# **https://intranet.rbch.nhs.uk/uploads/communications/images/University_Hospital_Dorst_NHSFT_CMYK_Blue.png**

Neonatal Unit

Poole Hospital

Longfleet Road

Poole

BH15 2JB

# **Parent Feedback Form**

This form is designed to help you think about any questions or comments you may have about aspects of your Baby’s Care in the Neonatal Unit.

You do not have to use this form or limit yourself to the spaces in these boxes. The form is just a way of triggering your thoughts.

Any feedback you give us will help the hospital team to listen to understand, and ensure we address any questions you may have.

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| **Care on Admission**   * **Please use this section for comments on and questions about the care You and Your Baby received on Admission to the Unit** |
| **Care During Your Stay on the Unit**   * **Please use this section for comments on and questions about the care You and Your Baby received during your stay on the Unit** |
| **Care of you, your family and your Baby prior to Discharge**   * **Please use this section for comments on and questions about You and your Baby’s Care in preparation for discharge**   **Please use this section to tell us about the care you received from any other team. This may include other Medical Teams, Community Midwives, your GP, Counsellors, The Patient Advice and Liaison Service (PALS), Patient Experience Team, or a hospital complaint system.**  **Please use this section to tell us about any aspects of You and your Baby’s Care that you found most supportive**  **Thank You for Your Feedback** |