

Sidcup Medical Centre 2016 Patient Participation Group Survey

Following on from the success of our previous 3 surveys where our patients' views and opinions were recorded and, where possible, improvements were made, we produce this 2016 survey. Please complete and hand back to a receptionist.

Closing date for receiving completed forms is 1 August 2016

Please tick the appropriate box. Comments/Suggestions are optional:

Q1 Our telephone triage system has now been up and running for the past couple of years and has proved to be very popular - we would be interested in your feedback as to your experience and thoughts on the telephone triage system.

Have you used the Telephone Triage System?

Yes No

If Yes, would you describe your experience as;

Very good Good Satisfactory Poor

Comment/Suggestions (optional)

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Q2 How easy do you find it to book an appointment with the Practice Nurse - as we have now provided additional clinics as a direct result of your comments in the previous survey. (this is not the Nurse Practitioner)

At Church Avenue

Very good Good Satisfactory Poor

At Burnt Oak Lane

Very good Good Satisfactory Poor

Comments/Suggestions

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Q3 We have a surgery website which can be found at www.sidcupmedicalcentre.co.uk. This is an ideal place to find out more information about the surgery and general health information. Have you got any suggestions what information you would like us to put on the website?

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Q4 How helpful do you find the receptionists?

Very helpful Fairly helpful Not very helpful Not at all helpful

Comments/Suggestions

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Q6 Overall how would you describe your experience of the surgery?

Very satisfied Fairly satisfied Not at all satisfied

Comments/Suggestions

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Q7 The surgery currently runs a successful Patient Participation Group (PPG). We understand that not everybody can attend the meetings so we also have a virtual group (VPPG) where views and opinions are requested by email around every 6-8 weeks. Would you consider being a part of either of our patient groups?

Yes No

If Yes are you interested in becoming part of our PPG Group or Virtual Group (please circle)

Name

Contact Number

E-mail

Please help us by completing the below section of this survey so that we know if we have received responses from as wide a spectrum of our registered patients as possible.

Are you? Male Female
(Please circle)

Age Group	24 and Under		25 - 40		41-59	
	60-74		75 and Over			

Please indicate which of the following ethnic groups you would most closely identify with?

White	British Group		Irish			
Mixed	White & Black Caribbean		White & Black African		White & Asian	
Asian or Asian British	Indian		Pakistani		Bangladeshi	
Black or Black British	Caribbean		African			
Chinese or Other Ethnic Group	Chinese		Any Other			

Please confirm which surgery you attend: Church Avenue or Burnt Oak Lane (please circle)

Thank You for taking the time to complete our survey. Results will be available on notice boards at the surgery and on the surgery website from the beginning of September.