



Outpatient Withdrawal Client Experience Survey

1. Did staff introduce themselves to you before providing care?

No, I already knew him/her

Never

Yes, sometimes

Yes, always

2. Did you feel that you were treated with respect and dignity during your outpatient visit?

Never

Sometimes

Usually

Always

3. Were you or your caregiver asked what your needs or cultural values are when making decisions about your care?

Never

Sometimes

Usually

Always

4. If you had any questions or concerns regarding your condition or treatment, did the nurses or doctors discuss them with you?

Never

Sometimes

Usually

Always

5. Did you receive enough information from hospital staff about what to do if you were worried about your condition or treatment after you left the hospital?

Yes

No

6. In general, how confident are you that you know what to do to take care of and manage your substance use and/or mental health?

Not at all confident

Partly confident

Quite confident

Completely confident



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7. Did we address your anxiety and fears in a way that you felt cared for?

Never

Sometimes

Usually

Always

8. Would you recommend Outpatient Withdrawal Services to family and friends?

Definitely no

Probably no

Probably yes

Definitely yes

9. Do you feel that coming to Outpatient Withdrawal Services helped you?

Never

Sometimes

Usually

Always

10. What group topics did you find helpful during your stay?

11. Were recreational activities and outings meaningful and enjoyable?

Yes

No

Please provide comments below:



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12. Is there anyone you would like to recognize for the care he or she provided during your stay?

No

Yes

If yes, please tell us whom you'd like to recognize and why.

13. Are there any general comments you would like to share?

14. Is there any feedback for improvement that you would like to provide?