Instructions to Staff for Distributing Client Satisfaction Surveys

In order to evaluate how effective the new model of service delivery is, we need to compare the opinions of families with a child who received services prior to the introduction of the new model with those who received services under the new model.

The questionnaires will be distributed in 2 phases. Phase 1 will target families who received assessment and intervention under the old model. Phase 2 of the evaluation will be distributed to families of children referred and assessed under the new model.

Questionnaires should be printed double-sided and stapled across the long margin above the title. The name of the service can be inserted prior to printing.

Instructions

- During Phase 1 (Insert date) questionnaires are to be distributed only to parents/carers of clients who were:
 - referred to the centre before (Insert date) and
 - → were older than 12 months of age at the time of referral and
 - -+ have been assessed as having a developmental issue/s and
 - → are now receiving ongoing intervention from the service.
- During Phase 2 (Insert date) questionnaires are to be distributed only to parents/carers of clients who were;
 - → referred to the centre after (Insert date) and
 - → were older than 12 months of age at the time of referral and
 - → have been assessed as having a developmental issue/s
- Questionnaires may be distributed to parents/carers by either administration staff or clinical staff. Each service needs to determine the most efficient method for their team.
- A suggested script to use when approaching parents/carers is:

'In order to help us evaluate our service and to ensure we are meeting the needs of children with developmental issues and their families, would you mind participating in this short survey. Your participation is voluntary and confidential. It should only take 5 – 10 minutes to complete. Please place your completed survey in the envelope provided and return it to the front desk when you are finished. If you have any questions about how to complete the survey, please ask me.

Thank you for taking the time to complete this survey'.

- Please provide each parent/carer with a questionnaire on a clipboard, a pen and an envelope to put the form in when they have finished.
- A parent should only complete the questionnaire once. The person handing out the questionnaire will therefore need to check that the parent/carer has not completed one on a previous visit.
- The parent/carer should complete the questionnaire and hand it back before they leave the centre if at all possible. Questionnaires taken home are unlikely to be returned.
- The most obvious time for the parent/carer to complete the questionnaire is while they are waiting for their child's appointment. However, it may be completed after the child's appointment or during the appointment if appropriate.
- Interpreters should be asked to help parents/carers complete the form if language is an issue.
- · Please keep completed surveys in a safe place for collection by (Insert name).

Introduction	
ease read carefully and answer ALL questions	unless otherwise stated.
ease note that all responses will be kept confid	lential!
Clinical Inteks 8 Trians	
Clinical Intake & Triage	
1. Which category best describes than 1 response.	your current role in this service? You may select more
Clinical Intake Officer	Other Medical Service Provider
Allied Health Service Provider	Team Leader/Service Manager/Director
Community-based Paediatrician	Discipline Director
Hospital-based Paediatricen	
Other (please specify)	
Please elaborate 3. Please indicate below how man intake/triage/prioritisation process	
	2-3 hours weekly
O Up to 1 hour weekly	() 3-4 hours weekly
1-2 hours weekly	More than 4 hours weekly
Other (please specify)	

