

# THE MANOR SURGERY

## IMPROVING THE PRACTICE QUESTIONNAIRE 2012.

Members of the Manor Surgery Patient Participation Group together with practice staff have designed this questionnaire to ask your opinion on various aspects of your experience during the last 12 months at the surgery. **YOU** can help the practice improve its service. Please help us and take the time to complete this survey.

### Accessibility

1.	Do you have any of the following access needs?	Mobility	
		Sight	
		Hearing	
		Small Children	
		Language	
		Other	
		No	
2.	The EXTERNAL access to the building would best be described as:	Excellent	
		Good	
		Meets my needs	
		Would benefit from changes	
		Does not meet my needs	
3.	The ENTRANCE to the building would best be described as:	Excellent	
		Good	
		Meets my needs	
		Would benefit from changes	
		Does not meet my needs	
4.	My use and access to the RECEPTION DESK would best be described as:	Excellent	
		Good	
		Meets my needs	
		Minor difficulties	
		Does not meet my needs	

5.	How do you rate the <b>hours</b> that the practice is open for appointments?	Excellent	
		Very Good	
		Good	
		Fair	
		Poor	
6.	If you have used the telephone appointment system, how did you find it?	Excellent	
		Very Good	
		Good	
		Fair	
		Poor	
7.	How would you rate the reception staff? Are they courteous and sensitive to your needs?	Excellent	
		Very Good	
		Good	
		Fair	
		Poor	
8.	How easy is it to contact the surgery on the telephone?	Excellent	
		Very Good	
		Good	
		Fair	
		Poor	
9.	How long do you normally have to wait to get an appointment with the GP of your choice?	Same day	
		Next day	
		2 days	
		3 days	
		4-7 days	
		8 days or longer	
10.	If you need to see a doctor urgently you can always get seen on the same day, although this may not be the doctor of your choice. How do you rate this?	Excellent	
		Very Good	
		Good	
		Fair	
		Poor	
Quality of consultation			
11.	When you consult your <b>doctor</b> how do you rate how well the doctor <b>explains</b> your health problem and any treatment that you might need	Excellent	
		Very Good	
		Good	
		Fair	
		Poor	

12.	How do you rate how well the <b>doctor listens</b> to what you have to say?	Excellent	
		Very Good	
		Good	
		Fair	
		Poor	
13.	How do you rate how much the <b>doctor involves you in decisions</b> about your care?	Excellent	
		Very Good	
		Good	
		Fair	
		Poor	
14.	If you needed to have a physical examination, were you given enough privacy? (Doctor or Nurse).	Yes	
		No	
		Sometimes	
15.	If you have consulted a nurse in the last 12 months, please rate how well they explained your health problem and any treatment that you might need.	Excellent	
		Very Good	
		Good	
		Fair	
		Poor	
16.	How do you rate how much the nurse involves you in decisions about your care?	Excellent	
		Very Good	
		Good	
		Fair	
		Poor	
17.	How do you rate how well the nurse listens to what you have to say	Excellent	
		Very Good	
		Good	
		Fair	
		Poor	
Communication			
18.	Do you use the surgery website?	Yes	
		No	
		Wasn't aware there was one	



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If you would like to add any further comments relating to any of the above questions, please do so.

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The following questions provide us only with general information about the range of people who have responded to this survey. It will not be used to identify you.

Are you?	Male
	Female
How old are you?	Under 16
	16-25
	26-35
	36-45
	46-55
	56-65
	65+
What ethnic group do you belong to?	White
	Mixed
	Asian or Asian British
	Black or Black British
	Chinese
	Other
	Not Stated