Community Pharmacy Patient Questionnaire

This section is about why you					
Q1 Why did you visit this pharmacy today?	. —		. —	~ ~	
To collect a prescription for: Yourself Someon For some other reason (please write in the reason for y		Bot	h	OR	
	,our violej.				
If you did not collect a prescription, please go to Q3.					
Q2 If you collected a prescription today, were yo have to wait in the pharmacy or did you come b				ight aw	ay, did you
Straight away	Came bac	k later			
Q3 How satisfied were you with the time it took other NHS services you required?	to provid	le your	prescri	ption a	nd/or any
Not at all satisfied Not very satisfied Fairly	satisfied [Ve	ry Satisf	ied 🗌	
a) After you receive services or advice fr information so that we're best placed to help when	you next	visit the	pharma	cy. We	always ensur
this information is safely stored and kept absolu	No 🗌]	ur cons	ent to sl	hare your dat
this information is safely stored and kept absolut procedures or do you have any concerns? Yes b) In certain circumstances, the pharmacy ma with another healthcare professional to support y information without your express permission. Has the	No ay need to our care he pharn] o ask yo . We wil nacy eve	I never	pass o	n your healt
this information is safely stored and kept absolut procedures or do you have any concerns? Yes b) In certain circumstances, the pharmacy may with another healthcare professional to support y information without your express permission. Has to this? Yes No	No ay need to our care the pharn cted? Yes] o ask yo . We wil nacy eve s N 	II never er asked	pass o for you	n your healt ir consent lik
this information is safely stored and kept absolut procedures or do you have any concerns? Yes b) In certain circumstances, the pharmacy may with another healthcare professional to support y information without your express permission. Has to this? Yes No c) If yes, do you feel your wishes were respe This section is about the pharmacy and the not just for too Q4 Thinking about any previous visits as w pharmacy on the following factors? Please tick	No ay need to our care the pharn cted? Yes e staff w day's vis rell as t] o ask yo . We wil nacy eve s □ N si who wol Sit oday's,	II never er asked No rk there how y	pass o for you e more would	n your healt ir consent lik generally, you rate the
this information is safely stored and kept absolut procedures or do you have any concerns? Yes	No ay need to our care the pharn cted? Yes e staff w day's vis rell as t] o ask yo . We wil nacy eve s □ N si who wol Sit oday's,	II never er asked No rk there how y	pass o for you e more would	n your healt ir consent lik generally, you rate the
this information is safely stored and kept absolut procedures or do you have any concerns? Yes	No ay need to our care. the pharm cted? Yes e staff w day's vis yell as t one box Very] o ask yo . We wil nacy events s N bacy events s N Mo wol sit oday's, for each Fairly	II never r asked No rk there how w aspect Fairly	pass o for you e more vould y of the p	n your healt ir consent like generally, you rate the bharmacy liste Don't
this information is safely stored and kept absolut procedures or do you have any concerns? Yes	No ay need to our care. the pharm cted? Yes e staff w day's vis yell as t one box Very] o ask yo . We wil nacy events s N bacy events s N Mo wol sit oday's, for each Fairly	II never r asked No rk there how w aspect Fairly	pass o for you e more vould y of the p	n your healt ir consent like generally, you rate the bharmacy liste Don't
this information is safely stored and kept absolu procedures or do you have any concerns? Yes	No ay need to our care. the pharm cted? Yes e staff w day's vis yell as t one box Very] o ask yo . We wil nacy events s N bacy events s N Mo wol sit oday's, for each Fairly	II never r asked No rk there how w aspect Fairly	pass o for you e more vould y of the p	n your healt ir consent like generally, you rate the bharmacy liste Don't
 this information is safely stored and kept absolup rocedures or do you have any concerns? Yes	No ay need to our care. the pharm cted? Yes e staff w day's vis yell as t one box Very] o ask yo . We wil nacy events s N bacy events s N Mo wol sit oday's, for each Fairly	II never r asked No rk there how w aspect Fairly	pass o for you e more vould y of the p	n your healt ir consent like generally, you rate the bharmacy liste Don't
 this information is safely stored and kept absolup rocedures or do you have any concerns? Yes	No ay need to our care. the pharm cted? Yes e staff w day's vis yell as t one box Very] o ask yo . We wil nacy events s N bacy events s <i>v</i> ho wol s <i>it</i> oday's, for each Fairly	II never r asked No rk there how w aspect Fairly	pass o for you e more vould y of the p	n your healt ir consent like generally, you rate the bharmacy liste Don't
 this information is safely stored and kept absolup rocedures or do you have any concerns? Yes	No ay need to our care. the pharm cted? Yes e staff w day's vis yell as t one box Very] o ask yo . We wil nacy events s N bacy events s <i>v</i> ho wol s <i>it</i> oday's, for each Fairly	II never r asked No rk there how w aspect Fairly	pass o for you e more vould y of the p	n your healt ir consent like generally, you rate the bharmacy liste Don't

ANSWERS:	Very poor	Fairly poor	Fairly good	Very good	Don't know
a) Being polite and taking the time to listen to what you wantb) Answering any queries you may have					
Parade Chemist. 25 Grand Parade, Green Lanes, Haringey, Lond	lon, N4 1L0	G		Pa	ge 1 of 2

c) The service you received from the pharmacistd) The service you received from the other			
pharmacy staff			
e) Providing an efficient service			
f) The staff overall			

Q6 Thinking about all the times you have used this pharmacy, how well do you think it provides each of the following services?

ANSWERS:	Not at all well	Not very well	Fairly well	Very well	Never used
a) Providing advice on a current health problem or a longer term health conditionb) Providing general advice on leading a more					
 c) Disposing of medicines you no longer need d) Providing advice on health services or information 					
available elsewhere					

Q7 Have you ever been given advice about any of the following by the pharmacist or pharmacy staff?

Stopping smoking	🗌 Yes	🗌 No
Healthy eating	🗌 Yes	🗌 No
Physical exercise	🗌 Yes	🗌 No

Q8 Which of the following best describes how you use this pharmacy?

This is the pharmacy that you choose to visit if possible
This is one of several pharmacies that you use when you need to
This pharmacy was just convenient for you today

Q9 Finally, taking everything into account - the staff, the shop and the service provided - how would you rate the pharmacy where you received this questionnaire?

Poor 🗌	Fair 🗌	Good 🗌	Very Good 🗌	Excellent	
		r comments a rite them in h		vice from this pharmacy could be	
[Insert here, i	f required, additi	onal questions rela	ating to healthcare service	e provision]	

These last few questions are just to help us categorise your answers

Q12 Are y	ou	Ma		Fer	nale		
16-19 🗌	20-24	25-34 🗌	35-44 🗌	45-54 🗌	55-64 🗌	65+	
Q11 How	old are you?						

Q 13 Which of the following apply to you:

You have, or care for, children under 16	
You are a carer for someone with a longstanding illness or infirmity	
Neither	
Thank you for completing this questionnaire	