



Friends and Family Test

Riverside Surgery, Bovey Tracey
Tower House Surgery, Chudleigh



We would be very grateful if you would complete this short survey about your most recent visit to your GP. We will use your comments to identify how we can make improvements to the services we offer.

Your evaluation

Please think about your most recent visit to your GP.

How likely are you to recommend our GP practice to friends and family if they need similar care or treatment?

Please tick one of the boxes.

- ☐ Extremely likely
- ☐ Likely
- ☐ Neither likely nor unlikely
- ☐ Unlikely
- ☐ Extremely unlikely
- ☐ Don't know

In this box, please write down your main reason for ticking the box you chose in **Your Evaluation**. This survey has to be anonymous, so please do not include here any details such as names or any other personal information.

About you

Your gender

- ☐ Male
- ☐ Female
- ☐ Prefer not to say

Your age group

- ☐ under 16
- ☐ 17 - 24 years
- ☐ 25 - 34 years
- ☐ 35 - 44 years
- ☐ 45 - 54 years
- ☐ 55 - 64 years
- ☐ 65 - 74
- ☐ 75 - 84
- ☐ over 84

Your ethnic background

- ☐ White British
- ☐ White Irish
- ☐ Mixed White and Black Caribbean
- ☐ Mixed White and Black African
- ☐ Mixed White and Asian
- ☐ Asian or British Asian, Indian
- ☐ Asian or British Asian, Pakistani
- ☐ Asian or British Asian, Bangladeshi
- ☐ Black or Black British, Caribbean
- ☐ Black or Black British, African
- ☐ Chinese
- ☐ Other Ethnic Group

Do you consider you have a long-term illness or disability?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

Which surgery do you usually attend?

- ☐ Riverside Surgery
- ☐ Tower House Surgery

Please return your completed form to Reception, or post it into the external letter box at the front of the building.