



Capital Health



# DISTRICT DEPARTMENT OF FAMILY PRACTICE

## MEMBER SURVEY

**Project:** Aligning Patients without a Family Physician to a Family Physician Accepting New Patients.

### ACCEPTING NEW PATIENTS:

- I am currently accepting new patients.
- I am currently NOT accepting new patients.
- I am currently NOT accepting new patients but may be interested under the "right" circumstances.

### STEERING GROUP:

- I am interested in participating in the Steering Group (paid at sessional rate of \$ 129/hour).
- I am not interested in participating in the Steering Group.
- I am not interested in participating in the Steering Group but would like to provide the following input:

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Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Do we have your contact information and practice profile? If not, please complete a **Member Contact Information** form available on our website ([www.cdha.nshealth.ca/ddfp](http://www.cdha.nshealth.ca/ddfp)).

**Please return by fax (454-7107) by September 3, 2010 to enter to win a prize!**

