

Date:	Requested due date:				
You are not required to complete the above info this blank if you wish to remain anonymous. PL envelop provided.					
Please read the questions below and place a tick \checkmark help us improve and	or × cross at the grade yo raise the standards.	ou feel v	ve perf	orm. T	his will
InadequateRequires11Score2Score	Good 3 3 Score	4	Outs 4 Sco	tandin ore	g
1 Is the service Safe?					
)	2	3	4
Any equipment that the agency uses is well mai	ntained				
There are enough staff to make sure I receive a is not rushed and staff have the right mix of skill kept safe					
I feel confident that my belongings are safe and	secure				
Staff give me my medicine according to the Car stored correctly and safely	e Plan and it is				
I am involved in reviewing my medicines and su independent as possible	pported to be as				
Staff have helped me know how to stay safe and concerns	d how to raise any				
I feel safe and protected by staff, but also have possible to do the things I want to do	as much freedom as				
Staff protect my dignity and human rights and reindividual	espect me as an				
I feel protected from being bullied, harassed, ha	rmed and abused				
If the person caring for me needs to change at s so that I know who to expect	short notice, I am told				
Staff deal with incidents and accidents quickly a	nd openly				
	Total	1	2	3	4

To be



Score (for office use only)

2	Is the service Effective?				
) (1	2	. 3	4
l an	n introduced to any staff who are going to provide my care				
	ff have the right knowledge, qualifications and skills to carry out r role in providing me with the right care				
	n always asked to give my consent (permission) to my care, Itment and support in a way I understand				
	en needed, my family and friends are also involved in decisions ut my care				
Sta	ff take steps at the right time to make sure I stay in good health				
reg	ff know about my health needs and personal preferences. They ularly involve me in decisions about my care and treatment and me as much choice and control as possible				
	ff make sure I get the right food and drink I need and that I have ugh of it				
	n regularly asked for my views about the service I receive and my dback is consistently good				
	Total	1	2	3	4

Score (for office use only)



3 Is the service Caring?

	•• (1	•• 2	3	4
Staff know about my background, likes, hopes and needs				
I am encouraged to express my views and I feel listened to				
Staff communicate with me in the way I need them to				
I have access to advocates (people who can speak on my behalf)				
Staff treat me with dignity and respect. They have time to develop trusting relationships with me and are concerned for my wellbeing				
Total	1	2	3	4

Score (for office use only)



Is the service Responsive?

My care, treatment and support are set out in writing and this tells staff what is needed to support me best

I am fully involved in decisions about my current and future care

I can choose who supports me and this includes being able to choose the gender of the person supporting me

My Care Plan is changed as my needs change, and all those who need to know, such as other services, are kept up to date

My Care Plan includes information about the whole of my life, including my goals, abilities and how I want to manage my health

If I need to visit hospital or use another service, staff plan this with me to make sure it goes as smoothly as possible

If I have any concerns and complaints, staff always take them seriously, investigate them thoroughly and respond to them in good time

Score (for office use only)

Total

Total

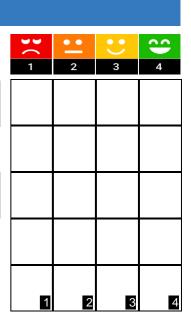
Is the service Well-led? 5

Staff know what is ex	pected of them and	are happy in their work
	pooloa or thom and	are happy in their work

Staff and managers work effectively with others who may be involved in caring for me, such as my local council

The managers know what they need to do and are always honest, including when things go wrong

I am asked for my views on the wider service and I feel included in how things will be different



Score (for office use only)



Respecting My Privacy

If you wish, you do not have to declare your identity on this survey and you may return it anonymously

	Yes	No	
A member of staff helped me to complete this survey			
I have been told that I can return this survey anonymously			
I have been shown how to return this survey anonymously			
I am satisfied that I can return this survey anonymously if I want to			

Comments

FOR OFFICE USE ONLY

Date returned:

Total Score:

Tallied By: (initials)

Notes