Agree Nether agree of disagree Disagree I am satisfied with the current process to identifying the specific needs of cilents and families I am satisfied with the current process for managing complex referrals <4 years I am satisfied with the current process for managing complex referrals <4 years I am satisfied with the current process for managing non-complex referrals <4 years I am satisfied with the current process for managing non-complex referrals <4 years I am satisfied with the current process for managing non-complex referrals <4 years I am satisfied, how would you suggest improving your existing process? I am satisfied with the current process for managing non-complex referrals <4 years I am satisfied with the current process for managing non-complex referrals <4 years I am satisfied with the current process for managing non-complex referrals <4 years I am satisfied with the current process for managing non-complex referrals <4 years I am satisfied with the current process for managing non-complex referrals <4 years I am satisfied with the current process for managing non-complex referrals <4 years I am satisfied with the current process for managing non-complex referrals <4 years I am satisfied with the current process for managing non-complex referrals <4 years I am satisfied with the current process for managing non-complex referrals <4 years I am satisfied with the current process for managing non-complex referred for as Case Discussion, Clinical Discussion or Case for non-s I am satisfied with the current for an for an for a set of the set of the set of the set	4. Please rate your resp	oonse to the following statemen	ts:	Nother serves	
I am satisfied with the current process for managing complex referrals <4 years			Agree		Disagre
families I am satisfied with the current process for managing complex referrals <4 years: I am satisfied with the current process for managing complex referrals <4 years: I am satisfied with the current process for managing non-complex referrals <4 years: I am satisfied with the current process for managing non-complex referrals <4 years: I am satisfied with the current process for managing non-complex referrals <4 years: I am satisfied with the current process for managing non-complex referrals <4 years: I am satisfied with the current process for managing non-complex referrals >4 years: 5. If you are unsatisfied, how would you suggest improving your existing process? Image: main satisfied with the current process for managing non-complex referred to as Case Discussion, Clinical Discussion or Case for enco. Multidisciplinary team discussion may also be referred to as Case Discussion, Clinical Discussion or Case for enco. 1 are satisfied of your clients would you deliver multidisciplinary assessment and/or intervention? Image: satisfied of your attend formal multidisciplinary Case Discussion Image: satisfied of you attend formal multidisciplinary Case Discussion Image: satisfied of you attend formal multidisciplinary Case Discussion Image: satisfied of you attend formal multidisciplinary Case Discussion Image: satisfied of you attend formal multidisciplinary case Discussion Image: satisfied of you attend formal multidisciplinary Case Discussion Image: satisfied of you as required <	I am satisfied with the current intake p	rocess	0	0	0
I am satisfied with the current process for managing non-complex referrals >4 years	the second s	s for identifying the specific needs of clients and	0	0	0
I am satisfied with the current process for managing non-complex referrals <4 years	I am satisfied with the current process	s for managing complex referrals <4 years	0	0	0
I am satisfied with the current process for managing non-complex referrals >4 years Image: Complex referrals >4 years 5. If you are unsatisfied, how would you suggest improving your existing process? Image: Complex referral set of the set	I am satisfied with the current process	s for managing complex referrals >4 years	0	0	0
5. If you are unsatisfied, how would you suggest improving your existing process? Image: Multidisciplinary Service Delivery mal multidisciplinary team discussion may also be referred to as Case Discussion, Clinical Discussion or Case and/or interventage of your clients would you deliver multidisciplinary assessment and/or intervention? <1. To what percentage of your clients would you deliver multidisciplinary assessment and/or intervention? <10-20% 40-50% 20-30% 60-70% 20-30% 60-70% 20-30% 70-80% 20-30% 07-80% 20-30% 07-80% 20-30% 00-10% 20-30% 00-10% 20-30% 00-10% 20-30% 00-10% 20-30% 00-10% 20-30% 00-10% 20-30% 00-10% 20-30% 00-10% 20-30% 00-10%	I am satisfied with the current process	s for managing non-complex referrals <4 years	0	0	0
Image: Service Delivery mail multidisciplinary team discussion may also be referred to as Case Discussion, Clinical Discussion or Case difference. 1. To what percentage of your clients would you deliver multidisciplinary assessment and/or intervention?	I am satisfied with the current process	s for managing non-complex referrals >4 years	0	0	0
mail multidisciplinary team discussion may also be referred to as Case Discussion, Clinical Discussion or Case and/or intervention? 	5. If you are unsatisfied	, how would you suggest impro	oving you	r existing proc	ess?
mail multidisciplinary team discussion may also be referred to as Case Discussion, Clinical Discussion or Case and/or intervention? 		-			
mail multidisciplinary team discussion may also be referred to as Case Discussion, Clinical Discussion or Case and/or intervention? 		e			
1. To what percentage of your clients would you deliver multidisciplinary assessment and/or intervention? <10% 40-50% 80-90% 10-20% 50-80% >90% 20-30% 60-70% >90% 30-40% 70-80% Never Monthly Monthly Never Only as required Fortnightly Fortnightly	Multidisciplinary Ser	vice Delivery			
1. To what percentage of your clients would you deliver multidisciplinary assessment and/or intervention? <10% 40-50% 80-90% 10-20% 50-80% >90% 20-30% 60-70% >90% 30-40% 70-80% Never Monthly Monthly Never Only as required Fortnightly Fortnightly	and a second second second				
1. To what percentage of your clients would you deliver multidisciplinary assessment and/or intervention? <10% 40.50% 80.90% 10.20% 50.60% >90% 20.30% 60.70% >90% 30.40% 70.80% 70.80% 2. How often do you attend formal multidisciplinary Case Discussion Never Monthly Weekly Only as required Formightly Formightly		ussion may also be referred to as Case I	Discussion, (Clinical Discussion	or Case
and/or intervention?	nference.				
and/or intervention?					
<10% 40-50% 80-90% 10-20% 50-60% >90% 20-30% 60-70% >90% 30-40% 70-80% 70-80% 2. How often do you attend formal multidisciplinary Case Discussion Never Monthly Weekly Only as réquired Fortnightly Fortnightly	1. To what percentage of	of your clients would you delive	r multidis	ciplinary asse	ssmen
10-20% 50-60% >90% 20-30% 60-70% 30-40% 30-40% 70-80% 70-80% 2. How often do you attend formal multidisciplinary Case Discussion Monthly Never Monthly Weekly Only as required Forthlightly Forthlightly	and/or intervention?				
 10-20% 20-30% 20-30% 60-70% 30-40% 70-80% 2. How often do you attend formal multidisciplinary Case Discussion Never Merkly Only as required Fortnightly 	~	0 40-50%	0	80-90%	
 20-30% 30-40% 70-80% 2. How often do you attend formal multidisciplinary Case Discussion Never Monthly Weekly Only as required Fortnightly 	0	0	0		
30-40%. 70-80% 2. How often do you attend formal multidisciplinary Case Discussion Never Monthly Weekly Only as required Fortnightly	0	0	0	>90%e	
2. How often do you attend formal multidisciplinary Case Discussion Never Monthly Weekly Only as required Fortnightly	() 20-30%	0 60-70%			
Never Monthly Weekly Only as required Fortnightly Fortnightly					
Never Monthly Weekly Only as required Forthlightly Forthlightly	30-40%	0 70-80%			
Weekly Only as required	×		se Discus	ssion	
O Fortnightly	2. How often do you att	end formal multidisciplinary Ca	se Discus	ssion	
Ŭ,	2. How often do you att	end formal multidisciplinary Ca		ssion	
Other (please specify)	2. How often do you att Never Weekly	end formal multidisciplinary Ca		ssion	
	2. How often do you att Never Weekly	end formal multidisciplinary Ca		ssion	
	2. How often do you att Never Weekly Fortnightly	end formal multidisciplinary Ca		ssion	
	2. How often do you att Never Weekly Fortnightly	end formal multidisciplinary Ca		ssion	
	2. How often do you att Never Weekly Fortnightly	end formal multidisciplinary Ca		ssion	
	2. How often do you att Never Weekly Fortnightly	end formal multidisciplinary Ca		ssion	
	2. How often do you att Never Weekly Fortnightly	end formal multidisciplinary Ca		ssion	
	2. How often do you att Never Weekly Fortnightly	end formal multidisciplinary Ca		ssion	

