FMA- Practice wide

Patient Satisfaction Survey

Results

Feb 2014

		<6 mths	6 mth-1 yr	1-2 yrs	3-4 yrs	5 or > yrs	no answer					
1	How long have you been going to this provider	5	7	17	28	154	1					
		Yes	No	No Answer								
2	During your most recent visit, did you see your provider within 15 minutes of your appointment time	195	16	2								
		Definitely	Somewhat	No	No Answer							
3	Did your provider seem to know the important information about your medical history	203	8	1	1							
		Yes	No	No Answer								
4	Did you talk to your provider about health questions or concern	201	8	4								
		Definitely	Somewhat	No	No Answer							
5	Did your provider listen carefully to you	208	1	1	3							
		Definitely	Somewhat	No	No Answer							
6	Did your provider give you easy to understand information about your health questions or concerns	202	10	1								
		Definitely	Somewhat	No	No Answer							
7	Did your provider explain things in a way that was easy to understand	205	7	1								
		Definitely	Somewhat	No	No Answer							
8	Did your provider show respect for what you had to say	209	4									
		Definitely	Somewhat	No	No Answer							
9	Did your provider spend enough time with you	207	6									
		0	1	2	3	4	5	6	7	8	9	10
10	Using a number between 0(worst) and 10 (best), what would you rate your provider			1					5	18	36	154
		Definitely	Somewhat	No	No Answer							
11	Would you recommend this provider's office to your family and friends	205	7									
		Yes	No	No answer	N/A							
12	During your most recent visit, did your provider order a blood test, x-ray, or other test for you	147	61	5								
		Yes	No	No answer	N/A							
13	Did someone form the provider's office follow up to give you those results	148	14	8	43							
		Definitely	Somewhat	No	No Answer							
14	During your most recent visit, were the clerks/receptionists as helpful as you thought they should be	206	5	1	1							
		Definitely	Somewhat	No	No Answer							
15	Did they treat you with courtesy and respect	206	4	2	1							
		none	1	2	3	4	5-9	10 or >	no answer			
16	How many times in the last 12 months did you see your provider	2	22	23	38	61	38	10	19			
		Never	Sometimes	Usually	Always	no answer	n/a					
17	If you called for an appointment for illness/injury, how often did you get one as soon as you needed	3	2	67	127	13	2					
		Never	Sometimes	Usually	Always	no answer	n/a					
18	If you called to schedule a check-up, how often did you get an appointment as soon as you needed	1	2	50	140	18	2					

Patient Satisfaction Survey
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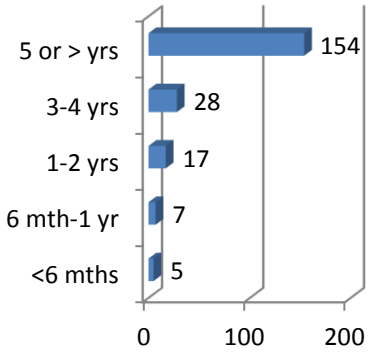
		Yes	No	No answer	N/A							
19	Did you call your provider's office with a medical question during regular office hours	117	84	12								
		Never	Sometimes	Usually	Always	no answer	n/a					
20	If so, how often did you get an answer to your question that same day	1	15	37	83	13	53					
		Yes	No	No answer	N/A							
21	Did you call your provider's office with a medical question after regular office hours	27	168	17	1							
		Never	Sometimes	Usually	Always	no answer	n/a					
22	If so, how often did you get an answer to your question as soon as you needed	1	4	13	22	13	160					
		Never	Sometimes	Usually	Always	no answer	n/a					
23	How often in the last 12 months did you see this provider within 15 minutes of your appointment time	4	14	86	91	16	2					
		Excellent	Very Good	Good	Fair	Poor	no answer					
24	How would you rate your overall health	23	60	75	36	5	14					
		Excellent	Very Good	Good	Fair	Poor	no answer					
25	How would you rate your mental or emotional health	54	64	57	18	2	18					
		18-24	25-34	35-44	45-54	55-64	65-74	75 or >	no answer			
26	What is your age	2	15	17	34	39	54	38	23			
		Male	Female	no answer								
27	Are you male or female	75	123	15								
		8th grade or<	some HS, no grad	HS grad/GED	college/2 yr	4 yr college	>4 yr college	no answer				
28	What is the highest level of school that you completed	11	21	77	48	23	16	17				
		White	Black/African Amer	Asian	Native Hawaiia	Amer Indian	other	no answer				
29	What is your race	192	5	1		1		14				
		Yes	no	no answer								
30	Are you of Hispanic or Latino origin or descent	4	194	15								
		yes	no	no answer	n/a							
31	Did someone help you complete this survey	17	182	14								
		read questions	wrote answers I gav	answered for m	translated	other ways	no answer	n/a				
32	How did the person help you	3	6	6		1	15	182				

