

Whiddon Family Satisfaction Survey 2022

We appreciate your time in completing this survey. Your feedback is important to us and it helps us improve our services.

Please complete and return this survey to us in the enclosed stamped addressed envelope, OR you can also complete the survey online by scanning the QR code.

We would appreciate it if you would return the survey by XX November 2022.



1. Location of your loved one's residential aged care home

- | | |
|---|--|
| <input type="checkbox"/> Beaudesert | <input type="checkbox"/> Laurieton |
| <input type="checkbox"/> Belmont | <input type="checkbox"/> Maclean |
| <input type="checkbox"/> Bourke | <input type="checkbox"/> Moree |
| <input type="checkbox"/> Casino | <input type="checkbox"/> Mudgee |
| <input type="checkbox"/> Easton Park- Arthur Webb Court | <input type="checkbox"/> Narrabri - Robert Young |
| <input type="checkbox"/> Easton Park- EPU | <input type="checkbox"/> Narrabri - Jessie Hunt |
| <input type="checkbox"/> Easton Park- Taylor House | <input type="checkbox"/> Redhead |
| <input type="checkbox"/> Easton Park- SDM | <input type="checkbox"/> Temora- Greenstone |
| <input type="checkbox"/> Grafton | <input type="checkbox"/> Temora- Narraburra |
| <input type="checkbox"/> Kelso | <input type="checkbox"/> Wingham |
| <input type="checkbox"/> Kyogle | <input type="checkbox"/> Wee Waa |
| <input type="checkbox"/> Largs | |

2. What best describes your involvement with us?

- Spouse of resident Relative of resident Friend of resident Resident's nominated representative

3. How long has your loved one been living at this Whiddon service?

- Less than 6 months 6 - 12 months 1-2 years 2-5 years Over 5 years

4. Is the home well run?

- Yes No

5. Do staff know what they are doing?

- Yes No Unsure

6. Does management follow up when you raise things with them?

- Yes No

7. Does your loved one feel safe at the Home?

- Yes No

8. How easy is it for your loved one to get the care they need?

- Very easy Easy Somewhat difficult Very difficult

9. If the response is difficult/very difficult: Can you tell us what needs are not being met.

(You can choose more than one option)

- | | |
|---|--|
| <input type="checkbox"/> Nursing care | <input type="checkbox"/> Personal care |
| <input type="checkbox"/> Allied health services e.g. physio | <input type="checkbox"/> Other |
| <input type="checkbox"/> Health services e.g. access to GP | |

10. Do you feel the staff know your loved one well?

- Yes No

11. Do you feel the staff treat your loved one with respect?

- Yes No

12. Do you feel the staff are kind and caring towards your loved one?

- Yes No

13. Do the same familiar staff care for your loved one every day?

- Yes No

14. How do you rate the relationship that your loved one has with Whiddon staff?

- Highly Good Satisfactory Not satisfactory

15. Do staff encourage your loved one to do as much as possible for himself/herself?

- Yes No

16. Does your loved one have a say over his/her activities? E.g. When he/she gets up, showered, etc.

- Yes No

17. Do you feel staff are able to support your loved one if she/he is feeling sad and lonely?

- Yes No

18. Are there enough activities and things to do at the Home that interest your loved one during the week?

- Yes No

19. Are there enough activities and things to do at the Home that interest your loved one the weekends?

- Yes No

20. Do you feel there are enough opportunities for your loved one to be active and exercise?

- Yes No

21. Has your loved one been able to make friends at the Care Home?

- Yes No Unsure

22. Does your loved one like the food at the Home?

- Yes No Sometimes

23. Does your loved one have choice over their meal selection?

- Yes No Sometimes

24. Are mealtimes an enjoyable and relaxed experience for your loved one?

- Yes No Sometimes

25. Is the Home clean, well maintained and comfortable?

- Yes No

26. We know there is no place like home, but is your loved one happy living at the Home?

- Yes No

27. What would you say is the best thing about this Whiddon care home?

(You can choose more than one option)

- | | |
|--|---------------------------------------|
| <input type="checkbox"/> The people | <input type="checkbox"/> The care |
| <input type="checkbox"/> The environment | <input type="checkbox"/> The location |
| <input type="checkbox"/> The activities | <input type="checkbox"/> Other |

28. How would you rate this care home?

- | | |
|------------------------------------|---|
| <input type="checkbox"/> Excellent | <input type="checkbox"/> Satisfactory |
| <input type="checkbox"/> Very good | <input type="checkbox"/> Unsatisfactory |
| <input type="checkbox"/> Good | |

29. How likely is it that you would recommend this Whiddon care home to a friend or colleague?

1 2 3 4 5

(1 - Not at all likely, 5 - Extremely likely)