

# Questionnaire

Thank you for assisting our practice in our journey of delivering high quality experiences to dental patients. Casting your fresh eyes over what we do will help identify areas that we can improve and therefore attain our goal of becoming the dental practice of choice in our area.

We appreciate your time.

May we ask you to use the following symbols to indicate your impression in the areas listed:

**✗** Left poor impression

**⊖** Neutral

**+** Added value to experience

ELEMENT	✗	⊖	+	COMMENTS
<b>PRIOR TO ARRIVING</b>				
Website				
Social media page				
Telephone call to book				
<b>ARRIVAL</b>				
External signage				
Landscaping & building				
Parking				



✗ Left poor impression

⊖ Neutral

✚ Added value to experience

ELEMENT	✗	⊖	✚	COMMENTS
<b>ENTRANCE</b>				
Welcome by staff				
Appearance of Waiting Room				
Level of comfort waiting				
Friendliness of receptionist				
<b>CLINICAL EXPERIENCE</b>				
Welcome & guidance through to surgery				
Appearance of surgery				
Comfort during procedure				
Explanations by Dentist				
Demeanour of Dentist				
Demeanour of Assistant				
<b>FINALISING YOUR VISIT</b>				
Ease of payment				
Ease of making next appointment				
Demeanour of Receptionist				
<b>FOLLOW UP</b>				
Follow up communications				

## FINAL QUESTIONS

Would you describe the overall friendliness, helpfulness and likability of our Team was:

- Below what you expected (below satisfactory customer service)
- As you expected (satisfactory customer service)
- Surpassed your expectations (great customer service)

Was your experience with our practice such that you would return for advised treatment?

Was experience such that you would convert to our practice as your regular dentist?

Were there any outstanding elements to your experience that we should either:

Make sure we keep.

Make sure we change.

Are there any further comments you wish to make?

*Thank you for sharing your observations and input.*