

Coulby Medical Practice Patient Survey



You can help this general practice improve its service

- This practice would welcome your honest feedback
- No-one at the practice will be able to identify your personal responses
- Once completed, please return this survey to reception in the envelope provided

Please mark the questionnaire like this with a blue or black pen. If you change your mind just cross out your old response and make your new choice.

		Yes	No	Not sure
Q1	Do you know that the Practice have a Patient Participation Group?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q2 What would be your preferred option for being called for your appointment from the waiting room?			
In person	<input type="checkbox"/>	By silent flashing LED system	<input type="checkbox"/>
By tannoy system	<input type="checkbox"/>	I do not have a preference	<input type="checkbox"/>
Not sure	<input type="checkbox"/>		

		Yes	No	Not sure
Q3a	Are you aware of the Practice website?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

		Yes	No	Do not have access to internet
Q3b	If so, have you used this?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

		Yes	No	Not sure	Do not have access to internet
Q4	If the Practice were to set up a social media newsfeed (through Facebook or Twitter) would you access this?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q5 If you were to be referred by the Practice how would you prefer to have your appointment booked?			
By receiving an appointment through the post from the Hospital	<input type="checkbox"/>	By electronically booking the appointment yourself (known as the Choose and Book system)	<input type="checkbox"/>
Not sure	<input type="checkbox"/>		

Thank you for your time and assistance