

Oak Park Township Senior Services Satisfaction Survey

Please assist us in providing our services by completing this survey. Either you or you caretaker may respond. If you prefer to respond personally, you may do so by calling **708-383-8060**

What Service(s) did you receive?

- Home Delivered Meals Case Management Community Care Program Chore Program Transportation
 Illinois Volunteer Money Management Program CPOE (Information and Assistance) CRC (Caregiver Resource Center)

How long have you been receiving service(s)?

How were you referred for service(s)?

Who is your case manager?

Staff contact person?

Please respond to the following by selecting ONE number for each statement

The services I receive meet my needs _____

My questions are not answered _____

The service I received was provided promptly _____

The staff person responded in a timely manner _____

Staff members were courteous _____

The staff member gave me choices for my care and assistance _____

I understood my options for care and assistance _____

If onsite service was not available, were you linked to the appropriate service provider? _____

The care and assistance I receive is not working well for me _____

Since receiving assistance from your staff, my situation has

- IMPROVED STAYED THE SAME GOTTEN WORSE

Name (optional):

Address:

Phone:

Thank you for taking the time to complete this survey. We appreciate your help in providing our services.