

Home-Based Services/Brief Telephone Survey

November 19, 2007

Establishing Contact

Hello, my name is {INTERVIEWER NAME} and I am calling from {AGENCY NAME}. May I please speak with {NAME OF CLIENT, CAREGIVER OR PROXY}?

PROGRAMMER NOTE:

IF YOU LEARN ON THIS CALL THAT THE CLIENT HAS DEMENTIA OR IS TOO FRAIL TO PARTICIPATE, ASK IF THE PERSON YOU ARE SPEAKING TO FEELS THAT HE OR SHE WOULD BE ABLE TO ANSWER THE SURVEY SPEAKING FOR THE CLIENT (SERVE AS A PROXY). THIS SHOULD BE A PERSON WHO KNOWS THE CLIENT WELL, PREFERABLY A FAMILY MEMBER OR CLOSE FRIEND WHO LIVES WITH AND/OR GIVES SUBSTANTIAL CARE TO THE CLIENT. A PAID CAREGIVER MAY NOT BE A PROXY. IF THIS PERSON CANNOT BE A PROXY, ASK FOR THE NAME AND NUMBER OF A FRIEND OR FAMILY MEMBER WHO MIGHT BE ABLE TO DO SO. A PROXY SHOULD ANSWER THE QUESTIONS AS IF RESPONDING FOR THE CLIENT.

Respondent is:

PROGRAMMER NOTE:

CHECK WHETHER THE RESPONDENT IS THE CLIENT, CAREGIVER, OR OTHER. IF A CAREGIVER OR PROXY, COMPLETE THE BLANKS FOR NAME AND RELATIONSHIP TO CLIENT.

Client.....	1	
Caregiver	2	
Name: _____		Rel. to Client: _____
Other?.....	91	
Name: _____		Rel. to Client: _____

Introductory Script

Our agency is interested in finding out about the quality and effectiveness of services you receive as part of the (_____) program. Our records indicate that you receive or recently received services in your home.

11. Is that correct? (If prompting is needed because the respondent is not sure, suggest services such as home delivered meals, homemaker, or assistance with bathing or dressing.)

Yes.....	1	→ CONTINUE WITH THE INTERVIEW
No	2	↑ THANK THE PERSON FOR THEIR REFUSED.....
REFUSED.....	-7	° TIME AND TERMINATE CALL
Don't Know	-8	→

Office Use Only:

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Client ID: _____

Date: _____

Agency Name: _____

12. Would this be a good time for you to take the survey?

- | | | |
|--------------|----|--|
| Yes..... | 1 | → PROCEED TO SURVEY |
| No | 2 | → TRY TO MAKE AN APPOINTMENT AND RECORD ON THE COVER SHEET OR IF THE CLIENT REFUSES TO PARTICIPATE, RECORD THAT ON THE COVER SHEET |
| REFUSED..... | -7 | |

The survey will take about 5 minutes to complete. Your answers will be used to help us make services better. We encourage you to participate, and your services will not be affected in any way whether you participate or not or by how you answer any of the questions. Your answers will be confidential.

Now I will be asking you about effects the in-home services may have had on your life.

1. Do the services you receive meet most of your needs?

Yes.....	1
No	2
REFUSED.....	-7
Undecided/Don't Know	-8

2. Do the services help you to stay in your home?

Yes.....	1
No	2
REFUSED.....	-7
Undecided/Don't Know	-8

3. Are the services effective in helping you in your everyday life?

Yes.....	1
No	2
REFUSED.....	-7
Undecided/Don't Know	-8

4. Would you recommend these services to a friend or family member who needs them?

Yes.....	1
No	2
REFUSED.....	-7
Undecided/Don't Know	-8

5. Overall, how would you rate the quality of the services you have received?

Excellent	1
Very Good	2
Good	3
Fair.....	4
Poor	5
REFUSED.....	-7
Don't Know	-8

6. From your perspective, how could these services be improved? [DON'T READ LIST. YOU MAY CHECK MORE THAN ONE ANSWER]

	YES	NO	RF	DK
No Suggestion:				
I do not know how services could be improved	1	2	-7	-8
Administrative Issues:				
a. Fewer rules and regulations.....	1	2	-7	-8
b. Less paperwork.....	1	2	-7	-8
c. More helpful and useful information.....	1	2	-7	-8
Worker Specific Issues:				
d. Better trained and skilled workers.....	1	2	-7	-8
e. Workers with a more professional attitude.....	1	2	-7	-8
f. Workers come as scheduled.....	1	2	-7	-8
g. Workers arrive on time and stay the full amount of time	1	2	-7	-8
h. Workers more respectful.....	1	2	-7	-8
i. Workers more personable and friendly.....	1	2	-7	-8
Service Issues:				
j. Services provided when needed.....	1	2	-7	-8
k. Same worker each time	1	2	-7	-8
l. I could choose the worker	1	2	-7	-8
m. More of current service	1	2	-7	-8
Other:				
n. Other?	1	2	-7	-8
(SPECIFY) _____				

We are interested in knowing more about the demographic characteristics of our clients. We would appreciate if you would answer a few questions about you. All this information will be kept confidential.

D1. What is your gender? [RECORD SEX OF RESPONDENT. DON'T ASK IF OBVIOUS]

MALE	1
FEMALE	2

D2. In what year were you born?

YEAR	_ _ _ _
REFUSED.....	-7
DON'T KNOW	-8

D3. What is your highest education level?

Less than high school Diploma	1
High school Diploma.....	2
Some college, including Associate degree.....	3
Bachelor's Degree	4
Some post-graduate work or advanced degree...	5
REFUSED.....	-7
DON'T KNOW	-8

D4. Are you Spanish, Hispanic or Latino?

YES.....	1
NO	2
REFUSED.....	-7
DON'T KNOW	-8

D5. What is your race? Check all that apply.

	YES	NO	RF	DK
a. American Indian or Alaskan Native	1	2	-7	-8
b. Asian.....	1	2	-7	-8
c. Black or African-American	1	2	-7	-8
d. White/Caucasian.....	1	2	-7	-8
e. Native Hawaiian/Other Pacific Islander	1	2	-7	-8
f. Other Race	1	2	-7	-8

D6. What is your marital status?

Now married	1
Widowed.....	2
Divorced.....	3
Separated	4
Never married.....	5
REFUSED.....	-7
DON'T KNOW	-8

D7. Where is your home located? Would you say...

In a City,.....	1
In a Suburban Area, or	2
In a Rural area?.....	3
REFUSED.....	-7
DON'T KNOW	-8

D8. We'd like to ask about who lives in your household. Do you...

	Yes	No	RF	DK
a. Live alone?.....	1	2	-7	-8
b. Live with your spouse?	1	2	-7	-8
c. Live with your children?	1	2	-7	-8
d. Live with other relatives?	1	2	-7	-8
e. Live with domestic partner?	1	2	-7	-8
f. Live with non-relatives other than domestic partner? ..	1	2	-7	-8

D9. How many people live in your household, including yourself? (If you reported that you live alone, put 1.)

NUMBER OF HOUSEHOLD MEMBERS..... |_|_|
REFUSED..... -7
DON'T KNOW -8

D10. Which category best describes your total gross household annual income for the last 12 months? Would you say...

\$5,000 or less 1
\$5,001 - \$10,000 2
\$10,001 - \$20,000 3
\$20,001 - \$30,000 4
\$30,001 - \$40,000 5
\$40,001 - \$50,000 6
\$50,001 - \$75,000 7
Over \$75,000? 8
REFUSED..... -7
DON'T KNOW -8

Thank you!