

CLIENT FEEDBACK FORM: - FAMILY MEDIATION

| Mediator: Party Name: | | | |
|--------------------------|--|--|--|
| Case Ref: Venue: | | | |

As part of our commitment to improving the service we provide, we send our clients this feedback questionnaire. We would be grateful if you could help us by completing this form and returning it in the enclosed envelope. Please be assured that the survey is completely confidential.

Unless you specify otherwise we will not contact you regarding any of the issues raised.

| Q1 | Was it easy to make initial contact with us | □ Yes □ No | | | | |
|-----|---|---|--|--|--|--|
| | | | | | | |
| Q2 | Did we give you information that was easy to understand? Any additional comment:- | □ Very easy to understand □ Fairly easy to understand □ Fairly difficult to understand □ Very difficult to understand □ Undecided | | | | |
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| Q3. | Please tell us how you heard about our organisation and whether it was easy or difficult to make initial contact. | ☐ Used us before ☐ Recommendation ☐ Email update ☐ Facebook ☐ Magazine advert ☐ Google search ☐ Events/seminars ☐ Solicitor ☐ Website ☐ Other agency | | | | |
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| Q4 | Did you understand information given at the Assessment Meeting? Was it? Any additional comment:- | □ Very informative □ Fairly informative □ Very uninformative □ Undecided | | | | |
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| Q5 | If you engaged in a Mediation Session was it clearly recorded by the Mediator what issues were important to you? Any additional comment:- | □ Very clear □ Fairly clear □ Very unclear □ Fairly unclear □ Undecided □ Not Applicable | | | | |
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| Q6 | How well did we explain information that was relevant to the issues being discussed in the Mediation and were options identified by the Mediator which may have resolved matters? Any additional comment:- | ☐ Very well ☐ Fairly well ☐ Fairly poor ☐ Very poor ☐ Undecided | | | | |

| Q7 | Were we able to offer you opportunities to progress your Mediation once relevant information had been identified and provided? Any additional comment:- | ☐ Yes ☐ No ☐ Don't know | | | |
|--|---|--|--|--|--|
| | | | | | |
| If you believe you were treated unfairly due to e.g. your ethnic background, race, colour, age, disability, mental status, sex, religion or any other reason please tell us briefly what happened. | | | | | |
| Q9 | Was the documentation you received easy to understand and did the Memorandum of Understanding set out clearly the issues involved in your Mediation and the proposals to resolve the dispute? | ☐ Yes very clear ☐ Yes mostly ☐ Not really | | | |
| | Any additional comments:- | | | | |
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| Q10 | Was the Mediation experience better, worse or the same as you had anticipated? Any additional comments:- | □ Better □ Same □ Worse | | | |
| | | | | | |
| Q11 | Would you recommend Midlands Dove Mediation to others if they needed Mediation Services? If yes, why would you recommend us | ☐ Yes ☐ No | | | |
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| Any General Comments:- | | | | | |
| I consent to the feedback information contained within this form being used in an annonomised manner | | | | | |
| for marketing purposes, including on social media. | | | | | |
| Signed Dated | | | | | |
| Drintad | | | | | |

Thank you for taking the time to complete this questionnaire