					000000	for mult	andorphi			000101
please rat	e your	level of	respons	e to the	followin	g staten	nents:			
							Agree	Neither ag disagr		Disagree
) am satisfied w clients.	ith the curr	ent process f	or multidiscip	linary Case D	iscussion of	complex	0	C)	0
I am satisfied th	hat the Cas	e Coordinato	r/Manager ha	as a defined r	ole		0	C)	0
I am satisfied th	nat all discip	plines are rep	presented				0	C)	0
) am satisfied th priority	nat meeting	s are regular	ly scheduled	and attendar	nce is seen a	SB	0	C)	0
I am satisfied th	nat effective	e lime-manag	gement strate	gies are in p	lace		0	С)	0
multidisci	plinary	Case D	iscussio	on?						
lon olini										
	cal Ac indicat			ge of vo	ur time i	s curren	ntly dedi	cated to	the foll	owing
1. Please	indicat	e what p		ge of yo	ur time i	s curren	ntly dedi	cated to	the foll	owing
1. Please non-clinic	indicat	e what p		ge of yo	ur time i	s curren	50-60%	60-70%	the foll	
1. Please	indicat al activ	e what p vities?	ercenta							
1. Please non-clinic Research Service Development	indicat al activ	e what p vities?	ercenta							
1. Please non-clinic Research Service Development Advocacy	indicat al activ	e what p vities?	ercenta							
1. Please non-clinic Research Service Development	indicat al activ	e what p vities?	ercenta							
1. Please non-clinic Research Service Development Advocacy Community Prevention & Promotion Professional	indicat al activ	e what p vities?	ercenta							
1. Please non-clinic Research Service Development Advocacy Community Prevention & Promotion Professional Development Clinical	indicat al activ	e what p vities?	ercenta							
1. Please non-clinic Research Service Development Advocacy Community Prevention & Promotion Professional Development	indicat al activ	e what p vities?	ercenta							
1. Please non-clinic Research Service Development Advocacy Community Prevention & Promotion Professional Development Clinical Supervision	indicat al activ	e what p vities?	ercenta							owing >80° CCCC CCC CCC CCC CCC CCCCC CCCC CCCC

