

St Heliers Health Centre

Customer Feedback - Tell Us What You Think

Our practice appreciates your comments and will use your feedback to support improvements. If you have any concerns or compliments, let us know. **Date:** _____ **Time:** _____

Compliment

Suggestion

Concern

Complaint

Tell us your experience with specialists, hospitals and community services after we referred you.

Please write here

If you wish to be contacted about your comments please leave your contact details below

Name:

Phone no:

**Thank-you for taking the time to complete the
Consumer Feedback form**

Place completed form in the box provided

