

# Service User and Carer's Feedback:

enhancing learning for student nurses



Dear Service User/Carer,

The involvement of service users and carers in the assessment of nursing practice is highly valued. Therefore we would be grateful if you would consider providing responses to the questions overleaf about the care that you have received from the student nurse named below. This can be anything you wish to share. This information will contribute to 'practical assessment' as part of the student's training.

Your participation in this feedback is entirely anonymous and therefore your personal details are not required. Your comments will be retained by the student in their portfolio. Feedback will be treated in strict confidence between the student and their mentor (who is a registered nurse) and will not affect your care. Your care will also not be affected if you choose not to participate.

If you do chose to participate, please complete this form and hand it to your registered nurse on completion.

Thank you for taking the time to take part.

Name of student nurse	
Student signature	
Date	

Name of mentor	
Mentor signature	
Date	

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Please read the instructions on the back page of this leaflet before answering any of the questions contained in this leaflet.

Please answer the following questions relating to the student nurse named overleaf by circling one answer to each question and adding any comments you wish to share in the space provided. Thank you.

**1 How would you rate the nursing care provided by the student?**

Poor    Acceptable    Satisfactory    Good    Very Good    Excellent    Exceptional  
Comments

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**2 How compassionate was the student's care?**

Poor    Acceptable    Satisfactory    Good    Very Good    Excellent    Exceptional  
Comments

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**3 How respectfully did the student treat you?**

Poor    Acceptable    Satisfactory    Good    Very Good    Excellent    Exceptional  
Comments

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**4 How clearly did the student communicate with you?**

Poor    Acceptable    Satisfactory    Good    Very Good    Excellent    Exceptional  
Comments

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**5 How well did the student listen to you?**

Poor    Acceptable    Satisfactory    Good    Very Good    Excellent    Exceptional  
Comments

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**6 How well did the student demonstrate an understanding of your needs?**

Poor    Acceptable    Satisfactory    Good    Very Good    Excellent    Exceptional  
Comments

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Service User/Carer – additional comments

Mentor/Registered Nurse comments

Student reflection