

# Counselling Service: Evaluation



We wish to continually improve our work, and your honest response to the following questions will greatly assist this.

## Counselling: In which area were you seen?

|                          |                          |                          |                          |                          |                          |                          |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Liverpool                | Manchester               | Chester                  | New Brighton             | West Kirby               | Southport                | Sheffield                |
| <input type="checkbox"/> |

## Please Rate The Following:

(1 = very poor, 2 = poor, 3 = average, 4 = good, 5 = very good)

How would you rate your counselling experience? Rating: .....

Comments .....

How well do you feel you and your counsellor worked together? Rating: .....

Comments .....

How expert and effective did your counsellor seem to be? Rating: .....

Comments .....

If you are not presently using our services, why did you stop?

Comments .....

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How good was the information given before your first appointment? Rating: .....

How valuable did you find the Counselling Agreement? Rating: .....

How would you have rated your well-being before your counselling? Rating: .....

How would you rate your well-being at the end of your counselling? Rating: .....

Did you feel that the counselling you received helped you grow? Rating: .....

Comments .....

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How would you rate the use of prayer in your counselling? Rating: or N/A .....

If you need further help, would you return to your counsellor? .....

Additional comments about your counsellor e.g. appearance, punctuality etc:

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How confidential did you feel your disclosed information would remain. Rating: .....

## Reception: Admin staff and facilities: please give your overall rating of:

Friendliness ..... Efficiency ..... Appearance .....

Reception area ..... Counselling room ..... The Building .....

Would you recommend the services of Reach? .....

Please take this opportunity to express your feelings, either positive or negative, about your experience with Reach. Also, any suggestions. Please be completely open and honest, so we may check our standards to see if we need to make changes.

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Please tick to give us permission to use any comments anonymously for publicity

## I want to help others find a better life !



You can help others to receive a similar quality of care by being a Reach *Partner* or a *Friend*. This way you are enabling hurting people across the North West to find a better life. *Partners* choose to give regularly (usually by monthly standing order). This gives the Team a great sense of support, as well as much needed resources. *Friends* also play a significant part in the work, through being generally supportive, considering occasional giving and perhaps prayerful support.



### I would like:

1. To become a Friend of Reach *Friends receive our newsletter and consider occasional giving*
2. Information on being a Reach Partner *Partners receive our newsletter and choose to donate monthly*
3. Information on becoming a volunteer with Reach, or helping with fund raising
4. To discuss having a Reach presentation at your church *(We will phone you to discuss this.)*

Name .....

Date .....

Thank you very much for taking the time to complete this. We will use this information as we seek to develop and improve our work.

Please return this evaluation to: Reach Merseyside, 85A Allerton Road, Liverpool L18 2DA  
Or use the freepost envelope Tel: 0151 737 2121

