Please answer the questions below by putting an \( \times \) in one box for each question unless more than one answer is allowed (these questions are clearly marked). We will keep your answers completely confidential.

If you would prefer to fill in the survey online, please go to www.gp-patient.co.uk.

<table>
<thead>
<tr>
<th>Survey number:</th>
<th>1234567890</th>
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<tr>
<td>Online password:</td>
<td>ABCDE</td>
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## YOUR LOCAL GP SERVICES

Q1. Generally, how easy is it to get through to someone at your GP practice on the phone?
- [ ] Very easy
- [ ] Fairly easy
- [ ] Not very easy
- [ ] Not at all easy
- [ ] Haven’t tried

Q2. How helpful do you find the receptionists at your GP practice?
- [ ] Very helpful
- [ ] Fairly helpful
- [ ] Not very helpful
- [ ] Not at all helpful
- [ ] Don’t know

Q3. In the past 12 months, have you booked general practice appointments in any of the following ways?
Please put an \( \times \) in all the boxes that apply to you.
- [ ] In person
- [ ] By phone
- [ ] By automated telephone booking
- [ ] Online including on an app
- [ ] Via another route, such as NHS 111
- [ ] Doesn’t apply / none of these

Q4. As far as you know, which of the following online services does your GP practice offer?
By ‘online’ we mean on a website or smartphone app.
Please put an \( \times \) in all the boxes that apply to you.
- [ ] Booking appointments online
- [ ] Ordering repeat prescriptions online
- [ ] Accessing my medical records online
- [ ] None of these
- [ ] Don’t know

Q5. Which of the following general practice online services have you used in the past 12 months?
By ‘online’ we mean on a website or smartphone app.
Please put an \( \times \) in all the boxes that apply to you.
- [ ] Booking appointments online
- [ ] Ordering repeat prescriptions online
- [ ] Accessing my medical records online
- [ ] None of these

Q6. How easy is it to use your GP practice’s website to look for information or access services?
- [ ] Very easy
- [ ] Fairly easy
- [ ] Not very easy
- [ ] Not at all easy
- [ ] Haven’t tried

Q7. As far as you are aware, what general practice appointment times are available to you?
Please put an \( \times \) in all the boxes that apply to you.
- [ ] Before 8am on at least one weekday
- [ ] Weekdays between 8am and 6.30pm
- [ ] After 6.30pm on a weekday
- [ ] On a Saturday
- [ ] On a Sunday
- [ ] Don’t know
How satisfied are you with the general practice appointment times that are available to you?

- Very satisfied
- Fairly satisfied
- Neither satisfied nor dissatisfied
- Fairly dissatisfied
- Very dissatisfied
- I’m not sure when I can get an appointment

Is there a particular GP you usually prefer to see or speak to?

- Yes, for all appointments
- Yes, for some appointments but not others
- No ..................................................Go to Q11

There is usually only one GP in my GP practice ..................................Go to Q11

How often do you see or speak to your preferred GP when you would like to?

- Always or almost always
- A lot of the time
- Some of the time
- Never or almost never
- I have not tried

MAKING AN APPOINTMENT

When did you last try to make a general practice appointment, either for yourself or for someone else?

Please include general practice appointments with different healthcare professionals. This could be with a GP, nurse or other healthcare professional.

- In the past 3 months
- Between 3 and 6 months ago
- Between 6 and 12 months ago
- More than 12 months ago
- Don’t know
- I haven’t tried to make an appointment since being registered with my current GP practice ..................................Go to Q23

If you tried to make more than one appointment, please think about just one of these when answering the next questions.

Who was this appointment for?

- Me
- A child under 16
- An adult aged 16 or over who I am a carer for
- Another adult aged 16 or over (including family members)

How concerned were you at the time about your health, or the health of the person you were making this appointment for?

- Very concerned
- Fairly concerned
- Not very concerned
- Not at all concerned
- Can’t remember

Before you tried to get this appointment, did you do any of the following?

Please put an X in all the boxes that apply to you.

- I looked for information online
- Spoke to a pharmacist
- Tried to treat myself / the person I was making this appointment for (for example with medication)
- Called an NHS helpline, such as NHS 111
- Went to or contacted another NHS service
- Asked for advice from a friend or family member
- Tried to get information or advice elsewhere (from a non-NHS service)
- I did not try to get information or advice

When would you have liked this appointment to be?

Please choose one option only.

- On the same day
- On the next day
- A few days later
- A week or more later
- I didn’t have a specific day in mind
- Can’t remember

On this occasion, were you offered a choice of appointment?

