

My Review, My Views

Name:

Date of Review:

I attended my review ☐

I didn't attend my review because _____

1. Did the IRO speak to you at your meeting?

Yes ☐

No ☐

2. Did you meet with the IRO on your own?

Yes ☐

No ☐

3. Did you feel that the IRO listened to what you had to say?

Yes ☐

No ☐

Comments.....

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4. Did you feel that everyone else at the meeting listened what you had to say?

Yes ☐

No ☐

Comments.....

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5. Were you happy with the people that attended your review?

Yes ☐

No ☐

If not, tell us who else should attend?

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6. Do you know what the plans are for your future? (Care Plan/Pathway Plan)

Yes ☐

No ☐

7. Did you lead your review? (Chair or Co-Chair) Yes ☐ No ☐

If you led your review, tell us how it was?

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If you did not lead your review, please tell us why?

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8. What can we do to help you lead your next review? (Chair or Co-Chair)

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Anything else you want to share with us about your review or ideas of how you would like to get involved next time?