The practice is carrying out a survey to gather feedback on your experience in the Covid-19 pandemic. We would like to use the information to identify and where possible make improvements on the way care is provided.

\*Required

\* This form will record your name, please fill your name.

**Telephone and Online Appointments**

The Covid-19 pandemic has altered the way that appointments are managed in primary care. Through the use of technology we have been able to offer patients telephone, video and online consultations which we feel have improved the efficiency of our service with increased accessibility for patients and reduced waiting times. We have been able to respond the more queries per day using this new system.

We would like to continue offering these services and would really value your thoughts.

Please help us by answering the following questions:

1. Have you received medical advice or treatment via non-traditional methods such as telephone, video or e-consultation since the pandemic began in March 2020?\*

* Yes
* No

1. If you said no to Question 1, would you like to in the future?\*

* Yes
* No

1. Have you used e-Consult to seek medical advice?\*

* Yes
* No

1. If yes, were you satisfied with the outcome to your e-Consult?\*

* Yes
* No

1. Have you had a video consultation during the Covid-19 pandemic?\*

* Yes
* No

1. Have you had a telephone consultation during the Covid-19 pandemic?\*

* Yes
* No

1. How would you rate your Video or Telephone call during the consultation?\*

* The best thing ever!
* Good
* Okay
* It was not great

1. If you had problems with these alternate forms of consultation (including any issues with technology), please explain:

1. Would you be happy to be offered a video or telephone consultation, where appropriate, for future appointments?\*

* Yes
* No

1. If you answered “No” please explain why:
2. Do you have access to a smart mobile phone or computer with internet access?\*

* Yes
* No

1. Would you say that you are confident in using technology, such as the internet for a video appointment?\*

* Yes
* No

1. Please add any further comments relating to the practice using technology as an additional method of carrying out consultations.

**Your level of risk in Covid-19 pandemic**

We would like to understand how the pandemic has affected you and if you are aware how to access services?

1. Do you consider yourself to be at high risk from Covid-19?\*

* Yes
* No

1. If your answer is “Yes”, please choose one of the options below\*

* You have a health condition which puts you at high risk
* You are pregnant
* Age > 70 years
* Other ………………………………………………..

1. Are you a carer or support someone who is considered at high risk from Covid-19?\*

* Yes
* No

1. Were you aware that GP Practices remained open to provide care remotely and in person throughout the Covid-19 pandemic?\*

* Yes
* No

1. What other types of access to medical advice and care are you aware of?\*

* NHS 111
* Out of Hours GP Hub
* Walk-in Centre or Urgent Care Centre
* Accident and Emergency Department
* Emergency 999 (London Ambulance Service)

1. How do you keep yourself up to date with information on Covid-19?\*

* Government website (Gov.uk)
* Practice Website ([theupstairssurgery@nhs.net](mailto:theupstairssurgery@nhs.net))
* Social Media (Twitter/Instagram/Facebook)
* Television
* Friends and Family
* Other …………………………………………………………………………………………………………………..

Impact of Covid-19 on your person health

1. Have you or anyone you care for experienced any changes to your healthcare due to the Covid-19 pandemic?\*

* Yes
* No

1. Please tell us about any changes to your healthcare you experienced that were related to the Covid-19 pandemic:
2. How much of an impact has the Covid-19 pandemic had on your mental health?\*

* No Impact
* Little Impact
* Moderate Impact
* Significant Impact

1. Have you been able to access support for your mental health or wellbring during this time?\*

* Yes – from family and/or friends
* Yes – from the Practice
* Yes – from a community or voluntary organisation
* Yes – from a mental healthcare provider
* Yes – online or from an app
* No – haven’t needed any support

Ethnicity

In England and Wales, there are 18 ethnic groups recommended for use by the government when asking for someone’s ethnicity. These are grouped into 5 ethnic groups, each with an “Any other” option where people can write in their ethnicity using their own words. These groups were used in the 2021 census of England and Wales.

1. Ethnicity – White

* English, Welsh, Scottish, Northern Irish or British
* Irish
* Gypsy or Irish Traveller
* Any other White background

1. Ethnicity – Mixed or Multiple ethnic groups

* White and Black African
* White and Black Caribbean
* White and Asian
* Any other Mixed or Multiple ethnic background

1. Ethnicity – Asian or Asian British

* Indian
* Pakistani
* Bangladeshi
* Chinese
* Any other Asian background

1. Ethnicity – Black, African, Caribbean or Black British

* African
* Caribbean
* Any other Black, African or Caribbean background
* Chinese
* Any other Asian background

1. Ethnicity – Other ethnic group

* Arab
* Eyptian
* Iranian
* Any other ethnicity

1. Your age?

* I am completing this on behalf of a child (a person under 18 years of age)
* 18-24
* 25-44
* 45-59
* Over 60 years

1. Gender\*

* Male
* Female
* Other
* Prefer not to say