

In-Home Supportive Services (IHSS)

Recipient Survey

Surveys Sent: 2759

Surveys Returned: 649/23%

	YES		NO		Total Responses	
1. Do you know which services and tasks your provider may do for you?	636	99%	6	1%	642	
2. Are you able to communicate to your provider?	632	99%	7	1%	639	
3. Are you able to communicate to your provider the way you want things done?	626	98%	15	2%	641	
4. Are your provider's absences a problem for you?	58	9%	584	91%	642	
5. What do you do if your provider is not able to come?	Call Golden				Total Responses	
	Call PA	Umbrella	Call APS	Nothing	Other*	Total Responses
	31	17	22	219	290	579
	5%	3%	4%	38%	50%	
	Other*					
	Provider always there			29	5%	
	Family helps			82	15%	
	Call 911			1	<1%	
	Have another provider			24	4%	
	Call friend, neighbor			22	4%	
	Reschedule			43	8%	
	Call Hospice			1	<1%	
	Emergency back-up plan			2	<1%	
	Provider lives with me			28	5%	
	Call Compass			23	4%	
	Not an issue			13	2%	

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	How to choose a provider	How to supervise a provider	How to review a timecard	Understanding the reassessment process	Understanding your rights and responsibilities	Total Responses
6. What trainings would you want to go to?	40 9%	49 11%	65 14%	154 33%	154 33%	462
	In Person	Video	On-Line			Total Responses
7. How would you like to receive these trainings?	95 22%	145 34%	188 44%			428
	Yes	No				Total Responses
8. Would you like to receive e-mails about local events and news concerning the IHSS program?	182 33%	372 67%				554
Provided e-mail address	161 29%	390 70%				