

# Customer Satisfaction Survey Form



**We're committed to operating to really high standards and offering our customers the best service we can.**



To demonstrate that, we're members of the British Healthcare Trades Association (BHTA) and we agree to keep to their Code of Practice, which is strictly monitored by both BHTA and by the Chartered Trading Standards Institute.

Our commitment to you:

- we never cold-call
- we never pressure sell
- we protect all pre-payments and deposits from customers
- we encourage you to have an advisor present at any home visits
- we will give you information you need to know in writing
- through our membership of BHTA, you have access to their free complaints mediation service if things go wrong

We want to know how we're doing – and so does the BHTA.

**To help us offer an even better service, we'd really appreciate it if you could answer the three questions on the other side of this page. BHTA will collate our customers' answers and let us know our scores. They will anonymise any comments you make.**

If you're not happy with any aspect of the service or product, please talk to us on the telephone number given above – we'll do our best to put it right.

If we're not able to resolve the problem to your satisfaction, you can contact BHTA and ask them to assist. You can contact them at [complaints@bhta.com](mailto:complaints@bhta.com) or on 020 7702 2141.

**You can:**

- hand the completed form overleaf back to us and we'll send it to BHTA
- or post the completed form overleaf to BHTA for free; just use the Freepost address envelope provided (please ask us for one if you cannot find it with this form).

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## 1. What did you buy?

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## 2. What did you think of:

	Very good	Good	Okay	Poor	Not applicable
The overall quality of the product/service you bought					
The staff's product knowledge					
How easy to understand any paperwork was?					
How clearly any terms/conditions were explained to you?					
The length of time taken to serve you/place your order					
The staff's general level of courtesy and helpfulness					
The overall quality of service you received					

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## 3. Was there someone particularly helpful, who you would like to nominate as the BHTA Employee of the Year?

If so, please complete the details below:

**EMPLOYEE(S) NAME**

**REASON**

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Thank you for giving your views, which will help us do even better in the future.