National Stroke Clot Retrieval Key Performance Indicators consumer feedback

|  |  |  |  |
| --- | --- | --- | --- |
|  | Always | Sometimes | Never |
| Did the team keep you and your whānau informed of what was happening in a way you could understand? |  |  |  |
| Did you feel safe and supported during your time in hospital? |  |  |  |
| Did the team respond to you/your whānau needs and requests satisfactorily? |  |  |  |

Comments: