




PATIENT SATISFACTION SURVEY

Excellent service is our most important goal. Your responses are important to us and will help us improve our services. Thank you for taking our survey and sharing your ideas with us.

Date: _____

Today I visited the Health Department in: Manteo Frisco Kill Devil Hills

Type of Visit? Physical Female Annual Immunization WIC Lab
Maternity Well Child Diabetes/MNT Other

Please check (v) how well you think we are doing in the following areas:	VERY GOOD 	GOOD	FAIR 	POOR	VERY POOR 	N/A
How satisfied were you with your visit today?						
RATING TODAY'S VISIT						
Ability to get an appointment						
Hours Health Department is open (8:00AM-5:00Pm, M-F)						
Convenience of Health Department's location						
Phone calls were returned promptly						
WAITING						
Length of time in waiting room						
Length of time in exam or interview room						
STAFF						
Friendly and helpful to you						
Listens to you						
Takes enough time with you						
Provides instruction you understand						
FACILITY						
Cleanliness						
Ease of finding the Health Department						
Comfort and safety while waiting						
Would you recommend the Health Dept. to your family/friends?	Yes		No			
Which Health Dept. location is most convenient?	Manteo	Kill Devil Hills		Frisco		

What do you like best about the Health Department? _____

What do you like least about the Health Department? _____

How did you first hear about the Health Department? _____

Suggestions/Comments: _____



DARE COUNTY
DEPARTMENT OF
PUBLIC HEALTH

SERVING TO ASSURE HEALTHY PEOPLE AND COMMUNITIES