

THE GP PATIENT SURVEY

Thank you for taking the time to answer these questions. Please answer the questions below by putting a **X** in ONE BOX for each question. We will keep your answers completely confidential.

If you would prefer to complete the survey online, please go to www.gp-patient.co.uk

Reference/Username:

 Online password:



A. ABOUT YOUR GP SURGERY OR HEALTH CENTRE

Q1 How easy do you find it to get into the building at your GP surgery or health centre?

- Very easy
- Fairly easy
- Not very easy
- Not at all easy

Q2 How clean is your GP surgery or health centre?

- Very clean
- Fairly clean
- Not very clean
- Not at all clean
- Don't know

Q3 In the reception area, can other patients overhear what you say to the receptionist?

- Yes, but I don't mind
- Yes, and I am not happy about it
- No, other patients can't overhear
- Don't know

Q4 How helpful do you find the receptionists at your GP surgery or health centre?

- Very helpful
- Fairly helpful
- Not very helpful
- Not at all helpful

B. GETTING THROUGH ON THE PHONE

Now please think about times you have phoned your GP surgery or health centre in the past 6 months.

Q5 In the past 6 months, how easy have you found the following?
Please put a **X** in one box for each row.

	Haven't tried	Very easy	Fairly easy	Not very easy	Not at all easy	Don't know
Getting through on the phone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Speaking to a doctor on the phone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Speaking to a nurse on the phone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Getting test results on the phone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

C. BOOKING AN APPOINTMENT

Q6 How do you normally book your appointments to see a doctor or nurse at your GP surgery or health centre?

Please **X** all the boxes that apply to you

- In person
- By phone
- By fax machine
- Online
- Digital TV
- Doesn't apply

Q7 Which of the following methods would you prefer to use to book appointments at your GP surgery or health centre?

Please **X** all the boxes that apply to you

- In person
- By phone
- By fax machine
- Online
- Digital TV
- Doesn't apply / no preference

D. SEEING A DOCTOR

Q8 In the past 6 months, have you tried to see a doctor fairly quickly?
By 'fairly quickly' we mean on the same day or in the next 2 weekdays the GP surgery or health centre was open.

- Yes Please go to Q9
- No Please go to Q11
- Can't remember Please go to Q11

Q9 Think about the last time you tried to see a doctor fairly quickly. Were you able to see a doctor on the same day or in the next 2 weekdays the GP surgery or health centre was open?

- Yes Please go to Q11
- No Please go to Q10
- Can't remember Please go to Q11

Q10 If you couldn't be seen within the next 2 weekdays the GP surgery or health centre was open, why was that?

Please **X** all the boxes that apply to you

- There weren't any appointments
- The times offered didn't suit me
- The appointment was with a doctor I didn't want to see
- I could have seen a nurse but I wanted to see a doctor
- I was offered an appointment at a different branch of my surgery
- Another reason
- Can't remember

Q11

In the past 6 months, have you **tried** to book ahead for an appointment with a doctor?

By 'booking ahead' we mean booking an appointment more than 2 full weekdays in advance.

- Yes Please go to Q12
- No Please go to Q13
- Can't remember Please go to Q13

Q12

Last time you tried to, were you **able** to get an appointment with a doctor **more than 2 full weekdays in advance**?

- Yes
- No
- Can't remember

Q13

When did you last see a doctor at your GP surgery or health centre?

- In the past 3 months Please go to Q15
- Between 3 and 6 months ago Please go to Q15
- More than 6 months ago Please go to Q14
- I have never been seen at my present GP surgery or health centre Please go to Q14

Q14

If you haven't seen a doctor in the past 6 months, why is that?

Please **X all** the boxes that apply to you

- I haven't needed to see a doctor
- I couldn't be seen at a convenient time
- I couldn't get to the GP surgery or health centre easily
- I didn't like or trust the doctors
- Another reason

E. WAITING TIME AT THE GP SURGERY OR HEALTH CENTRE

Q15

How long after your appointment time do you normally wait to be seen?

- I don't normally have appointments at a particular time
- I am normally seen at my appointment time
- Less than 5 minutes
- 5 to 15 minutes
- 16 to 30 minutes
- More than 30 minutes
- Can't remember

Q16

How do you feel about how long you normally have to wait?

