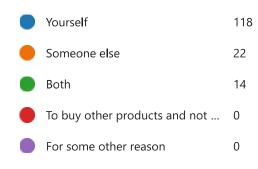
## Barrons Pharmacy Patient Questionnaire



1. Why did you visit this pharmacy today? To collect a prescription for:



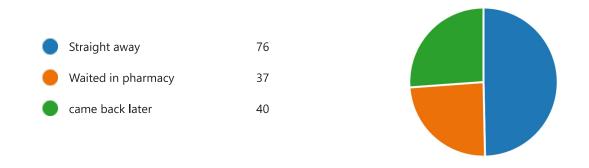


2. For some other reason (please write the reason for you visit):

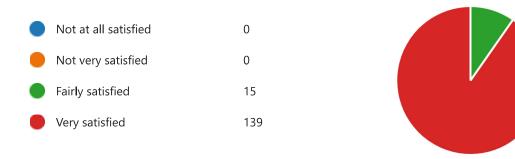
**O** Responses

**Latest Responses** 

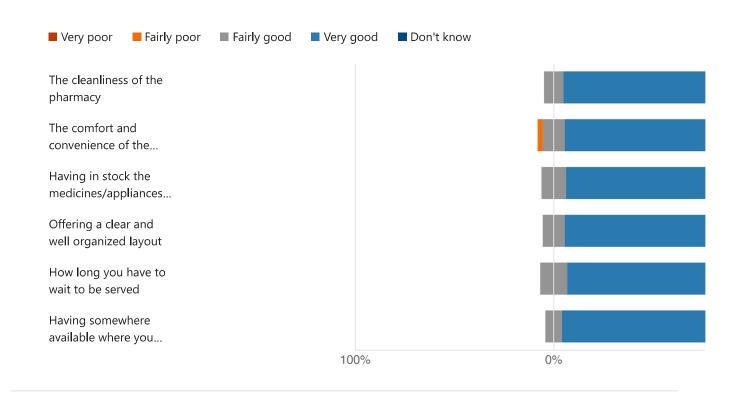
3. If you collected a prescription today, were you able to collect it straight away, did you have to wait in the pharmacy or did you come back later to collect it?



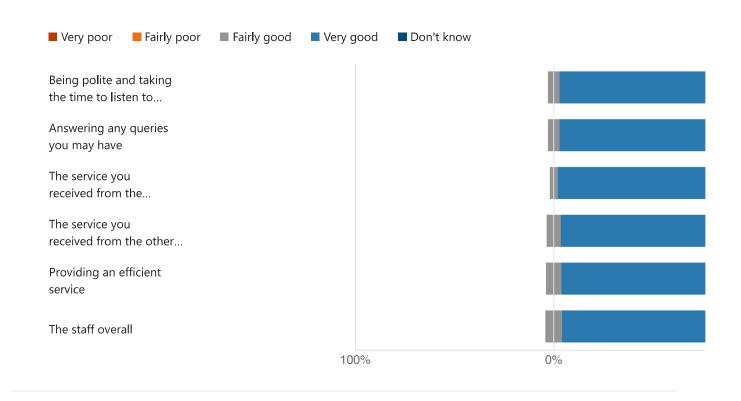
4. How satisfied were you with the time it took to provide your prescription and/or any other NHS services you required?



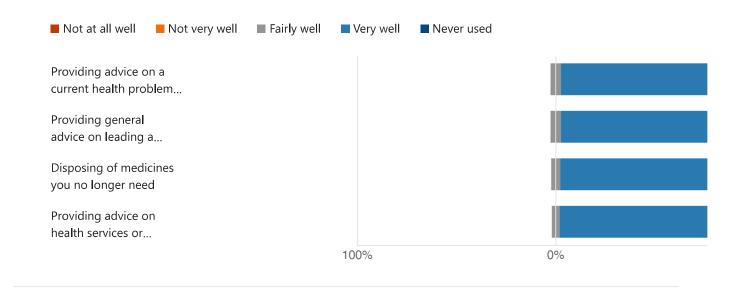
5. Thinking about any previous visits as well as today's, how would you rate the pharmacy on the following factors? Please tick one box for each aspect of the pharmacy listed below, to show how good or poor you think it is:



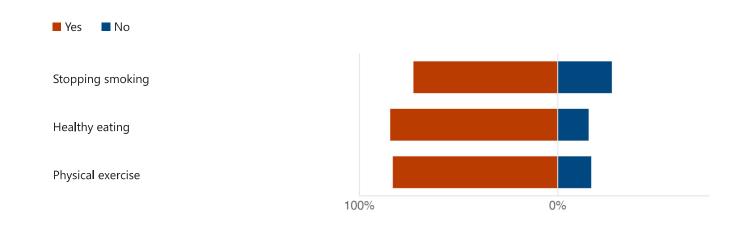
6. Again, including any previous visits to this pharmacy, how would you rate the pharmacist and the other staff who work there? Please tick one box for each aspect of the service listed below, to show how good or poor you think it is:



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



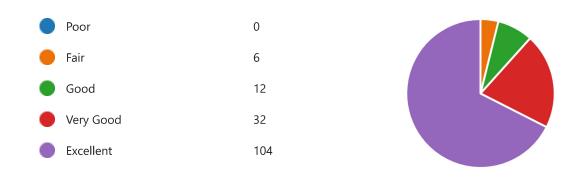
8. Have you ever been given advice about any of the following by the pharmacist or pharmacy staff?



