**UNIVERSITY OF ESSEX**

**DOCTORATE IN CLINICAL PSYCHOLOGY**

**ECC Section 3: Client / Carer Feedback form**

We would be grateful if you could answer the following questions to give us an impression as to how helpful you have found the psychological service you have received. For each question, please tick the box that applies to you. Thank you.

|  |  |
| --- | --- |
| **Name of Trainee:**  | **Date:** |
|  | **More than 15 minutes** | **5 to 15 Minutes** | **0 to 5** **Minutes** |
| How long on average did you have to wait before being seen after you had arrived for your appointment? |  |  |  |
|  | **Not at all** | **Somewhat** | **Definitely** | **Very Much So** |
| At your first appointment, were you received in a way that made you feel welcome and helped set you at ease? |  |  |  |  |
| Were you happy with the information that you were given about the work undertaken with you? |  |  |  |  |
| Did the psychologist understand your problem and how you felt about it? |  |  |  |  |
| Do you feel you were treated in a confidential and respectful way? |  |  |  |  |
| How satisfied were you with the help you received? |  |  |  |  |
| Have the psychological services you received helped you to deal more effectively with your problems? |  |  |  |  |
| If you needed help again, would you feel able to return to this service? |  |  |  |  |
| If you had a friend who had similar problems, would you recommend that she/he seeks psychological help? |  |  |  |  |
| Any further comments: |