

Consumer Services Survey

Aged Care and Community Services

We are asking residents to have their say on the availability of home based community services in the Snowy Monaro region. The information collected through this survey will assist all providers to understand your needs now and into the future. We understand that there is an unmet need in the area of home based services, inclusive of support and transportation for people with disability and the aged. Your feedback is important so we can understand where the gaps exist.

Participation in this survey can be anonymous. **If you are completing a hard copy of this survey please return by COB Friday 02 September 2022 to any Council Office**, email to council@snowymonaro.nsw.gov.au or post to PO Box 714 Cooma NSW 2630. If completing this on behalf of another person, please ensure responses reflect their current situation. This survey can also be found on Council's 'Your Say Snowy Monaro' website.

Name (optional)			
Where do you reside (town)?			
How old are you?	19-30 years	65-76 years	
	31-45 years	77-89 years	
	46-55 years	90+ years	
	56-64 years		
What is the age range of the person you are completing this survey for?	19-30 years	65-76 years	
	31-45 years	77-89 years	
	46-55 years	90+ years	
	56-64 years		
Are you (please tick)	Male	Female	Prefer not to say
	Aboriginal or Torres Strait Islander	From a non-English speaking background	
What is your employment status?	Employed full-time	Employed part time / casual	
	Not employed	Retired / pensioner	
	Student full time / part time	Other _____	
Are you completing this related to aged care, disability or other?	Aged care		
	Disability		
	Other_____		

Question 7	<p>Are you currently receiving any services in the Snowy Monaro region? (tick all that apply)</p> <table border="0"> <tr> <td>Home Care Package</td> <td>Social Support Individual</td> </tr> <tr> <td>Domestic Assistance</td> <td>Meals on Wheels</td> </tr> <tr> <td>Home Modifications</td> <td>Community Transport</td> </tr> <tr> <td>Centre Based Respite</td> <td>Personal Care</td> </tr> <tr> <td>Occasional Overnight Respite</td> <td>Home Maintenance</td> </tr> <tr> <td>Flexible Respite</td> <td>Social Support Group</td> </tr> <tr> <td colspan="2">Other _____</td> </tr> </table>	Home Care Package	Social Support Individual	Domestic Assistance	Meals on Wheels	Home Modifications	Community Transport	Centre Based Respite	Personal Care	Occasional Overnight Respite	Home Maintenance	Flexible Respite	Social Support Group	Other _____	
Home Care Package	Social Support Individual														
Domestic Assistance	Meals on Wheels														
Home Modifications	Community Transport														
Centre Based Respite	Personal Care														
Occasional Overnight Respite	Home Maintenance														
Flexible Respite	Social Support Group														
Other _____															
Question 8	<p>Do you feel that the services you currently receive are meeting your needs?</p> <table border="0"> <tr> <td>No</td> <td>Somewhat</td> <td>Yes</td> <td>I am not receiving services</td> </tr> </table> <p>Please describe why you chose this rating:</p>	No	Somewhat	Yes	I am not receiving services										
No	Somewhat	Yes	I am not receiving services												
Question 9	<p>Have you tried to access services in the past, but have not been able to secure a provider for home based support?</p> <table border="0"> <tr> <td>Yes</td> <td>No</td> </tr> </table> <p>If 'Yes' who have you tried and are you on a waitlist?</p> <table border="0"> <tr> <td>Yes</td> <td>No</td> </tr> </table> <p>Provider name:</p>	Yes	No	Yes	No										
Yes	No														
Yes	No														
Question 10	<p>Are you familiar with 'My Aged Care'?</p> <table border="0"> <tr> <td>Yes</td> <td>No</td> </tr> </table> <p>If 'No' would you like further information as to how to access?</p> <p>If 'Yes' are you registered with 'My Aged Care'?</p> <table border="0"> <tr> <td>Yes</td> <td>No</td> <td>Unsure</td> </tr> </table> <p>Are you on a waitlist through 'My Aged Care'?</p> <table border="0"> <tr> <td>Yes</td> <td>No</td> </tr> </table>	Yes	No	Yes	No	Unsure	Yes	No							
Yes	No														
Yes	No	Unsure													
Yes	No														

	<p>If 'Yes', what provider are you on the waitlist for?</p> <p>Provider name:</p>								
Question 11	<p>In planning ahead, are your responses in the survey reflective of your current or anticipated need?</p> <p>Are you in need of services:</p> <table> <tr> <td>Now</td> <td>9-12 months</td> </tr> <tr> <td>1-4 months</td> <td>12 months onwards</td> </tr> <tr> <td>4-9 months</td> <td></td> </tr> </table>	Now	9-12 months	1-4 months	12 months onwards	4-9 months			
Now	9-12 months								
1-4 months	12 months onwards								
4-9 months									
Question 12	<p>Do you have access and support to get onto the Internet?</p> <table> <tr> <td>Yes</td> <td>No</td> </tr> </table> <p>If 'Yes' do you require assistance to access 'My Aged Care'?</p> <p>If 'No' would you like assistance to register with 'My Aged Care'?</p> <table> <tr> <td>Yes</td> <td>No</td> </tr> </table>	Yes	No	Yes	No				
Yes	No								
Yes	No								
Question 13	<p>Are there things you used to enjoy doing, that you can no longer access? If yes, what sort of things and what would assist you to reengage?</p>								
Question 14	<p>How do you like to receive information about aged care and community services that are available to you?</p> <table> <tr> <td>Newspaper</td> <td>Radio</td> </tr> <tr> <td>Online</td> <td>Presentations to groups I attend (U3A, Probus, Lions, etc)</td> </tr> <tr> <td>Flyers</td> <td></td> </tr> <tr> <td>Other_____</td> <td></td> </tr> </table>	Newspaper	Radio	Online	Presentations to groups I attend (U3A, Probus, Lions, etc)	Flyers		Other_____	
Newspaper	Radio								
Online	Presentations to groups I attend (U3A, Probus, Lions, etc)								
Flyers									
Other_____									
Question 15	<p>Has this survey captured your concerns? If not, please provide further information.</p>								

Thank you for taking the time to complete this survey!