



Survey Title **Patient Survey - Acute Care Services**

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Description **Acute Care - Patient Survey**

Survey Dates 01/22/2018 To 02/04/2018

Survey Type **Patients**

Department	Assigned	Distributed	Returned	
Acute Care	15	10	1	
Day Surgery	25	25	6	
Emergency/Out-Patient	100	80	17	
Dietary Counseling	5	5	0	
Laboratory / X-Ray	50	50	40	
Pharmacy	5	5	0	
	<b>200</b>	<b>175</b>	<b>64</b>	<b>36.57%</b>

**1 In what area were you treated? (check all that applies)**

Multiple Answer with Comments      Service Location

Available Options

	Acute Care	Day Surgery	Emergency/Out-Patient	Laboratory / X-Ray	Occupational Therapy
<b>1</b>	<b>1</b>	<b>6</b>	<b>20</b>	<b>41</b>	<b>1</b>

Other (Please Specify Service/Department )  
**2**

Results

**Comments Not Displayed on this Report**

**2 How would you describe the treatment you received?**

Multiple Choice with Comments      Satisfaction Level      Met: 64 / 65      **98%**

Available Options

Excellent	Very Good	Good	Fair	Not Answered
<b>51</b>	<b>13</b>	<b>1</b>	<b>0</b>	<b>1</b>

Results

Void	Excellent	Very Good	Good	Not Answered
<b>N</b>	<b>Y</b>	<b>Y</b>	<b>N</b>	<b>N</b>
<b>1 / 66</b>	<b>51 / 66</b>	<b>13 / 66</b>	<b>1 / 66</b>	<b>1 / 66</b>
<b>2%</b>	<b>77%</b>	<b>20%</b>	<b>2%</b>	<b>2%</b>



3a **Were you given instructions before, during or after your treatment?**

Multiple Choice

Administration

Met: 58 / 60 **97%**

Available Options

Yes	No	Not Answered
<b>58</b>	<b>2</b>	<b>6</b>

Results

Void	Yes	No	Not Answered
<b>N</b>	<b>Y</b>	<b>N</b>	<b>N</b>
<b>1 / 66</b>	<b>58 / 66</b>	<b>2 / 66</b>	<b>6 / 66</b>
<b>2%</b>	<b>88%</b>	<b>3%</b>	<b>9%</b>



**3b If you were given instructions, did you understand the instructions given:**

Header Question with Sub Questions      No Grouping Needed

**3b.i Before your treatment/procedure?**

Met: 59 / 63      **94%**

Available Options

Clearly <b>59</b>	Somewhat Clearly <b>4</b>	Not at all <b>0</b>	Not Answered <b>3</b>
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Results

Void <b>N</b> 1 / 66 2%	Clearly <b>Y</b> 59 / 66 89%	Somewhat Clearly <b>N</b> 4 / 66 6%	Not Answered <b>N</b> 3 / 66 5%
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**3b.ii During your treatment/procedure?**

Met: 59 / 61      **97%**

Available Options

Clearly <b>59</b>	Somewhat Clearly <b>2</b>	Not at all <b>0</b>	Not Answered <b>5</b>
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Results

Void <b>N</b> 1 / 66 2%	Clearly <b>Y</b> 59 / 66 89%	Somewhat Clearly <b>N</b> 2 / 66 3%	Not Answered <b>N</b> 5 / 66 8%
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**3b.iii After your treatment/procedure?**

Met: 60 / 62      **97%**

Available Options

Clearly <b>60</b>	Somewhat Clearly <b>2</b>	Not at all <b>0</b>	Not Answered <b>4</b>
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Results

Void <b>N</b> 1 / 66 2%	Clearly <b>Y</b> 60 / 66 91%	Somewhat Clearly <b>N</b> 2 / 66 3%	Not Answered <b>N</b> 4 / 66 6%
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**3c What could we have done to be more helpful? (Please Comment)**

Comment Only

General Comments

**Comments Not Displayed on this Report**



4 Were we open, respectful and compassionate in our dealings with you?

Multiple Choice with Comments

Well Being

Met: 62 / 62 100%

Available Options

Yes	No	Not Answered
62	0	4

Results

Void	Yes	Not Answered
N	Y	N
1 / 66	62 / 66	4 / 66
2%	94%	6%

5 Did you feel safe in our care?

Multiple Choice with Comments

Safety & Security

Met: 62 / 62 100%

Available Options

Yes	No	Not Answered
62	0	4

Results

Void	Yes	Not Answered
N	Y	N
1 / 66	62 / 66	4 / 66
2%	94%	6%

6 Were you given the opportunity to access pastoral/spiritual care if there was a need to do so?

Multiple Choice with Comments

Well Being

Met: /

Available Options

Yes	No	Not Answered
8	3	55

Results

Void	Yes	No	Not Answered
N	N	N	N
1 / 66	8 / 66	3 / 66	55 / 66
2%	12%	5%	83%



**7 Do you know who to contact if you have any concerns?**

Multiple Choice with Comments

Information Management

Met: 52 / 61 **85%**

Available Options

Yes	No	Not Applicable	Not Answered
<b>52</b>	<b>9</b>	<b>0</b>	<b>5</b>

Results

Void	Yes	No	Not Answered
<b>N</b>	<b>Y</b>	<b>N</b>	<b>N</b>
<b>1 / 66</b>	<b>52 / 66</b>	<b>9 / 66</b>	<b>5 / 66</b>
<b>2%</b>	<b>79%</b>	<b>14%</b>	<b>8%</b>

**8 Do you feel your concerns were dealt with appropriately and in a timely fashion?**

Multiple Choice with Comments

Satisfaction Level

Met: 53 / 58 **91%**

Available Options

Yes	No	Not Applicable	Not Answered
<b>53</b>	<b>3</b>	<b>2</b>	<b>7</b>

Results

Void	Yes	No	Not Applicable	Not Answered
<b>N</b>	<b>Y</b>	<b>N</b>	<b>N</b>	<b>N</b>
<b>2 / 65</b>	<b>53 / 65</b>	<b>3 / 65</b>	<b>2 / 65</b>	<b>7 / 65</b>
<b>3%</b>	<b>82%</b>	<b>5%</b>	<b>3%</b>	<b>11%</b>

**9 Were there things you particularly liked or disliked? Please comment.**

Comment Only

General Comments

**Comments Not Displayed on this Report**

**10 This survey is our primary means of measuring patient satisfaction and identifying areas for improvement or recognition. Please use the area below to make general comment or suggestions about any part of your visit with us:**

Comment Only

General Comments

**Comments Not Displayed on this Report**