附件2-6

健康素养和中医药健康文化素养复核调查表

 **省（区、市）县（市、区）街道（乡镇）居委会（村）**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **序号** | **居民户地址** | **KISH表** | **原始问卷** | **复核** | **是否一致** |
| **调查对象姓名** | **性别** | **出生年月时间** | **文化程度** | **职业** | **调查对象姓名** | **性别** | **出生年月时间** | **文化程度** | **职业** |
| 1 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 11 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 12 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 13 |  |  |  |  |  |  |  |  |  |  |  |  |  |

**总体建议：①合格②不合格**

注：1、市县区级督导组填写复核结果表，每个居委会（村）复核5人。5项指标有1项不一致则为不一致，不一致比例>20%，则该地调查工作质量不合格。

2、省级督导组填写复核结果表，每个县区复核15人。5项指标有1项不一致则为不一致，不一致比例>20%，则该地调查工作质量不合格。