
| Very unhelpful |  |

**8. How do you feel about how long you usually have to wait to see a doctor or a nurse?**

|  |  |
| --- | --- |
| Very satisfied |  |
| Somewhat satisfied |  |
| Somewhat dissatisfied |  |
| Very dissatisfied |  |

**9. Are you aware of our econsult service?**

|  |  |
| --- | --- |
| Yes |  |
| No |  |

**10. Which of the following methods are you likely to use to communicate with us?**

|  |  |
| --- | --- |
| Econsult |  |
| Face to face |  |
| Telephone |  |
| SMS |  |

**11. Are you aware of our online repeat prescription ordering service?**

|  |  |
| --- | --- |
| Yes |  |
| No |  |

**12. In general, how satisfied are you with the care you get at the practice?**

|  |  |
| --- | --- |
| Very satisfied |  |
| Somewhat satisfied |  |
| Somewhat dissatisfied |  |
| Very dissatisfied |  |

**13. Please tell us**

1. **your age**

|  |  |
| --- | --- |
| Under 16 |  |
| 16-24 |  |
| 25-39 |  |
| 40-65 |  |

Over 65

1. **your gender**

|  |  |
| --- | --- |
| Male |  |
| Female |  |
| Transgender/ gender fluid |  |
| Prefer not to say |  |

1. **your employment status**

|  |  |
| --- | --- |
| Employed |  |
| Job seeking |  |
| Retired |  |
| Homemaker |  |

Not working on medical grounds

1. **whether you consider yourself to have a disability**

|  |  |  |  |
| --- | --- | --- | --- |
| Yes |  |  |  |
| No |  |  |  |

1. **your ethnicity**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  | | --- | --- | --- | --- | | White / Caucasian |  | Any other white background |  | | Black African |  | Black Caribbean |  | | Chinese |  | Indian |  | | Mixed race |  | Pakistani |  | | Prefer not to say |  | Bangladeshi |  | | Any other black background |  | Any other Asian background |  | |  |

**14. Is there any other comment you would like to make?**