## De Montfort Surgery The Friends and Family Test



Thank you for recently visiting our surgery. We would like a few moments of your time to help us improve our quality of care. For this we ask that you fill out the questionnaire below which is called the Friends and Family Test.

The Friends and Family Test has been created to provide services with the ability to identify the areas that service users feel that need improvement as well as recognising good practice in the quality of care provided to NHS patients and service users. By asking service users if they would recommend the service to their friends and family, it allows services to capture the level of care that they are providing and how they can aim to improve it. The test has been put into place to ensure the NHS remains vigilant to ensure that patients are not subjected to poor quality of care in the future.

We would like you to think about your experience in the surgery during this visit.
1. How likely are you to recommend our surgery to friends and family if they needed similar care or treatment?*
☐ Extremely likely
□ Likely
☐ Neither likely nor unlikely
Unlikely
Extremely unlikely
<del>_</del> _ , , ,
☐ Don't know
2. Can you tell us why you gave that response?
Please do NOT include personal identifiable details about yourself or any other person.
(*) Mandatory Question
We collect and monitor the following information to ensure that we are treating all people fairly and to help us identify any barriers that may need to be addressed.
What is your sex?
Male Female
What age are you?
□ 0-15 □ 16-24 □ 25-34 □ 34-44 □ 45-54 □ 55-64 □ 65-74 □ 75-84 □ 85 or over
What is your ethnic group?
☐ White       ☐ Mixed/Multiple Ethnic Group       ☐ Asian/Asian British       ☐ Black/African/Carribean/Black British       ☐ Other Ethnic Group
Are your day-to-day activites limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?
(includes any issues/problems related to old age)
☐ Yes, limited a lot ☐ Yes, limited a little ☐ No ☐ Prefer not to say
All responses are anonymous and confidential.
Your response to the first question contributes to our Friends and Family Test score, which is shared with the public.
Your response to the second (and any subsequent) question may be published, for example as part of a patient experience report.
Please tick the box below if you do not wish your response to the second (and any subsequent) question to be included in any publications or reports we may produce.   Do not publish my response(s)
may produce Do not publish my leaponise(s)

Please return the completed form to our Reception Staff

