108 HARLEY STREET QUESTIONNAIRE



aims to provide a high standard of service and patient care.

In order to assist with our on-going programme of quality control, we welcome feedback from out patients.

| | Excellent | Good | Unsatisfactory | Very Poor |
|--|----------------|------------|----------------|--------------|
| CONSULTANT | | | | |
| Availability | \circ | \circ | 0 | \circ |
| Manner / Level of information provided | \bigcirc | \circ | \circ | \bigcirc |
| Level of care | \bigcirc | \bigcirc | \bigcirc | \bigcirc |
| <u>NURSING</u> | | | | |
| Availability | \circ | \bigcirc | \circ | \bigcirc |
| Manner / Level of information on results and other queries | \circ | \circ | 0 | 0 |
| Level of care | \bigcirc | \bigcirc | \circ | \bigcirc |
| ADMINISTRATION - RECEPTIONIST | | | | |
| Telephone enquiries and appointment Efficiency/Manner | \circ | 0 | 0 | 0 |
| Follow-up Appointment Efficiency/Manner | \circ | \circ | 0 | \circ |
| Surgery Booking - Efficiency/Manner | \bigcirc | \bigcirc | \circ | \bigcirc |
| Payment Desk - Efficiency/Manner | \bigcirc | \circ | \circ | \bigcirc |
| <u>FACILITIES</u> | | | | |
| Waiting room | \circ | \bigcirc | \circ | \bigcirc |
| Changing facilities | \bigcirc | \circ | \circ | \circ |
| Overall appearance of building | \circ | \bigcirc | \bigcirc | \bigcirc |
| Treatment room facilities | \circ | \circ | \bigcirc | \bigcirc |
| PLEASE ADD ANY FURTHER COMME | NTS / CONCERNS | <u>:</u> | | |
| | | | | |
| | | | | |
| NAME: | | | | |
| DATE: | | | | |