

## Paramedic/physician associate feedback form

Additional roles are providing support to patients within practices, and this includes Physician associates (PA's) and paramedics. It would be helpful to have feedback following your appointment today. Would you mind either completing the attached and leaving it with reception or complete the online questionnaire using the QR code. Your feedback is important to continually develop our services.

Thank you

*When you saw the paramedic or physician associate for your consultation, did they introduce themselves to you? Please circle)*

YES      NO

*Were you satisfied with today's appointment? (Please circle)*

YES      NO

How reassured do you feel that your concern/illness has been dealt with appropriately?

1     2     3     4     5

Not at all  ▶ Very reassured

Did you feel you had enough time to discuss your concern fully? *(please circle)*

YES      NO

Would you see a paramedic/physician associate again?

1     2     3     4     5

never  ▶ Definitely

Do you feel the paramedic/physician associate was... (Please tick)

Knowledgeable?                       Yes |  No

Reassuring?                             Yes |  No

Confident?                               Yes |  No

Did you feel there any obvious differences between seeing the paramedic or physician associate and a GP?                      YES      NO      (If yes what are they?)

Please rate your overall experience with the paramedic/physician associate.

1     2     3     4     5

Disappointing

Very good

