

INTERPRETER EVALUATION FORM

Please tell us your opinion regarding the American Sign Language interpreting services provided to you at the Cleveland Clinic by completing this form and returning to:

Mail: Hannah Rahwangi, Cleveland Clinic 9500 Euclid Ave., KK30, Cleveland, OH 44195

Fax: (216) 444-0266

Email: TellGPS@ccf.org

Name (patient):

Interpreter name:

Appointment date and time:

Which service was provided today?

- Live interpreter
- Video-remote interpreter

Did the interpreter arrive on time?

- Yes
- No

Did the interpreter sign clearly, were you able to understand everything?

- Yes
- No

Did the interpreter stay for the full appointment?

- Yes
- No

Did the interpreter understand you?

- Yes
- No

Would you use this interpreter again?

- Yes
- No

Please share any comments, opinions, or concerns about your experience with interpreting services, including Video Remote Interpreting (VRI) at the Cleveland Clinic:

For any concerns with interpreting services, please contact the Cleveland Clinic's Ombudsman Office by phone at (216) 444-2544, or by email at ombudsman@ccf.org