

# Spring Satisfaction Survey

*Student Health Services*

January 1<sup>st</sup>, 2017 – May 5<sup>th</sup>, 2017

**Q1 - How did you hear about Student Health Services? (Check all that apply: please scroll)**

#	Answer	Count
1	Flyer/poster	2
2	Walking by	29
3	Web page	11
4	Referral by staff/faculty	10
5	Referral by friends/other students	28
6	Orientation	38
7	Newspaper	0
8	Other (please specify)	4
	Total	122

**Q2 - Which of the following was the reason for your visit to Student health Services today? (Check all that apply, please scroll)**

#	Answer	Count
1	Cold/cough symptoms (sore throat, runny nose)	45
2	Fatigue	3
3	Allergies	8
4	Birth Control	10
5	Stress	3
6	Yearly exams (e.g., women's health/men's health)	2
7	Sexual health testing (e.g., HIV, STD testing)	8
8	Urinary Tract Infection	10
9	Other (please specify)	33
	Total	122

Other (please specify)

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Rash

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Pain

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Headache and arm pain

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Rash

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Jaw pain

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Laryngitis

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Foot

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Lower back problems

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Bug bite

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Skin infection

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Dizzy headache foggy vision heavy  
feeling body

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Ear pain

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Wrist pain

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Infected eye

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Staff infection

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Pink eye

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Knots/lumps on neck

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Vagina burns

---

Throat pain

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Spasm

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Refill

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Knee

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Strep

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A bump on finger

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Strained muscle

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Impetigo

### Q3 - Did you have an appointment?

#	Answer	Count
1	Yes	82
2	No	40
	Total	122

### Q4 - Please indicate your level of agreement with the follow statements: I was able to schedule an appointment around my current activities. (Please scroll)

#	Answer	Count
1	Strongly agree	77
2	Agree	33
3	Neither Agree nor Disagree	11
4	Disagree	0
5	Strongly Disagree	0
	Total	121

### Q5 - I am confident my interactions with Student Health Services staff will be confidential.

#	Answer	Count
1	Strongly agree	91
2	Agree	30
3	Neither Agree nor Disagree	1
4	Disagree	0
5	Strongly Disagree	0
	Total	122

**Q6 - The staff members treated me with respect.**

#	Answer	Count
1	Strongly agree	98
2	Agree	23
3	Neither Agree nor Disagree	0
4	Disagree	0
5	Strongly Disagree	0
	Total	121

**Q7 - The staff members were welcoming.**

#	Answer	Count
1	Strongly agree	97
2	Agree	22
3	Neither Agree nor Disagree	3
4	Disagree	0
5	Strongly Disagree	0
	Total	122

**Q8 - The staff members acted professionally.**

#	Answer	Count
1	Strongly agree	96
2	Agree	25
3	Neither Agree nor Disagree	0
4	Disagree	1
5	Strongly Disagree	0
	Total	122

**Q9 - Please indicate your satisfaction level with the following: (Please scroll) Hours of operation.**

#	Answer	Count
1	Very Satisfied	79
2	Satisfied	33
3	Somewhat Satisfied	5
4	Neutral	3
5	Somewhat Dissatisfied	0
6	Dissatisfied	2
7	Very Dissatisfied	0
	Total	122

**Q10 - Courtesy and professionalism of the provider.**

#	Answer	Count
1	Very Satisfied	86
2	Satisfied	31
3	Somewhat Satisfied	3
4	Neutral	2
5	Somewhat Dissatisfied	0
6	Dissatisfied	0
7	Very Dissatisfied	0
	Total	122

**Q12 - Please indicate your overall level of satisfaction with your experience at Student Health Services.**

#	Answer	Count
7	Very Satisfied	92
6	Satisfied	24
5	Somewhat Satisfied	3
4	Neutral	2
3	Somewhat Dissatisfied	0
2	Dissatisfied	0
1	Very Dissatisfied	0
	Total	121

**Q11 - Respect for your personal privacy during the examination/treatment.**

#	Answer	Count
1	Very Satisfied	90
2	Satisfied	26
3	Somewhat Satisfied	4
4	Neutral	2
5	Somewhat Dissatisfied	0
6	Dissatisfied	0
7	Very Dissatisfied	0
	Total	122

**Q13 - Do you have any additional comments or suggestions?**

#	Answer	Count
1	Yes (please specify)	2
2	No	118
	Total	120

Yes (please specify)

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I have been helped greatly by you all and I really appreciate it