Rossendale Valley Medical Practice Patient Questionnaire

We would be grateful if you could complete this questionnaire about your Practice . Your opinions are valuable. Please answer all the question you can, there are no right or wrong answers. Your Doctor will not be able to identify your individual answers. (please circle your answer)

Please e rate the Doctor, Nurse and Reception staff

1	Making you fee	el at ease ?						
	Poor to Fair	Fair	Fair to Good	Good	Very Good	Excellent	Outstanding	
				25%	40%	15%	20%	
2	Being polite ar	nd considerate?						
	Poor to Fair	Fair	Fair to Good	Good	Very Good	Excellent	Outstanding	
					60%	15%	25%	
3	Listening to yo	u ?						
	Poor to Fair	Fair	Fair to Good	Good	Very Good	Excellent	Outstanding	
				35%	30%	15%	25%	
4	Fully understanding your concerns ?							
	Poor to Fair	Fair	Fair to Good	Good	Very Good	Excellent	Outstanding	
			10%	15%	25%	35%	15%	
5	Giving you end	ough time?						
	Poor to Fair	Fair	Fair to Good	Good	Very Good	Excellent	Outstanding	
				30%	25%	25%	20%	
7	Assessing you	r medical condi	tion?					
	Poor to Fair	Fair	Fair to Good	Good	Very Good	Excellent	Outstanding	
				40%	20%	15%	25%	
8	Showing care	and compassion	n ?					
	Poor to Fair	Fair	Fair to Good	Good	Very Good	Excellent	Outstanding	
				15%	10%	20%	55%	
9	Involving you i	n decisions abo	ut your care?					
	Poor to Fair	Fair	Fair to Good	Good	Very Good	Excellent	Outstanding	
			10%	25%	25%	25%	15%	
10	How helpful do	you find the gi	Reception					
	Poor to Fair	Fair	Fair to Good	Good	Very Good	Excellent	Outstanding	
				40%	5%	30%	25%	
11	How easy is it	go get through	on the phone?					
	Poor to Fair	Fair	Fair to Good	Good	Very Good	Excellent	Outstanding	
		5%	30%	55%	10%			
12	How easy is it	to get an appoir	ntment on the s	ame day ?	or telephone co	nsultation		
	Poor to Fair	Fair	Fair to Good	Good	Very Good	Excellent	Outstanding	
	10%		40%	40%	10%			
13	How easy is it	to pre-book an	appointment					
	Poor to Fair	Fair	Fair to Good	Good	Very Good	Excellent	Outstanding	
			25%	40%	5%	10%	20%	
14	How satisfied a	are you with the	Surgery hours	?				
	Poor to Fair	Fair	Fair to Good	Good	Very Good	Excellent	Outstanding	
				60%	15%	10%	15%	
15	Are we current	ly open at times	that are conve	enient to you?				
	Yes	No	Don't know					
	70%	5%	25%					
16	Overall, how w	ould you descri	be your experie	ence of your GP	today?			
	Poor to Fair	Fair	Fair to Good	Good	Very Good	Excellent	Outstanding	
		-		35%	15%	25%	25%	

17	Would you recommend your GP surgery to someone who has just moved to the area?										
	Yes	No	Don't know								
	80%		20%	-	-	-					
18	Are you male or female ?										
	Male	Female	Other								
	40%	60%		-	-	-	-				
19	9 How old are you ?										
	Under 18	18 to 24	25 to 34	35 to 44	45 to 54	55 to 64	64 to 74				
	75 to 84	85 or over	10%	10%	20%	25%	10%				
25%											
20	20 What is your ethnic group ?										
	White 85%	White 85% Mixed /Multuple Ethnic Group		Asian / Asian British 20% Black/African/Caribbean/Black Britis							

Any further comments:

- 1) Would be useful when making an appt to have confirmed who it is with, ie Doctor or Locum.
- 2) Outstanding Service during Covid
- 3) Thanks to all staff for a great service
- 4) Very happy with the Practice overall
- 5) More Face to Face appointments needed
- 6) The Staff are excellent
- 7) On the whole satisfied with the service
- 8) Thank you to the Doctor, Nurse and all staff for their hard work
- 9) We would prefer to see the Doctor every time we make an appointment

Poll Size 70 over two months of September and October 2022