



Wendat Community Programs
End of Service Survey – Services for Seniors – Mobile Social Work

NAME: (optional)

DATE:

Thank you for helping us to improve our service by completing this survey.

Instructions: Think about the services that you/your family member have received from Wendat. Please indicate your level of satisfaction with each of the following statements by checking the box which best represents your opinion.

	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
Overall, I am satisfied with the services received from Wendat Social Workers.					
I was part of choosing my goals.					
Services are available at times that were convenient for me.					
Staff treated me with respect.					
Staff spoke to me in a way that I understood.					
Wishes about who is and is not informed related to treatment were respected					
I believe that the service provided met my needs					

OPTIONAL

1. What has been the most helpful thing about the services you received from Wendat's Social workers?

2. What would improve the services offered by Wendat? (if applicable)

3. Did/do you feel supported by your care team? (your care team is the staff at Wendat)

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4. (a) Have you seen your provider or received services other than in-person in the last year? (video calls, virtual meetings, phone calls)
- Yes
 - No
- (b) Do you prefer to receive services or speak with your provider using telephone, video or secure email?
- Yes
 - No
 - Sometimes : _____

Please return to:

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