

Client Satisfaction Survey

SERVICES

I'm going to ask you several questions about how satisfied you are with the services you receive. You can answer: Very Satisfied, Satisfied, Neither Satisfied nor Dissatisfied, Dissatisfied, or Very Dissatisfied. You can also tell me if you really don't know.

1. How satisfied are you with **how often** services are provided?
a. Very Satisfied b. Satisfied c. Neither Satisfied nor Dissatisfied d. Dissatisfied e. Very Dissatisfied
2. How satisfied are you with the **length** of the service visits?
a. Very Satisfied b. Satisfied c. Neither Satisfied nor Dissatisfied d. Dissatisfied e. Very Dissatisfied
3. How satisfied are you with the **time of day** that services are provided?
a. Very Satisfied b. Satisfied c. Neither Satisfied nor Dissatisfied d. Dissatisfied e. Very Dissatisfied
4. How satisfied are you with the **day(s)** of the week services are provided?
a. Very Satisfied b. Satisfied c. Neither Satisfied nor Dissatisfied d. Dissatisfied e. Very Dissatisfied
5. Overall, how satisfied are you with the **quality** of the services you have received?
a. Very Satisfied b. Satisfied c. Neither Satisfied nor Dissatisfied d. Dissatisfied e. Very Dissatisfied

WORKERS

Next, I'm going to ask you several questions about how satisfied you are with the workers who come to help you. Again, you can answer: Very Satisfied, Satisfied, Neither Satisfied nor Dissatisfied, Dissatisfied, or Very Dissatisfied. You can also tell me if you really don't know.

6. How satisfied are you that your worker(s) has (have) the **knowledge and skills** needed to help you?
a. Very Satisfied b. Satisfied c. Neither Satisfied nor Dissatisfied d. Dissatisfied e. Very Dissatisfied
7. How satisfied are you with the way your worker(s) **treat you**?
a. Very Satisfied b. Satisfied c. Neither Satisfied nor Dissatisfied d. Dissatisfied e. Very Dissatisfied
8. How satisfied are you with the way you and your worker(s) **communicate**?
a. Very Satisfied b. Satisfied c. Neither Satisfied nor Dissatisfied d. Dissatisfied e. Very Dissatisfied
9. Do(es) your worker(s) **usually arrive at the scheduled time**?
a. Yes b. No c. I don't know when to expect them
10. Can you usually expect the **same person (people)** to come help?
a. Yes b. No c. Don't Know (d. Refused) (e. Not Applicable)

SERVICE IMPACT

The last set of questions focuses on the effect or impact these services have on your life.

11. Overall, would you say that the services you receive **meet your needs**?

- a. Yes b. to some extent c. No d. Don't Know (d. Refused) (e. Not Applicable)

12. Do these services help you to **maintain or improve** your quality of life?

- a. Yes b. to some extent c. No d. Don't Know (d. Refused) (e. Not Applicable)

13. Do these services help you **to stay in your home**? *(If at an ALF ask: Do these services help you to avoid moving into a nursing home?)* Would you say:

- a. Yes b. to some extent c. No d. Don't Know (d. Refused) (e. Not Applicable)

14. **Overall**, how satisfied are you with the services you receive?

- a. Very Satisfied b. Satisfied c. Neither Satisfied nor Dissatisfied d. Dissatisfied e. Very Dissatisfied

COMMENTS

That's the end of our questions.

15. Is there **anything else** you would like us to know about the services you receive?

**I want to thank you for participating in the survey.
Your feedback is important to the Department of Elder Affairs.
I hope you have a great day.**