

Dear Customer,

Adventist Health Hong Kong aims to provide the very best medical services and facilities. You are important to us and we care about your comfort and the way you are treated while you are in our care.

Our hospital has designed a special program with you, the patient, in mind. Entitled **SHARE**, this program involves us making the following promises to you:

- S** – Sense people's needs before they ask
- H** – Help each other
- A** – Acknowledge people's feelings
- R** – Respect the dignity and privacy of others
- E** – Explain what is happening

We would like to know exactly what you think about our hospital, in aspects of our services, facilities, and staff. Your comments on the things you like and the areas which we can improve are of utmost importance to us.

Please take a few moments to fill out this feedback form.

Adventist Health Hong Kong is committed to excellence – not just our idea of excellence, but your ideas as well.

We thank you for choosing Hong Kong Adventist Hospital.

港安醫療一向以提供卓越的醫療服務和設施為宗旨，尤其重視每位病人的感受和需要。為此，本院特別設立了「**SHARE 與爾共享**」服務標準，要求院內每位醫護人員和員工切實執行。

「**SHARE 與爾共享**」英文名稱的每個英文字母，代表了本院對每位病人的態度和服務承諾：

- 「**S**」，先出援手；
- 「**H**」，互助互勉；
- 「**A**」，感同身受；
- 「**R**」，尊重私隱；
- 「**E**」，深入溝通。

為了了解大家對本院設備、員工和服務的感受，懇請撥冗完成這份問卷。您的寶貴意見，是我們不斷進步的動力。

多謝！

Alex Lan 凌宏寶

President and Chief Executive Officer 院長及行政總裁

Adventist 港
Health 安
Hong Kong Adventist Hospital
香港港安醫院



SHARE
Yourself

PLEASE AFFIX
STAMP IF
POSTED
OUTSIDE
HONG KONG
如在本港投寄
毋須貼上郵票

BUSINESS REPLY SERVICE LICENCE NO.:
商業回郵牌號：7831

Performance Improvement Department
Hong Kong Adventist Hospital — Stubbs Road
40 Stubbs Road
Hong Kong

POSTAGE
WILL BE
PAID BY
LICENSEE
郵費由持
牌人支付

S H A R E 與 爾 共 享

SOUNDING BOARD 心聲版

How would you rate our service?
您如何評價本院服務？

Is there any department[s] / area[s] / staff you would like to commend?
你想評價個別部門 / 地方 / 職員嗎？

(Optional evaluation 可選擇評價)

	Excellent 卓越	Very Good 非常好	Good 好	Could be better 需改善	Poor 欠佳
Doctor 醫生	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Nurse 護士	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pharmacy 藥劑部	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Diagnostic Imaging 診斷中心	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rehabilitation 復康中心	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Laboratory 化驗中心	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Registration 登記處	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cashier 收費處	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Guest Relations 貴賓部	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Food 膳食質素	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Facilities 設施	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Equipment 儀器	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cleanliness 清潔程度	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Quietness 環境寧靜	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Carpark 停車場	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Is your appointment processed in a timely manner?
您的預約是否得到及時處理？

Yes 是 No 否

	Within 15 mins 15分鐘內	Within 30 mins 30分鐘內	Within 1 hour 1小時內	Above 1 hour 1小時以上
Out-patient consultation 診症服務	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Admission 入院處	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Discharge 出院處	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Did our staff communicate with you properly?
本院職員有否與您妥善溝通？

Yes 有 No 否

Are there any difficulties when you access our services information?
您在索取本院服務的資訊上有否遇到困難？

Yes 有 No 否

Would you choose our service again?
您會否再次選用本院的服務？

Likely 有可能 Unlikely 不太可能

Would you recommend this hospital to your friends and family?
您會向親友推薦本院嗎？

Likely 有可能 Unlikely 不太可能

Other Comments (If you need more space, please use a separate sheet.) 其他意見 (如有需要, 請另加紙補充。)

Please tick the appropriate box or write in the space provided as the case may be.
請在適當空格內加上✓號, 或在適當位置寫上答案和意見。

In-patient Service 住院服務 (Unit 病房)

Out-patient Service 門診服務

COMMENTS AND SUGGESTIONS 意見或建議

Thank you for completing this questionnaire. Personal data collected will only be used for service improvement purposes including investigation and patient liaison in accordance with the Personal Data (Privacy) Ordinance. Should you wish to withdraw this questionnaire or any part thereof, please email us at hkahinfo@hkah.org.hk and we shall cease to use your personal data in this questionnaire.

感謝閣下填寫此問卷。本院將會根據《個人資料(私隱)條例》使用閣下的個人資料於改善服務, 包括調查及病人聯絡等用途上。如欲取消此問卷, 請電郵至 hkahinfo@hkah.org.hk, 本院會因應閣下的指示停用此問卷的個人資料。

Personal Data (Optional) 個人資料 (可選填)

Date 填寫日期: _____

Name 姓名: _____ Miss / Ms / Mr / Mrs
小姐 / 女士 / 先生 / 太太

Contact Number 聯絡電話: _____

Email 電郵: _____

I am a 我是:

Patient 病人 Visitor 訪客 Doctor 醫生 Staff 員工



Hong Kong Adventist Hospital – Stubbs Road is grateful for your comments. Thank you!
衷心感謝您的意見。