Georgia Southwestern State University

Herschel A. Smith Health Center Satisfaction Survey

1. Class standing: Freshman Sophomore Junior Senior Graduate Faculty Staff
2. Gender:
3. Citizenship Status: U.S. citizen Non-Immigrant Visa Permanent Resident
4. Race/ethnic background? Asian Hispanic American Indian/Alaskan Pacific Islander Middle Eastern Biracial White/European American, non Hispanic Black/African American, non-Hispanic Other 5. When was the last time you visited the Health Center? Never (Please go to question #23) This semester This academic year
Last academic year Over two years ago
6. How many visits have you made to the Health Center this academic year? 10 1-5 6-10 more than 10 times
7. Did your care at the Health Center help your academic performance, class attendance or participation in other activities? N/A Not at all Somewhat Very Helpful
8. How long was your average walk-in wait before being seen by the nurse? N/A No wait 5min 10min 15min >20min
9. How long was your average walk-in wait before being seen by the Provider (Nurse Practitioner/MD)? N/A No wait 5min 10min 15min >20min
10. Did you feel the wait was reasonable? Yes No Explain

Please continue on the next page



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Quality of Service	Excellent	Good	Fair	Poor	N/A	
11. Helpfulness of the Physician						
12. Helpfulness of the Nurse practitioner						
13. Helpfulness of the Registered Nurse						
14. Level to which your concerns were addressed						
15. Convenience of service						
16. Availability of service						
17. Comfort and environment of waiting room						
18. Cost of medications						
19. Cost of services rendered for staff & Faculty (co-pay)						
20. Your perception of the quality of the care that you						
received at the Health Center						
21. Overall experience						
22. Would you use our services again? Yes No If no, Why Comments						
Comments						
23. If you have never used the Health Center, please tell us why? (Check all that apply)						
I didn't know about the Health Service						
I go to my own doctor/nurse practitioner off campus or at home						
☐ I have no health care needs						
I didn't know what services were offered at the Health Center						
☐ I had concerns about the cost						
☐ I thought I needed to have insurance to be seen in the Health Center						
I have concerns about the quality of care						
The Health Center hours conflict with my class/work schedule						
I am concerned about confidentiality						
Uther:						
24. Is it convenient for you to visit the Health Center during the current hours of 8 AM to 5PM Monday through						
Friday? Yes No						
25. If not, what hours would be better for you?						
26. What health education topics would you like to attend on campus?						
27. What services would you like offered at the Health Center?						
27. What services would you like offered at the Health Cen	IICI!					

Thank you for taking the time to fill out this survey. We will use the information you have given us as we plan for the future. Please submit or print and return to the Health Center