



## Final Client Satisfaction Survey

Clinician \_\_\_\_\_

Think of the problems or issues you wanted to resolve when you first came to counseling. Select a number below that best reflects how far you feel you have come in resolving those concerns.

- 0, No change or worse
- 1, Some Improvement
- 2, Moderate Improvement
- 3, Much Improvement
- 4, Mostly Resolved
- 5, Resolved

Please indicate how much you agree or disagree with each statement. On this scale, 1=strongly disagree and 5=strongly agree.

I felt supported, understood, and encouraged by the therapist

1    2    3    4    5

In our sessions we covered what was important to me

1    2    3    4    5

I had clear goals for what I wanted to accomplish in counseling

1    2    3    4    5

Counseling helped me to improve the quality of my life

1    2    3    4    5

I would come back to see this therapist again if the need arose and would recommend this therapist to others.

1    2    3    4    5

The front office staff was courteous and helpful

1    2    3    4    5

Please check the one statement that best matches your reason for ending counseling.

- Resolved the problem(s) to my/our satisfaction
- Felt much better and didn't see a need to keep coming
- I was not comfortable with the goals or methods used in counseling
- (Couples) We had incompatible goals for counseling
- We could not afford to keep coming financially and-or our insurance coverage ended
- Other commitments or pressures came up that made it difficult to focus on counseling
- Did not feel counseling was really helping me/us
- Other, please specify \_\_\_\_\_

Any additional comments you wish to make:

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