- I don't normally have to wait too long
- I have to wait a bit too long
- I have to wait far too long
- No opinion/doesn't apply

F. SEEING THE DOCTOR YOU PREFER

Q17 Is there a particular doctor you prefer to see at your GP surgery or health centre?

- Yes Please go to Q18
 No Please go to Q19
 There is usually only one doctor in my GP surgery or health centre Please go to Q19

Q18 How often do you see the doctor you prefer to see?

- Always or almost always
 A lot of the time
 Some of the time
 Never or almost never
 Not tried at this GP surgery or health centre

G. OPENING HOURS

Q19 How satisfied are you with the hours that your GP surgery or health centre is open?

- Very satisfied
 Fairly satisfied
 Neither satisfied nor dissatisfied
 Fairly dissatisfied
 Very dissatisfied
 I'm not sure when my GP surgery or health centre is open

Q20 As far as you know, is your GP surgery or health centre open...
Please put a **X** in one box for each row

	Yes	No	Sometimes	Don't know
... before 8am?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... at lunchtime?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... after 6.30pm?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... on Saturdays?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
... on Sundays?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q21 Would you like your GP surgery or health centre to open at additional times?

- Yes Please go to Q22
 No Please go to Section H

Q22 Which one of the following additional times would you most like the GP surgery or health centre to be open? Please pick one answer showing the time you would most like it to be open.

- Before 8am
 At lunchtime
 After 6.30pm
 On a Saturday
 On a Sunday

H. SEEING A DOCTOR AT THE GP SURGERY OR HEALTH CENTRE

Please answer these next questions about the last time you saw a doctor at your GP surgery or health centre.

Q23 Last time you saw a doctor at your GP surgery or health centre, how good was the doctor at each of the following? Please put a **X** in one box for each row.

	Very good	Good	Neither good nor poor	Poor	Very poor	Doesn't apply
Giving you enough time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Asking about your symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Listening to you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explaining tests and treatments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Involving you in decisions about your care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Treating you with care and concern	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Taking your problems seriously	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q24 Did you have confidence and trust in the doctor you saw?

- Yes, definitely
- Yes, to some extent
- No, not at all
- Don't know/can't say

I. SEEING A PRACTICE NURSE AT THE GP SURGERY OR HEALTH CENTRE

Q25 Have you seen a practice nurse at your GP surgery or health centre in the past 6 months?

- Yes..... Please go to Q26
- No..... Please go to Q27

Q26 How easy is it for you to get an appointment with a practice nurse at your GP surgery or health centre?

- Haven't tried
- Very easy
- Fairly easy
- Not very easy
- Not at all easy
- Don't know

Q27 Last time you saw a practice nurse at your GP surgery or health centre, how good was the practice nurse at each of the following? Please put a **X** in one box for each row.

	Very good	Good	Neither good nor poor	Poor	Very poor	Doesn't apply
Giving you enough time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Asking about your symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Listening to you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explaining tests and treatments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Involving you in decisions about your care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Treating you with care and concern	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Taking your problems seriously	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

J. YOUR OVERALL SATISFACTION

Q28 In general, how satisfied are you with the care you get at your GP surgery or health centre?

- Very satisfied
- Fairly satisfied
- Neither satisfied nor dissatisfied
- Fairly dissatisfied
- Very dissatisfied

Q29 Would you recommend your GP surgery or health centre to someone who has just moved to your local area?

- Yes, would definitely recommend
- Yes, might recommend
- Not sure
- No, would probably not recommend
- No, would definitely not recommend
- Don't know

K. NHS DENTISTRY

We are interested in whether you have been able to access NHS dental care if you have tried recently.

Q30 When did you last try to get an NHS dental appointment for yourself?

- In the last 3 months
 - Between 3 and 6 months ago
 - Between 6 months and a year ago
 - Between 1 and 2 years ago
 - More than 2 years ago
 - I have never tried to get an NHS dental appointment
- Please go to Q31
- Please go to Q34

Q31 Last time you tried to get an NHS dental appointment, what type of appointment were you trying to get?

