OCCUPATIONAL HEALTH SERVICE

Feedback

Occupational Health at Queen Mary, University of London is constantly striving to improve the service it offers to its clients. As someone who has used our service, we would be grateful for feedback from you. Would you be kind enough to complete this form and send it back to Occupational Health Service, Ground Floor Geography Building, Mile End Campus in the QM internal mail or via email.

Any feedback that you give is anonymous and will only be used to improve our

servi	ce.									
1.		What is your role at Queen Mary's? Please tick one only:								
		Medical Stud								
		Dental Stude								
		Post Graduat Staff	e Student							
		Other: please	give brief details							
2.		Why did you have Please tick as many as	e an appointment with Occu	pational Health?						
		Health screer	n (medical or dental student)	dent)						
		□ Vaccination								
		□ Travel services□ Assessment								
		Other: please give brief details								
3.	Who was your appointment with? Please tick one only:									
			onal Health Adviser (nurse)							
		An Occupation Not sure	onal Health Physician (doctor)							
		i Not Suig								
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4.	How would you describe the service you received from our reception staff? (please circle one number)									
Excellen	İ	5	4	3	2	1	Unsatisfactory			
5. How would you describe your meet professional? (please circle one number)				eting with	ting with the Occupational Health					
Excellent		5	4	3	2	1	Unsatisfactory			
6.	Overall, what do you think of the Occupational Health Service? (please circle one number)									
Excellent		5	4	3	2	1	Unsatisfactory			
		ave any c				hat you v	would like to make			
THAN	K YOU F	OR TAKII	NG THE T	TIME TO (COMPLET	TE THIS F	EEDBACK FORM			

Document Owner:
Marcia Bennett-Pompey

Date Reviewed: 03.2018

Next Review Date: 03.2023