



## Service Feedback Form

All About You – Disability Services is committed to continuously improving the quality of services provided. We are interested to know about your experience with our services and would appreciate you taking the time to complete this form and return it to [admin@allaboutyou.org.au](mailto:admin@allaboutyou.org.au)

Which service(s) have you worked with:

Service Coordination

Support Working Services

Please circle the suitable response

- |    |  |     |    |
|----|--|-----|----|
| 1. | The purpose, goals & processes of the services were clearly explained to me      | Yes | No |
| 2. | I found the service easy to access   | Yes | No |
| 3. | The worker was professional, respectful and understood my needs                  | Yes | No |
| 4. | Regular contact was made with me and was available when needed                   | Yes | No |
| 5. | Information provided to me was easy to understand                                | Yes | No |
| 6. | Services were provided in a timely manner  | Yes | No |
| 7. | My needs were met/I was able to reach my goals through support from the services | Yes | No |
| 8. | If needed I would use All About You – Disability Services again                  | Yes | No |
| 9. | I would recommend All About You - Disability Services to others                  | Yes | No |

### Additional Comments or Feedback

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#### **Optional**

Your name: \_\_\_\_\_

Your Support Worker's name: \_\_\_\_\_

*Please tick if you would like to be contacted regarding your feedback*