

We want to provide you with the very best possible personal care and service that meets your needs. To do this, it is important that we know your views on the practice and the care we provide and to record your opinions on where we can improve. We would be grateful if you would spend five minutes completing this form and then post it in the box in reception.

How did you hear about the practice?

Advertisement Passing the door Recommendation Yellow Pages
 Other directory Practice leaflet Website Other means

General appearance of practice	Very good	Good	Average	Poor
Décor				
State of repair/maintenance				
Outside appearance				
Cleanliness				

Practice personnel

Dentists	Yes	No
Are the dentists helpful?		
Are the dentists caring?		
Are the dentists friendly?		
Do they listen to you?		
Do they explain enough to you?		
Do you feel confident about the quality of treatment they are providing for you?		
Other staff (dental hygienists, dental nurses, dental receptionists)		
Are they friendly?		
Are they caring?		
Are they helpful?		
Are they well informed?		
Do they reassure you?		
Patient information		
Are there enough useful dental leaflets?		
Did you find the Newsletter interesting?		
Would you like more information and oral health education for children?		
Appointments		
Is it easy to book an appointment?		
Is the length of time you wait for future appointments acceptable?		
Do you like the new opening hours? (ie, 8am starts?)		
Are there any other times that you would like the practice to be open?		

If yes, when?.....

Visiting your dentist

Thinking about the last 12 months, which of the following best describes your experience:

Before today, I have visited my dentist on at least one occasion Tick one box
 This is the first time I have visited my dentist in the last 12 months



How many days do you usually have to wait in order to get an appointment with the dentist of your choice?

Same day		2 weeks		1 week	
Next day		Longer than 2 weeks			

Payment for treatment	Yes	No	No Opinion
Do you feel that the cost of treatment is fully explained?			
Do you think that the practice's private charges are reasonable?			
Are you interested in paying for private charges via a monthly pre-payment plan?			
Would you be interested in a finance option to pay for larger treatments?			

Would you recommend the practice to others?

Yes No Please tell us why

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Thank you very much for sparing the time for this survey.
Please leave it in the box at reception.