



Miami County 911 Citizen Survey

Recently you called the Miami County Communication (911) Center for assistance. To help us improve our service, it is important to know how you feel about your contact with us. The information and the comments you provide will be used in evaluating our service. (Note: If you requested medical assistance, the call taker asked a series of patient condition questions. We want you to know that just as soon as your address/location was confirmed, the EMS telecommunicator was already dispatching assistance to you.)

Please take a few minutes to fill out this brief questionnaire by checking the most accurate answer and return it in the enclosed self-addressed stamped envelope. Thank you for your time in responding to this questionnaire.

1. How long did the telephone ring before it was answered?
☐ 1 ring ☐ 2 rings ☐ 3 rings ☐ 4 rings ☐ Unknown
2. Was the time you waited for the call to be answered reasonable? ☐ Yes ☐ No
3. What assistance did you need? ☐ Police ☐ Fire ☐ Medical ☐ Other
4. Please select the one that best described the competency of the call taker you spoke to? (b)
☐ Expert ☐ Capable ☐ Inexperienced ☐ Incompetent
5. Please select the one that best described the attitude of the call taker you spoke to? (c)
☐ Caring ☐ Polite ☐ Inattentive ☐ Rude
6. Did the call taker understand the type of assistance you needed and obtain the necessary details?
☐ Yes ☐ No
7. Were you ever on hold for an unnecessary length of time?
☐ Yes ☐ No
8. How satisfied were you with the service provided by the 9-1-1 Center? (a)
☐ Exceeded Expectations ☐ Satisfied ☐ Frustrated ☐ Dissatisfied
9. How can we improve our call taking service? (e)

10. What community Concerns could the 9-1-1 Center help address? (d)

For Office Use

CAD# _____ Call Type _____ Month Audited _____