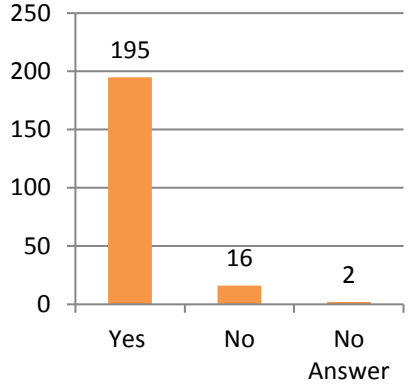
FMA- Practice wide

Patient Satisfaction Survey
Results

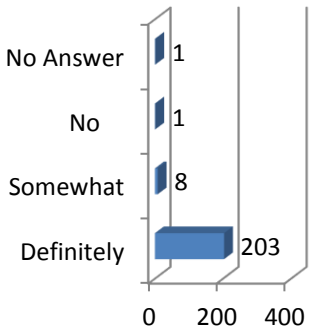
Feb 2014



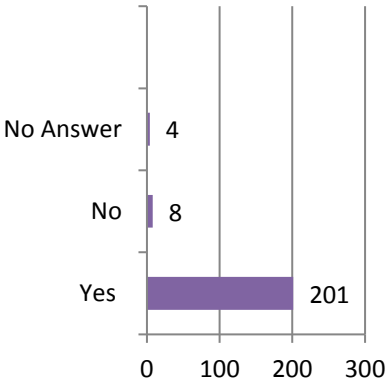
How long have you been going to this provider



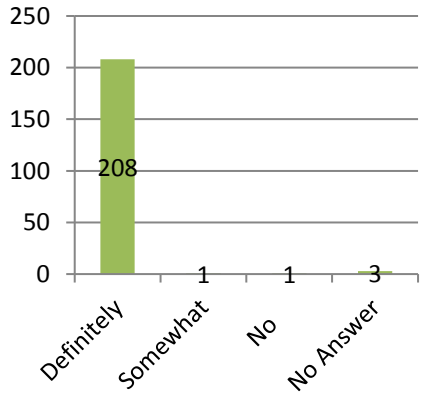
During your most recent visit, did you see your provider within 15 minutes of your appointment time



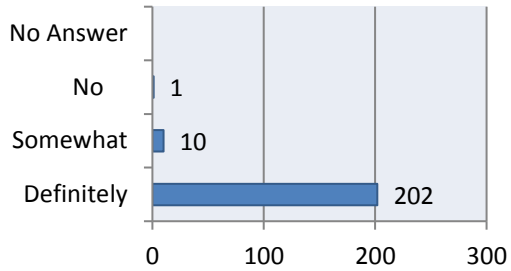
Did your provider seem to know the important information about your medical history



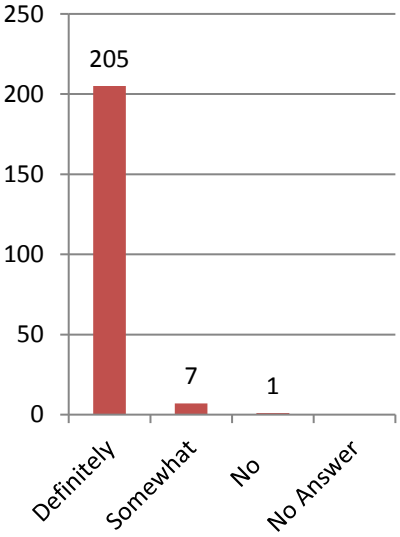
Did you talk to your provider about health questions or concern



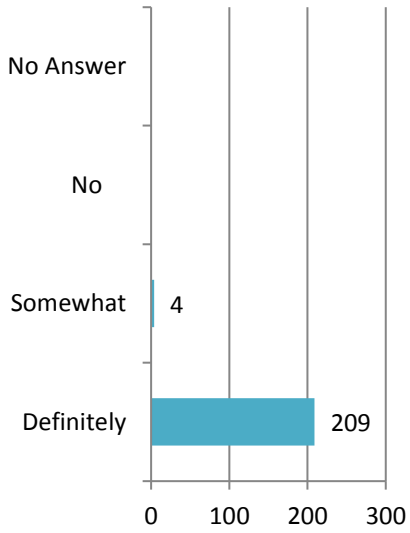
Did your provider listen carefully to you



