



Staff member: _____

Date: _____

THINK FAMILY

Service User Feedback – Adult

Parents/Family

1. **When you started, did the worker tell you enough about the service?**
Yes / No (please circle)

2. **Did you find the staff helpful?**
Yes / No (please circle)

3. **Did you find the staff reliable?**
Yes / No (please circle)

Domains- As a result of the service I have received;

Domain 1	Please Circle
I have more understanding into my own mental health/and/or addictions (delete as necessary)	Yes
	No
	N/A
I have a better understanding of the impact my mental health/and/or addictions has on my children and other family members (delete as necessary)	Yes
	No
	N/A
Domain 2	Please Circle
I understand that further needs have been identified for my children and other family members	Yes
	No
	N/A
Domain 3	Please Circle
The family focus approach has improved relationships with my children and other family members	Agree
	Disagree
	N/A

Domain 4	Please Circle
The family conversation has included talking about Family Strengths, Protective, Risk Factors and Family Stresses	Agree
	Disagree
	N/A
Domain 5	Please Circle
I am being supported by both mental health services and children's services	Agree
	Disagree
	N/A
Overall how satisfied were you with the service? (Number)	Very Satisfied
	Satisfied
	Not Satisfied
Domain 6	Please Circle
The family conversation has helped me understand my families cultural* and community** influences	Agree
	Disagree
	N/A

*What do we mean by Culture – myths, stigma, perceptions, poverty, housing, financial, ethnicity

**What do we mean by Community – the need to support stimulating and age appropriate experiences, from child care providers to adulthood in community supports. This is also a continuum of the family; siblings, extended family, young carers, grandparents, neighbours, friends.

Any Additional Comments