

SURVEY of DVR CUSTOMERS

On the wait list

By

STATE REHABILITATION COUNCIL
2006



PLEASE RETURN YOUR COMPLETED QUESTIONNAIRE IN THE ENCLOSED ENVELOPE TO:

SOCIAL & ECONOMIC SCIENCES RESEARCH CENTER
WASHINGTON STATE UNIVERSITY
PO Box 641801
PULLMAN, WA 99164-1801

OR

COMPLETE THE SURVEY AT:

<http://www.sesrc.wsu.edu/websurvey/DVRwait>

Q1. How familiar are you with the Washington State Division of Vocational Rehabilitation and its services? *(Please circle the number of your answer.)*

- 1 Very familiar
- 2 Somewhat familiar
- 3 Not very familiar

The Division of Vocational Rehabilitation is a statewide resource for people with disabilities. DVR assists individuals with disabilities in getting and keeping a job. DVR is a state and federally-sponsored program. DVR works with its customers, vendors, and the community to develop and implement Individual Plans for Employment that suit the customers strengths, abilities, and interests.

By law, when DVR cannot serve everyone who is eligible for and wants services, they must determine the order in which people are served based on disability-related criteria, as evaluated by a DVR counselor. Individuals with the most significant disabilities are served first, followed by individuals with significant disabilities, and last, all other individuals with disabilities.

Q2. How long have you been waiting to receive services from the Division of Vocational Rehabilitation?

_____ number of months

_____ number of years

Q3. Is this about as long as you expect to wait, or is it longer, or shorter than you expect to have to wait?

- 1 Shorter than I expect to wait
- 2 About as long as I expect to wait
- 3 Longer than I expect to wait
- 4 Not sure

Q4. Are you still interested in receiving services from the Division of Vocational Rehabilitation?

- 1 Definitely Yes
- 2 Probably Yes
- 3 Probably Not
- 4 Definitely Not
- 5 Not sure

Q5. When you were first placed on the wait list, did the Division of Vocational Rehabilitation provide you with any information about other resources or did they refer you to any other resources?

- 1 Yes
- 2 No → **Skip to Q7**
- 3 Not sure → **Skip to Q7**

Q6. Was the information that you received about other resources helpful to you in meeting your needs?

- 1 Yes
- 2 No
- 3 Not sure
- 4 Did not make use of the information

Q7. During the time that you have been waiting for services have there been any changes in your disability, either in severity or in other ways?

- 1 Significant Changes
- 2 Some Changes
- 3 Minor Changes
- 4 No Changes → **Skip to Q10**
- 5 Not sure → **Skip to Q10**

Q8. Which ONE of these statements BEST describes the effect of these changes in your disability on barriers to employment? The changes have . . .

- 1 Decreased any barriers to employment
- 2 Made no change in any barriers to employment
- 3 Increased some barriers to employment
- 4 Not sure

Q9. Have you informed the Division of Vocational Rehabilitation about the changes in your disability?

- 1 Yes
- 2 No
- 3 Not sure

Q10. In general, how satisfied are you with the Washington State Division of Vocational Rehabilitation? (Please circle the number of your answer.)

- 1 Very satisfied
- 2 Somewhat satisfied
- 3 Neutral
- 4 Somewhat dissatisfied
- 5 Very dissatisfied

Q11. Generally, is your opinion of Division of Vocational Rehabilitation employees ... (Please circle the number of your answer.)

- 1 Very favorable
- 2 Somewhat favorable
- 3 Somewhat unfavorable
- 4 Very unfavorable
- 5 Not sure

Q12. How would you compare the quality of the customer service you received from the Division of Vocational Rehabilitation in 2005 with the quality of customer service received in previous years? Would you say that the quality of customer service received in 2005 was ... (Please circle the number of your answer.)

- 0 Did not have any contacts with DVR in previous years
- 1 Much better
- 2 A little better
- 3 The same
- 4 A little worse
- 5 Much worse
- 6 No opinion or not applicable

Q13. Generally, is your opinion of Washington State government employees ... (Please circle the number of your answer.)

- 1 Very favorable
- 2 Somewhat favorable
- 3 Somewhat unfavorable
- 4 Very unfavorable
- 5 Not sure

Q14. How do you usually contact the Division of Vocational Rehabilitation?

- 1 In person
- 2 By telephone
- 3 By letter, fax communication, or email
- 4 Internet
- 5 Other (Please specify.) _____

Q15. In general, how often have contacts with the Division of Vocational Rehabilitation been handled. . . (Please circle one number for each.)

	Always	Usually	Sometimes	Rarely	Never	Don't Know
A. Courteously.....	1	2	3	4	5	6
B. Quickly	1	2	3	4	5	6
C. Helpfully.....	1	2	3	4	5	6

Q16. To what extent do you Agree or Disagree that the information provided during these contacts was . . . (Please circle one number for each.)

	Strongly Agree	Somewhat Agree	Somewhat Disagree	Strongly Disagree	Don't Know
A. Consistent.....	1	2	3	4	5
B. Useful.....	1	2	3	4	5
C. Complete	1	2	3	4	5
D. Understandable	1	2	3	4	5

Q17. When you contact the Division of Vocational Rehabilitation, what is a reasonable amount of time for the Division to acknowledge the receipt of your request?

	Same Day	Next Day	2 Days	Within 1 Week	Within 2 Weeks	Don't Know
A. Telephone.....	1	2	3	4	5	6
B. Email.....	1	2	3	4	5	6
C. Letter	1	2	3	4	5	6

Q18. Please tell us how satisfied you are with the current level of customer service provided by the Division of Vocational Rehabilitation.

