



# THE UNIVERSITY OF QUEENSLAND

## Resident Foodservice Satisfaction Questionnaire

*We are improving the foodservice and we need to know your opinions.  
Participation in this survey is **voluntary and anonymous**. Please complete this  
questionnaire at your leisure.*

*Please be completely honest.  
Your answers will not compromise your care in any way.*

*Thank you.*

**GENERAL INFORMATION**

This information will enable us to identify the level of satisfaction of various groups of our clients, which will help us to assure the quality of our foodservice. All information will be treated as **confidential**. All questions are optional. Please do not complete any questions you feel uncomfortable answering.

Your age is: .....

Your gender is: (please tick the appropriate box)

Female  Male

Your country of birth was: .....

Your *first* language is: (please tick the appropriate box)

English  Other .....

How long have you been living in this facility? .....

When did you choose your meal? (please tick the appropriate box)

No choice  3 or more days ago  2 or more days ago  Yesterday  Today  Just before I eat

How is your appetite today? (please tick the appropriate box)

About normal  Better than normal  Worse than normal

In general, would you say your health is: (please circle)

Excellent      Very good      Good      Fair      Poor

What sort of diet are you on?  
(Please tick the appropriate box)

Normal	<input type="checkbox"/>	Pureed	<input type="checkbox"/>
Fat or carbohydrate modified	<input type="checkbox"/>	Reduced/low salt	<input type="checkbox"/>
Texture modified soft	<input type="checkbox"/>	Other special diets	<input type="checkbox"/>
Fibre modified	<input type="checkbox"/>	Fluid restricted	<input type="checkbox"/>
Energy and protein increased	<input type="checkbox"/>	Not sure	<input type="checkbox"/>

**This section asks about your opinions of our foodservice**  
**PLEASE MARK YOUR ANSWER WITH A CIRCLE OR A TICK**

<b>HUNGER &amp; FOOD QUANTITY</b>						
1. I receive enough food	Always	Often	Sometimes	Rarely	Never	Does not apply
2. I still feel hungry after my meal	Always	Often	Sometimes	Rarely	Never	Does not apply
3. I feel hungry in between meals	Always	Often	Sometimes	Rarely	Never	Does not apply
<b>STAFF/SERVICE ISSUES</b>						
4. I am treated with respect by the staff at mealtimes	Always	Often	Sometimes	Rarely	Never	Does not apply
5. The staff who serve my meals are friendly and polite	Always	Often	Sometimes	Rarely	Never	Does not apply
<b>AUTONOMY</b>						
6. I am asked about my food and drink preferences	Always	Often	Sometimes	Rarely	Never	Does not apply
7. I am able to choose where I sit to eat my meal	Always	Often	Sometimes	Rarely	Never	Does not apply
8. I am able to make suggestions for the menu	Always	Often	Sometimes	Rarely	Never	Does not apply
<b>MEAL QUALITY &amp; ENJOYMENT</b>						
9. The meals taste nice	Always	Often	Sometimes	Rarely	Never	Does not apply
10. The meals have excellent and distinct flavours	Always	Often	Sometimes	Rarely	Never	Does not apply
11. I like the way the vegetables are cooked	Always	Often	Sometimes	Rarely	Never	Does not apply
12. There is enough variety for me to choose meals that I want to eat	Always	Often	Sometimes	Rarely	Never	Does not apply
13. The meat is tough and dry	Always	Often	Sometimes	Rarely	Never	Does not apply
14. The food has been as good as I expected	Always	Often	Sometimes	Rarely	Never	Does not apply
15. I really enjoy eating my meals	Always	Often	Sometimes	Rarely	Never	Does not apply
16. My meals help me to feel good	Always	Often	Sometimes	Rarely	Never	Does not apply
17. I like the amount of food choice I have	Always	Often	Sometimes	Rarely	Never	Does not apply
18. I like the way my meals are presented	Always	Often	Sometimes	Rarely	Never	Does not apply
<b>ADDITIONAL ITEMS</b>						
19. The dining room has a nice social atmosphere at meal times	Always	Often	Sometimes	Rarely	Never	Does not apply
20. The vegetables are too crisp	Always	Often	Sometimes	Rarely	Never	Does not apply
21. The vegetables are too soft	Always	Often	Sometimes	Rarely	Never	Does not apply
22. The hot foods are just the right temperature	Always	Often	Sometimes	Rarely	Never	Does not apply
23. I can suggest the timing of my meals	Always	Often	Sometimes	Rarely	Never	Does not apply
24. I am able to choose the size of my meal	Always	Often	Sometimes	Rarely	Never	Does not apply
25. Chewing food is difficult for me	Always	Often	Sometimes	Rarely	Never	Does not apply
26. Swallowing food is difficult for me	Always	Often	Sometimes	Rarely	Never	Does not apply

**PLEASE MARK YOUR ANSWER WITH A CIRCLE OR A TICK**

27. I am disturbed by noise in the dining area	Always	Often	Sometimes	Rarely	Never	Does not apply
28. The crockery and cutlery are chipped and/or stained	Always	Often	Sometimes	Rarely	Never	Does not apply
29. The staff who serve my meals are neat and clean	Always	Often	Sometimes	Rarely	Never	Does not apply
30. I enjoy having company at meal times	Always	Often	Sometimes	Rarely	Never	Does not apply
31. The cutlery and dining aids are adequate	Always	Often	Sometimes	Rarely	Never	Does not apply
32. The knives are blunt	Always	Often	Sometimes	Rarely	Never	Does not apply
33. By the time I receive my meal, I'd prefer a different choice	Always	Often	Sometimes	Rarely	Never	Does not apply
34. The entrée, main and dessert are served at the same time	Always	Often	Sometimes	Rarely	Never	Does not apply
35. I have access to snack (e.g. sandwiches/toast) preparation facilities whenever I choose	Always	Often	Sometimes	Rarely	Never	Does not apply
36. The main meals are served at times suitable for me	Always	Often	Sometimes	Rarely	Never	Does not apply
37. I can season the food to my taste	Always	Often	Sometimes	Rarely	Never	Does not apply
<b>Overall, how would you rate your satisfaction with the foodservice</b>	Very good	Good	Okay	Poor	Very poor	

**What time of day is it at the moment? .....**

**Please make some general comments or suggestions:**

---



---



---



---



---



---

**Dining location**

Own room

Dining room

**Did you have any assistance with completing this questionnaire?**

Yes

No

**Reason for assistance:** \_\_\_\_\_

**THANK YOU VERY MUCH FOR YOUR TIME**