

INFORMATION AND ASSISTANCE SATISFACTION SURVEY

Version: September 28, 2001

Hello [CLIENT'S NAME]. my name is [INTERVIEWER'S NAME] of the [AGENCY'S NAME]. I am following up with people who have called [AGENCY'S NAME] in the past few weeks, to ask for their feedback about the Information and Assistance Services. This will just take a few minutes and will help improve our service to callers. Yours responses are completely anonymous and will not affect the services that you are receiving in any way.

So, let's talk about your call last week [DATE]_____ to the Information and Assistance Services of [AGENCY'S NAME] about_____ [TOPIC OF CALL]

Please answer each question by checking the appropriate response or filling in the blank.

PLEASE READ ALL CHOICES UNLESS DIRECTED OTHERWISE.

1. First, did you call [NAME OF I & A SERVICE] to obtain help or services for yourself, to get help for a relative or someone you know, or were you calling from an agency for a client?

- For self (Service recipient)
- For relative/friend (Caregiver)
- For client (Formal provider)
- Other(describe): _____

2. Please tell me the reason why you called.

- To get information
- To obtain services (transportation, housing, health care, meals, etc.)
- To refer a client for services
- To follow up on a prior call
- Other (describe): _____

3. Had you ever used this service before last week?

- Yes
- No (***Skip to 4***)

3a. About how many times have you used it in the past year? _____

4. When you called the [NAME OF I & A SERVICE] last week, did you get a busy signal?

- Yes
- No (***Skip to 5***)

4a. How many times did you call before getting through? _____

Office Use Only:

1 of 6

Client ID: _____ Survey Date: _____

Date of Original I&A Call: _____ I&A Operator ID: _____

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5. How quickly was your call answered?

- Immediately, such as after 1 ring or two rings
- Quickly, less than 5 rings
- After a little while, 5-15 rings or
- Had to wait a long time, more than 15 rings

6. Was the phone answered by voice mail or by a person?

- Person (*Skip to 7*)
- Voice mail

6a. How well did you understand the voice mail instructions?

- Very well
- Somewhat well
- Only a little
- Not at all

7. Did you have to leave a message?

- Yes
- No (*Skip to 8*)

7a. Did someone call you back?

- Yes
- No (*Skip to 7c*)

7b. When did they call you back?

- Within the hour
 - In the same day
 - In the same week
 - More than a week
- (*Skip to 8*)

7c. Did you call them back?

- Yes
- No (*Skip to 14*)

7d. Did you speak with a person when you called them back?

- Yes
- No (*Skip to 14*)

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Now I have a few questions about the person you spoke to at the [NAME OF I & A SERVICE].

8. Overall, did you feel that the person(s) who talked with you listened carefully to what you wanted?
- Yes, definitely
 - Yes, I think so
 - No, I don't think so
 - No, definitely not
- 8a. Overall, did you feel that the person(s) who talked with you understood what you wanted?
- Yes, definitely
 - Yes, I think so
 - No, I don't think so
 - No, definitely not
9. Did she/he explain things to you in a way that you could understand?
- Yes, definitely
(Skip to 10)
 - Yes, I think so
(Skip to 10)
 - No, I don't think so
 - No, definitely not
- 9a. What kind of problems did you have?
- Language problem
 - Hearing problem
 - Don't remember
 - Other, specify _____
10. Overall, did you receive the information from [NAME OF I & A SERVICE] that you were looking for?
- Yes, definitely
 - Yes, I think so
 - No, I don't think so
 - No, definitely
11. Were you given names of any other places to call?
- Yes
 - No (Skip to 12)
 - N/A (Skip to 12)

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11a. Did you contact them?

- Yes (*Skip to 11c*)
- No

11b. Why not? (**DO NOT READ LIST**)

- Haven't had a chance to yet
- I tried to, but haven't heard from them yet
- They called and left message, but I haven't called them back.
- I got help from somewhere else
- Other (describe): _____
(*Skip to 12*)

11c. Did you start receiving services from any of the places you were referred to?

- Yes
- No

12. Have you made any other calls on your own to get the information or help you needed?

- Yes
- No (*Skip to 13*)

12a. Did you get the information or help you needed?

- Yes
- No (*Skip to 14*)

12b. About how many calls did you have to make before you got the information or help you needed? _____

I have a few questions about your overall experience with the [NAME OF I & A SERVICE].

13. Do you expect that the information you received from [NAME OF I & A SERVICE] will be helpful in resolving the issue you called about?

- Yes, definitely
- Yes, I think so
- No, I don't think so
- No, definitely not

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14. Overall, how satisfied were you with the way your call was handled?
- Very satisfied
 - Satisfied
 - Somewhat satisfied
 - Not at all satisfied
15. Would you recommend this service to a friend or colleague who needs the kind of information and assistance you did?
- Yes, definitely
 - Yes, I think so
 - No, I don't think so
 - No, definitely not
16. Do you have any recommendations on how to make the [NAME OF I & A SERVICE] better?
(DO NOT READ LIST. Check all that apply)
- None
 - Increase the hours the service is available
 - Reduce the waiting time to speak to someone
 - Eliminate voice mail system/have persons answer the phone
 - The persons who answer the phone should be more knowledgeable
 - Try to answer all questions on the first call
 - Be more timely in returning phone calls
 - Other (describe): _____

Finally, could you please tell me a bit about yourself? Like all of your other answers, all of this information will be kept strictly confidential.

I & A, Part 2, Demographics

1. Where is your home located? Would you say . . .
- A) In a city
 - B) In the suburbs of a city
 - C) In a small town or rural area.
2. What is your home zip code? _____
3. What is your date of birth? _____/_____/_____ (month / day / year)
4. **[Interviewer: Record sex of respondent. If not obvious, ask:]** What is your gender?
- A) Male
 - B) Female

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5. Which of the following statements describes your living arrangements? **[Check all that apply.]**

- A) I live alone.
- B) I live with my spouse.
- C) I live with my children.
- D) I live with other persons.

6. What is your highest educational level?

- A) Less than High School Diploma
- B) High School Diploma
- C) Some college, including Associate degree
- D) Bachelor's Degree
- E) Some post-graduate work or advanced degree or degrees

7. What is your race? **[Check all that apply.]**

- A) White or Caucasian
- B) Black or African American
- C) Asian
- D) American Indian or Alaskan Native
- E) Native Hawaiian or Other Pacific Islander
- F) Other

8. Are you of Hispanic origin?

- A) Yes
- B) No

9. What was the total combined income for all persons in your household during the past 12 months, including income from jobs, Social Security, retirement income, public assistance, and all other sources?

- A) Less than \$5,000
- B) \$5,001 – \$8,350
- C) \$ 8,351 – \$11,250
- D) \$ 11,251 – \$14,150
- E) \$ 14,151 – \$20,000
- F) \$ 20,001 – \$35,000
- G) \$35,001 – \$50,000
- H) \$50,001 or more

That is all the questions I have. Do you have any other comments? **Thank you very much for your time and cooperation.**