Dear Patients,

The doctors and staff at **Blackburn South Medical Centre** are committed to providing you with a high standard of patient care. Your input helps us to improve our service.

**How long have you been attending the practice? (Please Circle)**

0-2 years 3-5 years 6-10 years 11 years and over

**Do you find staff helpful, polite and accommodating with your needs? (Please Circle)**

Very Helpful Somewhat helpful Not very helpful Disappointing

**Do you have any comments about our practice, staff and/or services?** Please consider your experiences with access and availability of services, provision of information, privacy and confidentiality, continuity of care, and communication and interpersonal skills of the clinical and administrative team.

 **Is there any aspect of our care provision that could be improved?**

**If you wish to be contacted for a follow up, please write your name and email address or phone number below:**

Thank you for taking the time to provide us with your feedback. Your responses are treated in confidence.

Name (optional) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_