Service User Questionnaire



To complete this online survey you need to download it to your computer and open it in **Acrobat Reader**. You can get **Acrobat Reader** for free from: **get.adobe.com/uk/reader/**

the ques	vant to complete tionnaire in: Read?	Yes	No
• Plain	English?		
	uld you like to help this questionnaire?		
A me	mber of staff?		
• Some family	eone from my y?		
This i helps	dvocate? s someone who s you to speak up or ks up for you.		



	Yes	No No	Don't know
Did your family help to say what care and support you need?			
Are there meetings where you can speak up where you live?			
Are the staff friendly?			
Can you decide what you want to do in the day time?			
Do you know who your key worker is?			
Do the staff know how to work with you?			
Do the managers listen to you?			

			(:)	
	Do you see the managers:	Yes	No	
	Every day?			
	Every week?			
Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec	About once a month?			
Jon Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec	• Less often?			
Is there anything else you would like to change				

Thank you



Thank you for answering the questionnaire.

Please now send your answers back to us by email:







Clicking the button above will automatically create a new email with our address on it and your questionnaire attached.

You will then need to click 'send' to email your questionnaire back to us.