This could be a choice of place, time or healthcare professional.

Please put an X in all the boxes that apply to you.

- Yes, a choice of place
- Yes, a choice of time or day
- Yes, a choice of healthcare professional
- No, I was not offered a choice of appointment
- Can’t remember
- Doesn’t apply
Q17 Were you satisfied with the type of appointment (or appointments) you were offered?
☐ Yes, and I accepted an appointment
☐ No, but I still took an appointment
☐ No, and I did not take an appointment

If you did not take any appointments you were offered, why was that?
Please put an X in all the boxes that apply to you.

☐ There weren’t any appointments available for the time or day I wanted
☐ The appointment was at too short notice
☐ The appointment wasn’t soon enough
☐ I couldn’t book ahead at my GP practice
☐ There weren’t any appointments at the place I wanted
☐ The appointment was too far away / too difficult to get to
☐ I couldn’t see my preferred GP
☐ There weren’t any appointments with the healthcare professional I wanted
☐ The type of appointment I wanted was not available
☐ Another reason

Q18 What did you do when you did not take the appointment you were offered?
Please put an X in all the boxes that apply to you.

☐ Got an appointment for a different day
☐ Called an NHS helpline, such as NHS 111
☐ Went to A&E
☐ Spoke to a pharmacist
☐ Went to or contacted another NHS service
☐ Decided to contact my practice another time
☐ Looked for information online
☐ Spoke to a friend or family member
☐ Didn’t see or speak to anyone

Q19 What type of appointment did you get?
I got an appointment...
☐ …to speak to someone on the phone
☐ …to see someone at my GP practice
☐ …to see someone at another general practice location
☐ …to speak to someone online, for example on a video call
☐ …for a home visit

Q20 How long after initially trying to book the appointment did the appointment take place?
☐ On the same day
☐ On the next day
☐ A few days later
☐ A week or more later
☐ Can’t remember

Q21 Overall, how would you describe your experience of making an appointment?
☐ Very good
☐ Fairly good
☐ Neither good nor poor
☐ Fairly poor
☐ Very poor

YOUR LAST APPOINTMENT

The next few questions are about the last time you personally had a general practice appointment.

Q23 When was your last general practice appointment?
Please include appointments with different healthcare professionals, at different locations, as well as telephone and online appointments.

☐ In the past 3 months
☐ Between 3 and 6 months ago
☐ Between 6 and 12 months ago
☐ More than 12 months ago
☐ I haven’t had an appointment since being registered with my current GP practice.
Q24  Who was your last general practice appointment with?

Please choose one option only.

☐ A GP
☐ A nurse
☐ A general practice pharmacist
☐ A mental health professional
☐ Another healthcare professional
☐ Don’t know / not sure who I saw

Q25  How long after your appointment time did you wait to see or speak to the healthcare professional?

☐ 5 minutes or less
☐ Between 5 and 15 minutes
☐ 15 to 30 minutes
☐ More than 30 minutes
☐ I didn’t have an appointment at a set time
☐ Can’t remember

Q26  Last time you had a general practice appointment, how good was the healthcare professional at each of the following?

Giving you enough time

☐ Very good
☐ Good
☐ Neither good nor poor
☐ Poor
☐ Very poor
☐ Doesn’t apply

Listening to you

☐ Very good
☐ Good
☐ Neither good nor poor
☐ Poor
☐ Very poor
☐ Doesn’t apply

Treating you with care and concern

☐ Very good
☐ Good
☐ Neither good nor poor
☐ Poor
☐ Very poor
☐ Doesn’t apply

Q27  During your last general practice appointment, did you feel that the healthcare professional recognised and/or understood any mental health needs that you might have had?

☐ Yes, definitely
☐ Yes, to some extent
☐ No, not at all
☐ I did not have any mental health needs
☐ Did not apply to my last appointment

Q28  During your last general practice appointment, were you involved as much as you wanted to be in decisions about your care and treatment?

☐ Yes, definitely
☐ Yes, to some extent
☐ No, not at all
☐ Don’t know / doesn’t apply

Q29  During your last general practice appointment, did you have confidence and trust in the healthcare professional you saw or spoke to?

☐ Yes, definitely
☐ Yes, to some extent
☐ No, not at all
☐ Don’t know / can’t say

Q30  Thinking about the reason for your last general practice appointment, were your needs met?

☐ Yes, definitely
☐ Yes, to some extent
☐ No, not at all
☐ Don’t know / can’t say

OVERALL EXPERIENCE

Q31  Overall, how would you describe your experience of your GP practice?

