

CCFHC
Patient Satisfaction Survey

30. Please estimate your wait time once you checked in with staff.

- 0-15 min 15-30 min 30-45 min 45-60 min more than 60 min

31. Time of day you visited the clinic

- Morning Afternoon Evening

32. Why did you choose CCFHC?

- Convenient location No Insurance Great Physician & Staff
 Affordable It was recommended Hours Opened

33. What do you like about the health center? _____

34. What do you not like about the health center? _____

35. What times and days of the week are convenient for your appointments? _____

36. Would you return to the center for future care? Yes No
If no, please tell us why: _____

37. Would you refer others to our center? Yes No
If no, please tell us why: _____

38. Please share your suggestion for improvement with us:

Please provide your contact information to us if you would like for someone at Capitol City Family Health Center to follow up with you:

THANK YOU!