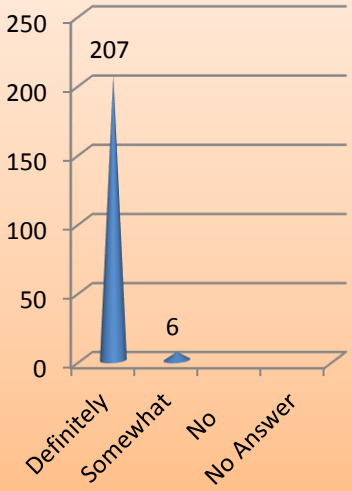
Did your provider give you easy to understand information about your health questions or concerns



Did your provider explain things in a way that was easy to understand



Did your provider show respect for what you had to say



Did your provider spend enough time with you

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Results

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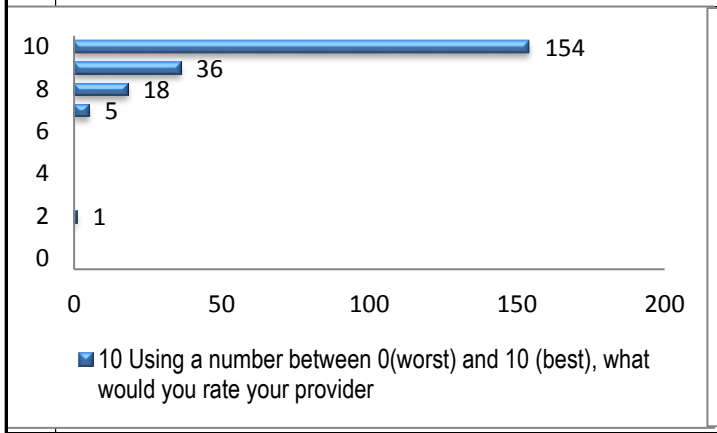
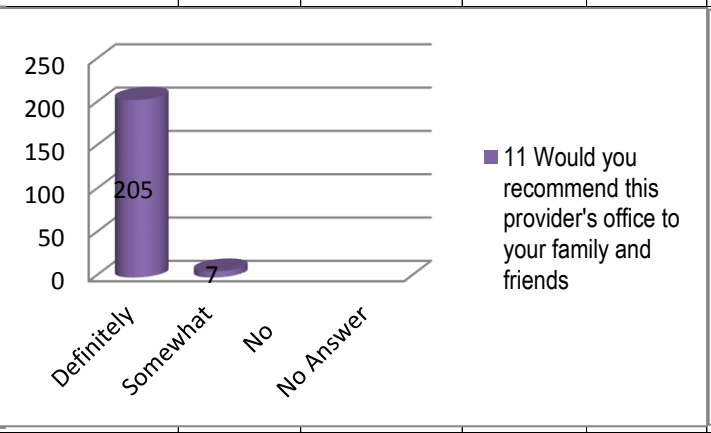
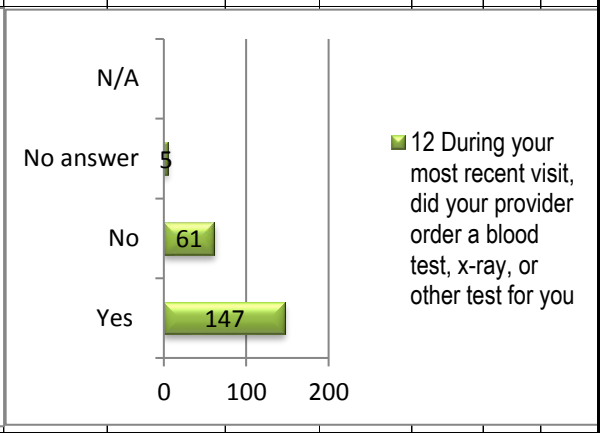
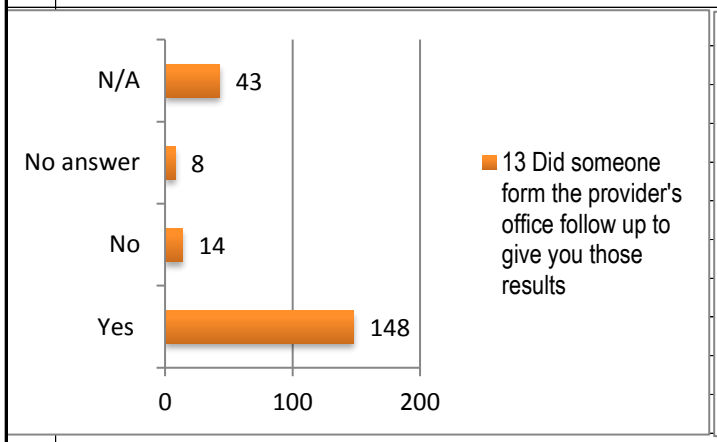
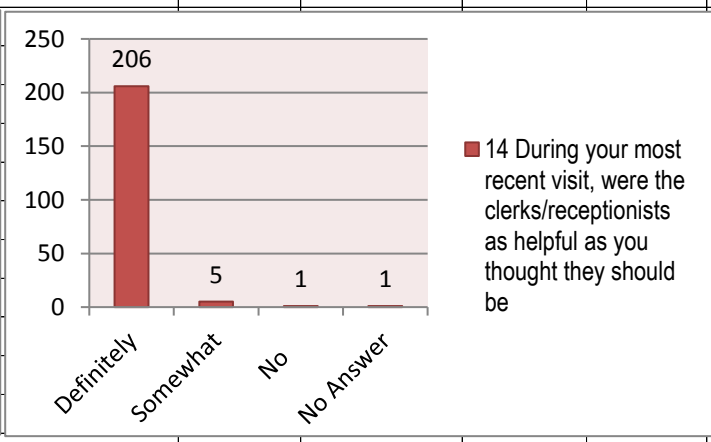
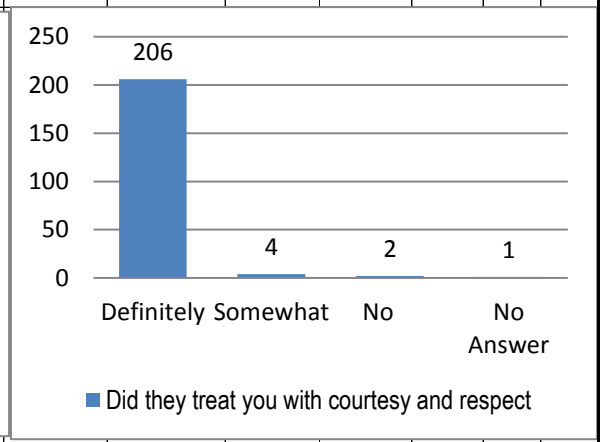