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



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



11. If you have any comments about how the service from this pharmacy could be improved, please write them in here:



Polite customer service
ready Great service
Uncomfortable seats helpful staff
holiday service every time chemist shop Nice chemist

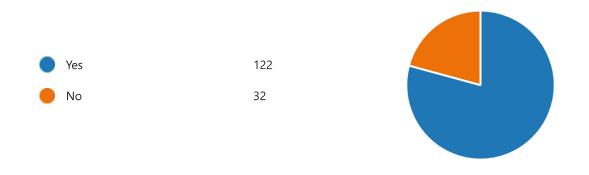
Polite customer service time using the chemist service medici medici

Nice service goc

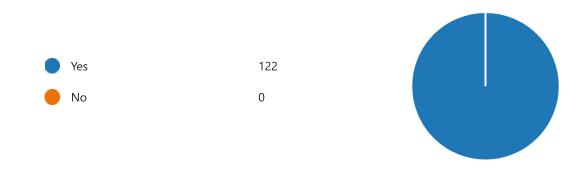
12. After you receive services or advice from us, we may retain some of your health information so that we're best placed to help when you next visit the pharmacy. We always ensure this information is safely stored and kept absolutely confidential. Are you happy with our procedures or do you have any concerns?



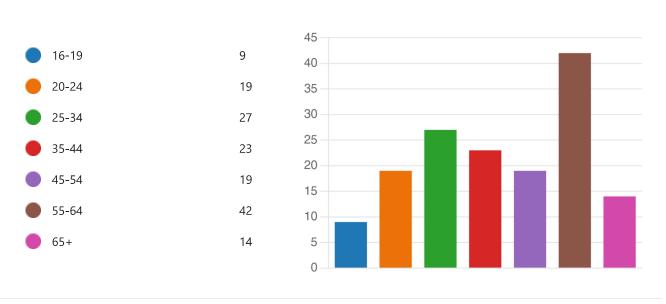
13. In certain circumstances, the pharmacy may need to ask your consent to share your data with another healthcare professional to support your care. We will never pass on your health information without your express permission. Has the pharmacy ever asked for your consent like this?



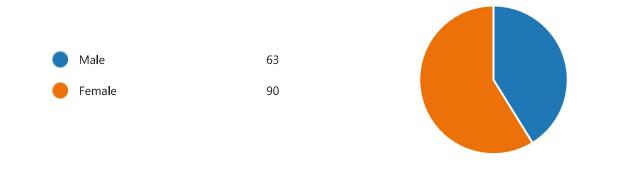
14. If you answered Yes to previous question, do you feel your wishes were respected?



## 15. How old are you?



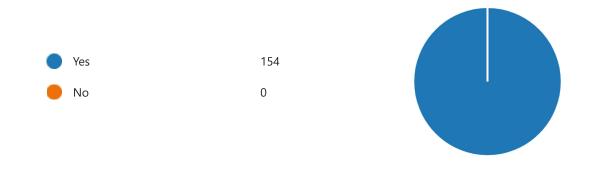
## 16. Are you..



## 17. Which of the following apply to you:

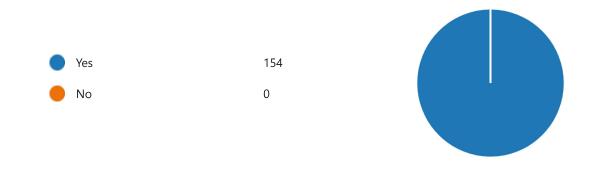


18. Do you know how to arrange to speak with pharmacy staff privately?



19. If "No", can you please explain the reasons for your answer

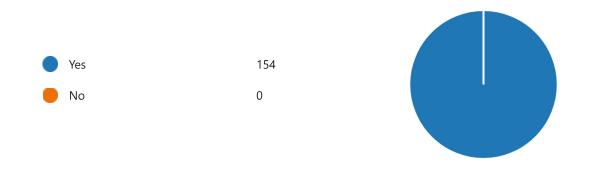
O Responses Latest Responses 20. Are you able to easily access health advice from pharmacy staff?



21. If "No", can you please explain the reasons for your answer



22. Are you happy with how quickly you are able to receive your prescriptions?



23. If "No", can you please explain the reasons for your answer

O Responses Latest Responses