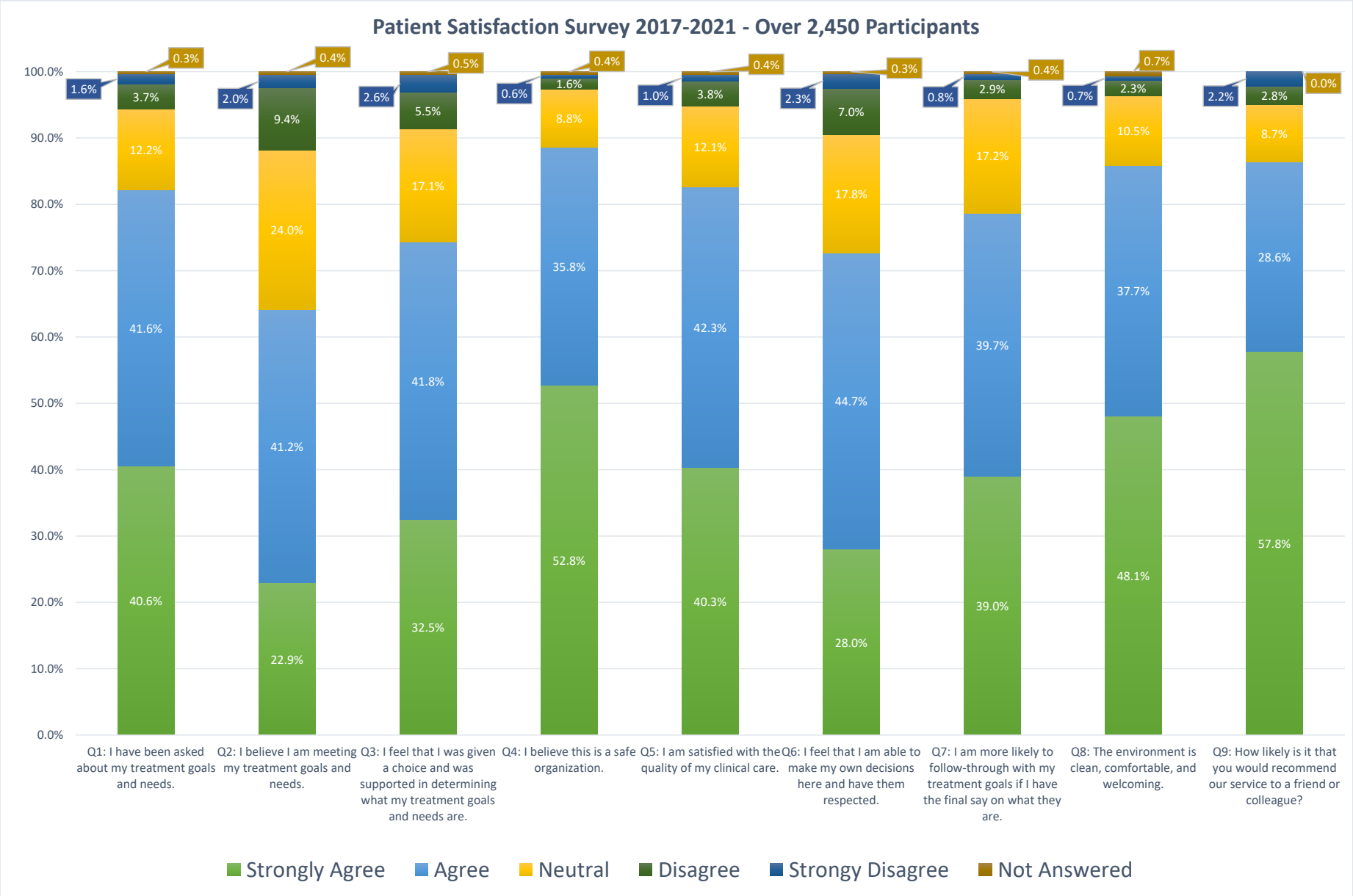
Patient Satisfaction Survey 2017-2021 - Over 2,450 Participants
100.0%
90.0%
80.0%
70.0%
60.0%
50.0%
40.0%
30.0%
20.0%
10.0%
0.0%
Q1: I have been asked about my treatment goals and needs.
Q2: I believe I am meeting my treatment goals and needs.
Q3: I feel that I was given a choice and was supported in determining what my treatment goals and needs are.
Q4: I believe this is a safe organization.
Q5: I am satisfied with the quality of my clinical care.
Q6: I feel that I am able to make my own decisions here and have them respected.
Q7: I am more likely to follow-through with my treatment goals if I have the final say on what they are.
Q8: The environment is clean, comfortable, and welcoming.
Q9: How likely is it that you would recommend our service to a friend or colleague?
Strongly Agree
Agree
Neutral
Disagree
Strongy Disagree
Not Answered