	Very Satisfied	Somewhat Satisfied	Somewhat Dissatisfied	Very Dissatisfied	Don't Know
A. Phone calls returned.....	1	2	3	4	5
B. Email messages acknowledged	1	2	3	4	5
C. Letters acknowledged.....	1	2	3	4	5

Q19. Were you made aware of the Client Assistance Program (CAP)?

- 1 Yes
- 2 No → **Skip to Q22**

Q20. Did you participate in the Client Assistance Program (CAP)?

- 1 Yes
- 2 No → **Skip to Q22**

Q21. How satisfied are you with the results of the Client Assistance Program (CAP)?

- 1 Very satisfied
- 2 Somewhat satisfied
- 3 Somewhat dissatisfied
- 4 Very dissatisfied
- 5 Not sure or not applicable

Q22. Do you have any specific suggestions for improving rehabilitation services in Washington State? (Please use the space below.)

Q23. Do you have any specific suggestions for improving customer input into the Division of Vocational Rehabilitation's planning process? (Please use the space below.)

Q24. Listed below are several aspects of your interaction with the Division of Vocational Rehabilitation. For each one, please indicate how much you Agree or Disagree.

	Strongly Agree ▼	Somewhat Agree ▼	Somewhat Disagree ▼	Strongly Disagree ▼	Don't Know ▼
A. My initial contact with the agency was warm and welcoming.....	1	2	3	4	5
B. My meeting(s) began promptly at the scheduled time	1	2	3	4	5
C. The meeting place was comfortable and private.....	1	2	3	4	5
D. The process for applying and receiving services was logical and orderly	1	2	3	4	5
E. The person with whom I met understood my vocational needs.....	1	2	3	4	5
F. The person with whom I met offered immediate assistance in meeting my vocational needs.....	1	2	3	4	5
G. The person with whom I met made me feel valued and respected	1	2	3	4	5
H. The person with whom I met understood the strengths I bring to my vocational rehabilitation plan	1	2	3	4	5
I. After my initial contact, I felt a sense of belonging from this office.....	1	2	3	4	5
J. I have always felt respected by people in this office.....	1	2	3	4	5

Q25. In your opinion is there ONE thing the Division of Vocational Rehabilitation could do to improve service?

- 1 yes (*please describe.*) _____
- 2 no

Q26. If you had a choice of how to conduct transactions with the Division of Vocational Rehabilitation, which ONE of these would be your MOST preferred way:

- 1 In-person transactions at an office
- 2 By telephone
- 3 On the Internet
- 4 By mail

Q27. If you were doing a report card on the Division of Vocational Rehabilitation, what grade would you give?

- 1 A
- 2 B
- 3 C
- 4 D
- 5 F
- 6 Don't Know

Q28. If you were doing a report card on all of Washington State government, what grade would you give?

- 1 A
- 2 B
- 3 C
- 4 D
- 5 F
- 6 Don't Know

Q29. Do you have Internet access?

- 1 Yes
- 2 No → **Skip to Q32**
- 3 Plan to have access shortly → **Skip to Q32**

Q30. In the past year, have you accessed the web site of the Division of Vocational Rehabilitation (<http://www1.dshs.wa.gov/dvr/>)?

- 1 Yes
- 2 No → **Skip to Q32**

Q31. If yes to Q30, please rate the usefulness of the Division of Vocational Rehabilitation's web site.

- 1 Very useful
- 2 Somewhat useful
- 3 No opinion
- 4 Not very useful
- 5 Not useful at all

Q32. Are you . . . ?

- 1 Male
- 2 Female
- 3 Transgender

Q33. What race or ethnic background do you consider yourself?

- 1 Black or African-American
- 2 Native American or Indian
- 3 Asian or Pacific Islander
- 4 White or Caucasian
- 5 Hispanic or Latino/Latina
- 6 Other Ethnicity/or Ethnicities _____

Q34. What is the highest year in school or degree that you have COMPLETED?
(Please circle only ONE answer.)

- | | | | | | | | | |
|-------------------------|---|----|------------|-----------|-----------|---|---|---|
| Elementary School | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| High School | 9 | 10 | 11 | 12 | GED | | | |
| Trade School..... | 1 | 2 | | | | | | |
| Community College.... | 1 | 2 | Associates | | | | | |
| Four-Year College..... | 1 | 2 | 3 | 4 | Bachelors | | | |
| Graduate School | 1 | 2 | Masters | Doctorate | | | | |

Q35. What is your current employment situation?

1. Employed full-time
2. Employed part-time
3. Self employed
4. Not employed, but looking for employment
5. Not employed, and not looking for employment
6. In school
7. Full time home maker
8. Retired
9. Other

Q36. Last, we want to ask how you completed this questionnaire. Did you . . .

1. Complete it by yourself
2. Complete it with help from someone who is paid to assist you
3. Complete it with help from someone else
4. Other _____
(please describe)

Thank you for taking the time to complete this questionnaire. Your assistance in providing this information is very much appreciated. If there is anything else you would like to tell us about this survey or the services and products provided by the Washington State Division of Vocational Rehabilitation, please do so below or on a separate piece of paper.

Please return your completed questionnaire in the envelope provided to:

Social & Economic Sciences Research Center
Washington State University
PO Box 641081
Pullman, WA 99164-1801