

2019 Patient Satisfaction Survey



KODIAK COMMUNITY
HEALTH CENTER

Patient Name: _____

Date of Visit: _____

In your recent experience(s), how often were you able to get an appointment as soon as you needed it?

Circle one: Always Usually Sometimes Never

Comments: _____

In your recent experience(s), how often did your healthcare provider explain things in a way that was easy to understand?

Circle one: Always Usually Sometimes Never

Comments: _____

In your recent experience(s), when a KCHC provider ordered a blood test, x-ray or other test for you, how often did someone from KCHC follow up to give you those results?

Circle one: Always Usually Sometimes Never

Comments: _____

Did anyone at KCHC ask you if they could help with any problems you have getting the healthcare you need? (For example: Transportation or Language)

Circle one: Yes No N/A

Comments: _____

Do you/your family qualify for our Sliding Fee Family Discount?

Circle one: Yes No Declined Don't Know

Are there any KCHC staff members that you would like us to honor, recognize or thank on your behalf?

Please circle today's Provider and/or Visit Type

Dr. Mortenson Dr. Burnside Dr. Walters Dr. Frazier
Dr. Silbergeld PA Holforty PA Witteveen PA Mete
FNP Walker FNP Narog Other: _____
Behavioral Health Nutrition Nursing Lab

5 = Very satisfied

4 = Somewhat satisfied

3 = Neither satisfied or dissatisfied

2 = Somewhat dissatisfied

1 = Very dissatisfied

Please rate your **check-in experience with our Front Desk Staff.**

Circle one: 5 4 3 2 1

Comments: _____

Please rate your **experience with the person who assisted your KCHC Provider today.**

Circle one: 5 4 3 2 1

Comments: _____

Please rate your **experience with your KCHC Provider this visit:** (For example: Doctor, Physician Assistant, Lab Technician, Nurse Practitioner, Dietician or Health Coach)

Circle one: 5 4 3 2 1

Comments: _____

Is there anything else you would like us to know?

May we contact you regarding any of your answers or comments above? Yes No

If so, what is the best way to reach you?

Phone # _____

Email _____

Thank you very much for your time. We truly appreciate your feedback.