



### CLIENT SATISFACTION QUESTIONNAIRE – PARENT

PLEASE ANSWER THE FOLLOWING QUESTIONS ABOUT YOUR EXPERIENCE AT NORTHERN YOUTH SERVICES.

1. Were you treated with respect by our staff?

Definitely Not 1      Probably Not 2      Neutral 3      Probably Yes 4      Definitely Yes 5

2. Were staff available when you needed them?

Definitely Not 1      Probably Not 2      Neutral 3      Probably Yes 4      Definitely Yes 5

3. Were services provided to you in an accessible manner?

Yes                                       No                                       Somewhat

Comments:

\_\_\_\_\_

4. If you were dissatisfied with Northern Youth Services in any way, please explain which part and why.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Please tell us about specific areas where we can improve our service to you

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Did you receive services in your preferred language?

YES                       NO

Although your response will be handled confidentially, you may choose not to complete this section:

Completed By: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

If you would like to be contacted to discuss any issues you have relating to the services you received, please check here \_\_\_\_\_.