

Evaluation of the Agency by the Adult Foster Provider

In order to ensure good communication between our agency and the foster providers, we are requesting some feedback from you regarding your contacts with the agency during the past licensing period.

Please rate the following statements according to: Strongly Agree (5); Agree (4); Somewhat Agree (3); Disagree (2); Strongly Disagree (1).

QUESTIONS 1-4 RELATE TO SERVICES PROVIDED BY THE CASE MANAGER:

- 1. I am able to reach the case manager when needed and receive a return call within a reasonable amount of time. 5 4 3 2 1
Comments: _____

- 2. I know who to contact if the case manager is unavailable or it is after hours. 5 4 3 2 1
Comments: _____

- 3. I think the case manager shares appropriate information about the adult at the time of placement. 5 4 3 2 1
Comments: _____

- 4. There is adequate communication with the case manager to discuss plans, problems, give feedback, and get support. 5 4 3 2 1
Comments: _____

QUESTIONS 5-7 RELATE TO FOSTER CARE PROGRAM SERVICES:

- 5. My communication with my licensing social worker, either in person or by phone, is satisfactory. 5 4 3 2 1
Comments: _____

- 6. The licensing social worker is supportive and advocates for foster providers. 5 4 3 2 1
Comments: _____

- 7. The newsletter is informative and helpful. 5 4 3 2 1
Comments: _____

WHAT TYPE OF ADDITIONAL TRAINING WOULD YOU LIKE TO RECEIVE?

ADDITIONAL COMMENTS:

EMAIL ADDRESS:

Signature

Date