1. Please rate your level of response to the following	statements		
	Agree	Neither agree nor disagree	Disagree
I am satisfied with the quality of initial service provision.	0	0	0
I am satisfied with the length of time families wait - from time of referral until they are completely aware of the services they will receive.	• 0	0	0
I am satisfied with the overall consistency with which decisions are made about the services to be provided to families.	0	0	0
I am satisfied with the way in which Ax and Rx plans are coordinated across all relevant disciplines.	0	0	0
I am satisfied with the overall quality of service offered to clients/families <4 years?	0	0	0
I am satisfied with the overall quality of service offered to clients/families >4 years?	0	0	0
2. What do you currently perceive as barriers to provi	iding evide	nce-based (EB	P) early
intervention services within this team?		a la su su se an	
77			
the second of the first design of the second s			
3. What do you currently perceive as barriers to imple	ementing a	Best Practice	Model o
Case for monoping referrals and manidian complete to			
Care for managing referrals and providing services w	lithin Qld H	ealth Child	
승규가 잘 많은 것 같아요. 이 것 같아요. 이 것 같아요. 이 가지 않는 것 않는	lithin Qld H	ealth Child	
Development Services in general?	lithin Qid H	ealth Child	
승규님이 많은 것 같아요. 이 집에 가지 않는 것이 같아요. 이 가지 않는 것이 가지 않는 것이 같아. 가지 않는 것이 없는 것 않이	/ithin Qld H	ealth Child	
Development Services in general?			
승규가 잘 많은 것 같아요. 이 것 같아요. 이 것 같아요. 이 가지 않는 것 않는			el of
Development Services in general?			el of
Development Services in general? 4. With regard to the proposed new Model of Care (Me			el of
Development Services in general? 4. With regard to the proposed new Model of Care (Meresponse to the following statements: 1 feel confident in my understanding of the proposed new MOC and its potential	OC), please	e rate your leve	
Development Services in general? 4. With regard to the proposed new Model of Care (Meresponse to the following statements: 1 feel confident in my understanding of the proposed new MOC and its potential impacts on the clinicians, clients/families and the Service. I am satisfied with the proposed changes to the way in which families access entry int	OC), please	e rate your leve	
Development Services in general? 4. With regard to the proposed new Model of Care (Meresponse to the following statements: 1 feel confident in my understanding of the proposed new MOC and its potential impacts on the clinicians, clients/families and the Service. (am satisfied with the proposed changes to the way in which families access entry int this Service?	OC), please	e rate your leve	
Development Services in general? 4. With regard to the proposed new Model of Care (Meresponse to the following statements: 1 feel confident in my understanding of the proposed new MOC and its potential impacts on the clinicians, clients/families and the Service. (am satisfied with the proposed changes to the way in which families access entry int this Service?	OC), please	e rate your leve	
Development Services in general? 4. With regard to the proposed new Model of Care (Meresponse to the following statements: 1 leel contident in my understanding of the proposed new MOC and its potential impacts on the clinicians, clients/families and the Service. 1 am satisfied with the proposed changes to the way in which families access entry int this Service? Parent Education	OC), please	e rate your leve	
Development Services in general? 4. With regard to the proposed new Model of Care (Meresponse to the following statements: 1 feel contident in my understanding of the proposed new MOC and its potential impacts on the clinicians, clients/families and the Service. 1 am satisfied with the proposed changes to the way in which families access entry int this Service? Parent Education this section, Parent Education sessions include Parent Information ses	OC), please	e rate your leve	
Development Services in general? 4. With regard to the proposed new Model of Care (Meresponse to the following statements: 1 leel contident in my understanding of the proposed new MOC and its potential impacts on the clinicians, clients/families and the Service. 1 am satisfied with the proposed changes to the way in which families access entry int this Service? Parent Education this section, Parent Education sessions include Parent Information sestions.	OC), please	e rate your leve	
Development Services in general? 4. With regard to the proposed new Model of Care (Meresponse to the following statements: 1 leel contident in my understanding of the proposed new MOC and its potential impacts on the clinicians, clients/families and the Service. 1 am satisfied with the proposed changes to the way in which families access entry int this Service? Parent Education this section, Parent Education sessions include Parent Information sestions.	OC), please	e rate your leve	
Development Services in general? 4. With regard to the proposed new Model of Care (Meresponse to the following statements: 1 leel contident in my understanding of the proposed new MOC and its potential impacts on the clinicians, clients/families and the Service. 1 am satisfied with the proposed changes to the way in which families access entry int this Service? Parent Education this section, Parent Education sessions include Parent Information sestions.	OC), please	e rate your leve	
Development Services in general? 4. With regard to the proposed new Model of Care (Meresponse to the following statements: 1 leel contident in my understanding of the proposed new MOC and its potential impacts on the clinicians, clients/families and the Service. 1 am satisfied with the proposed changes to the way in which families access entry int this Service? Parent Education this section, Parent Education sessions include Parent Information sest vention sessions. 1. How often are you involved in providing *parent education Never	OC), please	e rate your leve Neither agree nor disagree	
Development Services in general? 4. With regard to the proposed new Model of Care (Meresponse to the following statements: 1 leel contident in my understanding of the proposed new MOC and its potential impacts on the clinicians, clients/families and the Service. 1 am satisfied with the proposed changes to the way in which families access entry int this Service? Parent Education this section, Parent Education sessions include Parent Information sest rvention sessions. 1. How often are you involved in providing *parent education	OC), please	e rate your leve Neither agree nor disagree	
Development Services in general? 4. With regard to the proposed new Model of Care (Meresponse to the following statements: 1 leel contident in my understanding of the proposed new MOC and its potential impacts on the clinicians, clients/families and the Service. 1 am satisfied with the proposed changes to the way in which families access entry int this Service? Parent Education this section, Parent Education sessions include Parent Information sest vention sessions. 1. How often are you involved in providing *parent education Never	OC), please	e rate your leve Neither agree nor disagree	
Development Services in general? 4. With regard to the proposed new Model of Care (Meresponse to the following statements: 1 leel contident in my understanding of the proposed new MOC and its potential impacts on the clinicians, clients/families and the Service. 1 am satisfied with the proposed changes to the way in which families access entry int this Service? Parent Education this section, Parent Education sessions include Parent Information sest vention sessions. 1. How often are you involved in providing *parent education Never	OC), please	e rate your leve Neither agree nor disagree	

