

Mossman Port Douglas Counselling Services

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Email: admin@mossmanportdouglascounsellingservices.com.au

CLIENT FEEDBACK FORM

Your feedback is important to us. It allows us to continuously make improvements, additions, and/or changes to our Services so we can continue to provide a quality, confidential, professional and affordable Counselling service to our Clients and wider community. And yes – it's ok to remain anonymous.

Working Relationship with your Counsellor:

- | | |
|--|---------------|
| Do you feel your Counsellor listened to you? | Yes/No/Unsure |
| Do you think your Counsellor focused on what was important to you? | Yes/No/Unsure |
| Did your Counsellor accept what you said without judging you? | Yes/No/Unsure |
| Did your Counselling provide a safe and trusting environment? | Yes/No/Unsure |
| Did your Counsellor understand things from your perspective? | Yes/No/Unsure |
| Did your Counsellor show warmth towards you? | Yes/No/Unsure |
| Did your Counsellor show Leadership when needed? | Yes/No/Unsure |
| Did your Counsellor challenge you, where appropriate? | Yes/No/Unsure |
| Did your Counsellor begin and finish sessions on time? | Yes/No/Unsure |

Results:

- | | |
|--|---------------|
| Do you feel that counselling has made a difference to your life for whatever reason/s there were when you made your first appointment? | Yes/No/Unsure |
| Have these changes been positive and welcome? | Yes/No/Unsure |

Overall Satisfaction? _____

Would you recommend **Mossman Port Douglas Counselling Services**? Yes/No/Unsure

Other Comments: _____

Thank you 