



CITY AUDIT SERVICES CLIENT SURVEY

Ref: COY04_01/08/17 : NCH Allocations
 To: Sue Taylor, Assistant Director Housing Services
 Audit Manager: Mick Ahern
 Lead Auditor: John Slater

Following our recent audit, please complete this Survey by the 14/03/2008 , entering your evaluations against each question.

Please use the following evaluations:

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

AUDIT PROCESS

RATING

How well were the scope and objectives of our audit communicated to you?	
How well did our audit address the views that you expressed?	
How well were you kept informed of significant issues identified during the audit?	
At the conclusion of our audit, how well did we consult with you regarding our findings and recommendations?	

AUDIT STAFF

RATING

How well was the audit conducted with regard to the minimum disruption to the section?	
How well do you rate the conduct of our Auditor(s) in the following areas:	
a) Professionalism	
b) Courteousness	
c) Understanding of your business	

AUDIT REPORTS/CORRESPONDENCE

RATING

How do you rate the accuracy of the findings?	
How do you rate the relevance of the findings?	
How do you rate the practicality of the recommendations made or advice given?	
How well do you rate the format of our report?	
How do you rate the timeliness of the issue of the report?	

GENERAL OPINION

RATING

How would you rate the overall usefulness of the service we have provided?	
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As part of our commitment to improve the service that we provide, the responses to this questionnaire are recorded and used to calculate one of our performance indicators. To help us assess the performance of staff members, it would be appreciated if you could provide some detail to any of the answers marked with a rating of poor or fair (1 or 2):

We would also welcome any additional comments you may wish to make in relation to the service we provide:

Thank you very much for completing this Questionnaire.

Signed.....

Date.....

City Audit Services

