






Experience-based survey template

How do you feel about your overall experience?

Please tick the box next to the face which best represents your feelings.

Your comments?

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About you:

This survey is part of a wider project called Hardwiring for Excellence. If you would like to learn more about this project then write your details below and we'll be in touch.

Your contact details (optional):

Name:

Address:

Phone:

E-mail:

About us:

This survey aims to better understand patient experiences in order to improve the way Waitemata DHB works.

The contact person is Karen Frederickson,
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or 486-8920 x2614 or 021784 296



Our core values: Customer Focus 'eye' | Integrity 'sunrise' | Compassion 'bird' | Respect 'koru' | Openness 'flower'

HOW DO YOU FEEL?

We want to understand what it feels like to attend our Outpatient Clinics.

We invite you to fill in this survey so we can improve our services.

Complete the form now and put it in the box or post it back to us.

This is a confidential survey and it's your choice whether you take part.

Whatever you do won't affect your treatment.

Thanks for your help.
The Outpatient Clinic Staff



This template is an example of a survey brochure created by the Waitemata District Health Board in order to better understand patient experiences. You can use this example to help develop your own survey.

Note: there are two pages to this PDF. This survey example is of a double sided A4 folded into three.

Template URL

www.healthcodesign.org.nz/tools/tool3c.pdf

Experience-based survey template

Your Outpatient Clinic Experience

Are you a patient? Or family/whanau/friend?



How did you feel about...?

This page is intended to help you think about how you feel at different stages in your journey through your Outpatient Clinic appointment. Please tick the box next to the face which best represents your feelings at each stage.

Arriving/Checking in	Waiting	Procedure (if required)	Clinic appointment	Information	Leaving
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

How can we make it better? Please write down what you would like to see improved.

_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____