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www.gpprimarychoice.co.uk

How Are We Doing?

Please take a few minutes to fill out this survey on the timeliness and quality of the service you received today. Your surgery has recently added additional appointments for blood tests during the week and we would appreciate your feedback. Your answers will be kept confidential. Thank you for your participation.

Which surgery have you attended?

General Patient Satisfaction

Before the current system, how difficult has it been to get an appointment at your GP Surgery for a blood test?

- Very easy Easy Adequate Difficult Very difficult

How would you rate the increased appointments now available at both your GP Surgery and at alternative nearby surgeries?

- Excellent Good Adequate Poor Very poor

If you had not got an appointment at your local GP Surgery, historically what would you have done?

- Gone to Clacton Hospital Gone to Harwich Hospital Gone to Essex County Hospital
 Gone to Colchester Hospital Gone to the walk in centre

Your Appointment

How long ago did you make this appointment?

- 1 Day 2-5 days over 5 days

Was an appointment offered to you within 5 days of you requesting it?

- Yes and I booked it Yes but I requested a different appointment for my own convenience No

How convenient were the time slots offered to you?

- Very convenient Convenient Adequate Not convenient
 Very inconvenient

Would you have preferred an alternative time for your appointment? Yes No

Please state a time if you would have preferred an alternative

Did you attend your appointment at your own surgery?

Yes No

If 'No' which surgery did you attend

Was your blood test for a child under the age of 12?

Yes No

Day of Your Appointment

How would you rate the courtesy of the staff at the reception desk?

Very courteous Courteous Adequate Rude Very rude

How would you rate your experience having your blood test today?

Excellent Good Adequate Poor Very poor

Additional Feedback

Personal Information

Providing the following information is optional.

First Name	Last Name	Gender	Age
Address	City	County	Post Code
Email	Phone		

Would you like someone to contact you regarding your responses on this survey?

Yes | No

Thank you for taking the time to fill out our survey.