

ISS Australia: Client Feedback Form

International Social Service (ISS) Australia is keen to receive feedback from you about our services. We will collate the information you provide for statistical purposes and in order to assist in improving our services. Though it is not compulsory, we would appreciate you completing this form and returning it to us by post, fax or email.

YOUR NAME:

NAME OF YOUR CASEWORKER:

DATE FORM COMPLETED:

ABOUT OUR SERVICES

1=Poor ↔ 7=Excellent

1. Did you receive the services that you were seeking?

YES NO NOT SURE

2. Were you pleased with the outcome of your case?

YES NO NOT SURE

3. Do you think you were provided with adequate information with regard to:

- | | | | | | | | |
|--|---|---|---|---|---|---|---|
| ➤ Our role and services | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| ➤ The progress of your case | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| ➤ Other sources of information and support | 1 | 2 | 3 | 4 | 5 | 6 | 7 |

Comments:

4. How would you rate the support you received from ISS Australia throughout the period you used our service?

- | | | | | | | | |
|----------------------------------|---|---|---|---|---|---|---|
| ➤ Beginning of service provision | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| ➤ During service provision | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| ➤ Case closure | 1 | 2 | 3 | 4 | 5 | 6 | 7 |

Comments:

5. How would you rate your satisfaction with the overall service provided by ISS Australia? 1 2 3 4 5 6 7

Comments:

(Please turn over...)

IMPACT OF OUR SERVICES ON YOU

1=Poor ↔ 7=Excellent

6. How would you rate your emotional well-being at the different stages of the services provided by ISS Australia:

- | | | | | | | | |
|----------------------------------|---|---|---|---|---|---|---|
| ➤ Beginning of service provision | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| ➤ During service provision | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| ➤ Case closure | 1 | 2 | 3 | 4 | 5 | 6 | 7 |

Comments:

7. If other family members were involved, how would you rate their emotional well-being at the different stages of the services provided by ISS Australia:

- | | | | | | | | |
|----------------------------------|---|---|---|---|---|---|---|
| ➤ Beginning of service provision | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| ➤ During service provision | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| ➤ Case closure | 1 | 2 | 3 | 4 | 5 | 6 | 7 |

Comments:

8. Overall, did your family's situation or well-being improve as a result of the services we provided?

YES NO NOT SURE

ABOUT OUR STAFF AND OUR ORGANISATION

1=Poor ↔ 7=Excellent

9. How would you rate the quality of your ISS Australia caseworker?

- | | | | | | | | |
|--|---|---|---|---|---|---|---|
| ➤ Knowledge | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| ➤ Sensitivity to your needs / feelings | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| ➤ Trustworthiness | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| ➤ Accessibility and reliability | 1 | 2 | 3 | 4 | 5 | 6 | 7 |

Comments:

10. In what areas could our staff improve to meet you needs or provide a better service?

- | | |
|--|--|
| <input type="checkbox"/> Expertise and level of skills | <input type="checkbox"/> Cultural knowledge and skills |
| <input type="checkbox"/> Communication and listening skills | <input type="checkbox"/> Providing access to information |
| <input type="checkbox"/> Maintaining privacy and confidentiality | <input type="checkbox"/> Meeting individual needs |
| <input type="checkbox"/> Behaviour and attitudes | <input type="checkbox"/> Efficiency |
| <input type="checkbox"/> Working with other relevant agencies | <input type="checkbox"/> Other (please specify) _____ |

11. Do you have any other suggestions or comments you would like to make about ISS Australia?

THANK YOU FOR YOUR ASSISTANCE

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