

VISN 12 Telephone Care Services Satisfaction Survey

OMB No. 2900-0770 Estimated Burden: 10 minutes Expiration Date: 9/30/2020

The Paperwork Reduction Act of 1995: This information is collected in accordance with section 3507 of the Paperwork Reduction Act of 1995. Accordingly, we may not conduct or sponsor and you are not required to respond to, a collection of information unless it displays a valid OMB number. We anticipate that the time expended by all individuals who complete this survey will average 10 minutes. This includes the time it will take to follow instructions, gather the necessary facts and respond to questions asked. Customer satisfaction is used to gauge customer perceptions of VA services as well as customer expectations and desires. The results of this telephone/mail survey will lead to improvements in the quality of service delivery by helping to achieve services. Participation in this survey is voluntary and failure to respond will have no impact on benefits to which you may be entitled.

William S. Middleton Memorial Veterans Hospital and Clinics Telephone Care Services Patient Satisfaction Survey

THE PAPERWORK REDUCTION ACT OF 1995 requires us to notify you that this information collected is in accordance with the clearance requirements of section 3507 of this Act. The public reporting burden for this collection of information is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. No person will be penalized for failing to furnish this information if it does not display a currently valid OMB control number. This collection of information is intended to fulfill the need identified by the Department of Veterans Affairs in their call for the development of needed improvements to the current VISN 12 Telephone Care Services program. Your obligation to respond to this survey is voluntary and failure to furnish this information will have no effect on any of your benefits.

For each item identified below, please circle the number best fits your level of satisfaction with Telephone Care Services.

Courtesy Courtesy of the nurse/clerk to whom you spoke on the phone	1	very poor	2	2	poor	3	fair	4	good	5	very good
Promptness Promptness with which the telephone was answered	1	very poor	2	2	poor	3	fair	4	good	5	very good
If a return call was needed, degree to which a nurse returned your call within an acceptable amount of time	1	very poor	2	2	poor	3	fair	4	good	5	very good
Listening How well nurse listened to your concerns	1	very poor	2	2	poor	3	fair	4	good	5	very good
Education Understandability of the nurse's advice	1	very poor	2	2	poor	3	fair	4	good	5	very good
Usefulness of the information given by the clerk	1	very poor	;	2	poor	3	fair	4	good	5	very good
Other Adequacy of time spent on phone with nurse	1	very poor	2	2	poor	3	fair	4	good	5	very good
Degree to which staff identified themselves to you	1	very poor		2	poor	3	fair	4	good	5	very good
How well your needs were met by using Telephone Care Services	1	very poor	2	2	poor	3	fair	4	good	5	very good
Your likelihood of calling the Telephone Care Services again	1	very poor	2	2	poor	3	fair	4	good	5	very good
Overall service provided by the Telephone Care Services	1	very poor		2	poor	3	fair	4	good	5	very good

Comments: