



Eden Alternative Warmth Survey - Family Questionnaire

Please take a moment to complete the following form and return it to us. Your input is extremely valuable and will be appreciated. Data from this survey will be used to evaluate the services we provide to you. Thank you for your assistance. Please respond according to the following key:

SA = Strongly Agree A = Agree N = Neutral D = Disagree SD = Strongly Disagree

	SA	A	N	D	SD
1. The residents/Elders and families participate in decision-making.					
2. The administrator knows my name.					
3. The employees care about the residents/Elders.					
4. The people who live here are safe.					
5. The employees are well-trained and know what they are doing.					
6. The residents/Elders appear lonely.					
7. I rarely see the administrator.					
8. I trust my family member's physician (primary care provider).					
9. People work here because they enjoy working with the residents/Elders.					
10. I often see children in the home/community.					
11. The home/community is clean.					
12. Residents'/Elders' rooms/apartments/suites look like they would in someone's home.					
13. I am comfortable bringing my concerns to an employee.					
14. Employees are friendly.					
15. People from the city/town/community are involved in the home.					
16. I believe this is an abuse-free environment.					
17. Employees are respectful of me.					
18. The residents/Elders appear bored.					
19. Employees take time to talk and listen to the residents/Elders.					
20. In general, I am satisfied with the home/community.					