

IMPROVING PRACTICE QUESTIONNAIRE (IPQ)

CFEP UK Surveys

Application Form

P O Box 51

All prices include VAT @ 15%

Exeter

EX4 4WT

**3 ways
to pay...**

- ① Complete this form and post to us with payment (cheques should be made payable to 'CFEP UK Surveys')
 ② Apply and pay online at www.cfep.co.uk ③ Call us on 01392 252740 with your credit or debit card details

Step

1

FILL IN YOUR DETAILS...

Practice manager or contact person:	(Dr/Mr/Mrs/Ms/Miss)		
Practice name:			
Address:			
Direct contact tel no:		E-mail address:	
Patient list size:		Name of host PCT/PCO/LMC etc:	

We may contact you from time to time to keep you up to date with products and services that we feel may be of interest to you. If you would not like us to retain your e-mail address for this purpose, please tick here.

For more information or guidance, please call us on **01392 252740** or e-mail **enquiries@cfep.co.uk**

Step

2

CHOOSE A SURVEY...

Option 1: IPQ at practice level

An overall report of your practice and healthcare professionals.

>> For Option 1, please complete the form on page 2.

Option 2: IPQ with individual results for each clinician

- Reports for each individual clinician and an overall, combined practice report.
- An all-inclusive cost of £107.66 (inc. VAT) per participating clinician.

*Useful for revalidation and appraisal.
GPs, nurses and other healthcare professionals receive individual results.*

>> For Option 2, please complete the form on page 3.

Option 3: 360i 360° feedback for GPs

Our Colleague Feedback Evaluation Tool (CFET) (in conjunction with the IPQ at individual level) for 360° feedback.

OFFER: Only an additional £53.83 (inc. VAT) for each participating GP when you book CFET *in conjunction* with IPQ at individual level.²

Useful for revalidation and appraisal.

We have developed a **telephone consultation questionnaire** which may be of interest to clinicians in General Practice. Please tick if you would like to receive more information.

Please turn the page to let us know which option you have chosen and complete all details required.

Step LET US KNOW YOUR SURVEY REQUIREMENTS...

3 Please complete all details required for your chosen option.

Option 1 IPQ at practice level An overall report of your practice and healthcare professionals.

For every 1,000 patients, 25 questionnaires are needed¹. Please note that a minimum of 40 completed questionnaires are necessary to ensure statistical validity. To meet these requirements we send out a minimum of 65 questionnaires, even for practices with small list sizes. Where your patient list size is over 18,000, the price per extra questionnaire is 98p (inc. VAT).

FOR OPTION 1, PLEASE COMPLETE THE FOLLOWING DETAILS:

I would like to participate in the IPQ at **PRACTICE LEVEL** only.

I would like to receive my survey pack on [date]: _____ NB: Allow 10 working days for delivery

Please choose **one** of the following **report formats**:

Bound hard copy **or** Electronic copy

Both (an additional £17.12 [inc. VAT] per report)

Optional extra:

Customised practice results poster Share your results with patients (This can help to meet PE6)

A2, full colour PVC poster £44.05 (inc. VAT) **A4, electronic copy delivered via e-mail** £28.38 (inc. VAT)

NB: Your customised practice results poster will be delivered 15 working days after receiving your practice results.

Practice Level Price Guide		
Patient List Size	All-inclusive Cost (inc. VAT @ 15%)	No of Questionnaires Sent
0 - 1000	£107.66	65
1001-2000	£107.66	65
2001-3000	£165.41	100
3001-4000	£220.21	130
4001-5000	£244.69	180
5001-6000	£269.15	210
6001-7000	£293.62	240
7001-8000	£318.09	265
8001-9000	£329.83	305
9001-10000	£340.60	325
10001-11000	£351.36	360
11001-12000	£364.09	370
12001-13000	£389.53	425
13001-14000	£414.98	465
14001-15000	£434.55	510
15001-16000	£453.15	530
16001-17000	£460.00	560
17001-18000	£484.47	585

I confirm that I have read and accept the terms and conditions of the service that will be provided by CFEP UK Surveys. All prices include VAT @ 15%.

I enclose a cheque for £ _____ Signed _____ Date _____
(made payable to 'CFEP UK Surveys')

