*Insert hospital logo*

# **Feedback Form for Parents**

**This form is designed to help you think about any questions or comments you may have about aspects of your and your baby’s care. You do not have to use this form or limit yourself to the spaces in this boxes. The form is just a way of triggering your thoughts.**

**Any feedback you give us will help the hospital team to review your care and ensure we address your questions as best as we can.**

**You can post the feedback form back to us, using the self-addressed envelope or call us to discuss your questions or concerns using the details of your key contact. You can also access the form online at [*insert link*].**

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| **Care during pregnancy**   * Please use this section for comments on and questions about the care you received during your pregnancy |
| **Care during the birth of your baby**   * Please use this section for comments on and questions about the care you received during the birth of your baby |
| **The care of you, your family and your baby after birth**   * Please use this section for comments on and questions about how our maternity team cared for you after the birth of your baby |
| Please use this section to tell us about the care you received from any other team. This may include other medical teams, community midwives, your GP, counsellors, chaplains, The Patient Advice and Liaison Service (PALS), Patient Experience Team, or a hospital complaint system |
| Please use this section to tell us about any aspects of your care that were most supportive |
| Are there any other comments you’d like to make? |