



**Capital and Coast
CARE COORDINATION CENTRE**

Referrer Feedback Form

The Capital & Coast Care Coordination Centre is commencing a pilot of a new referral form, ending 30 March 2007. We invite you to provide feedback on the draft referral form in the space below:

1. The form was easy to follow: Yes/No
Comments:

2. The form captured the information I needed to pass on Yes/No
Comments:

3. The form allowed enough space to capture relevant details
Yes/No
Comments:



4. I attached additional relevant information to the referral

Yes/No

Comments:

5. I recommend the following changes:

a. _____

b. _____

c. _____

d. _____

6. Overall I rate this referral form as:

a. Excellent

b. Very good

c. Satisfactory

d. Poor

7. Any other comments:

Please return your completed feedback form via e-mail, post or fax to:
Fran Cook, Service Manager, Care Coordination Centre by 13 April 2007

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Thank you for your participation and feedback