

# Coventry Cyrenians Exit Questionnaire – Alcohol/Mediation Comic Relief

Date

Client Name (Optional)

QUESTIONS	POOR	OK	GOOD	VERY GOOD	EXCELLENT
How did you find the assessment process?		3	7	3	3
How helpful/supportive did you find the staff?		1	5	7	3
How helpful did you find the mediation/alcohol support service?		4	6	1	4
How did you find the overall experience		1	7	2	6

Tick YES or NO, if NO, please explain the reason for this answer		
	YES	NO
Did you feel confidentiality was respected?	16	
Did you feel listened to?	16	
Did the mediation/alcohol support service meet your expectations	15	
Has this experience given you confidence for your future?	16	
Would you recommend this service to anyone else?	16	
Other improvements to life related to - Communication 8      Education 9      Health 10      New Interests 5      Career 2 Other - 'Improved outlook'.		