

Site of Survey NAME OF PRACTICE		Date of Visit				
Name of Doctor		1 - Low Satisfaction	2	3	4	5 - High Satisfaction
When requesting an appointment, my child is / I am always given the opportunity to see their primary physician.		1	2	3	4	5
The office coordinates my / my child's care so that we can see all the medical personnel we need to see and get all the tests we need during one visit.		1	2	3	4	5
I am able to get an appointment for myself or my child as soon as we need it, including Same-Day.		1	2	3	4	5
When I call the office for advice or help, I get a call back on the same day, if my / my child's doctor is in the office.		1	2	3	4	5
When I call the doctor's office with a medical emergency, I get a response from the doctor within a reasonable amount of time, 24 hours a day, 7 days a week		1	2	3	4	5
My / my child's doctor's office provides me with the ability to send secure emails requesting advice or help, and my emails are responded to within a reasonable amount of time		1	2	3	4	5
My / my child's doctor's office provides me with an interactive patient web portal that is helpful to us		1	2	3	4	5
My / my child's doctor's office provides us with language services when we need them.		1	2	3	4	5
The doctor that me / my child saw today communicates well and cares about me / my child.		1	2	3	4	5
Staff is skillful, helpful, and respectful, and answers my questions		1	2	3	4	5
My / my child's Care Team gives us easy to understand instructions about taking medicines and possible side effects		1	2	3	4	5
My / my child's doctor's office helps me make appointments with labs and specialists.		1	2	3	4	5
My / my child's doctor's office follows up with me regarding test results		1	2	3	4	5
My / my child's doctor's office helps me identify health insurance resources when I need them.		1	2	3	4	5
My / my child's doctor's office has a list of community resources that can help me care for myself / my child		1	2	3	4	5
My / my child's doctor discusses personal problems, family problems, alcohol or drug use with us.		1	2	3	4	5
My / my child's doctor discusses mental or emotional illness with us		1	2	3	4	5
My / my child's doctor discusses my / my child's specific health goals and barriers with us		1	2	3	4	5
My / my child's Care Team helps us make choices for better habits and health for myself / my child		1	2	3	4	5
My / my child's Care Team works with us on my / my child's care needs, and supports our self-management.		1	2	3	4	5