Owner of Pharmacy:	Address of Pharmacy:	Date Patient survey completed:		
Top areas of performance				
Question				% of respondents satisfied with service
Areas in greatest need for improvement				
Question		% of respondents dissatisfied with service	Action taken or planned (including timescale)	

Report for publication

Pharmacy response to respondent's additional comments

Areas within control of pharmacy	Areas outside control of pharmacy

Age range of respondents						
16-19	20-24	25-34	35-44	45-54	55-64	65+
%:	%:	%:	%:	%:	%:	%:

Profile of respondents					
This is the pharmacy that the respondent chooses to visit if possible	This is one of several pharmacies that the respondent uses	This pharmacy was just convenient on the day for the respondent			
%:	%:	%:			