

Feedback survey for family, carers and friends of people in a care home

Name of care home:	
Date:	

The views of people who use, live or work in a care service are important to us. They help us form a view of the way in which a service and its staff help promote people's well-being.

Please take a few minutes to tell us your views about the care your family member/friend receives from the care home.

You do not need to provide your name and contact details, unless you would like to do so, or if you wish to speak to us. Your individual comments are confidential and will not be shared.

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The care and support my family member/friend receives is: (please tick):					
e			8		
Excellent	Good	Needs Improvement	Poor		
What is good about liv	ng here?				
What would you like to	change or improv	/e?			
	anange en impres	<u> </u>			
Would you recommend	d living here to a fr	iend or relative?			
Yes	No		Maybe		
Please say why:					
For office use only:					

INSP No:

Date of Issue:

Please add any other comments you would like to share with us.				
hat we do with the information we receive from you				
e may discuss issues raised within this questionnaire as part of the inspection				

and matters may be referred to in the inspection report. However, we will not disclose your identity.

Important: We process any personal and/or sensitive information we hold about you fairly and lawfully, and we only ask for such information where it is necessary for us to carry out our role. For more information about how we process your personal data, and your rights in relation to this, please see our Privacy Notice at www.careinspectorate.wales/how-we-use-your-information, or contact us for a paper copy.

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