

Dear Sir or Madam,

Subject: Satisfaction Questionnaire on the Services Rendered by the Local Service Quality and Complaints Commissioner's Office

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You have recently called on the services provided by the Local Service Quality and Complaints Commissioner's Office of the Douglas, Mental Health University Institute.

In order to improve the processing of future requests, this questionnaire is sent to you so that you may indicate your level of satisfaction regarding the services that you have received. You may or may not indicate your name.

Your answers will be reviewed and will help us to improve the services provided by the Local Service Quality and Complaints Commissioner's Office to other people, and the results of the assessment will be submitted to the attention of the Board of Directors, as part of the activity report issued by this Office.

Thank you for your cooperation.

The Local Service Quality and Complaints Commissioner,

*Francine Y. Bourassa*

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Francine Y. Bourassa, MA

# Satisfaction questionnaire on the services rendered by the Local Service Quality and Complaints Commissioner's Office

You have used the services of the Local Service Quality and Complaints Commissioner's Office this year in order to formulate:

- A complaint
- A request for assistance
- A request for an intervention
- Other

Please answer the following questions:

**What did you like about these services?**

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**What didn't you like about these services?**

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**What improvement would you like to see from these services?**

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# What do you think?

Please tick the appropriate answers.

**Of your welcome at the Local Commissioner's Office, on the phone or in person.**

\_\_\_\_\_   
Excellent

\_\_\_\_\_   
Good

\_\_\_\_\_   
Fair

\_\_\_\_\_   
Poor

**Of the information you obtained from the Local Commissioner's Office.**

\_\_\_\_\_   
None

\_\_\_\_\_   
Incomplete

\_\_\_\_\_   
Complete

\_\_\_\_\_   
Very complete

**Of the assistance you were provided by the Local Commissioner's Office.**

\_\_\_\_\_   
Not helpful

\_\_\_\_\_   
Not very helpful

\_\_\_\_\_   
Helpful

\_\_\_\_\_   
Very helpful

**Of the handling of your request or the examination of your complaint, in general, done by the Local Commissioner's Office.**

\_\_\_\_\_   
Excellent

\_\_\_\_\_   
Good

\_\_\_\_\_   
Fair

\_\_\_\_\_   
Poor

**Of the actions taken regarding your concerns, after the intervention of the Local Commissioner's Office.**

\_\_\_\_\_   
No results

\_\_\_\_\_   
Little results

\_\_\_\_\_   
Good results

\_\_\_\_\_   
Very good results

**Of the quality of services you received at the Local Commissioner's Office, as a whole.**

\_\_\_\_\_   
Unsatisfactory

\_\_\_\_\_   
Not very satisfactory

\_\_\_\_\_   
Satisfactory

\_\_\_\_\_   
Very satisfactory

**Of the possibility of appealing to the *Protecteur du citoyen*, only in the case of a complaint, to obtain more satisfaction.**

\_\_\_\_\_   
No interest

\_\_\_\_\_   
Little interest

\_\_\_\_\_   
Yes, maybe

\_\_\_\_\_   
Yes, certainly

**Of referring a friend or a client to the Local Commissioner's Office.**

\_\_\_\_\_   
Yes, certainly

\_\_\_\_\_   
Yes, maybe

\_\_\_\_\_   
I don't think so

\_\_\_\_\_   
Certainly not

**T**hank you for your cooperation!

If you wish, you may tell us how to contact you.

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