Better Together

Scotland's Patient Experience Programme

GP Patient Experience Survey

Please read the enclosed letter for more information about this survey.

If you would prefer, you can complete this survey online at **www.gpsurvey.org.uk**

To do this, you will need to enter this ID:

Instructions

Please answer all questions, unless the instructions ask you to skip a question.

For each question, please place a tick in the box next to the answer that most closely matches your own experience at your GP surgery.

For example, if your answer is yes, write in a tick as below:

☑ Yes

☐ No

Don't worry if you make a mistake. Simply cross it out and tick the correct answer.

Most of the questions are about your whole experience over the last 12 months, but some will ask you to think specifically about the most recent time you had contact with your GP surgery.

Helpline
0800 783 2896

healthier scotland
SCOTTISH GOVERNMENT

NHS SCOTLAND

Q1 This survey is about contact with your GP surgery in the last 12 months. **Have you had contact with the GP surgery named on the enclosed letter in the last 12 months?**

1 ☐ Yes ➔ Go to Question **2**

2 ☐ No ➔ Please **do not** fill in this form

If you have any questions about filling in the survey please phone the helpline on **0800 783 2896**

Section 1: Access

Q2 In the last 12 months, when you have phoned your GP surgery, could you get through on the phone?

*Please tick **ONE** box only*

1 ☐ Always ➔ Go to Question **3**

2 ☐ Most of the time ➔ Go to Question **3**

3 ☐ Sometimes ➔ Go to Question **3**

4 ☐ Rarely ➔ Go to Question **3**

5 ☐ Never ➔ Go to Question **4**

6 ☐ I haven't tried to phone ➔ Go to Question **4**

7 ☐ I can't remember or I don't know ➔ Go to Question **3**

Q3 When you have phoned your GP surgery, was the person who answered polite and helpful?

*Please tick **ONE** box only*

1 ☐ Always

2 ☐ Most of the time

3 ☐ Sometimes

4 ☐ Rarely

5 ☐ Never

6 ☐ I can't remember or I don't know

Q4 **In the last 12 months**, have you contacted your GP surgery because you needed advice **fairly quickly** because you felt unwell or were worried about something? (*Please include contacting your GP surgery for **someone else**, for example a child or elderly person who is registered at the **same surgery**).*

*Please tick **ONE** box only*

1 ☐ Yes ➔ Go to Question **5**

2 ☐ No ➔ Go to Question **7**

Q5 **The last time this happened**, did you see or speak to a doctor or nurse **within 2 working days?**

*Please tick **ONE** box only*

1 ☐ Yes, I saw a doctor or nurse **face-to-face** ➔ Go to Question **7**

2 ☐ Yes, I spoke to a doctor or nurse on the **telephone** ➔ Go to Question **7**

3 ☐ No ➔ Go to Question **6**

Q6 Why did you not see or speak to a doctor or nurse **within 2 working days**?

*Please tick **ONE** box only*

1 ☐ I **was** offered the chance but the time offered did not suit me

2 ☐ I **was** offered the chance but the person I wanted was not available

3 ☐ I **was not** offered the chance

4 ☐ I can't remember or I don't know

5 ☐ Other reason

Q7 **In the last 12 months**, have you tried to book a doctor's appointment **in advance**? (For example, have you tried to book an appointment for when you get back from a holiday or to fit in with other commitments)

*Please tick **ONE** box only*

1 ☐ Yes ➔ Go to Question **8**

2 ☐ No ➔ Go to Question **10**

Q8 The last time you tried to book **in advance**, were you able to get an appointment?

*Please tick **ONE** box only*

1 ☐ Yes ➔ Go to Question **10**

2 ☐ No ➔ Go to Question **9**

3 ☐ Can't remember ➔ Go to Question **10**

Q9 Why did you not get an appointment in advance*?*

*Please tick **ONE** box only*

1 ☐ There were no advance appointments available for booking

2 ☐ I was offered an appointment, but not at a time that suited me

3 ☐ I was offered an appointment, but not with the doctor I wished to see

4 ☐ I can't remember or I don't know

5 ☐ Other reason

Q10 When you arrange to see a doctor at your GP surgery can you *usually* see the doctor you prefer?

*Please tick **ONE** box only*

1 ☐ Yes

2 ☐ No

3 ☐ I don't have a doctor I prefer to see

4 ☐ There is usually only one doctor in my GP surgery

Q11 How do you feel about how long you *usually* have to wait to be seen after you arrive at your GP surgery?

*Please tick **ONE** box only*

1 ☐ It is reasonable

2 ☐ It is too long

3 ☐ I can't remember or I don't know

Q12 Overall how would you rate the arrangements for getting to see a doctor and/or nurse in your GP surgery?

*Please tick **ONE** box in each list*

Getting to see a doctor	Getting to see a nurse
1 ☐ Excellent	1 ☐ Excellent
2 ☐ Good	2 ☐ Good
3 ☐ Fair	3 ☐ Fair
4 ☐ Poor	4 ☐ Poor
5 ☐ Very poor	5 ☐ Very poor
6 ☐ I did not try to see a doctor	6 ☐ I did not try to see a nurse

Section 2: At the GP Surgery – based on your experience in the last 12 months

Q13 When you attended your GP surgery, how often did you experience each of the following?

*Please tick **ONE** box on each line.*

	Always	Most of the time	Some-times	Rarely	Never	Not relevant
The receptionist was polite and helpful	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
I was worried because other people could overhear me talking to the receptionist	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
I felt bothered or threatened by other patients	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6

Q14 How much do you **agree or disagree** with each of the following about the **doctor or doctors** you have seen at your GP surgery?

