

## Let us serve you better

*Dear Guest*

*Thank you for staying at Jacaranda Lodge,  
Sydney Adventist Hospital.*

*We value your visit here and will do our  
utmost to make your stay comfortable -*

*“A Home away from Home”.*

*We would appreciate your views regarding  
your stay with us, because only you can tell  
us if we are meeting your needs.*

*Please take a few moments to complete this  
form. You may leave it in the silver box out-  
side the Lodge office or give to us when you  
leave*

***Thank you for your feedback.***



SYDNEY  
ADVENTIST  
HOSPITAL

Jacaranda Lodge was founded in 1993 to provide budget accommodation for patients and their families while undergoing treatment at the Sydney Adventist Hospital.

If you would like to make a contribution to assist with ongoing services you can place your donation in the donation box located by the Lodge office. For donations by credit card, please call (02) 9487 9066.

*Thank you for making a difference.*

### OPTIONAL INFORMATION

**Name:**

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**Address:**

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**Contact No. :**

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Welcome to the...

## Jacaranda Lodge Sydney Adventist Hospital

Your stay...Your say....



**Thank you for your time....**

## PRIOR TO ARRIVAL EXPERIENCE

4 = Poor 3 = Fair 2 = Good 1 = Excellent

4 3 2 1

Information provided on the telephone

Information sent in the Lodge letter

Information provided by your Referring

Doctor / Admissions staff

## CHECK IN EXPERIENCE

4 = Poor 3 = Fair 2 = Good 1 = Excellent

4 3 2 1

Please rate the ease of locating the Lodge

Speedy and efficiency of check-in

Please rate your overall arrival experience

Was the check-in warm & friendly?  Yes  No

## ROOM EXPERIENCE

4 = Poor 3 = Fair 2 = Good 1 = Excellent

4 3 2 1

Please rate your overall room experience

Cleanliness of your room

Cleanliness & freshness of your bathroom

Maintenance of your room

Are there any issues with your room?

Please specify:

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## KITCHEN

4 = Poor 3 = Fair 2 = Good 1 = Excellent

4 3 2 1

Please rate your overall kitchen experience

Cleanliness of your Kitchen

Facilities of your Kitchen

Maintenance of your Kitchen

Are there any issues with your Kitchen?

Please specify:

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## STAFF

4 = Poor 3 = Fair 2 = Good 1 = Excellent

4 3 2 1

Overall experience with our staff

Genuine, caring attitude

Helpful in fulfilling requests

Present themselves professionally  Yes  No

Did they meet your needs & expectations  Yes  No

Were you made to feel at home?  Yes  No

Any further comments:

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## EXTRAS

4 = Poor 3 = Fair 2 = Good 1 = Excellent

4 3 2 1

Was Parking convenient

Were the security staff helpful & friendly?  Yes  No

Was the check out procedure smooth & understood clearly?  Yes  No

Any further comments/suggestions:

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## TELL US ABOUT YOURSELF

What is your postcode? \_\_\_\_\_

Female  Male

Age:

21-30  31-40  41-50  51-60  61-70

71 & over

Length of stay:

1 week & under  2 to 4 weeks  Over 5 weeks

Are you a Patient  or Carer

Was your procedure at SAH  or Other Hospital

Your Room Number \_\_\_\_\_

How did you hear about Jacaranda Lodge?

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Any further comments/suggestions:

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