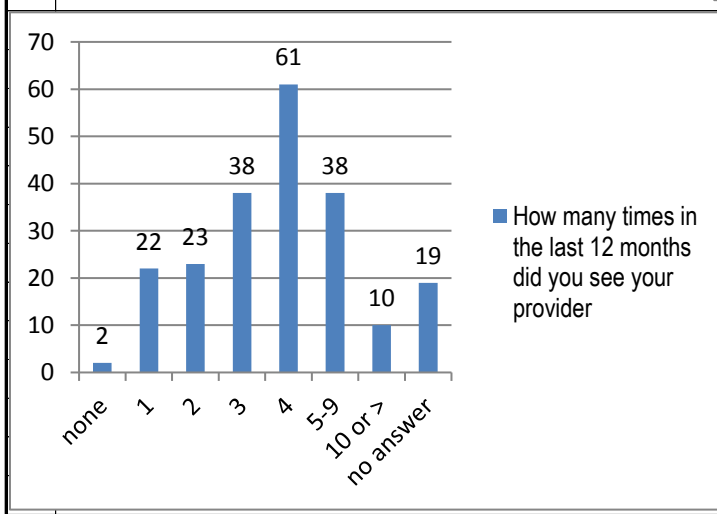


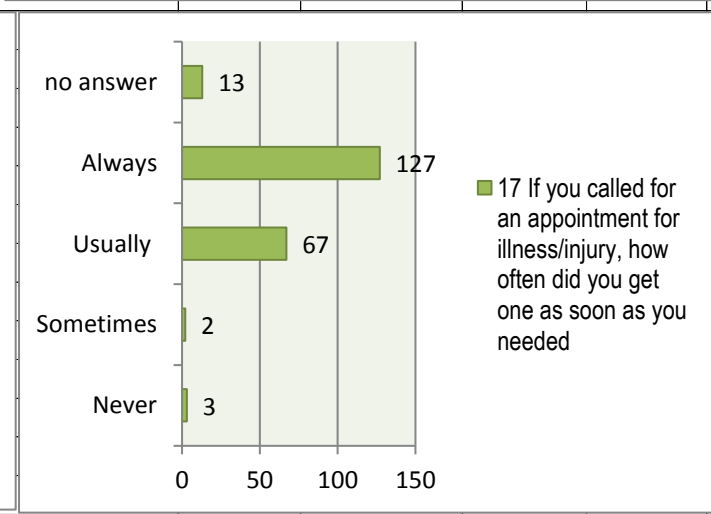


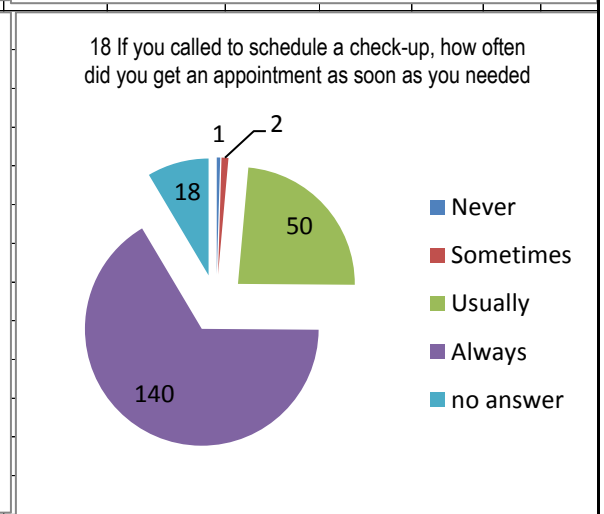




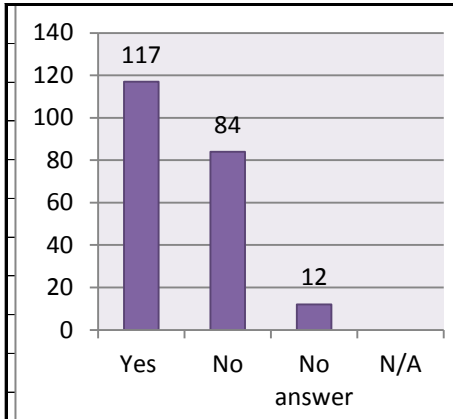




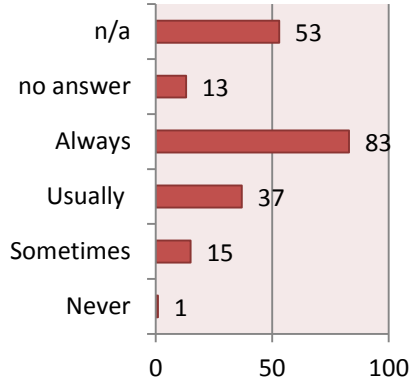




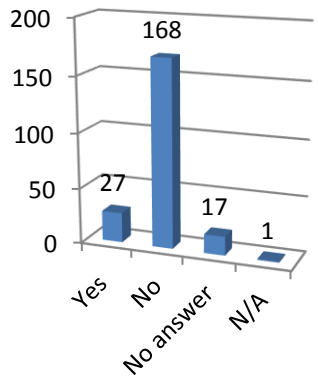
Patient Satisfaction Survey Results



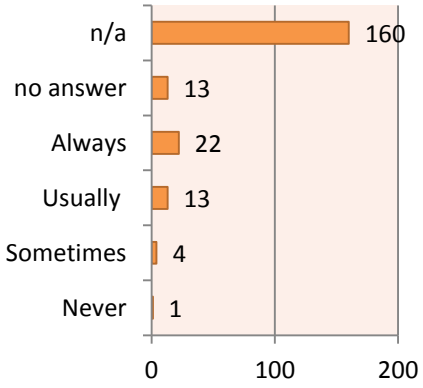
19 Did you call your provider's office with a medical question during regular office hours



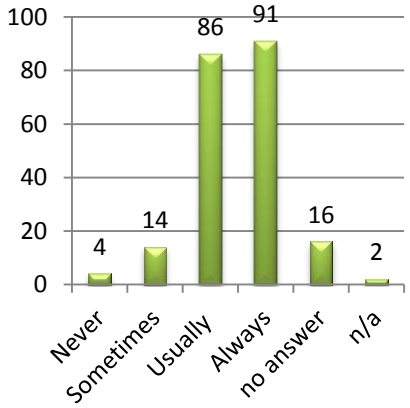
20 If so, how often did you get an answer to your question that same day



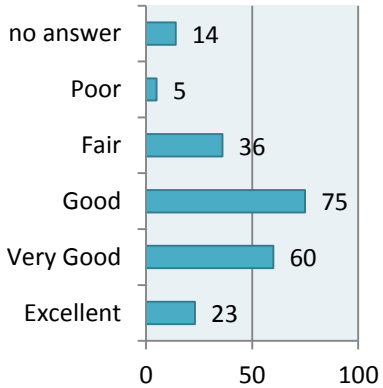
21 Did you call your provider's office with a medical question after regular office hours