☐ Very good
☐ Fairly good
☐ Neither good nor poor
☐ Fairly poor
☐ Very poor

YOUR HEALTH

Q32  Have you experienced any of the following over the last 12 months?

Please put an X in all the boxes that apply to you.

☐ Problems with your physical mobility, for example, difficulty getting about your home
☐ Two or more falls that have needed medical attention
☐ Feeling isolated from others
☐ None of these
Q33
Do you take 5 or more medications on a regular basis?
Please think about prescribed medications as well as those bought over the counter.
☐ Yes
☐ No

Q34
Do you have any long-term physical or mental health conditions, disabilities or illnesses?
By long-term, we mean anything lasting or expected to last for 12 months or more. Please include issues related to old age.
☐ Yes
☐ No
☐ Don’t know / can’t say
☐ I would prefer not to say ...........Go to Q44

Q35
Which, if any, of the following long-term conditions do you have?
Please put an X in all the boxes that apply to you.
☐ Alzheimer’s disease or other cause of dementia
☐ Arthritis or ongoing problem with back or joints
☐ Blindness or partial sight
☐ A breathing condition such as asthma or COPD
☐ Cancer (diagnosis or treatment in the last 5 years)
☐ Deafness or hearing loss
☐ A developmental disability, such as autism or ADHD
☐ Diabetes
☐ A heart condition, such as angina or atrial fibrillation
☐ High blood pressure
☐ Kidney or liver disease
☐ A learning disability
☐ A mental health condition
☐ A neurological condition, such as epilepsy
☐ A stroke (which affects your day-to-day life)
☐ Another long-term condition or disability
☐ I do not have any long-term conditions...............................Go to Q44

Q36
Do any of these conditions reduce your ability to carry out your day-to-day activities?
☐ Yes, a lot
☐ Yes, a little
☐ No, not at all

Q37
How confident are you that you can manage any issues arising from your condition (or conditions)?
☐ Very confident
☐ Fairly confident
☐ Not very confident
☐ Not at all confident
☐ Don’t know

Q38
In the last 12 months, have you had enough support from local services or organisations to help you to manage your condition (or conditions)?
Please think about all services and organisations, not just health services.
☐ Yes, definitely
☐ Yes, to some extent
☐ No
☐ I haven’t needed support
☐ Don’t know / can’t say

Q39
In the last 12 months have you had any unexpected stays in hospital because of your condition (or conditions)?
☐ Yes
☐ No
The next few questions are about support you have had to plan and manage care relating to your long-term condition (or conditions).

Q40 Have you had a conversation with a healthcare professional from your GP practice to discuss what is important to you when managing your condition (or conditions)?

☐ Yes
☐ No...............................................Go to Q44
☐ Don’t know........................................Go to Q44

A care plan is an agreement between you and healthcare professionals to help you manage your health day-to-day. It can include information about your medicine, an eating or exercise plan, or goals you want to achieve such as returning to work.

Q41 Have you agreed a plan with a healthcare professional from your GP practice to manage your condition (or conditions)?

☐ Yes
☐ No...............................................Go to Q44
☐ Don’t know........................................Go to Q44

Q42 How helpful have you found this plan in managing your condition (or conditions)?

☐ Very helpful
☐ Fairly helpful
☐ Not very helpful
☐ Not at all helpful
☐ Don’t know

Q43 Have you been given (or offered) a written or printed copy of this plan?

☐ Yes
☐ No
☐ Don’t know

Q44 In the past 12 months, have you contacted an NHS service when you wanted to see a GP but your GP practice was closed?

☐ Yes, for myself
☐ Yes, for someone else
☐ No ..............................................Go to Q44

Please think about the last time you contacted an NHS service (for yourself or for someone else) when you wanted to see a GP but your GP practice was closed.

Q45 Considering all of the services you contacted, which of the following happened on that occasion?

Please put an X in all the boxes that apply to you.

☐ I contacted an NHS service by telephone
☐ A healthcare professional called me back
☐ A healthcare professional visited me at home
☐ I went to A&E
☐ I saw a pharmacist
☐ I went to another general practice service
☐ I went to another NHS service
☐ Can’t remember

Q46 How do you feel about how quickly you received care or advice on that occasion?

☐ It was about right
☐ It took too long
☐ Don’t know / doesn’t apply

Q47 Considering all of the people that you saw or spoke to on that occasion, did you have confidence and trust in them?

☐ Yes, definitely
☐ Yes, to some extent
☐ No, not at all
☐ Don’t know / can’t say

Q48 Overall, how would you describe your last experience of NHS services when you wanted to see a GP but your GP practice was closed?

