



Feedback Form

Thank you for entrusting Hali Rauer & Full Circle: End-of-Life Doula Services with the care and support of your loved one during their end-of-life journey. Your feedback is important to us as we strive to continuously improve our services. Please take a few moments to share your thoughts and experiences with us.

Client's Name: _____ Relationship to client: _____

Date of Service: _____

SERVICE AND PERFORMANCE	1	2	3	4	5
Please rate your overall experience with the end-of-life doula services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How would you rate the communication between you and the end-of-life doula?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did the end-of-life doula provide adequate emotional support to you and your loved one?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did the end-of-life doula provide helpful practical assistance with advance directives, personal affairs, and caregiving coordination?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did the end-of-life doula offer meaningful spiritual or existential support to you and your loved one?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did the end-of-life doula assist you and your loved one with legacy projects or activities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did the end-of-life doula provide helpful support to you and your family during the grieving process?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Anything you'd like to share with us?
