

## Supported Living Parent Satisfaction Survey

Dear Parent,

Please help us evaluate our programs so that we can improve our services to you. Your participation is voluntary, as well as appreciated. **This is only an example of the survey we use!**

Thank you,  
Sherry Robitaille, Director of Quality Assurance

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### **SUPPORTED LIVING:**

**Does your son/daughter receive Supported Living Services? If yes, please answer the following questions:**

I have attended an annual-interdisciplinary meeting.  
Strongly Agree      Agree      Disagree      Strongly Disagree

I find one annual meeting per year is beneficial and sufficient.  
Strongly Agree      Agree      Disagree      Strongly Disagree

I appreciate the opportunity to set goals and objectives with the team.  
Strongly Agree      Agree      Disagree      Strongly Disagree

The following services were represented at the annual review:

\_\_\_\_ Supported Living      \_\_\_\_ Benefits      \_\_\_\_ Community Life Program  
\_\_\_\_ Vocational Services      \_\_\_\_ Home/Health Service      \_\_\_\_ Therapist  
\_\_\_\_ DMR      \_\_\_\_ My son/daughter's peers  
\_\_\_\_ Other:

I feel the various care providers coordinate services well.  
Strongly Agree      Agree      Disagree      Strongly Disagree

I feel the Support Coordinator takes a holistic view of my son/daughter's needs and assists with finding and securing services in a timely fashion.  
Strongly Agree      Agree      Disagree      Strongly Disagree

I understand and agree with the concept of "person-centered planning."  
Strongly Agree      Agree      Disagree      Strongly Disagree

I feel my son/daughter continues to increase skills for independent living.  
Strongly Agree      Agree      Disagree      Strongly Disagree

I feel that the communication with the Supported Living staff is adequate.  
Strongly Agree      Agree      Disagree      Strongly Disagree

My calls/e-mails, letters are answered in a timely fashion.  
Strongly Agree      Agree      Disagree      Strongly Disagree

Staff members are courteous and respectful.  
Strongly Agree      Agree      Disagree      Strongly Disagree

I understand how my son/daughter and the Support Coordinator utilize their time.

Strongly Agree      Agree      Disagree      Strongly Disagree

I feel the Support Coordinator understands my son/daughter's disability.

Strongly Agree      Agree      Disagree      Strongly Disagree

I am satisfied with the services provided by the Supported Living program.

Strongly Agree      Agree      Disagree      Strongly Disagree

I offer the following suggestions for services in the Supported Living Program:

I have had to call the After Hours/Weekend emergency line (Extension 117)

Yes      No      If yes, please answer the following questions:

I had to leave a message.

Yes      No

Staff members were courteous.

Yes      No

I was pleased with the services I received.

Yes      No

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**BENEFITS:**

**Does your son/daughter receive Benefit Services? If yes, please answer the following questions:**

The Benefits Coordinator is knowledgeable about the entitlements.

\_\_\_\_\_ SSI/SSDI      \_\_\_\_\_ DMR Rent Subsidy      \_\_\_\_\_ Energy Assistance  
\_\_\_\_\_ DSS Cash Assistance      \_\_\_\_\_ DSS Food Stamps      \_\_\_\_\_ Title XIX

The Benefits Coordinator is able to help me understand the various entitlements.

Strongly Agree      Agree      Disagree      Strongly Disagree

I appreciate information about special opportunities, such as PLAN of CT

Strongly Agree      Agree      Disagree      Strongly Disagree

The Benefits Coordinator responds to my questions/phone calls in a timely manner.

Strongly Agree      Agree      Disagree      Strongly Disagree

I am satisfied with the Benefit services.

Strongly Agree      Agree      Disagree      Strongly Disagree

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**EDUCATION:**

**Does your son/daughter receive Education Services? If yes, please answer the following questions:**

Classes have expanded my son/daughter's interests.

Strongly Agree      Agree      Disagree      Strongly Disagree

The course catalogue offers an adequate variety of Continuing Adult Education classes.

Strongly Agree      Agree      Disagree      Strongly Disagree

I would like to see the following Continuing Adult Education classes offered:

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I am satisfied with the services provided by the Education program.  
Strongly Agree      Agree      Disagree      Strongly Disagree

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**EMPLOYMENT:**

**Does your son/daughter receive Employment Services? If yes, please answer the following questions:**

The Job Developer took into consideration my son/daughter's strengths, abilities and likes/dislikes when looking for a job.

Strongly Agree      Agree      Disagree      Strongly Disagree

I am satisfied with amount of time it took to find my son/daughter this job.

Strongly Agree      Agree      Disagree      Strongly Disagree

The Job Developer asked for my feedback during the job seeking process.

Strongly Agree      Agree      Disagree      Strongly Disagree      Not Applicable

I am satisfied with number of hours my son/daughter currently works/volunteers.

Strongly Agree      Agree      Disagree      Strongly Disagree      Not Applicable

The Employment Department keeps me up-to-date on my son/daughter's progress.

Strongly Agree      Agree      Disagree      Strongly Disagree      Not Applicable

My calls, email and/or letters are answered in a timely fashion.

Strongly Agree      Agree      Disagree      Strongly Disagree

I am satisfied with the services provided by the Employment program.

Strongly Agree      Agree      Disagree      Strongly Disagree

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**RECREATION**

**Does your son/daughter receive Recreation Services? If yes, please answer the following questions:**

I am satisfied with the types of recreation activities that are offered.

Strongly Agree      Agree      Disagree      Strongly Disagree

The cost of recreation activities is reasonable.

Strongly Agree      Agree      Disagree      Strongly Disagree

I feel the current recreation billing system is adequate and is easily understood.

Strongly Agree      Agree      Disagree      Strongly Disagree      Not Applicable

My son/daughter gets on most of the recreation activities he/she signs up for.

Strongly Agree      Agree      Disagree      Strongly Disagree

I feel I am well informed of upcoming events offered through the recreation program (i.e. Special Olympics, Best Buddies, Sports Programs, Travel Program Trips, etc).

Strongly Agree      Agree      Disagree      Strongly Disagree

My calls, email and/or letters are answered in a timely fashion.

Strongly Agree      Agree      Disagree      Strongly Disagree

I am satisfied with the services provided by the Recreation program.

Strongly Agree      Agree      Disagree      Strongly Disagree

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**COMMUNITY LIFE PROGRAM:**

**Does your son/daughter receive Community Life Program Services? If yes, please answer the following questions:**

I am pleased that a program offering a supervised, structured day program is being offered.

Strongly Agree      Agree      Disagree      Strongly Disagree

The four areas of concentration (exercise, nutrition, greater knowledge and use of the New Haven and surrounding areas, interactions with a diverse population) are important for my son/daughter.

Strongly Agree      Agree      Disagree      Strongly Disagree

This program has expanded my son/daughter's interests.

Strongly Agree      Agree      Disagree      Strongly Disagree

I am satisfied with the types of activities that are offered.

Strongly Agree      Agree      Disagree      Strongly Disagree

I am satisfied with the services provided by the Community Life program.

Strongly Agree      Agree      Disagree      Strongly Disagree

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**OTHER:**

I find the website useful for getting up to date information on recreation and educational offerings.

Strongly Agree      Agree      Disagree      Strongly Disagree

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What types of things would you like to see Chapel Haven offer?

What do you feel Chapel Haven does well?

Do you have any suggestions for improvements?

Is there anything specific you would like to see Chapel Haven staff trained in?

Additional Comments:

Signed (Optional): \_\_\_\_\_  
Supported Living 2006 – 2007