

Doncaster Local Involvement Network (LINK) Podiatry/Chiropody in Thorne/Moorends Survey

For office purposes only, please insert the first part of your postcode

Please tick one of the following:

Male

Female

Do you suffer from diabetes?

Yes

No

Do you have a carer?

Yes

No

Do you require a home visit for treatments?

Yes

No

The LINK is currently undertaking a survey regarding access to Podiatry/Chiropody Services in the Thorne/Moorends area. In order to assess the services provided please take the time to complete the following:

1 Do you know how to access Podiatry/Chiropody services? Yes No

*(If you answered **Yes** please answer **Part A** questions **2** to **12**)*

*(If you answered **No** please answer **Part B** questions **13** to **15**)*

Part A

2 Have you used Podiatry/Chiropody services in the previous 12 months? Yes No

If yes how many times?

3 Did you find it easy to access information? Yes No

4 Where did you receive treatment? Home Local Clinic Other (please specify)

5 How was your treatment funded? NHS Private

6 Were you referred or self referred? Referred Self Referred

7 If referred, who were you referred by?

8 Did you know you could self refer? Yes No

If yes who informed you?

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- 9 Was your appointment urgent or routine? Urgent Routine
- 10 After referral how long did you wait for treatment?
- 11 Describe your experience. Good Bad Average Excellent
- 12 What changes could be made to improve the service you received?

Part B

- 13 If you required treatment who would you go to in the first instance?

- 14 Did you know you could self refer? Yes No

- 15 Where would be the best place for you to obtain relevant information?