

Transition/Moving on Review

Please answer the following if applicable?

Our goal was to ensure that the move from CAMHS was in a timely manner and that you continued to receive support until you moved on.

Was this achieved?

Yes
 NO

Our goal was that you were communicated with as agreed throughout the move

Was this achieved?

Yes
 NO

Our goal was that the information shared about you was discussed with you.

Did this happen?

Yes
 NO

Was your moving on goal achieved?

No 0 1 2 3 4 5 6 7 8 9 10 Yes

Overall rating of your transition/moving on experience?

No 0 1 2 3 4 5 6 7 8 9 10 Yes

Was your moving on plan helpful?

Yes
 NO

Please could you let us know how we could improve your experience moving between services?

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Thank you