		you please provide deta	ails
	or childcare, etc.		
12			
	barriers to the pro	vision of *parent education	tion
ur team?			
	<u>7</u>		currently perceive as barriers to the provision of *parent educa

Introduction	And in case of the local division of the	ALC: NOT THE OWNER WATER
ase read carefully and answer AL ase note that all responses will b	L questions unless otherwise stated. Sor e kept confidential!	ne questions WILL require an answer.
Demographics		
1. What is your profession	On?	O Other Medical Officer
Occupational Therapist Physiotherapist Psychologist	Early Intervention & Parenting Specialist Paediatrician Paediatric Fellow	O Dietitian Audiologist
Other (please specify)		
Ves No		
O No	Cess	
O_No Clinical Intake and Ac	cess lescribes your current role in thi	is team/service? You may sele
O.No Clinical Intake and Ac 1. Which category best d	lescribes your current role in thi	is team/service? You may select cal Service Provider
No No Clinical Intake and Act No Clinical Intake and Act Clinical Intake Officer Clinical Intake Officer Allied Health Service Provider	lescribes your current role in thi	cal Service Provider er/Service Manager/Director
No No No Intake and Act No I. Which category best d more than one. Clinical Intake Officer	lescribes your current role in thi	cal Service Provider er/Service Manager/Director
No No Clinical Intake and Act No Clinical Intake and Act Clinical Intake Officer Clinical Intake Officer Allied Health Service Provider Community-based Paediatrician	lescribes your current role in thi	cal Service Provider er/Service Manager/Director
No Clinical Intake and Act 1. Which category best demore than one. Clinical Intake Officer Clinical Intake Officer Allied Health Service Provider Community-based Paediatrician Hospital-based Paediatricar	lescribes your current role in thi	cal Service Provider er/Service Manager/Director