☐ Very good
☐ Fairly good
☐ Neither good nor poor
☐ Fairly poor
☐ Very poor
☐ Don’t know / can’t say
NHS DENTISTRY

Q49 When did you last try to get an NHS dental appointment for yourself?
☐ In the last 3 months
☐ Between 3 and 6 months ago
☐ Between 6 months and a year ago
☐ Between 1 and 2 years ago
☐ More than 2 years ago ..............Go to Q53
☐ I have never tried to get an NHS dental appointment .......Go to Q53

Q50 Last time you tried to get an NHS dental appointment, was it with a dental practice you had been to before for NHS dental care?
☐ Yes
☐ No
☐ Can’t remember

Q51 Were you successful in getting an NHS dental appointment?
☐ Yes
☐ No
☐ Can’t remember

Q52 Overall, how would you describe your experience of NHS dental services?
☐ Very good
☐ Fairly good
☐ Neither good nor poor
☐ Fairly poor
☐ Very poor

Q53 Why haven’t you tried to get an NHS dental appointment in the last two years? If more than one of these applies to you, please put an X in the box next to the main one only.
☐ I haven’t needed to visit a dentist
☐ I no longer have any natural teeth
☐ I haven’t had time to visit a dentist
☐ I don’t like going to the dentist
☐ I didn’t think I could get an NHS dentist
☐ I’m on a waiting list for an NHS dentist
☐ I stayed with my dentist when they changed from NHS to private
☐ I prefer to go to a private dentist
☐ NHS dental care is too expensive
☐ Another reason

SOME QUESTIONS ABOUT YOU

The following questions will help us to see how experiences vary between different groups of the population. We will keep your answers completely confidential.

Q54 Are you male or female?
☐ Male
☐ Female

Q55 How old are you?
☐ Under 16
☐ 16 to 17
☐ 18 to 24
☐ 25 to 34
☐ 35 to 44
☐ 45 to 54
☐ 55 to 64
☐ 65 to 74
☐ 75 to 84
☐ 85 or over

Q56 What is your ethnic group?
A. White
☐ English / Welsh / Scottish / Northern Irish / British
☐ Irish
☐ Gypsy or Irish Traveller
☐ Any other White background

B. Mixed / multiple ethnic groups
☐ White and Black Caribbean
☐ White and Black African
☐ White and Asian
☐ Any other Mixed / multiple ethnic background

C. Asian / Asian British
☐ Indian
☐ Pakistani
☐ Bangladeshi
☐ Chinese
☐ Any other Asian background

D. Black / African / Caribbean / Black British
☐ African
☐ Caribbean
☐ Any other Black / African / Caribbean background

E. Other ethnic group
☐ Arab
☐ Any other ethnic group
Q57 Which of these best describes what you are doing at present?

If more than one of these applies to you, please put an X in the box next to the main one only.

☐ Full-time paid work (30 hours or more each week)
☐ Part-time paid work (under 30 hours each week)
☐ Full-time education at school, college or university
☐ Unemployed
☐ Permanently sick or disabled
☐ Fully retired from work
☐ Looking after the family or home
☐ Doing something else

Q58 Are you a parent or a legal guardian for any children aged under 16 living in your home?

☐ Yes
☐ No

Q59 Do you look after, or give any help or support to family members, friends, neighbours or others because of either:

- long-term physical or mental ill health / disability, or
- problems related to old age?

Don't count anything you do as part of your paid employment.

☐ No
☐ Yes, 1 to 9 hours a week
☐ Yes, 10 to 19 hours a week
☐ Yes, 20 to 34 hours a week
☐ Yes, 35 to 49 hours a week
☐ Yes, 50 or more hours a week

Q60 Are you a deaf person who uses sign language?

☐ Yes
☐ No

Q61 Which of the following best describes your smoking habits?

☐ Never smoked
☐ Former smoker
☐ Occasional smoker
☐ Regular smoker

Q62 Which of the following best describes how you think of yourself?

☐ Heterosexual or straight
☐ Gay or lesbian
☐ Bisexual
☐ Other
☐ I would prefer not to say

Q63 Which, if any, of the following best describes your religion?

☐ No religion
☐ Buddhist
☐ Christian (including Church of England, Catholic, Protestant, and other Christian denominations)
☐ Hindu
☐ Jewish
☐ Muslim
☐ Sikh
☐ Other
☐ I would prefer not to say

Thank you for your time.
Please return this questionnaire in the reply paid envelope provided or send it in an envelope marked FREEPOST GP PATIENT SURVEY (you do not need a stamp).