

## **Complaints Service Evaluation**

We appreciate that the circumstances surrounding your complaint may have been stressful or challenging for you. Our aim is to make sure that our complaints process is as simple, timely and as professional as possible, in order to minimise any additional distress. Please let us know if we have achieved this by taking a few moments to complete this very short questionnaire. All responses will be treated anonymously and we will use your feedback to make improvements to our service.

PLEASE AVOID USING A MAC COMPUTER TO COMPLETE THIS FORM
PLEASE ENSURE YOU HAVE THE LATEST VERSION OF ADOBE ACROBAT ON YOUR PC
CLICK HERE TO DOWNLOAD IT: http://get.adobe.com/uk/reader/

How easy was it to find out how to make your complaint?
Comments / Suggestions for improvement (optional)
How happy were you with the attitude of the complaints staff towards you? E.g. were they professional, friendly and polite?
Comments / Suggestions for improvement (optional)

How satisfied were you that the complaints staff showed empathy and understanding towards you?
Comments / Suggestions for improvement (optional)
How happy were you with the time taken to investigate your complaint?
Comments / Suggestions for improvement (optional)
Did the complaints staff clearly explain how they had reached their final decision to uphold/not uphold your complaint?
Comments / Suggestions for improvement (optional)

## Thank you for taking the time to complete this form

Please press submit or if you have any issues, save on desktop and attach via email to eforms.office@nes.scot.nhs.uk