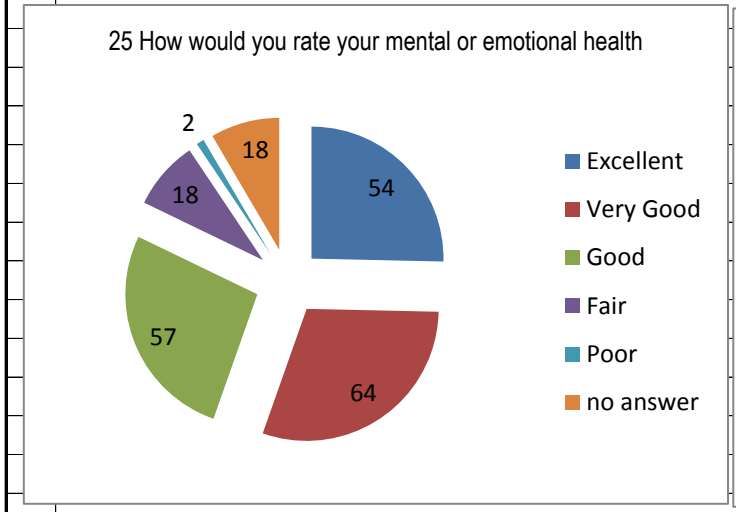
22 If so, how often did you get an answer to your question as soon as you needed

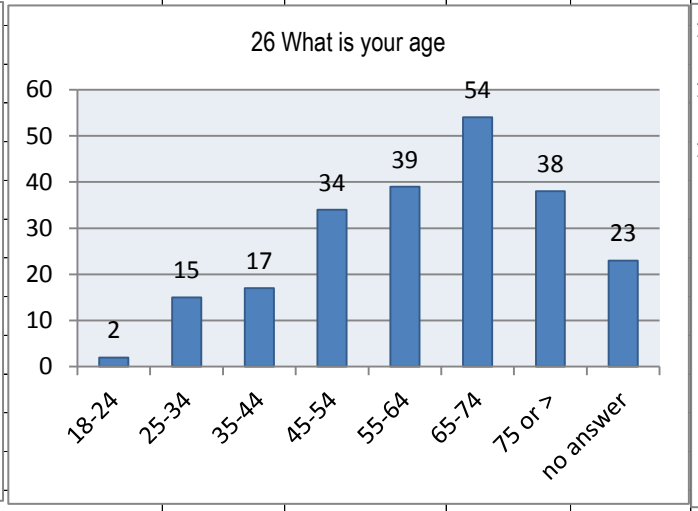


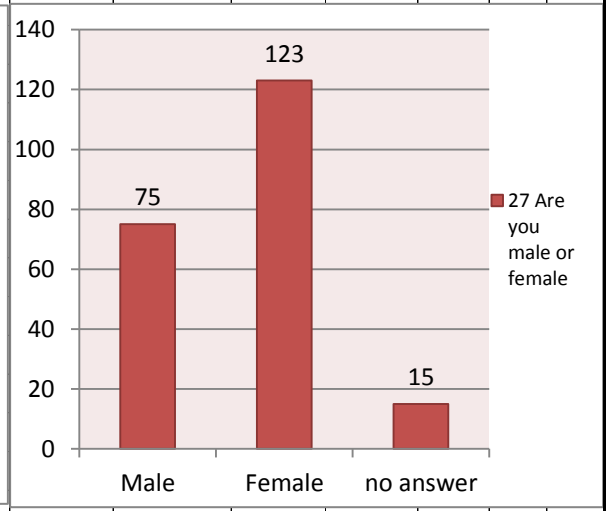
23 How often in the last 12 months did you see this provider within 15 minutes of your appointment time



