

## Client Feedback Questionnaire

As part of our commitment to improving the services we provide, we ask our clients to complete this feedback questionnaire. We would be grateful if you could help us improve by completing this form:

**Q1. How satisfied were you with our overall level of service?**

(PLEASE CHECK ONE BOX)

Very satisfied  Fairly Satisfied  Fairly dissatisfied  Very dissatisfied  Undecided

Q1a. If dissatisfied, please tell us briefly why this is:

**Q2. Did we give you information/advice that was easy to understand?**

(PLEASE CHECK ONE BOX)

Very easy  Fairly easy  Fairly difficult  Very difficult  Undecided

Q2a. How might we improve?

**Q3. How informative did you find our staff?**

(PLEASE CHECK ONE BOX)

Very good  Fairly good  Fairly poor  Very poor  Undecided

**Q4. How well did we keep you up-to-date with the progress of your case?**

(PLEASE CHECK ONE BOX)

Very well  Fairly well  Fairly poor  Very poor  Undecided /Not Applicable

**Q5. How well did we listen to what you had to say?**

(PLEASE CHECK ONE BOX)

Very well  Fairly well  Fairly poor  Very poor  Undecided

**Q6. Did we treat you fairly at all times?**

(PLEASE CHECK ONE BOX)

Yes  No  Don't know

**Q7. Would you recommend us to someone else if they needed legal help or advice?**

(PLEASE CHECK ONE BOX)

Certain to  Likely to  Unlikely to  Certain not to  Undecided

**Q8. Do you have any further comments or suggestions that may help us to improve our level of service?**

*no*  
Please continue on another sheet if necessary.

Thank you for completing this questionnaire. If you would like us to contact you to discuss any of the issues raised, please complete your name and address below.

