

## Counselling Survey

This survey could be adapted to suit different patient needs. This particular survey is aimed at patients who are supported at Oncology/Breast cancer units.

**1** How did you find out about the counselling service offered by the Oncology/Breast cancer unit?

- From a leaflet                       From a member of staff involved in your care                       Other

**2** Once it was agreed that a referral to the counsellor would be helpful, how long was it before the counsellor contacted you?

- 0-7 days                       7-14 days                       Other

**3** Were you happy with the response time?

- Yes                       No

**4** Did you feel that the counselling referral was made at the appropriate time for you?

- Yes                       No

**5** Once your counselling started, how easy was it for you to make contact with the counsellor if you needed to?

- Very Easy                       Fairly Easy                       Not Very Easy                       Difficult                       Very Difficult

**6** Did you proceed with the counselling?

- Yes                       No

If you answered YES to Q6 then please answer these questions, otherwise thank you for your time.

**7** How many sessions with the counsellor did you have?

- One session                       Two to five sessions                       Six to ten sessions                       Other

**8** Would you have liked more sessions?

- Yes                       No

**9** Were you taught any relaxation Techniques?

- Yes                       No

**10** If YES, did you find this a useful technique to help you manage your anxiety?

- Yes                       No

**11** Were you taught other ways to manage stress?

Yes

No

**12** If YES, were they helpful?

Yes

No

**13** Would you find it helpful to be offered complementary therapies, such as aromatherapy massage and reflexology?

Yes

No

**14** Did you find the room in which the counselling session took place:

	Yes	No
Comfortable?	<input type="checkbox"/>	<input type="checkbox"/>
Welcoming?	<input type="checkbox"/>	<input type="checkbox"/>
Offered privacy?	<input type="checkbox"/>	<input type="checkbox"/>

**15** Please use this space to make any further comments on the room:

**16** How would you rate the usefulness of seeing the counsellor?

Very helpful

Helpful

OK

Unhelpful

Very unhelpful

**17** In what ways have you found the counselling helpful or unhelpful?

**18** Please use this space to elaborate on your answers or to make any further comments;

Thank you for providing your feedback.