

Study ID:	

FACULTY OF HEALTH AND SOCIAL CARE SCIENCES

Investigating the contribution of physician assistants (PAs) to primary care in England

Protocol reference: PC245 09/1801/1066

PATIENT SURVEY

We would be grateful if you would complete this survey about your visit to the Physician Assistant on/_/_ at Please complete the form answering ALL the questions that apply to you. There are no right or wrong answers. Staff at the practice will NOT be able to identify your individual responses. Please seal your completed survey form in the prepaid envelope provided and return to the research team by post.						
SEEING A PHYSICIAN ASSISTANT A	T THE G	ip sura	SERY OR H	IFALTH	CENTR	RE.
How good was the Physician As above at each of the following?		-				
	good		good		poor	apply
			nor poor			
Giving you enough time						
Asking about your symptoms						
_istening to you						
Explaining tests and treatments						
nvolving you in decisions about your care.						
Freating you with care and concern						

Q_2	Did you have confidence and trust in the Physician Assistant you saw?				
	Please put a × in one box				
	Yes, definitely				
	☐ Yes, to some extent				
	☐ No, not at all				
	☐ Don't know/can't say				
	YOUR OVERALL SATISFACTION				
Q3	In general how satisfied are you with the care you get at your GP surgery or health centre? Please put $a \times in$ one box				
	☐ Very satisfied				
	☐ Satisfied				
	Neither satisfied nor dissatisfied				
	Dissatisfied				
	☐ Very dissatisfied				
Q4	Would you recommend your GP surgery or health centre to someone who has just moved to your local area? Please put $a \times in$ one box				
	Yes, would definitely recommend				
	Yes, might recommend				
	☐ Not sure				
	No, would probably not recommend				
	☐ No, would definitely not recommend				
	☐ Don't know				

In general how satisfied are you with the care you received from the Physician Assistant on the date written on page 1 of this survey? Please put a × in one box						
		Very satisfied	d			
		Satisfied				
		Neither satis	fied nor dis	satisfi	ied	
	Dissatisfied					
		Very dissatist	fied			
Q6	who	you saw <u>on th</u> e a GP? <i>Pleas</i>	e date wri e put a × ii	itten d n one		
		•		•	ician Assistant again Assistant again	
		Neither satis	,		•	
		Dissatisfied a				
		Very dissatisf	•			
		,	.ou unu pr			
			SOME QUES	STIONS	S ABOUT YOU	
	-		•		speriences vary between different swill be completely confidential.	
Q7	Are	you male or fe	emale? <i>Ple</i>	ase p	ut a × in one box	
		Male			Female	
Q8	How	old are you?	Please put	t a × i	n one box	
		16 to 24		55 to	0 64	
		25 to 34		65 to	74	
		35 to 44		75 to	84	
		45 to 54		85 ar	nd over	

What is your ethnic group? Please choose one section from A to E below, then select the appropriate option to indicate your ethnic group

Α	White				
	British				
	Irish				
	Any Other White background				
	Please write in				
В	Mixed				
	White and Black Caribbean				
	White and Black African				
	White and Asian				
Щ	Any Other Mixed background				
	Please write in				
c	Asian or Asian British Indian Pakistani Bangladeshi Any Other Asian background Please write in				
D	Black or Black British				
	Caribbean				
	African				
	Any Other Black background				
十,	Please write in				
-	rease write in				
Е	Chinese or other ethnic group				
	Chinese				
	Any other ethnic group				
\top	Please write in				