

Client & Family Satisfaction Survey (Easy Read Version)

Thank you for using Fraserside's services.

Please fill out this satisfaction survey.

This **satisfaction survey** will help tell us your thoughts and feelings about your experience using Fraserside's services.

Your thoughts and feelings help us improve your experience in the future.

The survey has 9 questions. The survey will take you 10 minutes to fill out.

You do not have to fill out the entire survey.

You can ask someone to help you fill out the survey.

We will not share the information you write down in the survey unless you say it's ok.

Please send your satisfaction survey to us when you are done. You can give it to us, mail it to us, or email it to us.

Give to any Fraserside person.

Mail: Second Floor – 519 Seventh Street, New Westminster, BC V3M 6A7

Email: feedback@fraserside.bc.ca

If you have questions about this satisfaction survey, you can call us at 604-522-3722, Ext. 101 or email us at feedback@fraserside.bc.ca



1. Draw a checkmark beside all the services that apply to this statement:

The Fraserside services I used are:		
Community Living	Social Housing	
Horizons Day Programs	Peterson Place Emergency Family Shelter	
Mobile Work Crew		
Supported Employment Residential Services	Bolivar Court Supported Housing	
(Home Share Services, Mundy Residence, Hyde Creek or Gilley Residence)	Ibsen Apartments	
	Community Services Desk	
Mental Health	Summer Camp Subsidies	
Calcutt Place	Parks and Recreation Subsidies	
Delta House/Bridging Program	Counselling	
Summit House	Perspectives Adult Substance Use Services	
Fraserdale Bear Creek House	Perspectives Youth & Family Outreach	
New Leaf Clubhouse	Children Who Witness Abuse	
2. Draw a checkmark ▼ beside all me	ethods that apply to this statement:	
I heard about Fraserside's services	s from:	
Another agency	A poster	
Fraserside's website	Community Resource Book	
A newspaper article or advertisement	A friend or family member Something else	



3. Draw a checkmark beside one option that applies to this statement:

Luse Fraserside's services:

Every week

Every month

Every second week

Always

4. Draw a (circle) around the feeling that applies best to this statement:

My overall happiness with Fraserside's services is:











5. Draw a(circle) around or for each of these statements:







Information about Fraserside's services was easy for me to find.







I felt accepted by Fraserside.





(Statements continue on the next page.)





I felt safe using Fraserside's services.







I was treated with respect.







My cultural and spiritual beliefs were respected.







I've been asked before to give feedback about Fraserside's services.







I would recommend Fraserside's services to other people.







My life got better because of Fraserside's services.







6. Draw a checkmark beside all the areas that apply to this statement: My life got better in these areas: My mental health My housing My use of drugs and alcohol My employment My relationships with my family My behaviours My physical health How I get along with other people 7. Write in this box about the things you enjoyed about Fraserside's services: 8. Write in this box about the things that Fraserside's services can do to be better: 9. Write in this box any more thoughts or feelings you have about Fraserside's services:

10. If you want someone from Fraserside to talk with you about your thoughts and feelings that you wrote down in this satisfaction survey, write down your name, your email address and your phone number here:

Your Name:	 	
Your Email Address:	 	
Your Phone Number:	 	

Thank you. This is the end of the survey.

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