



Client Satisfaction Survey

Your name (optional): _____

Thank you for completing this survey. Your input is very valuable. The results of this survey will help identify opportunities for improvement. **Please respond only to the questions that apply to your experiences with Cascade Employment Services.** Surveys can be returned to a Cascade staff member, mailed to Cascade at 2023 E Sims Way # 115, Port Townsend, WA 98368 or emailed to taylor@casconnections.org

1) How would you rate your overall satisfaction with your rehabilitation program? (select one)

- | | |
|---------------------------|------------------------------|
| 1) 😊 Completely satisfied | 4) 😞 Dissatisfied |
| 2) 😊 Satisfied | 5) 😞 Completely dissatisfied |
| 3) 😊 Somewhat satisfied | |

If not satisfied or completely satisfied, why weren't you satisfied?

2) How well did Cascade staff make information about your program available and easy to understand?

- | | |
|--------------------|----------------------|
| 1) 😊 Very well | 4) 😞 Not well |
| 2) 😊 Well | 5) 😞 Not well at all |
| 3) 😊 Somewhat well | |

3) Cascade staff treats me with dignity and respect and listens my concerns?

😊 Yes ____ 😞 No ____ Comments:

4) How satisfied were you with the speed of arranging services: (select one)

- | | |
|---------------------------|------------------------------|
| 1) 😊 Completely satisfied | 4) 😞 Dissatisfied |
| 2) 😊 Satisfied | 5) 😞 Completely dissatisfied |
| 3) 😊 Somewhat satisfied | |

5) Were you satisfied with your involvement in planning your employment program? (select one)

- | | |
|---------------------------|------------------------------|
| 1) 😊 Completely satisfied | 4) 😞 Dissatisfied |
| 2) 😊 Satisfied | 5) 😞 Completely dissatisfied |
| 3) 😊 Somewhat satisfied | |

6) Were your interests, strengths and abilities taken into account in the development of your work plan?

😊 Yes ____ 😞 No ____ Comment:

7) Were you given the type of support that you desired?

😊 Yes ____ 😞 No ____ Comment:



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8) Have you experienced any of the following barriers within Cascade or in the general Community? (Please specify the barrier encountered in the “Description” box.)

Barrier	Source	Description
<input type="checkbox"/> Architecture	<input type="checkbox"/> Cascade <input type="checkbox"/> Community	
<input type="checkbox"/> Environment	<input type="checkbox"/> Cascade <input type="checkbox"/> Community	
<input type="checkbox"/> Attitudes	<input type="checkbox"/> Cascade <input type="checkbox"/> Community	
<input type="checkbox"/> Finances	<input type="checkbox"/> Cascade <input type="checkbox"/> Community	
<input type="checkbox"/> Employment	<input type="checkbox"/> Cascade <input type="checkbox"/> Community	
<input type="checkbox"/> Communication	<input type="checkbox"/> Cascade <input type="checkbox"/> Community	
<input type="checkbox"/> Technology	<input type="checkbox"/> Cascade <input type="checkbox"/> Community	
<input type="checkbox"/> Transportation	<input type="checkbox"/> Cascade <input type="checkbox"/> Community	
<input type="checkbox"/> Community Integration (if applicable)	<input type="checkbox"/> Cascade <input type="checkbox"/> Community	
<input type="checkbox"/> Other	<input type="checkbox"/> Cascade <input type="checkbox"/> Community	

9) What would you say are the major benefits that you receive from participating in Cascade Employment services?

10) If you could make one recommendation for improving our program, what would it be?

11) Other comments: