

How good is your care?

Tell us your experience of living in a care home



Complete and return to your local Care Inspectorate office in the pre-paid envelope provided.

Thank you for taking the time to complete this survey. This survey is for people who live in a care home. Please answer on the basis of your experience of the service during the past year.

The Care Inspectorate inspects this service regularly to check the quality of the care being provided. We will use your answers to help us plan areas we need to focus on during our inspection of the service. All of your answers will be treated as confidential.

If any questions are not relevant to you, or if you do not want to answer any of the questions, please leave them blank.

Please put any further comments you have about the service in the comments box provided. Although we will take care not to identify an individual, we may use some comments as examples in the inspection report.

You will find our privacy policy here:

<http://www.careinspectorate.com/index.php/core-privacy-notice>

Website: www.careinspectorate.com

Email: enquiries@careinspectorate.gov.scot

Care Inspectorate Enquiries: 0345 600 9527

Tell us about you

- I use the service
- I am a friend/relative/advocate/volunteer and I am completing this on behalf of someone who uses the service
- I am a carer who works for the service and I am helping the person complete the survey
- I am from the Care Inspectorate and I am helping the person complete the survey

Wellbeing

1. How I feel: (tick all that apply)

I feel safe



I feel valued



I feel bored



Wellbeing

I feel I am independent



I feel at home



I feel content



Wellbeing

I feel lonely



I feel listened to



I feel accepted



Wellbeing

Strongly agree

Agree

Disagree

Strongly disagree

Don't know



2. Overall I am happy with the care and support I receive at this home

Strongly agree

Agree

Disagree

Strongly disagree

Don't know



3. I am treated:

• kindly

• with dignity and respect

• fairly

4. What is the one thing you would like to change about this home?

Wellbeing

Strongly agree



Agree



Disagree



Strongly disagree



Don't know



5. My wellbeing:

- | | | | | | |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| • I like the food | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • I get up and go to bed when I want | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • I spend my time doing the things that I enjoy | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • I am not discriminated against in any way | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • I am supported to keep as well as I can | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • I am encouraged to move more | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

6. Comments on wellbeing

Staff team

Strongly agree



Agree



Disagree



Strongly disagree



Don't know



7. I feel the staff:

- know what they are doing
- work well together

Strongly agree



Agree



Disagree



Strongly disagree



Don't know



8. The staff team:

- I get on well with the staff
- I am able to get help from staff when I need it
- Staff treat me well

9. Comments on the staff team

Setting

Strongly agree



Agree



Disagree



Strongly disagree



Don't know



10. Where I live:

• I live in a comfortable, homely environment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• I have my room the way I like it	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• It is clean here	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• I can go outside when I want	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• I can get peace and quiet when I want	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• I am encouraged to be part of the community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

11. Comments on the setting

Care and support

Strongly agree



Agree



Disagree



Strongly disagree



Don't know



12. My care and support:

- I am involved in decisions about my care and support
- I can choose who else (family, friends) can be involved in my care and support

13. Comments on my care and support

Leadership

Strongly agree



Agree



Disagree



Strongly disagree



Don't know



14. Leadership:

- | | | | | | |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| • I am able to be involved in how the service is run | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • I can raise concerns and know that they are dealt with | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

15. Comments on leadership

If you would like to talk to us in more detail about this service please provide your name and contact telephone number in the box below.

Please be aware that we may not be able to contact everybody during an inspection, this will depend on the number of requests received.

Please note that by providing your contact details you are giving consent to be contacted by one of our inspectors. Your details will be kept confidential and be used only for the purpose of contacting you in relation to this service. Your details will be disposed of once the inspection has been finalised.

If you wish to withdraw your consent please use the details below to contact us quoting 'How good is my care? Care homes for older people survey' and the name of the service that you completed the survey for.

Email: enquiries@careinspectorate.gov.scot

Telephone: 0345 600 9527

Name

Contact telephone number

Thank you for taking the time to answer this survey.

If you specifically want to discuss something with us please contact us on [0345 600 9527](tel:03456009527)

Headquarters

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