

'Chain Partner Satisfaction Survey'
< Name Organisation >

Dear Chain Partner,

With this survey we like to measure the quality of the care delivered by our organisation. It is important for us to know what you think of our services. Your assessment of a number of essential items enables us to improve our services.

Question:	Not at all likely	Unlikely	Neutral	Likely	Extremely Likely
1. The provided physiotherapeutic care is to your complete satisfaction.					
2. The content and relevancy of the 'back' reporting are good.					
3. The potentially added measure-/test results are very meaningful.					
4. You redirect very specific indications to our organisation.					
5. Your clients are very positive about <Name Organisation>.					
6. You are satisfied about the process 'Directly Accessible Physiotherapy'.					

7. What are your expectations of < Name Organisation >?

8. Do you prefer to receive additional information on 'Directly Accessible Physiotherapy'?

Yes

No

9. As a Care redirector, do you like to share comments, ideas and/or improvements in relation to our services? We really like to hear your thoughts !

For potential personal feedback on the results, please fill in your name and organisation.

Name: _____ Organisation: _____

We like to thank you for your cooperation !!

The team of < Name Organisation >.

Background information

Implementation Direct Accessibility Physiotherapy, improvement cooperation Partners in the whole Chain.

1. Design 1 A4 with questions, to be quick and easy populated > maximum time 5 minutes.
 2. Send questionnaire to Chain Partners, addressed in the provided contact list.
 3. Attach prepaid reply envelope addressed to Ask Advise & Consultancy.
 4. Provide a rapport with results, conclusions and recommendations.
 5. Provide us information which Chain Partner likes to receive additional information.
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