



Client Feedback Kit



Supporting women and their families
to live free from family and domestic violence

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Produced by Women's Health West 2007
with funding provided by Office of Housing
Promoting Excellence Grant

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Introduction

The Client Feedback Kit is the result of a project undertaken by Women's Health West in 2006.

The project aimed to develop tools, information and processes that would:

- ensure that feedback tools and practices are accessible and relevant to a diverse range of clients
- Obtain high quality feedback from clients.

The project also aimed to improve the way that:

- client feedback was incorporated into service planning, improvement and evaluation

Involving Clients in developing feedback mechanisms

In the early stages of the project, the project team interviewed a number of ex-clients who had exited the service within the 12 months prior to the interviews taking place. All the women interviewed were from a Culturally and Linguistically Diverse (CALD) background. Half of the women interviewed spoke English while the other half interviewed spoke very little English.

We asked women about the barriers to them participating in the existing feedback mechanisms (complaints mechanisms and feedback survey). We also asked the interviewees to help us think about ways that we could improve WHW's feedback mechanisms so that other women from CALD backgrounds were able to give feedback to the service.

The main learnings from these interviews were as follows:

- Interview participants wanted to feedback to the service in their preferred language (i.e. through an interpreter or through a translated written survey)
- Interview participants were enthusiastic about feedback and believed it to be very important. Interview participants thought other CALD women would be motivated to feedback to the service if they understood that their feedback would benefit service users in the future.
- Interview participants preferred a variety of feedback modes. Participants thought that client feedback mechanisms needed to incorporate a number of feedback modes such as: face to face discussion, anonymous written surveys (including both check box questions

and open ended questions) and informal discussions with a worker

- Interview participants thought that it was essential for all clients to be given information and encouragement about:
 - what feedback is
 - how to feedback to the service
 - how feedback will be used
 - reassurance that there will be no negative consequences to their feedback
 - encouragement to be honest in their feedback, especially when the feedback is negative

- Interview participants said that given WHW clients were often experiencing trauma when they come into contact with the service, WHW clients needed the opportunity to build the skills and confidence to give effective feedback over time. This was particularly the case if a woman wanted to give negative feedback.

- Women suggested that clients be given different opportunities to feedback to the service throughout their journey through the service rather than just one opportunity at the end of their contact with the service (i.e. through an exit survey). The women interviewed thought that multiple feedback points would give clients the opportunity to learn skills and knowledge in feedback and gain positive experiences of feedback.

Details of the responses that women gave to these interviews can be found in Women's Health West (2006) Client Feedback Project-Interim Report.

The project team have incorporated all of the learnings from these interviews into the feedback mechanism and processes developed.

Feedback Tools

The project developed a number of feedback tools including:

- a new exit survey
- a series of verbal feedback questions to be asked at different stages of a client's journey through the service
- a brochure explaining how to feedback and how to make a complaint to WHW
- a feedback record that guides workers on what feedback questions to ask, and what information (verbal and written) to give at different stages of a client's journey through the service. This record also records a client's response to verbal feedback questions.
- a series of evaluation questions that can be used to review the mechanisms developed

By adopting different kinds of feedback modes (i.e. written, verbal, formal, informal etc) at different stages of a client's journey through the service, we hope that at some stage during a client's contact with WHW she will encounter a feedback mechanism that suits her.

Exit survey

A new exit survey (see attachment 1) was designed that contains both check box and written answers. The survey also asks whether the respondent speaks a language other than English, is from an ATSI background or has a disability. These questions will help monitor participation rates in the exit survey.

The exit survey has been translated into two languages; Vietnamese and Arabic (see attachments 7&8). Women's Health West intends to translate the survey into several new languages each year. New translations will be prioritised according to the language profile and needs of clients using WHW services. Completed surveys will be translated back into English every quarter. Only surveys where women have given extended responses will need to

be translated back into English. Check box answers can be collated no matter what language the survey respondent used.

Given that the ex-clients interviewed at the beginning of this project suggested that the information and encouragement that women received when they were given the exit survey was essential in facilitating participation, we have included a series of instructions for workers about facilitating access to the exit survey (see attachment 3- case closure section). When clients exit the service they will be offered the opportunity to fill out the exit survey herself or the opportunity to respond to the exit survey in a face to face interview with the program coordinator. These interviews will be conducted through and interpreter whenever a client wishes.

Verbal feedback

We also have incorporated verbal feedback questions at different stages of a woman's journey through the service (see attachment 3). Different feedback questions are asked at the 2nd of 3rd case interview, during a case review interview and at case closure. Questions are asked at these points so that WHW can gain continuous feedback and can utilise interpreters during these face to face meetings to facilitate greater access to feedback mechanisms. Another reason for incorporating opportunities for verbal feedback was because some of the ex-clients interviewed at the beginning of the project preferred verbal forms of feedback.

Feedback/Complaints brochure

The project team developed a brochure on how to give feedback and make a complaint at WHW (see attachment 2) The reason for developing the brochure was that the ex-clients interviewed said that knowledge about what feedback is, how to feedback and why feedback is important, was a key component of encouraging more clients from diverse backgrounds to feedback. The brochure is translated into two community languages; Vietnamese and Arabic (see attachments 7&8). The brochure will be translated into several new community languages each year. The worker will verbally explain the key points contained in the brochure during the first case management interview (see for verbal information check list). Clients understanding of this information will be checked

during the second or third case interview. The Family Services Client Feedback record (see below) monitors what information has been given to clients and in what language this information has been given.

The Family Violence Services Feedback Record

The Family Violence Feedback Record (see attachment 3) was designed as a single form that will be kept in a client's record during their contact with the service that will record client's responses to verbal feedback questions throughout their journey through the service. The record will also guide workers in what verbal and written information to give to clients at different service stages. The form will also record what information is given to clients, when it is given and in what language it is given.

Service improvement

Feedback from the exit surveys, the Family Violence Services Feedback Record and complaints processes will be collated every 6 months. The leadership team will review feedback for emerging themes and the implications of client feedback for service improvement. Service Improvement recommendations will be documented.

Evaluating feedback mechanisms

A series of evaluation questions (see attachment 4) were developed in order to evaluate the feedback mechanism every year. The questions attempt to evaluate whether:

- feedback tools and practices are accessible and relevant to a diverse range of clients
- obtain high quality feedback from clients
- client feedback is incorporated into service improvement

Feedback at Women's Health West: what happens when?

The following table summarises the different feedback mechanisms that will be implemented at different stages in a client's journey through the service. It also outlines what information is given to a client at these different service stages.

Feedback timetable	
When?	What?
First face-to-face case planning meeting after intake	Information given: <ul style="list-style-type: none"> ▪ Feedback and Complaints Brochure ▪ Verbal Information <ul style="list-style-type: none"> ○ What feedback is? ○ Purpose of feedback ○ How feedback can be given? ○ No retribution for negative feedback ○ How to make a complaint?
2 nd or 3 rd case planning meeting	Verbal feedback questions asked (for details see) Understanding of how to feedback to service or make a complaint checked (see ... for details)
Case review	Verbal feedback questions asked (see case review)
Case closure	Verbal Feedback questions asked (see) Exit survey given out and explained (client given opportunity to fill out survey during a face to face interview)