*Please tick **ONE** box on each line.*

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
The doctor listens to me	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
I feel that the doctor has all the information they need to treat me	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
The doctor shows consideration for my personal circumstances in treating me	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
The doctor talks in a way that helps me understand my condition and treatment	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
I am confident in the doctor's ability to treat me	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
I have enough time with the doctor	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

Q15 Have you seen a **nurse** at your GP surgery in the last 12 months?

1 ☐ No ➔ Please go to Question **16**

2 ☐ Yes ➔ How much do you **agree or disagree** with each of the following about the **nurse or nurses** you have seen at your GP surgery?

*Please tick **ONE** box on each line.*

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
The nurse listens to me	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
I feel that the nurse has all the information they need to treat me	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
The nurse shows consideration for my personal circumstances in treating me	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
The nurse talks in a way that helps me understand my condition and treatment	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
I am confident in the nurse's ability to treat me	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
I have enough time with the nurse	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

Q16 Have you been prescribed **medicines** at your GP surgery in the last 12 months?

1 ☐ No ➔ Please go to Question **17**

2 ☐ Yes ➔ How often have you experienced the following?

*Please tick **ONE** box on each line.*

	Always	Most of the time	Some-times	Rarely	Never
I know enough about what my medicines are for	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
I know enough about how and when to take my medicines	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
I know enough about possible side effects of my medicines	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
I would know what to do if I had any problems with my medicines	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

Q17 How do you feel about being involved in decisions about your care and treatment?

*Please tick **ONE** box only*

1 ☐ I am **involved more** than I want to be	4 ☐ I do **not wish to be involved**
2 ☐ I am **involved as much as** I want to be	5 ☐ Not relevant
3 ☐ I am **not involved enough**	

Section 3: Overall Experience – based on your experience in the last 12 months

Q18 How much do you **agree or disagree** with each of the following about how you generally feel about your GP surgery?

*Please tick **ONE** box on each line.*

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
I am treated with dignity and respect	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
My personal values and beliefs are respected	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

Q19 **Overall, how would you rate the care provided by your GP surgery?**

*Please tick **ONE** box only*

1 ☐ **Excellent** 2 ☐ **Good** 3 ☐ **Fair** 4 ☐ **Poor** 5 ☐ **Very poor**

Q20 If there is anything else you would like to tell us about your experiences at your GP surgery, please write your comments in the box below.

Section 4: About you

This information will help us to find out if different groups of people in Scotland have different experiences of treatment at their GP surgeries. Nobody at your GP surgery will be able to see your answers. If you would prefer not to answer a particular question then you should skip it and go to the next question.

Q21 Are you male or female?
*Please tick **ONE** box only*

1 ☐ Male

2 ☐ Female

Q22 What was your age on your last birthday?
Please answer in full years only

Q23 Which of the following options best describes how you think of yourself?
*Please tick **ONE** box only*

1 ☐ Heterosexual / straight
2 ☐ Gay / Lesbian
3 ☐ Bisexual
4 ☐ Other

Q24 What **religion**, religious denomination or body do you belong to?
*Please tick **ONE** box only*

1 ☐ None
2 ☐ Church of Scotland
3 ☐ Roman Catholic
4 ☐ Other Christian
5 ☐ Muslim
6 ☐ Buddhist
7 ☐ Sikh
8 ☐ Jewish
9 ☐ Hindu
10 ☐ Pagan
11 ☐ Another religion, please write in:

Q25 What is your **ethnic group?**
*Choose **ONE** section from A to E, then tick **ONE** box which best describes your ethnic group or background*

01 **A White**
1 ☐ Scottish
2 ☐ English
3 ☐ Welsh
4 ☐ Northern Irish
5 ☐ British
6 ☐ Irish
7 ☐ Gypsy / Traveller
8 ☐ Polish
9 ☐ Other, please write in:

02 **B Mixed or multiple ethnic groups**
10 ☐ Please write in:

03 **C Asian, Asian Scottish or Asian British**
11 ☐ Pakistani, Pakistani Scottish or Pakistani British
12 ☐ Indian, Indian Scottish or Indian British
13 ☐ Bangladeshi, Bangladeshi Scottish or Bangladeshi British
14 ☐ Chinese, Chinese Scottish or Chinese British
15 ☐ Other, please write in:

04 **D African, Caribbean or Black**
16 ☐ African, African Scottish or African British
17 ☐ Caribbean, Caribbean Scottish or Caribbean British
18 ☐ Black, Black Scottish or Black British
19 ☐ Other, please write in:

05 **E Other ethnic group**
20 ☐ Arab
21 ☐ Other, please write in:

Q26 Do you have any of the following?
*Please tick **ALL** that apply*

1 ☐ Deafness or severe hearing impairment

2 ☐ Blindness or severe vision impairment

3 ☐ A physical disability

4 ☐ A learning disability (such as Down's Syndrome)

5 ☐ A learning difficulty (such as dyslexia)

6 ☐ A mental health condition (such as depression or schizophrenia)

7 ☐ A long term condition (such as diabetes, cancer, HIV, heart disease or epilepsy)

8 ☐ Other, please write in:

Q27 Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?
(Include problems related to old age).
*Please tick **ONE** box only*

1 ☐ Yes, limited a lot

2 ☐ Yes, limited a little

3 ☐ No

Q28 Do you need an **interpreter** or other **help to communicate**?
*Please tick **ONE** box only*

1 ☐ No

2 ☐ Yes – what type of help do you need?

Thank you for taking the time to complete this form. Please return it in the envelope provided. If you have no envelope please post it (no stamp needed) to:

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