



Customer Satisfaction Survey

As part of our on-going commitment to customer satisfaction, we are keen to seek the views of our customers about the service we provide. This will help us to identify any areas that need improving. Please take a few minutes to fill out this questionnaire and then place it in the box provided in the Reception (or in the prepaid envelope provided). Thank you.

All information will be treated confidentially.

Why did you come to the Register Office today?

- | | | | | | |
|--------------------------|--------------------------|-----------------------------------|--------------------------|-------------------------|--------------------------|
| Register a birth | <input type="checkbox"/> | Register a death | <input type="checkbox"/> | Give a notice | <input type="checkbox"/> |
| Be married | <input type="checkbox"/> | Plan a marriage/civil partnership | <input type="checkbox"/> | Attend a marriage | <input type="checkbox"/> |
| Obtain a certificate | <input type="checkbox"/> | Plan a renewal of vows ceremony | <input type="checkbox"/> | Plan a naming ceremony | <input type="checkbox"/> |
| Attend a naming ceremony | <input type="checkbox"/> | Attend a renewal of vows ceremony | <input type="checkbox"/> | Plan a funeral ceremony | <input type="checkbox"/> |

Other (Please state)

How did you find about the Register Office?

- | | | | | | | | |
|-------------------------|--------------------------|----------------------|--------------------------|----------------------|--------------------------|---------------|--------------------------|
| Local Press | <input type="checkbox"/> | Hospital | <input type="checkbox"/> | Midwife | <input type="checkbox"/> | GP | <input type="checkbox"/> |
| Funeral Director | <input type="checkbox"/> | Friend/Relative | <input type="checkbox"/> | Previous visit | <input type="checkbox"/> | Word of mouth | <input type="checkbox"/> |
| General Register Office | <input type="checkbox"/> | Other Council Office | <input type="checkbox"/> | Other (Please state) | <input type="checkbox"/> | | |

Did you make an appointment before you visited the Register Office?

Yes No

If you made an appointment before attending, were you seen on time?

Yes No

If no, how long did you have to wait after your appointment time?

Less than 5 minutes 5-10 minutes 11-15 minutes More than 15 minutes

If you didn't make an appointment, how long did you have to wait?

Less than 5 minutes 5-10 minutes 11-15 minutes More than 15 minutes

At present the office is open Monday - Wednesday 8.30am - 5.00pm, Thursday 8.30am - 6.00pm, Friday 8.30am - 4.30pm and Saturday by appointment only. Do you think these hours are satisfactory?

Yes No

If no, when else would you like the Register Office to be open? _____

Overall how satisfied or dissatisfied were you with your visit to the Register Office today?

- | | | | | | | | |
|----------------|--------------------------|-------------------|--------------------------|------------|--------------------------|---------------------|--------------------------|
| Very satisfied | <input type="checkbox"/> | Fairly satisfied | <input type="checkbox"/> | Neither | <input type="checkbox"/> | Fairly dissatisfied | <input type="checkbox"/> |
| Dissatisfied | <input type="checkbox"/> | Very dissatisfied | <input type="checkbox"/> | No opinion | <input type="checkbox"/> | | |

Overall how would you rate the service you received whilst you were at the Register Office today?
(1 being poor, 10 being excellent) Please circle

1 2 3 4 5 6 7 8 9 10

Please say how much you agree or disagree with the following statements about the Register Office:

Strongly agree Agree Neither Disagree Strongly disagree No opinion

On arrival:

From the outside the building looked attractive

It was clear that I had arrived at the Register Office

Waiting Room / Reception:

The waiting area was clean and tidy

The reception staff were polite

The reception staff dealt with me in an appropriate manner

Your appointment:

The information I received was clear and understandable

My questions were answered clearly

The officer dealt with me in an appropriate manner

Leaflets:

The information in the leaflets provided was clear and easy to understand

Overall:

The service I have received from the Register Office today represents value for money

Presentation:

The wearing of a uniform enhances the overall appearance of the registration service

If you answered disagree to any of the above please explain why

Overall

The Register Office offered you sufficient choice?

If you answered disagree, please explain why

If you have any suggestions for how our service can be improved, please give them below.

If you would like a written response to any of your comments or suggestions please complete your personal details below:

Name _____

Address _____

Thank you for taking the time to complete this questionnaire. If you have any queries concerning this questionnaire, please contact The Register Office, Nightingale House, Balaclava Street, Stockton-on-Tees TS18 2AL. Tel: (01642) 527720 Fax: (01642) 527725 Email: registrars@stockton.gov.uk