

## Children and Young People's Short Breaks and Break Time feedback form

Name:

Age:

How did you feel before you took part in a Break Time activity? (please circle)



What activity did you do?

Did you have fun? (please circle)



Did you make new friends? (please circle)



Were the adults who looked after you nice? (please circle)



Are there other games or fun things you'd like to try?

**Service Contract Schedule 3 - Draft evaluation for Short Breaks (Sept. 2021)**

**How did you feel after you came to the Break Time activity? (please circle)**



**Is there anything else you would like to tell us about?**

**Draw a picture or tell us about an activity that you enjoyed.**

## Parent and Carer's Short Breaks and Break Time feedback form

Dear Parent/Carer

Please can you complete this form regarding the short break your child/young person has recently attended. Your views are important to help develop short break activities in the future.

- Your name
- Child/young person's name
- Break Time ID number (if applicable)
- Name of provider
- Activity and venue (if applicable)
- Date(s) and times attended

Was the service suitable for your child - were their needs met and did they enjoy the activities?

Is there anything that could be improved?

How has your child attending a Break Time or short break activity helped you?

**Service Contract Schedule 3 - Draft evaluation for Short Breaks (Sept. 2021)**

Has it helped any other family members?

What difference does having a short break make to your family?

Do you have any other comments regarding Short Breaks?

Please return your completed form to: [cyp-shortbreaks@lancashire.gov.uk](mailto:cyp-shortbreaks@lancashire.gov.uk)

Or by post to: Policy, Information & Commissioning (Start Well), Room CH1:53, County Hall,  
Preston, PR1 0LD