

# SEE and HEAR

## Quality Checklist for Care and Support

### What have you seen and heard when you have visited a care service?

We want you to tell us about your experience and wider observations. Please complete the following checklist indicating your response with a tick in the appropriate boxes.

### Quality Checklist

	Aspect	Question	Yes	No	Not seen	Comments
<b>S</b>	<b>Safety</b>	Did it seem that the entrance was secure?				
		Were you asked to sign in when you arrived?				
<b>E</b>	<b>Experience</b>	Did it feel you were greeted in a friendly way?				
		Did the atmosphere appear homely?				
<b>E</b>	<b>Effectiveness</b>	Did you have to wait long?				
		Did staff seem prepared for your visit?				

**and**

<b>H</b>	<b>Hear</b>	Could you hear interaction, chatting and or laughter?				
		Did it seem that customers were included and involved?				
<b>E</b>	<b>Environment</b>	Did it appear clean, pleasantly decorated and furnished?				
		Did it seem that there were any unpleasant odours?				
		Did you see any visible hazards?				
<b>A</b>	<b>Activities</b>	Did it appear that there were activities going on?				
		Were customers in the company of staff?				
		Did staff appear to be engaging with customers?				
<b>R</b>	<b>Respect</b>	Were customers acknowledged when staff came into the room?				
		Did staff knock and wait before entering bedrooms?				
		Did customers' appearance seem well kept with appropriate attire?				

Please share any further comments or observations you would like to raise.	
Name and address of service visited	
Date of visit	
Reason for visit (e.g. Social Worker; District Nurse; Hairdresser; Visitor)	
*Name (person completing form)	
*Role and organisation	
*Contact Number/Email address	

Your feedback and comments will help us recognise good practice or address concerns and will be used without identifying you. If you optionally wish to provide your name and contact details we will keep these confidential. We aim to continually improve the quality of care throughout Warwickshire and your feedback is valuable.

For further information on how we use your information please see:  
[www.warwickshire.gov.uk/privacy](http://www.warwickshire.gov.uk/privacy)

**Please post your completed form to:**

The Quality Assurance Team  
 Building Two, Saltisford Office Park,  
 Warwick,  
 Warwickshire, CV34 4UL

or alternatively please use the link to complete electronically:  
[www.warwickshire.gov.uk/seeandhear](http://www.warwickshire.gov.uk/seeandhear)

This form should not be used for complaints or feedback about individuals. If you wish to make a complaint, please contact the Customer Relations team.

Visit [www.warwickshire.gov.uk/socialcarecomplaints](http://www.warwickshire.gov.uk/socialcarecomplaints) and use the online 'Contact us' button.

If you think that an adult with care and support needs is experiencing, or at risk of, abuse or neglect, contact us 24 hours-a-day on: **01926 412080**.

**Thank you for taking the time to complete this form**

