

## Home-Start HOST / Dad Matters

### EXPERIENCE OF SERVICE QUESTIONNAIRE

*Please think about the service you, your child and/or your family have had from Home-Start and Dad Matters*

*For each item, please tick the box that best describes what **you** think or feel*

	Certainly True	Partly True	Not True	Don't Know
I feel that the people who have contacted me listened to me				
It was easy to talk to the people who contacted me				
I was treated well by the people who have contacted me				
My views and worries were taken seriously				
I feel the people at Home-Start and Dad Matters know how to help with my problems				
I have been given enough explanation about the help available				
I feel that the people who have seen us are working together to help with the problem(s)				
I have felt comfortable having remote or face to face contact				
The appointments are usually at a convenient time				
If a friend needed similar help, I would recommend that they contact Home-Start and Dad Matters				
Overall, the help I have received is good				

Please Turn Over

What was really good about the service? .....

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Was there anything you didn't like or anything that needs improving? .....

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Is there anything else you want to tell us about the service you received? .....

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Thank You for taking the time to complete this questionnaire.

*If you don't want to take part, please tick this box  and return the blank questionnaire in the envelope provided.*