

Feedback form for new ideas.

Idea / trial evaluated	
Date	

1) How beneficial have you found the trial of the above idea? (1 = no improvement - 5 = totally revolutionary) Tick the most appropriate.

1 2 3 4 5

2) If there has been an improvement, how could these be described?

- _____
- _____
- _____
- _____

3) Do you have a better solution than the suggested scheme?

Further comments

Thank you – your feedback is appreciated.

STRATA

**Stand Safe
Work Comfortably**