() None	2-3 hours y	veekly		
0	0			
Up to 1 hour weekly	O 3-4 hours v			
1-2 hours weekly	O More than	4 hours week	Υ.	
Other (please specify)	-			
3. Please indicate whether the	time you currently spend	on intak	e/triage/priorit	isation
processes has changed since	e the implementation of th	e new m	odel?	
O Increased				
Stayed the same				
Decreased				
0				
Please elaborate				
Please elaborate				
Please elaborate				
4. Please rate your response	to the following statement	s regard	ing the new mo	odel
4	to the following statement	s regard	ing the new me	odel
4. Please rate your response	to the following statement	s regard	Neither agree nor	odel Disagre
4. Please rate your response				
4. Please rate your response rimplemented:			Neither agree nor	
4. Please rate your response r implemented: I am satisfied with the changes to the way in wt Service. I am satisfied with the new Intake process J am satisfied with the overall consistency with	nich familles access entry into this		Neither agree nor	
A. Please rate your response implemented: I am satisfied with the changes to the way in with Service. I am satisfied with the new Intake process am satisfied with the overall consistency with services to be provided to families. J am satisfied with the length of time families with the length of time families with the length of time families.	nich familles access entry into this which decisions are made about the		Neither agree nor	
4. Please rate your response r implemented: I am satisfied with the changes to the way in wt Service. I am satisfied with the new Intake process J am satisfied with the overall consistency with services to be provided to families.	nich familles access entry into this which decisions are made about the rait - from time of referral until Clinical		Neither agree nor	
4. Please rate your response a implemented: I am satisfied with the changes to the way in where service. I am satisfied with the new intake process I am satisfied with the overall consistency with services to be provided to families. I am satisfied with the length of time families with the length of time families with the new intake process for ic clients and families.	nich families access entry into this which decisions are made about the rait - from time of referral until Clinical lentifying 'up front' the specific needs of		Neither agree nor	
A. Please rate your response implemented: I am satisfied with the changes to the way in which service. I am satisfied with the new Intake process am satisfied with the new Intake process am satisfied with the length of time families with the length of time families with take am satisfied with the new intake process for id clients and families am satisfied with the new intake process for managing	nich familles access entry into this which decisions are made about the rait - from time of referral until Clinical lentifying 'up front' the specific needs of g complex referrals <4 years		Neither agree nor	
A. Please rate your response implemented: I am satisfied with the changes to the way in which service. I am satisfied with the new Intake process I am satisfied with the overall consistency with services to be provided to families. I am satisfied with the length of time families with the length of time families with the length of time families with the new intake I am satisfied with the new intake process for inclients and families I am satisfied with the new process for managing am satisfied with the new process for managing	hich families access entry into this which decisions are made about the rait - from time of referral until Clinical lentifying 'up front' the specific needs of g complex referrals <4 years g complex referrals >4 years		Neither agree nor	
A. Please rate your response implemented: I am satisfied with the changes to the way in which service. I am satisfied with the new Intake process am satisfied with the new Intake process am satisfied with the length of time families with the new intake process for managine am satisfied with the new process for managine I am satisfied with the new proceses for managine I am satisfied with the new process for managine I	hich familles access entry into this which decisions are made about the rait - from time of referral until Clinical lentifying 'up front' the specific needs of g complex referrals <4 years g complex referrals >4 years ng non-complex referrals <4 years		Neither agree nor	
A. Please rate your response implemented: I am satisfied with the changes to the way in which service. I am satisfied with the new Intake process I am satisfied with the overall consistency with services to be provided to families. I am satisfied with the length of time families with the length of time families with the length of time families with the new intake I am satisfied with the new intake process for inclients and families I am satisfied with the new process for managing am satisfied with the new process for managing	hich families access entry into this which decisions are made about the rait - from time of referral until Clinical lentifying 'up front' the specific needs of g complex referrals <4 years g complex referrals >4 years ng non-complex referrals >4 years		Neither agree nor	
A. Please rate your response implemented: I am satisfied with the changes to the way in with Service. I am satisfied with the new Intake process am satisfied with the new Intake process am satisfied with the new Intake process for an astisfied with the new Intake process for intake am satisfied with the new Intake process for intake am satisfied with the new Intake process for managin am satisfied with the new process for managin	hich families access entry into this which decisions are made about the rait - from time of referral until Clinical lentifying 'up front' the specific needs of g complex referrals <4 years g complex referrals >4 years ng non-complex referrals >4 years ng non-complex referrals >4 years plans are coordinated across all		Neither agree nor	

Appendix 11.3: Post-implementation staff satisfaction survey (page 3/3)

perspective?		
Multidisciplinary S	Service Delivery	
rmal multidisciplinary team on ference.	liscussion may also be referred to as	Case Discussion, Clinical Discussion or Case
	of your clients currently rece	ive multidisciplinary assessment and/c
intervention?		
O None	30-40%	0 70-80%
<10% <10%	40-50%	80-90%
0 10-20%	0 50-60%	>90%
0 20-30%	60-70%	
Stayed the same		
Discon sistemate	2	
Please elaborate		
Please elaborale	1911	
		al multidisciplinary team discussion