|  |  |  |
| --- | --- | --- |
| Question | Yes | No |
| 1. Do you feel that the service is what you expected it to be?
 | 19 |  |
| 1. Did you feel that our staff listened to you and took on board your needs when we did your assessment and agreed your SMART Goals?
 | 19 |  |
| 1. Are you getting the same carers at regular call times?
 | 19 |  |
| 1. Do you feel that you are able to ask staff to do things for you in the way that you would like?
 | 19 |  |
| 1. Does the service make you feel safe and as independent as possible in your own home?
 | 19 |  |
| 1. Are our care staff careful and respect your home when they carry out their visits?
 | 19 |  |
| 1. Do you know who to contact if you have a concern?
 | 19 |  |
| 1. Is there anything else we can do to improve the service for you?
 | 19 |  |
| 1. What was the one thing about this service that made a difference to you?
 |
| * Due to mum’s high blood pressure she is not progressing well with Enablement, she is still unable to get out of bed. She is working on sitting up and doing her SMART Goals. Carers are pleasant and have been taking on dad’s needs too
 | GL |
| * Carers are lovely ladies
 | BP |
| * Carers have been very good, if I need a chat they always make time to chat with me, they are friendly and helpful
 | SB |
| * Carers have been very good especially with my personal care
 | CH |
| * Carer June has been exceptional and carer are doing a fantastic job
 | PB |
| * The service could not get any better if you tried
 | CO |
| * We are very happy with the service, the carers are chatty and DH recognises all his carers
 | DH |
| * The service is good and we are happy – dad is looked after well
 | RD |
| * The carers have been brilliant, they are more like family and friends than carers
 | CW |
| * I am grateful for the service
 | LC |
| * Service has been good. We get information and always have our calls returned
 | JH |
| * I would like Val to get out of bed a couple of hours a day - a referral to therapy has been sent regarding poor sitting tolerance – they are happy with this
 | VG |
| * Not to rely on family for support
 | MM |
| * Carers are kind and caring
 | BC |
| * I am completely satisfied with everything the carers do – I will miss the carers when I won’t be having them anymore
 | EB |
|  |
| Outstanding | Good | My needs are met | Requires improvement | inadequate |
| 9 | 8 | 1 |  |  |

Contact by Telephone Breakdown

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Service User | Husband | Wife | Daughter | Son | Granddaughter/son | Niece/Nephew | Other |
| 13 | 1 | 2 | 2 |  |  |  |  |

End of service satisfaction survey

(Service User)

|  |  |  |
| --- | --- | --- |
| Question | Agree | Disagree |
| 1. I was involved in deciding what goals I wanted to achieve through the in lieu of short term Enablement Service
 | 19 |  |
| 1. These goals were clear and met my needs:
 | 19 |  |
| 1. I achieved the goals the were planned
 | 19 |  |
| 1. The in lieu of Short-term Enablement worker visits were planned for the times which were appropriate to help me
 | 19 |  |
| 1. The in lieu of short term Enablement worker came at the times we had agreed
 | 19 |  |
| 1. The in lieu of Short term Enablement worker supported me if I needed to contact other services during and at the end of service
 | 19 |  |
| 1. Overall I was treated with dignity and respect by the in lieu of Short term Enablement Service
 | 19 |  |
| 1. I feel less dependent on others than at the start of the in lieu of Short term Enablement service
 | 19 |  |
| 1. I knew how to contact the in Lieu of Short Term Enablement service if I needed to
 | 19 |  |
| 1. When I needed to contact in Lieu of Short Term Enablement service, I was able to reach someone easily
 | 19 |  |
| 1. My family or people close to me were given the information to help me with in lieu of short term Enablement
 | 19 |  |
| 1. If someone else you knew told you they had been referred to the service, would you encourage them to try it
 | 19 |  |
| 1. Do you feel the service has benefited you and improved your quality of life
 | 19 |  |
| 1. Is there anything else you would like to tell us about the service?
 |
| * Blinding service – the care side was brilliant
 | EB |
| * It was nice having carers coming in
 | GG |
| * I was pleased with the service and the care given
 | BC |
| * We are happy with the service and it has helped mum get back to her normal self
 | RL |
| * The service is going well and we appreciate the times the carers come
 | DM |
| * I am impressed with all the carers, some are outstanding. Mum enjoys seeing them and having a chat
 | SC |
| * Service has been good, carers are lovely. The service has definitely improved my life
 | AM |
| * I am grateful with the help and support I got with having a shower, the carers are helpful and pleasant
 | VL |
| * Carer DL was brilliant with mum, we can’t thank her enough. We wish we could have stayed with Premier Care – the new company isn’t that great, thank you for the service
 | ID |
| * Carers are nice and helpful, they did a really good job – thank you everyone for helping me
 | PM |
| * Mum wouldn’t be where she is now without the carers, she loves the carers they have been wonderful and mum is very happy
 | PH |
| * The service has helped I wouldn’t of done it on my own it has worked well
 | PR |
| * They have both benefited from the service. The service has helped the family and gave them peace of mind and they have been able to go back to work
 | PB |
| * we are 100% pleased with the carers.SH got on well with them, we would like to say thank you to all the carers
 | SH |
| * if mum didn’t have Premier Care she would have had to go into a care home. Carers are nice – we are very grateful for the service
 | EM |
| * Carers are nice – I miss them coming for a chat
 | VL |
| Overall how satisfied are you with the service? (please tick) |
| Outstanding | Good | My needs are met | Requires improvement | inadequate |
| 13 | 6 |  |  |  |

Contact by Telephone Breakdown

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Service User | Husband | Wife | Daughter | Son | Granddaughter/son | Niece/Nephew | Other |
| 11 |  | 1 | 6 | 1 |  |  |  |

End of service satisfaction survey

(Carer)

|  |  |  |  |
| --- | --- | --- | --- |
| Question | Agree | Disagree | NA |
| 1. Offered me training and support where necessary to help me maintain my caring role
 |  |  |  |
| 1. Were you happy with the service you received from the Therapy Team, OT or physio and do you think it enhanced the progression of the service user?
 |  |  |  |
| 1. Gave me the confidence to be able to maintain my caring role after the in lieu of Short Term Enablement service ended
 |  |  |
| 1. Supported me in identifying any additional information or support I required after the in lieu of short term Enablement period ended
 |  |  |
| Comments |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| Overall how satisfied are you with the service? (please tick) |
| Outstanding | Good | My needs are met | Requires improvement | inadequate |
|  |  |  |  |  |

Contact by Telephone Breakdown

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Service User | Husband | Wife | Daughter | Son | Granddaughter | Niece/Nephew | Other |
|  |  |  |  |  |  |  |  |