- A routine check-up or non-urgent treatment
- Urgent treatment
- Other
- Can't remember

Q32 Last time you tried to get an NHS dental appointment, was it with a dental practice you had been to before for NHS dental care?

- Yes
- No
- Can't remember

Q33 Were you successful in getting an NHS dental appointment?

- Yes
 - No
 - Can't remember
- Please go to Section L

Q34 Why haven't you tried to get an NHS dental appointment in the last two years? If more than one of these applies to you, please X the main ONE only

- I have not needed to visit a dentist
- I no longer have any natural teeth
- I have not had time to visit a dentist
- I don't like going to the dentist
- I didn't think I could get an NHS dentist
- I am on a waiting list for an NHS dentist
- I stayed with my dentist when they changed from NHS to private
- I prefer to go to a private dentist
- NHS dental care is too expensive
- Another reason

L. SOME QUESTIONS ABOUT YOU

The following questions will help us to see how experiences vary between different groups of the population. We will keep your answers completely confidential.

Q35 Are you male or female?

- Male
 Female

Q36 How old are you?

- Under 18
 18 to 24
 25 to 34
 35 to 44
 45 to 54
 55 to 64
 55 to 64
 65 to 74
 75 to 84
 85 or over

Q37 Which of these best describes what you are doing at present?

If more than one of these applies to you, please **X** the main ONE only

- Full-time paid work (30 hours or more each week) Please go to Q38
 Part-time paid work (under 30 hours each week) Please go to Q38
 Full-time education at school, college or university
 Unemployed
 Permanently sick or disabled
 Fully retired from work
 Looking after the home
 Doing something else

Please go to Q40

Q38 In general, how long does your journey take from home to work (door to door)?

- Up to 30 minutes
 31 minutes to 1 hour
 More than 1 hour
 I live on site

Q39 If you need to see a doctor at your GP surgery or health centre during your typical working hours, can you take time away from your work to do this?

- Yes
 No

Q40 In general, would you say your health is...?

- Excellent
 Very good
 Good
 Fair
 Poor

Q41 Do you have any of the following long-standing conditions? Please include problems which are due to old age.

Please **X** all the boxes that apply to you

- Deafness or severe hearing impairment
 Blindness or severe visual impairment
 A condition that substantially limits one or more basic physical activities such as walking, climbing stairs, lifting or carrying
 A learning difficulty
 A long-standing psychological or emotional condition
 Other, including any long-standing illness
 No, I do not have a long-standing condition

Q42 Are you a deaf person who uses sign language?

- Yes
 No

Q43 Are you a parent or a legal guardian for any children aged under 16 currently living in your home?

- Yes
 No

Q44 Do you have carer responsibilities for anyone in your household with a long-standing health problem or disability?

- Yes
 No

The following questions will help us to see how experiences vary between different groups of the population. We will keep your answers completely confidential.

Q45 What is your ethnic group?
Choose one section from A to E below, then select the appropriate option to indicate your ethnic group

A. White

- British
- Irish
- Any other White background

→ Please write in

B. Mixed

- White and Black Caribbean
- White and Black African
- White and Asian
- Any other Mixed background

→ Please write in

C. Asian or Asian British

- Indian
- Pakistani
- Bangladeshi
- Any other Asian background

→ Please write in

D. Black or Black British

- Caribbean
- African
- Any other Black background

→ Please write in

E. Chinese or other ethnic group

- Chinese
- Any other ethnic group

→ Please write in

Q46 Which of the following best describes how you think of yourself?

- Heterosexual/straight
- Gay/Lesbian
- Bisexual
- Other
- I would prefer not to say

Q47 Which of the following best describes your religion?

- None
- Buddhist
- Christian (including Church of England, Catholic, Protestant, and other Christian denominations)
- Hindu
- Jewish
- Muslim
- Sikh
- Other
- I would prefer not to say

Thank you for your time.

Please return this questionnaire in the reply paid envelope provided or send it in an envelope marked only FREEPOST GP PATIENT SURVEY (no stamp is needed).

This questionnaire has been developed in conjunction with the Peninsula Medical School and the National Primary Care Research and Development Centre at the University of Manchester.

