

Proposed Merger of Stuart House Surgery and Westside Surgery - Survey

You can also complete this survey online at:

<https://www.surveymonkey.com/r/StuartHouseWestside>

Introduction

We are undertaking a formal consultation about the possibility of merging the patient lists of Stuart House Surgery and Westside Surgery to create one practice. Crucially, you will only see improvements to the service, we will continue to operate during our current opening hours. You will still be able to see your preferred GP as you do now.

FAQs and details of the road show events we will be holding are available from your Practice and on the websites. After reading the relevant information and/or attending one of the events, we are asking for your views on this proposal and would like you to complete this short survey.

Please share your views by the closing date of 29th September 2017.

1. Please tell us which GP Practice you are currently registered with?

- Stuart House Surgery
- Westside Surgery

2. Approximately how far do you live from your practice?

Less than a mile 1-2 miles 2-4 miles 5 miles

3. What form of transport do you currently use to visit your GP surgery?

- Walk
- Car
- Bus
- Taxi
- Friend/relative
- Community transport
- Not – applicable - I receive home visits

Other, please specify:

4. To what extent do you understand the reasons for these Practices to merge?

Fully understand

Partially Understand

Don't really understand

Don't understand at all

Don't know

5. If you do not have a good understanding of this proposal, please tell us what other information you need:

6. Please tell us below what you feel the advantages of this merger could be:

7. What is most important to you when accessing a GP Practice? (please tick only 2):

- Distance from home
- Mix of male and female GPs
- Range of services available
- Access such as free parking or disabled access
- Recommendations from NHS Choices or friend/relative
- Telephone access
- Longer opening hours
- Appointments available at convenient times

Any other factors – please state below:

8. Please tell us below if there is anything about this merger that would cause you concern and, if so, please give us your suggestions of how we could address this:

10. Please tell us below if you have any other comments:

Equalities Monitoring - Under the provisions of the Equality Act 2010, all NHS organisations are required to demonstrate that their processes are fair, and that they are not discriminating or disadvantaging anyone because of their age, disability, gender reassignment status, marriage or civil partnership status, pregnancy or maternity, race, religion or belief, sex or sexual orientation. Please help us to monitor how well we engage with the population we serve, by completing the monitoring section below. Your answers will be kept strictly confidential in line with the Data Protection Act 1998 and you will not be personally identifiable through your answers

Gender	Male		Female		Prefer not to say	
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Age	Under 18		18-30		31-40		41-50		51-60	
	61-70		71-80		81-90		90+		Prefer not to say	

Do you consider yourself to have a disability or long term health condition?					Yes	No
Physical impairment		Mental health condition		Long-standing illness		
Sensory impairment		Learning Disability/Difficulty		Prefer not to say		
Other, please state						

How do you describe your ethnic origin?							
White British		Black British		Asian British		Aisian Chinese	
White Irish		Black Caribbean		Asian Indian		Asian other	
White European		Black African		Asian Pakistani		Mixed	
White Other		Black other		Asian Bangladeshi		Prefer not to say	
Other, please state							

What is your employment status?									
Employed		Self-Employed		Unemployed		Retired		Student	
Other Please state									

To request this form in an alternative language, or if you require the services of an interpreter, please contact us

Norėdami paprašyti šias alternatyvias savo kalbos formas arba jeigu jums reikalinga vertėjo paslauga, prašau susisiekiite su mumis.

Желающих получить альтеративные формы на своем языке или Вам нужна услуга переводчика просьба связаться с нами.

Polish

Aby zażądać formularz w alternatywnym języku, albo jeśli potrzebujesz usług tłumacza, proszę skontaktować się z nami.

Czech

Pro vyžádání tohoto formuláře v jiném jazyce nebo potřebujete-li tlumočníka, prosím, kontaktujte nás.

Portuguese

Para pedir este formulário numa outra língua ou se precisa de um intérprete, por favour contacte – nos.