

1.8.2 CLIENT SURVEY

POLICY:

Each subrecipient must collect a minimum of ten surveys each quarter using the Client Survey. The QA committee determines the client survey template.

PROCEDURE:

Each subrecipient will determine when and how the surveys are to be completed. (e.g., 4 initial visits, 4 annual visits, 2 problem visits or every 15th appointment until 10 surveys are completed)

After the 10 or more surveys are collected, subrecipient staff should complete the fillable pdf form, "Survey Results Form, Individual Site", using Adobe Reader.

Submit client survey results report to the ND FPP nurse consultant by January 15th, April 15th, July 15th, and October 15th, respectively.

The state office will review the client surveys and notify the agency if a plan of action is needed.

RESOURCES:

Patient Satisfaction Survey (English)

https://www.hhs.nd.gov/sites/www/files/documents/rhntc patient sat survey 12-10-2021.pdf

*RHNTC: Patient Satisfaction Survey

Patient Satisfaction Survey (Spanish)

RHNTC: Encuesta de satisfacción del paciente con una cita de telesalud

Survey Results Form

https://www.hhs.nd.gov/sites/www/files/documents/DHS%20Legacy/Survey Results Form Individual

Site - Fillable 2.pdf

Effective Date: August 2023 Last Reviewed: June - July 2023 Next Scheduled Review: July 2024