

# HARTINGTON SURGERY

## 'THE NHS FRIENDS AND FAMILY TEST'

### How Did We Do Today?

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 the needed similar care or treatment?”**

Please circle the appropriate statement below.

Extremely likely	Likely	Neither likely or unlikely	Unlikely	Extremely unlikely	Don't know
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Please tell us the main reason for selecting your statement

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**“What impressed you today and why?” (Optional)**

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**“If you could change one thing about the surgery, what would it be?”**

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Name (optional):

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Contact Details (optional):

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Please tick if you are a carer completing this on behalf of a patient.

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