Appendix B

Revised consumer feedback questionnaire (version mailed to consumers)

HACC consumer feedback interview schedule

The following questions are about the services and assistance you have been receiving from your local Home and Community Care (HACC) agency.

It is important that all government agencies providing assistance of this type receive some kind of feedback on their services. The Federal and State Governments also need to know that the quality of service you are receiving is of an acceptable level.

Your participation in this interview is entirely voluntary. Please indicate if there are any questions you would rather not answer. Your replies to the interview questions will be completely confidential. No information about you or your answers will be passed back to the agency providing your services.

Thank you for your time.

If the main client of the service is unable to complete this interview, a carer or household member may do so on his or her behalf.

Name of agency

1: Provision of services

1	Did someone from the agency discuss your needs with you before providing services?	_
		Yes
		Unsure \sqcup_3
2	If the agency discussed your needs with you, did they take into account all your carer might need help with?	the things you and
	your curer migni need neip with:	Yes \square .
		Yes
	Can't ren	nember \square_3
	Carreren	N_0
		1 10 4
3	Do you receive more than one service from the agency ?	
		Yes
		No <u> </u>
4	If you do receive more than one service from the agency, are they provided fashion?	l in a coordinated
	<i>Juenon</i>	Yes \square_1
		Partly 2
		No
5	What type of assistance do you receive from the agency?	
••••		
••••		

6	Did the agency make a clear agreement with you about which services (they would provide to you), how often you would get them and for how long?
	Yes \square
	Some of this information \square_2
	No, none of this information \square_3
7	Do you think that the services the agency said they would provide were the right services (or the right amount of services) for you? Yes
8	If you did not think the services were right, did you discuss this with the agency?
	Yes \square_1 No \square_2
9	Does the agency provide you with help in the way they said they would provide it?
	Yes Most of the time

2: Rights and information

1	How were your rights and responsibilities explained to you? (this would include your right to access personal information, confidentiality of personal information and privacy issues)
	Verbally explained \square_1
	Information provided (leaflets etc.) \square_2
	Already familiar with information \square_3
	Not explained \square_4
	4 · · · · · · · · · · · · · · · · · · ·
2	Do you have any concerns with the way the agency deals with privacy and confidentiality of information?
	Yes \square_1
	No \square_2
3	Do you have any concerns about the personal information the agency might keep about you?
	Yes \square
	No \square_2
4	Are you aware of any occasions when the agency may have passed on information about you without asking for your permission first?
	Yes
	N_0 \square_2
	<u>-</u>
5	Have you ever tried to get hold of the personal information that the agency has about you?
	Yes \square
	N_0
6	If you have tried to obtain personal information, did you get the information you wanted? Yes
	\square Mostly \square 2
	$N_0 = \frac{1}{2}$
	1 10 <u>3</u>

3: Satisfaction with services

1	How satisfied are you with the performance of the staff at the agency?
	Very Satisfied $\underline{\underline{\hspace{1cm}}}$
	Moderately Satisfied \square
	Unsatisfied
	Unsure \square $_{4}$
	Please comment/explain if you wish
•••	
•••	
2	Have you ever been concerned about your safety or security because of the actions
	of agency staff? Yes
	$ \begin{array}{c} \text{No} \\ \text{No.} \end{array} $
3	Does anyone from the agency discuss with you the need to change or increase the
J	amount of help you receive?
	Yes 1
	Yes, but not as often as I would like
	No
4	How often does someone from the agency contact you to see how you are getting along?
	At least weekly \bigsqcup_{1}
	At least every two weeks
	At least every two months \square_3
	At least every 6 months
	About once a year \sqsubseteq 5
	Not at all $lacksquare$
5	Do you feel that you could gain access to documents about the way the agency is run, if you wanted to?
	Yes
	Unsure \Box
	N_0

6	Have you ever asked the agency for help and been refused?	Yes	
7	If you have been refused help, what help did you ask for?		
8	Did the agency explain why they refused to help?	Yes	
9	Were you satisfied with their response?	Yes	
10	Not applicate the agency informed you of what to do if you're not happy with you get?	able	ee
11	Did the agency tell you that you can voice any concerns you have aboutside authorities?	out them t	
12	Do you feel confident that the agency will listen to any concerns you deal with them properly? Uns	Yes	

13 Do you think that things would go badly for you if you made a complaint abothe agency?	out
Yes	
Unsure	
No	
N0	. • 3
14 What do you think would happen if you made a complaint about the agency?	?
	•••••
	•••••
4: Advocacy	
4. Advocacy	
An advocate is a person you can choose to represent your rights, and negotiate or your behalf. This may be a friend, a family member or an advocacy service.	n
1 Did you receive any information from the agency about how you could obtain advocate?	n an
Yes	
Unsure	
Previously had information	
No	

5: General Information

1	You are
	Male \square_1
	Female \square_2
2	You are aged between
_	0-54 years
	55- 64 years
	65-74 years \square_3
	75-84 years \square_4
	85 and over \square_{5}
	85 and over • 5
3	The services you are receiving are primarily
	to help you \square
	to help the person you are caring for \square
	to help you as a carer \square $_{\scriptscriptstyle 3}$
4	You are (Please feel free to tick more than one box)
	From a non-English speaking background $lacksquare$ $lacksquare$
	Of Aboriginal or Torres Strait Islander descent $lacksquare$
	A pension recipient or otherwise financially disadvantaged \square_3
	Living in a rural or remote area \square_4
	Caring for someone with dementia \square_{5}
	None of the above \square_6
5	Is the agency sensitive and responsive to your different requirements as a member of one of these groups?
	Yes \square_1
	Partly \square_2
	No
	1 10 3

Further comments
(please feel free to elaborate on any issues you think need further discussion)