

Your feedback will help us learn more about what you think of your experience – what you like and what you think we could improve. Ultimately, you're helping us to make changes that will ensure we can offer the best possible care.

| Month / Year | Extremely Likely | Likely | Neither Likely nor Unlikely | Unlikely | Extremely Unlikely | Don't Know |
|--------------|------------------|--------|-----------------------------|----------|--------------------|------------|
| Jan-24 | 87 | 10 | 3 | 0 | 0 | 0 |
| Feb-24 | 0 | 0 | 0 | 0 | 0 | 0 |
| Mar-24 | 0 | 0 | 0 | 0 | 0 | 0 |
| Apr-24 | 0 | 0 | 0 | 0 | 0 | 0 |
| May-24 | 0 | 0 | 0 | 0 | 0 | 0 |
| Jun-24 | 0 | 0 | 0 | 0 | 0 | 0 |
| Jul-24 | 0 | 0 | 0 | 0 | 0 | 0 |
| Aug-24 | 0 | 0 | 0 | 0 | 0 | 0 |
| Sep-24 | 0 | 0 | 0 | 0 | 0 | 0 |
| Oct-24 | 0 | 0 | 0 | 0 | 0 | 0 |
| Nov-24 | 0 | 0 | 0 | 0 | 0 | 0 |
| Dec-24 | 0 | 0 | 0 | 0 | 0 | 0 |