Organisation name Site or unit		FORM Structured In-Stay Feedback Form	
Document ID	CON-FRM-004	**Version**	1.0
Status	Blank form, to adapt	**Issue date**	
Review date		**Replaces**	
Owner		**Approved by**	
Signature			

Form · CON-FRM-004 · Version 1.1 · Approved by the ASF Expert Committee

Supports: 2A.8

1. Purpose

To record a patient's answers to fixed questions during their stay or day-care visit. The patient may decline any question.

2. How to complete

- Explain the purpose: to improve care. The answers are confidential and do not affect treatment.
- Ask the questions in the patient's language, or hand over the form.
- Record the answers as given, including any comment.
- If a safety concern is raised, inform the ward head at once.

3. Checks

Check	Entry
Staff explained my care and treatment clearly	Yes / Partly / No [EC]
I was involved in decisions about my care	Yes / Partly / No [EC]
I felt safe during my stay	Yes / Partly / No [EC]
I was treated with respect and dignity	Yes / Partly / No [EC]

I knew who to ask if I had a concern	Yes / Partly / No [EC]
Anything you would like us to change (free text)	Comment [EC]

4. Evidence

Reference	Note
E-009	ASF Expert Committee consensus. Questions to be finalised by the committee and the patient representative.

5. Change history

Version	Date	What changed	Approval
1.0	the date of approval	First version	Approved by the ASF Expert Committee
1.1	the date of approval	Internal quality review: corrected cross-references, status wording and document control	Approved by the ASF Expert Committee

6. References

- Accréditation Sans Frontières (2026). ASF Expert Committee consensus on Standard 1. (E-009)

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