

About Your Visit to the Health Center...

We are please that you have chosen to receive your care at Great Brook Valley Health center. Please take the time to complete this confidential survey. Your comments will help us to see how well we are meeting your needs.

Please circle the number that best represents your visit to the health center today.

1) How easy was it to get today's appointment at the Health Center?

Very difficult Very easy
 1 2 3 4 5

2) How would you describe your time in the waiting room?

A very long wait A very short wait
 1 2 3 4 5

3) How would you describe the quality of health information and care you received?

Low quality High Quality
 1 2 3 4 5

4) How would you describe the helpfulness of the reception and secretarial staff?

Not very helpful Very helpful
 1 2 3 4 5

5) How would you describe the caring of the nurses and medical assistants?

Not very caring Very caring
 1 2 3 4 5

6) How would you describe the communication between you and your provider?

- My provider listens to me.

Didn't listen Listened well
 1 2 3 4 5

- My provider's explanations and instructions were complete and understandable.

Not complete and understandable Very complete and understandable
 1 2 3 4 5

- My provider took time to answer my questions.

Didn't take time Took a lot of time
 1 2 3 4 5

7) In general, the Health Center respected my privacy and me as an individual.

Don't agree Strongly agree
 1 2 3 4 5

8) Would you recommend the Health Center to family or friends?

Would recommend Wouldn't recommend
 1 2 3 4 5

Please write your additional comments: