

As part of "Take 5 to Tune In" the Heartland Kidney Network would like to ask you a few questions about your experiences at your clinic. Your answers are **anonymous** and **confidential**. The results will be shared with your clinic as a group average to make improvements.

1. I know how to share a complaint about the clinic, the staff or my care.									
	□ Yes		□ _{No}						
2. la	m concerr □ _{Yes}	ned th	at I will be treat	ted d	ifferently if I s	share	a complaint.		
3. How often does the clinic staff listen to you carefully?									
	Never		Almost Never		Sometimes		Almost Always		Always
4. Ho		_	he clinic staff s Almost Never	_	_	_	you? Almost Always		Always
5. Ho					-		you as a person? Almost Always		Always
	Please fo	old an	=	-	ur time and p form in the "		pation! 5 to Tune In" en	velor	oe.



For more information or to file a grievance please contact the Heartland Kidney Network at: 920 Main Street, Suite 801, Kansas City, MO 64105

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