

TUSCARAWAS COUNTY JOB & FAMILY SERVICES

Re-cap of 11 Surveys April 1 – June 30, 2011

Your opinion is important to us. Please complete the following survey to help us improve our services. We will use this information to assist with our future planning. Your response will be confidential and anonymous.

1. Agency services you are currently receiving (as applicable):

- | | |
|-------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Food Assistance (4) | <input checked="" type="checkbox"/> Adoption Services (6) |
| <input type="checkbox"/> Disability Assistance | <input type="checkbox"/> Kinship Care |
| <input type="checkbox"/> Ohio Works First | <input checked="" type="checkbox"/> Foster Parent Services (1) |
| <input type="checkbox"/> PRC | <input type="checkbox"/> Child Protective Services |
| <input checked="" type="checkbox"/> Medicaid (Aged, Blind, Disabled)(1) | <input type="checkbox"/> Adult Protective Services |
| <input checked="" type="checkbox"/> Medicaid (Healthy Families) (2) | <input type="checkbox"/> Alternative Response |
| <input checked="" type="checkbox"/> Medicaid (Healthy Start) (1) | |
| <input type="checkbox"/> Child Care Assistance | |
| <input checked="" type="checkbox"/> Other (please specify): | -Our adopted daughter is currently in a RTC for drug and alcohol, impulsive behavior disorder, ADHD, & anger issues. PLEASE HELP. |
| | - Adoption Subsidy |

2. How did you learn about our agency and services?

- | | |
|-------------------------------------------------------------|---------------------------------------------------|
| <input checked="" type="checkbox"/> Friend (4) | <input type="checkbox"/> Radio |
| <input checked="" type="checkbox"/> Family (4) | <input type="checkbox"/> Newspaper |
| <input checked="" type="checkbox"/> Minister (1) | <input type="checkbox"/> Attorney |
| <input checked="" type="checkbox"/> Phone Book (1) | <input type="checkbox"/> Physician |
| <input type="checkbox"/> Court | |
| <input type="checkbox"/> TCJFS Web site | <input type="checkbox"/> Other Web site |
| <input checked="" type="checkbox"/> Other Agency (specify): | -Center for Child & Family Development |
| | -Guernsey County Children Services Board |
| | -Christian Children's Home of Ohio |

3. Please indicate level of agreement with each statement:

Agree = 1

Neutral = 2

Disagree = 3

1.08 I received prompt attention.

1.00 Agency staff was courteous.

1.00 Agency staff was skilled and knowledgeable.

1.17 First appointment occurred in reasonable time.

1.00 Staff was professional.

1.00 I felt comfortable with my caseworker.

1.00 Caseworker encouraged family participation.

1.00 Services were helpful.

1.08 I would recommend the agency to others.

1.25 A supervisor was available if requested.

4 a. How many agency staff did you see before receiving your initial assistance or service?

-An average of 1.5 workers

-Don't remember

-Came to pick up foster child and received immediate services.

4 b. How was your experience with a phone interview, if applicable?

-Good - 4

-N/A - 3

-Very knowledgeable

-Helpful, answered as many questions as possible.

-Never had one

5. Were there any services you needed or expected that you did not receive?

-No - 9

-Assistance needed was not available in this area.

-Medicaid

6 a. Were there any barriers to receiving services (transportation, hours, etc.)?

-No - 9

-N/A - 2

6 b. How can these barriers be eliminated?

-No - 2

-N/A - 4

7. If you left a message (voice mail) with a worker, was your call returned in a timely manner? **Yes (10)** No

8. Have you visited the agency's public Web site (www.tcjfs.org)? Yes No

- 11

If Yes, what did you like about the Web site?

What suggestions do you have to improve our agency's public Web site?

9. When applying for services, were you informed of your rights and responsibilities?

Yes - **10** No **N/A - 1**

10. Overall rating of the agency:

- Very Good - 7 Good - 3 Fair - 1 Poor

11. What do you feel are the agency's strengths/good points?

- Counseling and advice were very good; considerate, helpful and helping transfer medical services to Texas from Ohio by IV-E Children Services worker.
- They know what they are doing. Covered all.
- Employees were knowledgeable and helpful.
- Great and kind workers. Very great experience.
- Good at answering questions and providing information about children and services.
- Do help people when need help with food!!
- Very courteous and helpful

12. In what areas could the agency improve?

- More intense resources in this area to be available.
- Can't think of anything.
- Have had little contact with agency since adoption several years ago.

13. Demographics (optional):

Average Age - 34

- Male (4)
 Female (7)

Race/Ethnicity:

- White (10)
 African American (1)
 Hispanic
 Asian
 Native American

Thank you for your time and input.

Please return this form to the receptionist or mail in the provided envelope.

**The results of the quarterly surveys are posted on the bulletin board in our reception.
Also, the results are posted on our public agency website at www.tcjfs.org**