

GEORGIA DEPARTMENT OF HUMAN SERVICES OFFICE OF INSPECTOR GENERAL-RESIDENTIAL CHILD CARE UNIT PROVIDER SATISFACTION SURVEY

Please select the one answer that most closely reflects the degree to which you agree or disagree with each statement as it pertains to the Residential Child Care Licensing (RCC) unit.

Name (Optional): ______ License Type (Optional): _____

RCC Staff Member(s) Conducting Inspection/Investigation: _____

RCC Staff Arrival Time: _____

RCC Staff Departure Time: _____

		Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree
	Provider Opticfaction Opennon enter	1	2	0	3	4
	Provider Satisfaction Components:					
1.	Upon arrival, the surveyor(s) identified himself/herself to the person in charge and explained the purpose of the visit.					
2.	While on site, RCC staff acted courteously and professionally during the visit.					
3.	RCC staff demonstrated adequate working knowledge of applicable Rules and Regulations.					
4.	Any findings resulting from the visit were discussed during the exit conference.					
5.	I was given the opportunity to provide additional information and/or clarification to preliminary rule citations discussed during the exit conference.					
6.	I felt comfortable discussing any problems/concerns I had with RCC staff.					
7.	Overall I am satisfied with the service rendered by RCC.					

In your opinion, what could be done to improve the process: _____

Return to: Director

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