

Overall Rating (1-5 — 5 being excellent)

Quality of care:

Value for money:

Referrals (if applicable)

Have you been referred Yes/No

Were you satisfied with Consultant Yes/No

Name of Consultant

Rating (1-5—5 being excellent) 1 2 3 4 5

Comments & Suggestions

Thank you for taking the time and the effort to complete this valued questionnaire to enable us to improve our services to you.

Please complete the address box below should you wish to receive a reply to comments raised.

04/01/19

Your opinions count

As our Statement of Purpose states we are committed to providing our patients with expert personalised health care of the highest quality of care at all times in a relaxed, comfortable and unhurried environment.

Our objective is to provide all patients with an outcome consistent with current best practice guidelines and also with their expectations.

To assist in achieving this your completion of this PSQ will help us to continue to achieve best possible practice to make you, the patient, feel you are receiving the best possible outcome of your visit to our rooms here within The London Clinic.

If you would like to complete this PSQ at home please ask for a stamped addressed envelope from the office.

GDPR & Privacy Statement.

Your privacy is our priority. We understand the information you have given in this document is provided in the Strictest Confidence and assure you it is protected under the Data Protection Act.

In keeping with GDPR legislation, we are committed to respecting both your trust and privacy. Our **online Privacy policy** at www.drjackedmonds.co.uk explains in detail. We will store your details securely and treat them responsibly. We will also never pass your data to third parties without your knowledge.

Dr Jack A T Edmonds MB BS FRCGP

Your Health in our Hands

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**Dr Jack A T Edmonds
MB BS FRCGP**

Private General Practitioner

***Patient
Satisfaction
Questionnaire
2019***

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LONDON
W1G 7JW**

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Patient Satisfaction Questionnaire

Please base all your answers on this visit only. Use a score between 1 and 5. 1 being poor and 5 excellent.

Initial impression

Information prior to arrival _____
Convenience of appointment time _____
Convenience of location _____
Overall telephone communication _____

On Arrival at our Practice

Directions to our rooms from main reception _____
Greeting on arrival _____
Promptness of attention _____
Waiting room comfort (3rd Floor) _____
Overall impression _____

3rd Floor Waiting Room Amenities

Quality of refreshments _____
iPad _____
Reading material - health _____
Reading material— commercial _____
Toilet facilities _____
Overall rating of waiting area _____

Quality of GP Care

Attentive _____
Listening _____
Explanation of procedures _____
Level of privacy _____
Referral arrangements (if applicable) _____
Explanation of dispensed medication _____
Diagnosis information, was it clear? _____
Follow-up—did you understand the arrangements made? _____
Overall impression of clinical care _____

Clinical/Treatment Room Care

Courtesy of staff _____
Explanation of procedures _____
Time and attention given _____
Cleanliness _____

Speed of Attention

(Please tick as appropriate)

Your appointment was kept to time _____
Appointment delay was unacceptable _____

Office administration

Arrangement of referrals _____
Explanation of payment procedure _____
Ease of financial arrangements _____
Telephone communication _____

Web Site

Have you ever visited our web site? _____
How would you rate the web site? _____
How user friendly is it? _____

ABOUT YOU (please circle)

Are you? MALE / FEMALE/OTHER

Private patient / Corporate patient

Which age group are you in?

Under 18

19-34

35-54

55-74

75+

If you have visited before are we:

Getting better

Getting worse

Staying the same

Would you recommend us?

Yes / No / Maybe