

## THANK YOU FOR YOUR COMMENTS

Your feedback is important to us and helps to improve our service.

We want to hear about your experience working with Simcoe Muskoka Family Connexions.

Please don't hesitate to contact us if you have any specific questions or comments about any service you have received.

If you wish to make a formal complaint please see the "We Care about our Service" brochure or visit us online for more information at [familyconnexions.ca](http://familyconnexions.ca).

## OUR PURPOSE

To work together with families, community partners, and colleagues to enhance the safety and wellbeing of children, youth and families.

# We Want to Hear From You

## CONFIDENTIAL FEEDBACK FORM

### Organizational Excellence & Accountability

60 Bell Farm Road, Unit 7  
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 /SMFConnexions

 @SMFConnexions

[familyconnexions.com](http://familyconnexions.com)



Simcoe Muskoka  
**Family Connexions**

Safe kids. Strong families.  
Compassionate community.

## TELL US WHAT YOU THINK ABOUT OUR SERVICES

Please take a few minutes to complete this questionnaire and return this form to Simcoe Muskoka Family Connexions using the secure feedback boxes located in each branch office or by mail. We are happy to provide you with a postage-paid return envelope. If you prefer, you may also choose to provide anonymous feedback online by clicking on the client corner tab on our website at [www.familyconnexions.ca](http://www.familyconnexions.ca). Your information will be kept confidential.

	Strongly Agree	Somewhat Agree	Somewhat Disagree	Strongly Disagree	Not Applicable
1. My messages were returned within 24 hours (i.e by phone, text, e-mail)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. I was treated with respect.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Agency staff took the time to listen to my point of view.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Agency staff helped me identify my family's strengths.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. I clearly understood why the agency became involved with my family.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. I clearly understood what had to happen for my case to be closed.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. I would feel comfortable contacting the agency in the future for services.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Overall, I am satisfied with the services my family and I received from the agency.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. What part of our service or involvement did you find helpful? What did we do well?	<hr/> <hr/> <hr/>				
10. What part of our service or involvement with you and/or your family could we improve on?	<hr/> <hr/>				
11. As a result of your involvement with the agency what changed for you, your child, youth or family?	<hr/> <hr/>				

12. Was our service provided to you in an accessible manner?

Yes  Somewhat  No

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13. Did you encounter any problems in accessing our services?

Yes  Somewhat  No

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14. What would you have changed about your involvement with the Agency?

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15. Did you receive culturally appropriate services? Please comment below.

Yes  No  N/A

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16. Avez-vous reçu des services de qualité en français? If applicable, did you receive services in French? Veuillez inscrire vos commentaires ci-dessous.

Oui/Yes  Non/No  N/A

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