

Real Time Patient Experience Survey

Trauma Clinic Questions

- 1) What is your overall level of satisfaction with your care experience? (Mandatory)



- 2) I am completing this survey

As a patient, As a patient with my family support or caregiver, As a family or caregiver of a patient

- 3) Did we give you enough information to prepare for the visit?

Yes, No, Does not apply to me

- 4) **How often do** we treat you with courtesy and respect? (Mandatory)

Always, Very often, Not often, Never

- 5) How satisfied are you with how quickly the healthcare team responded to your needs and concerns?

Very satisfied, Satisfied, Dissatisfied, Very dissatisfied

- 6) If there were delays to your visit, did we explain why?

Yes, No, Not sure, **Prefer not to answer**

- 7) **How often are** things explained to you in a way you can easily understand?

Always, Very often, Not often, Never

- 8) **How often are** our staff approachable and open to answer your questions?

Always, Very often, Not often, Never, Not applicable

- 9) Are staff sensitive to your cultural values **and those of your family** (language, culture traditions, beliefs, etc?)

Always, Very often, Not often, Never

- 10) If we gave you written instructions, were they easy to understand?

Yes, they were easy to understand; No, they were not easy to understand; No, they were not written in my language

- 11) Is there anything we could have done differently to improve your care experience?

- 12) Is there someone you would like to thank for providing excellent care?