Family Engagement Quality Improvement Project

Post-visit Family Survey Questions

1. During today’s visit, did this practice honor or respect your values and beliefs?
   a. Yes
   b. No

2. During today’s visit, did the people providing medical care to your child explain things about your child’s health in a way that was easy to understand?
   a. Yes
   b. No

3. During today’s visit, did the people providing medical care to your child show respect for what you and your family had to say?
   a. Yes
   b. No

4. During today’s visit, did clerks, receptionists, and other clinic staff at this practice treat you with dignity and respect?
   a. Yes
   b. No

5. During today’s visit, did the people providing medical care to my child involve me and my family in decisions about my child’s health?
   a. Yes
   b. No