

Community Care Service Voucher Scheme for the Elderly **Customer Satisfaction Survey**

In order to enhance the service quality, the Community Care Service Voucher (CCSV) Office of the Social Welfare Department would like to collect your opinions on CCSV service by answering the following questions. The survey will take approximately 5 minutes to complete. All information is provided voluntarily for the purpose of service monitoring and improvement of the Recognised Service Providers (RSPs). For enquiries, please contact CCSV Office at 3107 3013. Thank you for your valuable advice.

- 1. Please put a "✓" under the answer that most accurately represents your opinion. If the relevant question does not apply to your situation, please put a "✓" under "N.A."**

Overall Service (Note: Applicable to all voucher users)

	Strongly Agree	Agree	No Comment	Disagree	Strongly Disagree	N.A.
I am satisfied with the CCSV services.						
I am satisfied with the service quality of the RSPs.						

Service Arrangement of RSPs (Note: Applicable to all voucher users)

	Strongly Agree	Agree	No Comment	Disagree	Strongly Disagree	N.A.
The service policy is clear.						
The services meet the needs of the elderly persons.						
The procedures of giving feedback and complaint are clear and transparent.						

Performance of RSP staff (Note: Applicable to all voucher users)

	Strongly Agree	Agree	No Comment	Disagree	Strongly Disagree	N.A.
The staff clearly explains service details.						
The staff has good attitude and are professional.						

Centre-based Services Provided by RSPs (Note: Applicable to voucher users of centre-based services)

	Strongly Agree	Agree	No Comment	Disagree	Strongly Disagree	N.A.
The centre is clean and tidy.						
The centre is fully staffed.						
Transportation arrangement is appropriate.						

Home-based Services provided by RSPs (Note: Applicable to voucher users of home-based services)

	Strongly Agree	Agree	No Comment	Disagree	Strongly Disagree	N.A.
The time schedule of home-based services is appropriate.						
The service provided is consistent with the service contract made.						

Other Services Provided by RSPs (Note: Applicable to voucher users who receive residential respite service (RRS), speech therapy (ST), and rental service of assistive technology (AT) products)

	Strongly Agree	Agree	No Comment	Disagree	Strongly Disagree	N.A.
The RRS arrangement is appropriate.						
The ST service meet the needs of the elderly person.						
The rental procedure of AT products is smooth.						

2. Will you continue to use the service provided by your existing RSP?

- Yes
- No, the reason is as follows (please select the main reason):
- Personal reasons
 - Wish to try another RSPs
 - The existing RSP is unable to meet my service need
 - Change to another RSP based on suggestion from others
 - New RSP can provide better services
 - The existing RSP has poor service quality
 - Others (please specify: _____)

3. Will you continue to use CCSV?

- Yes
- No, the reason is as follows (please select the main reason):
- Will admit to residential care service subvented by the Government.
 - Will admit to community care service subvented by the Government.
 - Will admit to private residential care home for the elderly.
 - Prefer to waitlist for residential/community care service subvented by the Government.
 - Hospitalisation / Away from Hong Kong
 - Under the care of family / caregiver / domestic helper
 - Others (please specify: _____)

4. Are you:

- CCSV voucher holder
- Family member / carer of CCSV voucher holder
- Others (please specify: _____)

5. Other comment:

Please fill in other comment (if any) in the space below. You may also contact CCSV Office at 3107 3013 from Monday to Friday, 9:30 am to 1:00 pm and 2:30 pm to 5:00 pm, except public holidays.

6. The information below is optional:

Name of voucher holder : _____
CCSV number : CCSV-_____
Name of RSP : _____
Name of contact person's name
(not applicable for voucher holders) : _____
Relationship with voucher holder
(not applicable for voucher holders) : _____
Contact phone number : _____
Date : _____

Please submit the completed questionnaire to the CCSV Office of Social Welfare Department by the following means:

1. Fax (Fax no.: 2117 1264)
2. Post (Address: Rooms 2601-05A, 26/F, Two Chinachem Exchange Square, 338 King's Road, North Point, Hong Kong)
3. Contact CCSV Recognised Service Provider

This questionnaire is completed. Thank you!