

- Alumni section continued -

Discovery and Recovery

Attending treatment is “Discovery” and provides you with your foundation. Your on-going “Recovery” depends completely upon your participation in After Care and 12-step meetings (such as AA or NA); this is where you will find lasting recovery one day at a time. Keep coming back!

_____ 12-Step Contact made?

_____ Pass It On

_____ Aftercare set up?

_____ Giving Back

Name:

Email address:

Mailing address:

Cell Phone:

Home Phone:

I, _____, authorize Cumberland Heights Foundation Inc. to contact me after my completion of treatment, that staff or alumni volunteers may contact me by phone, email or regular mail for the purposes of supporting my recovery, reminding me of any pertinent appointments made prior to discharge, inviting me to attend Alumni events, or doing anonymous follow-up studies on the general effectiveness of treatment. My personal and contact information will continue to be kept strictly confidential and not released without my written consent.

Signature and date

- This document to be kept in Nursing Station -

Cumberland Heights Residential Services
Patient Satisfaction Survey
Adult

Print Name: _____

Date: _____

In an ongoing effort to improve the quality of our services, we need your feedback. Please complete this form and return it to Brenda Huffines, or in her absence your Case Manager. Please give us your honest opinion when answering these questions. We value your input and it is very important to us when further developing our services here at Cumberland Heights.

Please circle the appropriate answer below. Additional comments may be made on the last page of this questionnaire. Thank you.

Program: (please circle one)

Traditional Adult *Men* Traditional Adult *Women* First Step *Men* First Step *Women*

1. Did you receive the information you needed when you called Cumberland Heights?	Yes	No
2. Were you made to feel welcome upon your arrival at Cumberland Heights?	Yes	No
3. Did Cumberland Heights' staff do all they could to help your admission process?	Yes	No
4. Were the financial arrangements, including insurance, explained in a satisfactory manner?	Yes	No
5. Were you treated with care and respect by the nursing staff during your admission process?	Yes	No
6. Were you treated with care and respect by the nursing staff during your detox process?	Yes	No
7. Did your orientation to the program include the following information in enough detail:		
A. Your rights and responsibilities as a patient?	Yes	No
B. What to do in an emergency (such as a fire or tornado)?	Yes	No
C. The daily schedule and the location of things on campus, (i.e., dining room, group rooms, restrooms, etc)?	Yes	No
8. Were your psychiatric needs addressed by the psychiatrist as necessary?	N/A	Yes No
9. Were your medical needs addressed by the physician?	Yes	No
10. If you were sent to another healthcare facility or physician while a patient at Cumberland Heights, were you satisfied with that service?	N/A	Yes No

11. Did your counselor work with you in developing your treatment plan?	Yes	No
12. Did the individual counseling increase your self-awareness and coping strategies?	Yes	No
13. Were the recovery education groups helpful in providing you with information on how to practice using your recovery tools?	Yes	No
14. Were the group therapy sessions helpful in building relationships with peers, learning 12 Step principles, and expressing feelings?	Yes	No
15. Did you learn about how addiction affects the whole family?	Yes	No
16. Did your treatment program teach you skills to begin to improve your relationship with your family and loved ones?	Yes	No
17. Did the program's spiritual focus help you to develop a personal concept of spirituality?	Yes	No
18. Were the recreational and social activities helpful in introducing you to chemical free leisure time?	Yes	No
19. Did you receive specific referrals to assist you with your recovery efforts after discharge?	Yes	No
20. Was the program helpful in motivating your desire to stay sober?	Yes	No
21. Was the program helpful in building your self esteem, problem solving skills, and feel resolution skills using recovery tools?	Yes	No
22. Was the program helpful in developing your initial understanding of AA philosophy and the 12 Steps in order to build an effective sober support system?	Yes	No
23. Were you satisfied with the food, staff, and cafeteria at Cumberland Heights?	Yes	No
24. Were your living areas comfortable, neat, and clean?	Yes	No
25. Did the campus and surrounding grounds add to your recovery experience?	Yes	No
26. If you experienced a problem with the treatment and/or staff at Cumberland Heights, was it resolved to your satisfaction? <i>If No, please describe:</i> <hr/> <hr/> <hr/> <hr/>	N/A	Yes No
27. Would you feel comfortable recommending Cumberland Heights to a loved one or a friend?	Yes	No

ADDITIONAL COMMENTS:

1. Things that have made me feel good about Cumberland Heights are: _____

[illegible]

2. Things that Cumberland Heights needs to work on improving are: _____

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Thank you for taking the time to complete this survey!