



PLEASE TELL US ABOUT YOUR EXPERIENCE AT THE STRATFORD CLINIC

We continually seek to provide our clients with the best of care and the highest quality service. One of the most important aspects of this is how you feel about the service you received whilst in our care at the clinic.

We are keen to hear about what we are doing well so that we can keep doing these things as well as anything you feel we can improve on. The form should take less than five minutes to complete.

Please do feel you can be completely honest. All comments are looked at anonymously by our Governance Committee which meets quarterly to discuss our performance. We do not reveal your identity unless you give specific permission. If you would like a written response from us following your feedback please indicate this at the end of the form.

CONSULTANT NAME.....

Before your appointment	Yes definitely	Yes, to some extent	No
Was your appointment at a convenient date and time?			
Did you have enough information before your appointment?			
Was communication regarding the appointment sufficient?			
Were you able to find the clinic without difficulty?			
At your appointment			
Was the clinic clean and tidy?			
Were you given enough privacy when discussing your condition or treatment?			
The care you received			
Did you have sufficient time with your Consultant?			
Was your condition explained to you in a way you could understand?			
Was any treatment you needed explained to you in a way you could understand?			
Were you involved as much as you wanted to be in decisions about your care and treatment?			
Did you have confidence and trust in the professionals treating you?			
Overall, did you feel you were treated with respect and dignity while you were at the clinic?			

