

Participant Satisfaction Survey

Independent Nurses Australia | ABN 81 675 482 210

The purpose of the Participant Satisfaction Survey is to determine our performance from a participant's perspective, and to ensure that Independent Nurses Australia Pty Ltd is providing services in a manner that supports individuals goals and needs. We encourage and appreciate your feedback and comments, and reassure you of your privacy when addressing your concerns. **This survey is confidential.**

Name: _____ Contact number (optional): _____

Service/s: _____

Signature: _____ Date: ____/____/____

Would you like to be contacted regarding your feedback on this survey? ☐ Yes ☐ No

I am treated with respect and dignity in my dealings with Independent Nurses Australia Pty Ltd. I feel listened to and heard.

☐ Strongly agree ☐ Agree ☐ Neutral ☐ Somewhat disagree ☐ Completely disagree ☐ Not sure ☐
N/A

Independent Nurses Australia Pty Ltd involves me in care planning and the service delivery is tailored to my needs.

☐ Strongly agree ☐ Agree ☐ Neutral ☐ Somewhat disagree ☐ Completely disagree ☐ Not sure ☐
N/A

Independent Nurses Australia Pty Ltd is responsive to my feedback, comments and requests regarding my support plan.

☐ Strongly agree ☐ Agree ☐ Neutral ☐ Somewhat disagree ☐ Completely disagree ☐ Not sure ☐
N/A

My language and cultural needs are taken into consideration.

☐ Strongly agree ☐ Agree ☐ Neutral ☐ Somewhat disagree ☐ Completely disagree ☐ Not sure ☐
N/A

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Information is communicated to me in a way that I can easily understand.

☐ Strongly agree ☐ Agree ☐ Neutral ☐ Somewhat disagree ☐ Completely disagree ☐ Not sure ☐

N/A

When Independent Nurses Australia Pty Ltd makes decisions, I am given enough information to understand the decision.

☐ Strongly agree ☐ Agree ☐ Neutral ☐ Somewhat disagree ☐ Completely disagree ☐ Not sure ☐

N/A

Independent Nurses Australia Pty Ltd ensures that I am given the opportunity to send feedback and complaints, and that I feel safe to do so.

☐ Strongly agree ☐ Agree ☐ Neutral ☐ Somewhat disagree ☐ Completely disagree ☐ Not sure ☐

N/A

My feedback and complaints have been dealt with in a timely manner.

☐ Strongly agree ☐ Agree ☐ Neutral ☐ Somewhat disagree ☐ Completely disagree ☐ Not sure ☐

N/A

The staff have a high level of knowledge and skills, and meet my needs.

☐ Strongly agree ☐ Agree ☐ Neutral ☐ Somewhat disagree ☐ Completely disagree ☐ Not sure ☐

N/A

The staff encourage me to make my own choices/decisions, and be more independent.

☐ Strongly agree ☐ Agree ☐ Neutral ☐ Somewhat disagree ☐ Completely disagree ☐ Not sure ☐

N/A

I feel that my information is kept confidential by staff.

☐ Strongly agree ☐ Agree ☐ Neutral ☐ Somewhat disagree ☐ Completely disagree ☐ Not sure ☐

N/A

If you have lodged a complaint, has your complaint been resolved to your satisfaction? If not, why not?

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If you have an advocate/support person who assists you to carry out your wishes - does Independent Nurses Australia Pty Ltd include this person in decisions that affect you?

What do you like about our services?

What do you dislike about our services?

Do you have any suggestions of ways we could improve our service/s?

Please rate your overall satisfaction with our supports and services. 1 = Lower and 10 = Highest.

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Do you have any other comments?