

FEEDBACK FORM
(To be completed by PHCT member)

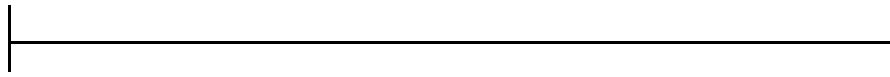
Please complete this form after you have had
accompany you.

1. Did he/she turn up on time?

2. Please rate his/her subsequent understanding of your role.

No understanding my role

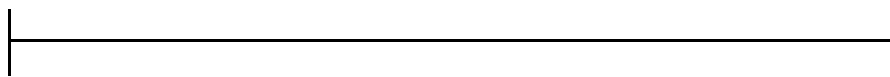
Fully understand my role
as far as I am aware



3. Please rate his/her interest

Not at all interested

Very interested

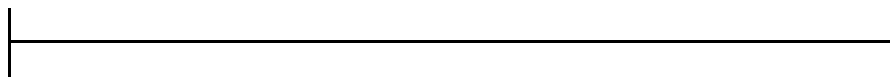


4. Please rate his/her communication

a) with you

Poor

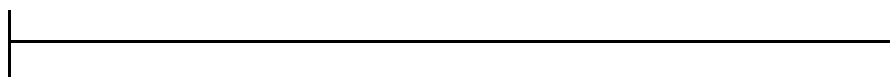
Excellent



b) with any patients seen

Poor

Excellent



5. Any other comments

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