

BLACKTHORN HEALTH CENTRE

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FRIENDS & FAMILY TEST

The questions below are extremely helpful for us to try and provide the best possible service.

These questions can also be completed online www.leavemyfeedback.com/4656

Or on the iPad in Reception

Question 1.

We would like you to think about your recent experience of our service. How likely are you to recommend our GP Practice to friends and family if they need similar care or treatment?

Extremely Likely Neither Unlikely Extremely Don't
likely Likely or unlikely extremely unlikely know

Question 2.

Can you tell us why you gave that response ?

PLEASE PLACE COMPLETED FORM IN COLLECTION BOX IN RECEPTION

Please tick this box if you DO NOT wish your anonymous comments to be made public: