

45. Tell us what we do best here.

46. Tell us what improvements would make things better for you here.

47. Please add any additional comments you would like us to hear.

69. Do you want someone to contact you about your comments? Yes No
 If so, please be sure to include your name:

Name: _____ Date: _____
 (Optional) (Optional)

Phone: _____ E-mail Address: _____
 (Optional) (Optional)

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2010 NURSING FACILITY RESIDENT SATISFACTION SURVEY

Thinking about your overall experience here, how would you rate the following characteristics of this community?

	VERY GOOD	GOOD	AVERAGE	POOR	VERY POOR
1. The quality of the medical and nursing care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. The living environment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. The way I am treated	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. The service provided to me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. The quality of my life here	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. The staff of the community	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Thinking about the atmosphere and the environment at this community, please indicate your agreement or disagreement with the following statements:

	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE
7. This community has a home-like atmosphere	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. The noise level in this community does not bother me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. This community is odor free	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. This community is clean and neat	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. Furniture and equipment are in good condition	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. I feel safe here	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. My personal items are safe here	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Thinking about services provided to you at this community, please indicate your agreement or disagreement with the following statements:

	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE
14. I can get help when I need it	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15. This community offers a good variety of activities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16. My laundry is done properly	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17. The activity programs meet my needs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

DO NOT SEPARATE PAGES

Thinking about the quality of your life at this community, please indicate your agreement or disagreement with the following statements:

	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE
18. I am encouraged to do things for myself	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
19. I know who to talk to if I have a problem	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
20. I can make choices about my daily routine	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
21. My privacy is respected	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
22. The food is good	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Thinking about the care and treatment you receive at this community, please indicate your agreement or disagreement with the following statements:

	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE
23. I receive excellent nursing care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
24. My medications are given correctly	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
25. The nurses treat me with dignity and respect	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Thinking about your personal care needs... like help going to the toilet, bathing, dressing and getting around:

	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE
26. I get the help I need with personal care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Thinking about how you've been feeling lately, please answer the following questions:

27. I would rate my overall health as	VERY GOOD	GOOD	AVERAGE	POOR	VERY POOR
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
28. I have pain	MOST OF THE TIME	SOMETIMES	SELDOM	NEVER	
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
29. When I have pain, I would describe my pain as	SEVERE	MODERATE	MILD	VERY MILD	DOES NOT APPLY
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
30. Staff notices or asks about my pain	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE	
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
31. When I am in pain, staff tries to help relieve my pain	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE	DOES NOT APPLY
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Thinking about the staff at this community, please indicate your agreement or disagreement with the following statements:

	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE
32. The staff take time to listen to me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
33. The staff treat me with dignity and respect	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
34. The staff respond right away when I call for help	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
35. The staff are friendly and courteous	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
36. The staff are gentle when they care for me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
37. The staff care about me as a person	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
38. The staff seem happy to be working here	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

OVERALL SATISFACTION

	VERY SATISFIED	SATISFIED	NEITHER SATISFIED NOR DISSATISFIED	DISSATISFIED	VERY DISSATISFIED
39. In general, how satisfied are you with this community?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

OVERALL RECOMMENDATION

	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE
40. I would recommend this community to others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

41. What is your gender? Select one.

Male Female

42. How old were you on your last birthday? Select one.

Less than 65 years of age 75-84 years of age More than 94 years of age
 65-74 years of age 85-94 years of age

43. How long have you lived at this community? Select one.

Less than 1 year 1-5 years 6-10 years More than 10 years

44. Who helped you complete this survey? Select one.

no one/completed myself a fellow resident a volunteer
 a family member a friend