

Version used in pilot mailout

HACC consumer feedback form

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 response to this questionnaire is entirely voluntary. If there are any questions you do not feel comfortable answering please feel free to not reply to the question. If you would like to discuss any of your replies in further detail please note the “further comments” section on the final page of this document. Your replies to the survey 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 questionnaire, 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 they began providing services?

- Yes..... 1
- No..... 2
- Unsure..... 3

2 *If the agency discussed your needs with you, did they take into account all the things you and your carer might need help with?*

- Yes..... 1
- Mostly..... 2
- Can't remember..... 3
- No..... 4

3 Do you receive more than one service from the agency ?

- Yes..... 1
- No..... 2

4 *If you do receive more than one service from the agency, are they provided in a coordinated fashion?*

- Yes..... 1
- Partly..... 2
- No..... 3

Please comment/explain if you wish

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5 What type of assistance do you receive from the agency?

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6 How would you rate the agency in providing information about ALL of their services?

- Very good..... 1
- Good..... 2
- Fair..... 3
- Poor..... 4
- Unsure..... 5

7 Did the agency make a clear agreement with you about the services they would provide to you?

- Yes, in written form..... 1
- Yes, verbally..... 2
- I had a general idea..... 3
- Can't remember..... 4
- Not really..... 5

8 Did they tell you which services, how often you would get them and for how long?

- Yes..... 1
- Some of this information..... 2
- No, none of this information..... 3

9 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..... 1
- No..... 2

10 *If you did not think the services were right, did you discuss this with the agency?*

- Yes..... 1
- No..... 2

11 *If you did not discuss this with the agency, what were your reasons for not doing so?*

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12 **Are there other services which you would like to have?**

Yes..... 1
No..... 2

13 *If yes, please describe them*

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14 **Does the agency provide you with help in the way they said they would provide it?**

Yes..... 1
Most of the time..... 2
No..... 3

15 **Are you happy with the way your agency currently charges you for services?**

Yes..... 1
Mostly..... 2
No..... 3
Not relevant..... 4

Please comment/explain if you wish

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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..... 1
Information provided (leaflets etc)..... 2
Already familiar with information..... 3
Not explained..... 4

- 2 Do you have any concerns with the way the agency deals with privacy and confidentiality of information?**

Yes..... 1
No..... 2

- 3 *If you do have concerns, what are they?***

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- 4 Do you have any concerns about the personal information the agency might keep about you?**

Yes..... 1
No..... 2

- 5 Have you ever tried to get hold of the personal information that the agency has about you?**

Yes..... 1
No..... 2

- 6 *If you have tried to obtain personal information, did you get the information you wanted?***

Yes..... 1
Mostly..... 2
No..... 3

7 Are you aware of any occasions when the agency may have passed on information about you without asking for your permission first?

Yes..... 1

No..... 2

8 If you are aware of such occasions, what action did you take?

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3: Satisfaction with Services

1 How satisfied are you with the performance of the staff at the agency?

Very Satisfied..... 1

Moderately Satisfied..... 2

Unsatisfied..... 3

Unsure..... 4

Please comment/explain if you wish

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2 Have you ever been concerned about your safety or security because of the actions of agency staff?

Yes..... 1

No..... 2

3 Does anyone from the agency discuss with you the need to change or increase the amount of help you receive?

Yes..... 1

Yes, but not as often as I would like..... 2

No..... 3

4 How often does someone from the agency contact you to see how you are getting along?

- At least weekly..... 1
- At least every two months..... 2
- At least every 6 months..... 3
- About once a year..... 4
- Not at all..... 5

5 Do you feel that you can voice your opinions to the agency about how it is being run?

- Yes..... 1
- Unsure..... 2
- Already have a say..... 3
- Don't want to..... 4
- No..... 5
- No, don't feel I can..... 6

6 Do you feel that you could gain access to documents about the way the agency is run, if you wanted to?

- Yes..... 1
- Unsure..... 2
- No..... 3

7 Have you ever asked the agency for help and been refused?

- Yes..... 1
- No..... 2

8 *If you have been refused help, what help did you ask for?*

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9 *Did the agency explain why they refused to help ?*

- Yes..... 1
- No..... 2

10 *Why did the agency refuse to help?*

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11 *Were you satisfied with their response?*

- Yes..... 1
- Partly..... 2
- No..... 3
- Not applicable..... 5

12 **Have you ever had any concerns about the help you receive from the agency?**

- Yes..... 1
- No..... 2

13 *If you have had concerns, have you expressed them to the agency staff?*

- Yes..... 1
- No..... 2

14 *If you talked to agency staff about your concerns, were you happy with the way they responded?*

- Yes..... 1
- Mostly..... 2
- No..... 3

15 *If you were not happy with the way agency staff responded to your concerns, what were you unhappy about?*

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16 **Has the agency informed you of what to do if you're not happy with the service you get?**

- Yes..... 1
- Unsure..... 2
- No..... 3

17 Did the agency tell you that you can voice any concerns you have about them to outside authorities?

Yes..... 1

No..... 2

18 Do you feel confident that the agency will listen to any concerns you have, and deal with them properly?

Yes..... 1

Unsure..... 2

No..... 3

19 Do you think that things would go badly for you if you made a complaint about the agency ?

Yes..... 1

Unsure..... 2

No..... 3

20 What do you think would happen if you made a complaint about the agency?

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4: Advocacy

An advocate is a person you can choose to represent your rights, and negotiate on your behalf. This may be a friend, a family member or an advocacy service.

1 Has the agency provided you with any information about your right to have someone else speak on your behalf (an advocate)?

Yes..... 1

Unsure..... 2

Previously had information..... 3

No..... 4

2 Did you receive any information from the agency about how you could obtain an advocate?

- Yes..... 1
- Unsure..... 2
- Previously had information..... 3
- No..... 4

3 Have you ever had someone speak on your behalf in relation to the services you received from the agency?

- Yes..... 1
- No..... 2

4 *If you have used a representative or advocate to speak on your behalf, what was your experience with this? (eg what was the outcome?)*

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5 Do you feel confident that you could obtain an advocate of your choice if you needed to?

- Yes..... 1
- Unsure..... 2
- No..... 3

5: General Information

1 You are.....

- Male..... 1
- Female..... 2

2 You are aged between.....

- 0-54 years..... 1
- 55- 64 years..... 2
- 65-74 years..... 3
- 75-84 years..... 4
- 85 and over..... 5

3 The services you are receiving are primarily.....

to help you..... 1

to help the person you are caring for..... 2

to help you as a carer..... 3

4 You are(Please feel free to tick more than one box)

From a non-English speaking background..... 1

An Aboriginal or Torres Strait Islander..... 2

Financially disadvantaged..... 3

Living in a rural or remote area..... 4

Caring for someone with dementia..... 5

None of the above..... 6

5 Is the agency sensitive and responsive to your different requirements as a member of one of these groups?

Yes..... 1

Partly..... 2

No..... 3

Further comments

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

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