



Carers feedback questionnaire

This survey aims to allow those who care for a family member or someone close to them to provide feedback of their experience when in contact with our services.

We are interested in hearing your views, even if your contact has only been limited. This information will be used to help make improvements to those experiences.

The questions should be answered by the carer, and your answers should be from your point of view. All the responses will be collated and the results will not identify you individually.

To what extent do you agree with the following statements?

Strongly
Agree

Agree

Disagree

Strongly
Disagree

Your experiences of support and recognition as a carer

When I am in contact with services and/or staff, I feel welcome.

☐☐☐☐

When I am in contact with services, I am treated with dignity and respect.

☐☐☐☐

Are there any ways in which staff could make you feel more welcome or improve the way carers are treated?

Strongly
Agree

Agree

Disagree

Strongly
Disagree

Staff recognise me as a carer of the person who will be using the service.

☐☐☐☐

A member of staff explained about confidentiality.

☐☐☐☐

I am encouraged to share information about the person I support.

☐☐☐☐

With thanks to Southern Heath NHS Foundation Trust for agreement on using their survey

I was given helpful advice about how to keep in contact with the team / the service, should I need to.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I was told how to raise any concerns I may have, and how to complain if I needed to.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I was told how to access help out of hours.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Staff give me enough time to express any views or concerns I may have.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Staff have ensured I have sufficient information about the different kinds of support available to carers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I know who I can talk to in the team / service if I wanted more information about the kind of illness / disability I am supporting as a carer.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If I needed to, I would know who to ask in the team / service about having my own needs reviewed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How likely would you be to recommend this service to friends or family, if they needed similar care and support?	Extremely likely <input type="checkbox"/> Unlikely <input type="checkbox"/>	Likely <input type="checkbox"/> Extremely unlikely <input type="checkbox"/>	Neither <input type="checkbox"/> Don't know <input type="checkbox"/>	

About your caring

My relationship to the person I care for is:

☐ Spouse/Partner
 ☐ Parent
 ☐ Son/Daughter
 ☐ Brother/Sister
 ☐ Other Relative
☐ Friend/Neighbour
☐ Other

Your NHS no: