Use of health and social-service questionnaire

We would like to know whether you have had any contacts with the social services listed below, and, if so, the number of times you have had contacts with them since your last visit (**x** months / weeks ago).

Please put '00' if you had no contact. Please put the number of times in the appropriate boxes.

General practice and community nursing services

Number of times you saw a GP at the surgery
Number of times you saw a GP at your home
Number of times you spoke to a GP on the telephone
Number of times you saw a practice nurse at the surgery
Number of times you saw a district nurse at your home
Number of times you saw a counsellor at the surgery
Number of times you saw a GP at your home
Number of contacts with anyone else from the practice
Who did you see?
Social Services
Number of times you saw a social worker
Where did you see the social worker?
Number of times you saw a home help
Number of times you saw a care assistant
Number of times you visited a Day Centre
Number of contacts with anyone else from Social Services
Who did you see?

Psychiatric Hospital and Community Services

Number of times you saw a psychiatrist at the hospital clinic
Number of times you saw a psychiatrist at your home
Number of times you saw a psychologist
Number of times you saw a community psychiatric nurse
Number of contacts with anyone else from the psychiatric services
Who did you see?
Other Services
Number of times you attended a Day Hospital
Number of times you went to the Accident and Emergency Department
Number of times you went to a hospital clinic
Number of nights you spent on a hospital ward
Occupational or employment health services
Number of contacts with anyone else from the hospital
Who did you see?
Number of times you contacted NHS Direct
Number of times you called for an Ambulance or paramedic