

# Feedback Form

At St Basil's your feedback is important as it helps us to know what we are doing well and what we need to improve. We especially welcome feedback from our clients and their families.

- Clients or family members can also provide feedback through: Satisfaction survey, or by contacting their Coordinator/ Manager
- Please use this form to inform us of opportunities to improve, comment, compliments, suggestions: - For complaints use separate complaint form.

Is your feedback a:

Comment  Compliment  Suggestion

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**Please indicate who is providing the feedback:**

Client  Family member/representative  Staff member on behalf of client  Other

Full Name:	
Address:	
Phone:	Date:
Email	
Preferred contact method:	<input type="checkbox"/> Phone <input type="checkbox"/> Email <input type="checkbox"/> Mail

# Feedback Form

## Office Use Only

Coordinator/ Manager to Complete		Date Received:	
Please Circle:			
Action Plan	By Whom	By When	Date Completed

**Closure**

**Evaluation** *(If appropriate, describe how action/improvements were evaluated and the result):*

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**Outcome or end result:** *(Tick applicable boxes)*

Issue resolved - no improvements implemented  
 Improvement implemented  
 Other *(Describe)*

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**CLOSED OUT/COMPLETE:**

Coordinator/Manager \_\_\_\_\_ Date \_\_\_\_\_