

Resident/Representative Satisfaction Survey

This survey collects anonymous feedback of your satisfaction residing in this nursing home. Your responses will help improve our culture and overall satisfaction with care and services. Thanking for taking the time to complete the survey!

Your survey responses will...

- **Help** your opinions be heard.
- **Help** make leadership aware of areas that need improvement.
- **All responses are confidential and anonymous.**

Please note: Family members may complete the surveys for the residents they represent. Champions can assist residents as needed to complete the survey. We suggest the resident must have a BIMS score above 8 to complete the survey.

PLEASE CHECK BOX FOR RESIDENT OR FAMILY THEN CIRCLE YOUR RESPONSES TO EACH QUESTION

<input type="checkbox"/> Resident <input type="checkbox"/> Representative		poor	fair	good	excellent
1	Are there enough scheduled activities here?				
2	Are there things to do on weekends that you enjoy?				
3	Are you/resident satisfied with the exercise programs?				

Total Score: _____

Date: _____

Thank you for taking this survey!