

Diabetes Clinic Satisfaction Questionnaire (DCSQ)

The following statements concern aspects of the care you receive at your hospital diabetes clinic or diabetes centre. Please circle a number from -2 to +2 on each scale to show how dissatisfied or satisfied you are with each aspect.

If a statement does not apply to you because you have had no experience of that aspect of the service, please indicate by circling the 'n/a' beside that statement and note on the back of the page why it doesn't apply to you.

	dissatisfied	slightly dissatisfied	neither satisfied nor dissatisfied	satisfied	very satisfied	
1. The amount of time spent talking to the staff (including doctors, nurses and other staff)	-2	-1	0	1	2	n/a
2. Continuity of care, that is, whether or not you see the same doctor/nurse on each visit	-2	-1	0	1	2	n/a

NOT FOR USE: SAMPLE

NOT FOR USE: This is a shortened sample only.

For use of the full questionnaire please contact info@healthpsychologyresearch.com

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