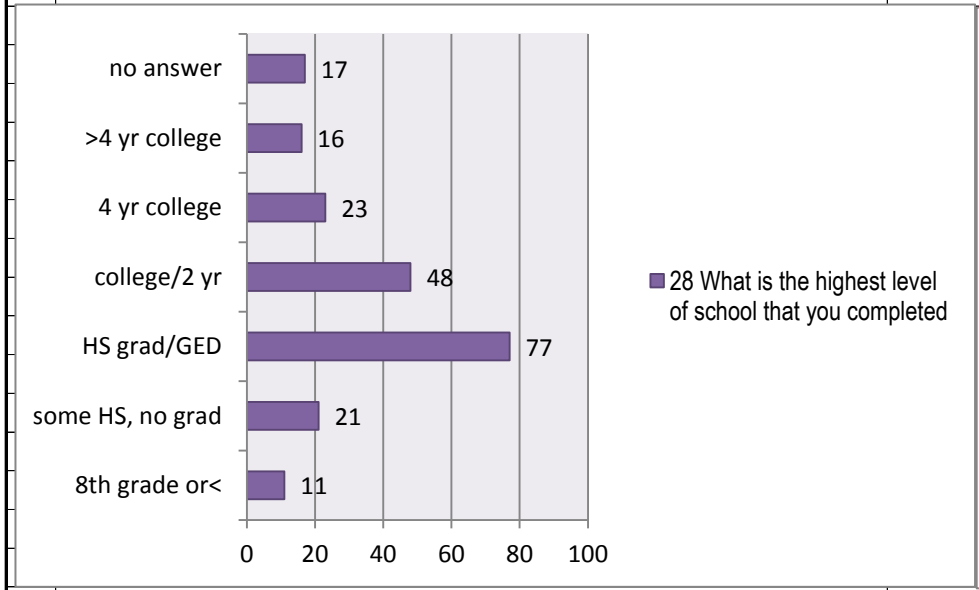
24 How would you rate your overall health

