



IMHP (Improving Mental Health Provision CIC) Feedback Form

We realise that we benefit from a wide and diverse cohort with varied views and welcome any input that ensures IMHP's activities are carried out in a democratic manner. There is no exact precedent for the type of organisation that we are developing together and it is a learning curve for us all.

It is useful to know what is working well and if you are amenable we will include anonymous testimonies online and in print on occasion. Suggestions are also very welcome and integral to our approach - both can be documented via this form.

From the constitutional level wide participation in decision making is built in to IMHP's structure. To this end we share information and welcome discussion and involvement in planning via meetings and the Facebook group - this has been streamlined into the SLACK application available via the website. We are also more than happy to keep non-users of electronic communication in the loop via texts.

Should you be unhappy with any aspect of IMHP's decisions, delivery, team members, etc. please complete this form. Interpersonal issues can also be documented and handled in this manner. The form can be submitted anonymously and your views taken on board but we will be more than happy to arrange a confidential problem solving meeting if you wish to make yourself known.

What type of feedback is this? (please tick all that apply)

Compliment Suggestion Concern Complaint Interpersonal Issue

What is it regarding? (please tick all that apply)

Our organisation in general Our team in general A particular team member

A visitor or participant A guest facilitator or partner organisation A venue

Delivery and activities Signposting and information

Communications (face to face, phone, email, website, SLACK, Facebook) Other

Please give as much detail as you are able to so we can best address your feedback

What is your involvement with IMHP? (please tick all that apply)

Team member Participant Visitor Volunteer Subcommittee

Guest facilitator Representative from another organisation or service Other

Are you happy for your feedback to be published anonymously electronically or physically and/or shared with other agencies where appropriate ? Yes No

*If you wish to make yourself known Information contained in this part of the form will be kept in accordance with the Data Protection Act 1998, treated confidentially, and will not be shared with any other individuals or organisations. **Otherwise please leave blank.***

Name Telephone

Email Address

Would you like a meeting regarding this matter? Yes No

If so when is the best time to make contact and meet with you?

Many thanks for providing feedback, we will ensure that it is taken on board!