

Satisfaction Survey

The following questions help the care team understand how you feel about the medical care that you receive. It allows us to evaluate how we are doing and makes changes as needed. The survey will take 5 minutes for you to complete. Your input is very valuable to us and we encourage everyone to complete.

Directions: On the following pages are some things that people say about medical care. Please read each one carefully, keeping in mind the medical care that you are receiving now. (If you have not received care recently, think about what you would expect if you needed care today.) We are interested in your feelings, good and bad, about the medical care that we have provided to you.

Please circle one.

1. The care team at MKC are good about explaining the reason for medical tests and treatments.

Strongly Disagree		1-----2-----3-----4-----5	Strongly Agree	
1	2	3	4	5

If strongly disagree, please describe: _____

2. The care team at MKC make it easy for me to understand my current kidney function.

Strongly Disagree		1-----2-----3-----4-----5	Strongly Agree	
1	2	3	4	5

If strongly disagree, please describe: _____

3. The care team at MKC make it easy for me to know how I care for myself.

Strongly Disagree		1-----2-----3-----4-----5	Strongly Agree	
1	2	3	4	5

If strongly disagree, please describe: _____

4. I feel certain that I can get the medical care that I need without being set back financially.

Strongly Disagree		1-----2-----3-----4-----5	Strongly Agree	
1	2	3	4	5

If strongly disagree, please describe: _____

Please see reverse side

5. With the MKC team, I have easy access to the medical specialists that I need.

Strongly Disagree 1-----2-----3-----4-----5 Strongly Agree

1	2	3	4	5
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If strongly disagree, please describe: _____

6. At MKC, I feel that my needs are met in a timely manner.

Strongly Disagree 1-----2-----3-----4-----5 Strongly Agree

1	2	3	4	5
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If strongly disagree, please describe: _____

7. The doctors and care managers at MKC treat me in a very friendly and courteous manner

Strongly Disagree 1-----2-----3-----4-----5 Strongly Agree

1	2	3	4	5
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If strongly disagree, please describe: _____

8. Doctors and care providers at MKC spend plenty of time with me.

Strongly Disagree 1-----2-----3-----4-----5 Strongly Agree

1	2	3	4	5
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If strongly disagree, please describe: _____

9. I am completely satisfied with the medical education and care I receive at MKC.

Strongly Disagree 1-----2-----3-----4-----5 Strongly Agree

1	2	3	4	5
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If strongly disagree, please describe: _____

10. What other services would you like to see at Malama Kidney Center? (Please describe)