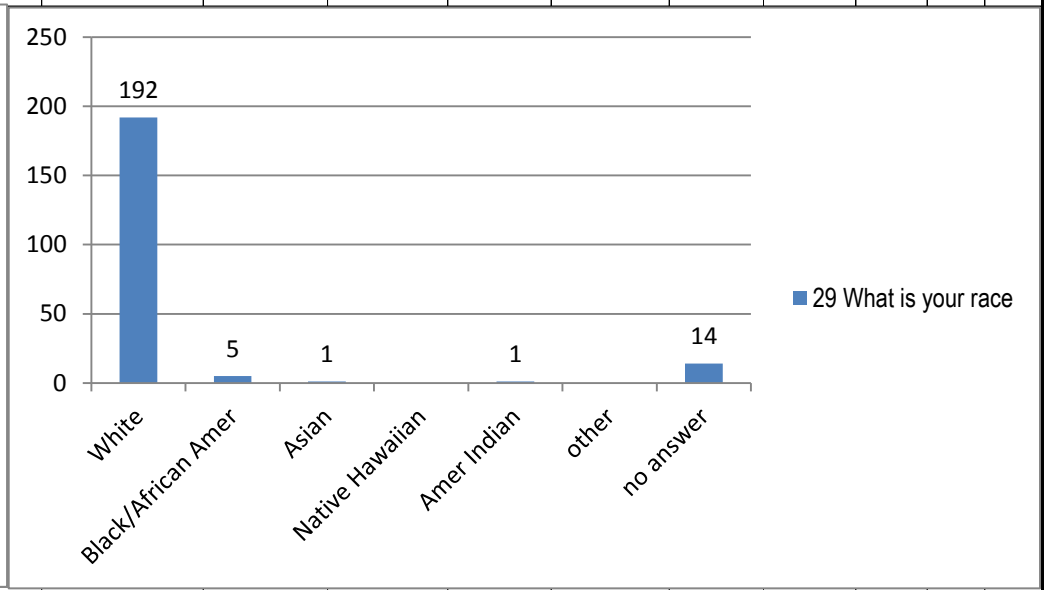


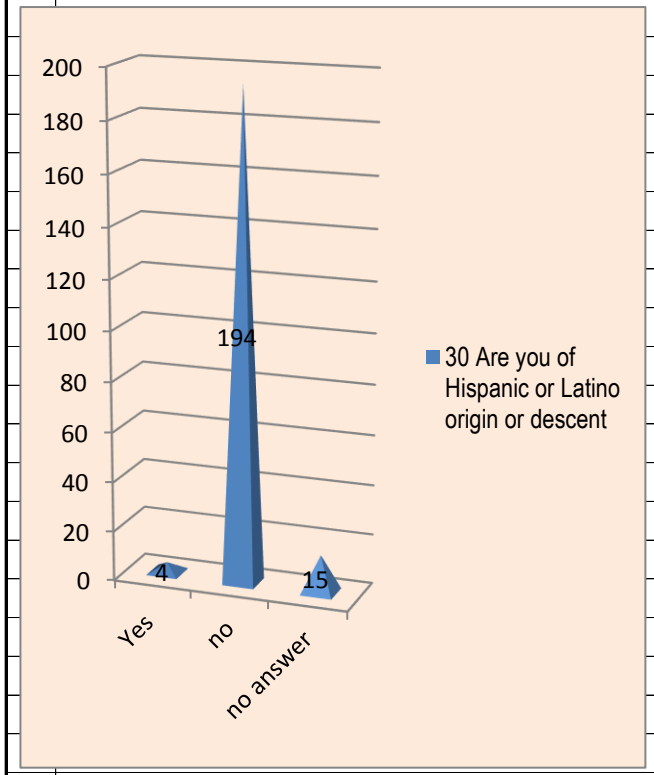


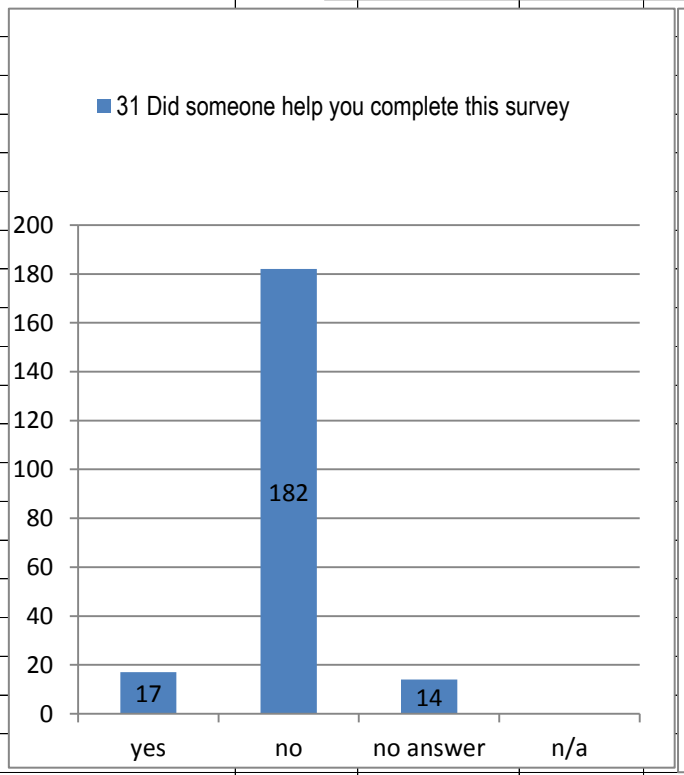


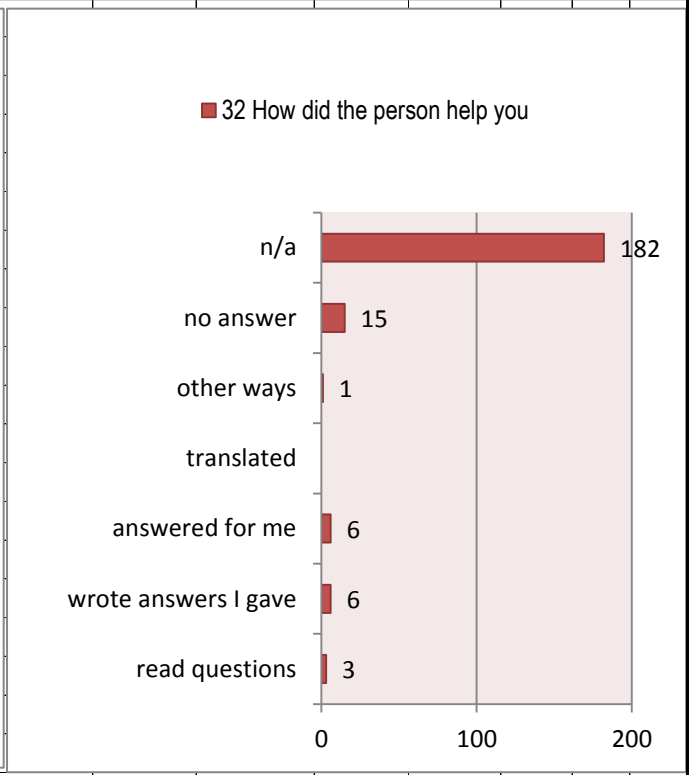
27 Are you male or female


no answer
>4 yr college
4 yr college
college/2 yr
HS grad/GED
some HS, no grad
8th grade or<
17
16
23
48
77
21
11
0
20
40
60
80
100
28 What is the highest level of school that you completed


250
200
150
100
50
0
192
5
1
1
14
White
Black/African Amer
Asian
Native Hawaiian
Amer Indian
other
no answer
29 What is your race


200
180
160
140
120
100
80
60
40
20
0
194
4
15
Yes
no
no answer
30 Are you of Hispanic or Latino origin or descent


31 Did someone help you complete this survey
200
180
160
140
120
100
80
60
40
20
0
17
182
14
yes
no
no answer
n/a


32 How did the person help you
n/a
no answer
other ways
translated
answered for me
wrote answers I gave
read questions
182
15
1
6
6
3
0
100
200