PATIENT CARE

BOLTON COMMUNITY PRACTICE CIC



Patient Advisory Group



Bolton Community Practice is totally committed to Excellence; it is proud of its patient care and seeks to improve this wherever possible.

To help us achieve our goal of Excellence, we would welcome your views on how we have taken care of you today. We love compliments and we'd really like to hear from you. However, if you feel we could have performed better, we need to receive your views! Use this form to let us know about your experience and include any comments or suggestions about how you think we can improve. You do not have to include your name and address if you do not wish to do so, but if you wish to receive a reply, please include your name plus a telephone contact number and/or e-mail address. When you have completed this form, please hand it to the Receptionist or place it in the Suggestion Box on the wall. Thank you.

We look forward to hearing from you. (Please be aware that any clinical complaints involving your doctor/clinician should be made initially to your Practice Manager who will explain the appropriate complaints procedure.) Which surgery do you attend? Astley Dale, Market, Ladybridge, Little Lever (delete where appropriate) Comments	
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Comments	
Continue overleaf if necessary	

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