

Project name Fair Ciold Family Works

Service Specification ID 1-228848670

Families NSW is a key NSW Government strategy to support the health and wellbeing of children up to 8 years and their families. You are being asked to complete this survey because you have received a service from a Families NSW family worker.

Families NSW wants to find out about your experience with this service and how it helped you and your family. Your answers are completely confidential. Your name will not be recorded. The information you give will be used to improve the service.

Please answer each question by ticking the box that best describes your opinion. Place your completed survey form in the envelope provided or the sealed box and return it to your family worker. If you need help filling out the survey please ask your worker for assistance.

Thank you on behalf of Families NSW.

Please state how much you agree or disagree with each of the statements below	Agree	Mostly agree	Mostly disagree	Disagree	Not an issue for my family
my child/children and I are getting on better	☐ ı		□ ₃	 4	\(\sigma_{5}\)
I have found out about services to help me or my child/children	\(\) 1		☐ ₃	 4	
I have started using another service to help me or my child/children	⊠ i		 3	 4	₅
I am more likely to share feelings or seek advice on dealing with problems	\(\sigma\) 1		□₃	4	 5
I am happy with the service I received for myself or my family	$\mathbf{\Delta}_{\scriptscriptstyle 1}$		 3	Q ₄	□ ₅
I would recommend this service to a friend	⊠ ₁		З	 4	 5
out you					
you of Aboriginal or Torres Strait Islander origin?		No M ₁	Yes		
you speak a language other than English at home?		No D ₁	Yes	121	anguage?
w long have you been in this service?	TOTAL CONTRACT OF THE CONTRACT	Less than month		4-6	Over 6
you have further comments about this service, ple	ase writ				4
	the statements below Ince attending this service have you observed a sitive change in the following areas: my child/children and I are getting on better I have found out about services to help me or my child/children I have started using another service to help me or my child/children I am more likely to share feelings or seek advice on dealing with problems I am happy with the service I received for myself or my family I would recommend this service to a friend out you a you of Aboriginal or Torres Strait Islander origin? you speak a language other than English at home? woon have you been in this service?	Agree Ince attending this service have you observed a sitive change in the following areas: my child/children and I are getting on better I have found out about services to help me or my child/children I have started using another service to help me or my child/children I am more likely to share feelings or seek advice on dealing with problems I am happy with the service I received for myself or my family I would recommend this service to a friend out you e you of Aboriginal or Torres Strait Islander origin? you speak a language other than English at home? we long have you been in this service?	the statements below The statements below The attending this service have you observed a sitive change in the following areas: The statement out about services to help me or my child/children I have found out about services to help me or my child/children I have started using another service to help me or my child/children I am more likely to share feelings or seek advice on dealing with problems I am happy with the service I received for myself or my family I would recommend this service to a friend The service out you are you of Aboriginal or Torres Strait Islander origin? No out you speak a language other than English at home? Less than month who have you been in this service? You have further comments about this service, please write them do you have further comments about this service, please write them do you have further comments about this service, please write them do you have further comments about this service, please write them do you have further comments about this service, please write them do you have further comments about this service, please write them do you have further comments about this service, please write them do you have further comments about this service, please write them do you have further comments about this service, please write them do you have further comments about this service, please write them do you have further comments about this service, please write them do you have further comments about this service, please write them do you have further comments about this service, please write them do you have further comments about this service, please write them do you have further comments about this service, please write them do you have further comments about this service.	the statements below Agree agree disagree rice attending this service have you observed a sitive change in the following areas: my child/children and I are getting on better I have found out about services to help me or my child/children I have started using another service to help me or my child/children I am more likely to share feelings or seek advice on dealing with problems I am happy with the service I received for myself or my family I would recommend this service to a friend out you a you of Aboriginal or Torres Strait Islander origin? No Yes you speak a language other than English at home? Less than 1 1-3 month month month Months	the statements below Agree agree disagree Disagree Ince attending this service have you observed a sitive change in the following areas: my child/children and I are getting on better I have found out about services to help me or my child/children I have started using another service to help me or my child/children I have started using another service to help me or my child/children I am more likely to share feelings or seek advice on dealing with problems I am happy with the service I received for myself or my family I would recommend this service to a friend Agree agree disagree disagree Disagree disagree disagree disagree disagree disagree Disagree 1 and solve the following areas: My could continue the



Project name Family Service

Service Specification ID 1-1:22.8848670

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	nce attending this service have you observed a sitive change in the following areas:		_		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
1.	my child/children and I are getting on better	☐ i		4 3	4	\square_5
2.	I have found out about services to help me or my child/children	 1	$\boxed{2}$	 3	 4	 5
3.	I have started using another service to help me or my child/children		\square_2	 3	 4	Q 5
4.	I am more likely to share feelings or seek advice on dealing with problems		1 2	Пз	 4	
5.	I am happy with the service I received for myself or my family			Пз	Q 4	\square_5
6.	I would recommend this service to a friend			Пз	 4	
Αb	out you					
Ar	e you of Aboriginal or Torres Strait Islander origin?		No L	Yes 2		
Do	you speak a language other than English at home?		No M ₁	Yes	Which I	language? Loch
Но	w long have you been in this service?		Less than month	1 1-3 months	4-6 months	Over 6 months
Ιf	you have further comments about this service, ple	ase writ	e them do	own here	I	



Project name Cabramatta/Fairfield Family Worker

Service Specification ID 1-1228848670

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	nce attending this service have you observed a sitive change in the following areas:						
1.	my child/children and I are getting on better		2	 3	4	<u> </u>	
2.	I have found out about services to help me or my child/children	4		□ ₃	4	5	
3,	I have started using another service to help me or my child/children			 3	4	<u></u> 5	
4.	I am more likely to share feelings or seek advice on dealing with problems				4	5	
5.	I am happy with the service I received for myself or my family	U ₁		□ ₃	4	5	
6.	I would recommend this service to a friend		2	\square_3	4	₅	
Αb	out you						
Are	you of Aboriginal or Torres Strait Islander origin?		No M	Yes 2			
Do	you speak a language other than English at home?		No 1	Yes	Which I	anguage?	Laws
Нон	w long have you been in this service?		Less than month	1 1-3, months	4-6 months	Over 6 months	
Ιfγ	ou have further comments about this service, plea	se write	e them do	wn here:			
Ĵ	feel from to have se	, vice	Lo	help) incj	mp	*



Project name Cabramatta/Fairfield Family Worker

Service Specification ID __1_1228848670_____

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	nce attending this service have you observed a sitive change in the following areas:					and the second of the second o
1.	my child/children and I are getting on better		□ 2	\square_3	4	5
2.	I have found out about services to help me or my child/children		 2	□ ₃	 4	 5
3,	I have started using another service to help me or my child/children			 3	Q ₄	<u></u>
4.	I am more likely to share feelings or seek advice on dealing with problems	2 1	 2	3	 4	_ 5
5.	I am happy with the service I received for myself or my family				 4	<u> </u>
6.	I would recommend this service to a friend			\square_3	Q 4	5
Αb	out you					
Are	e you of Aboriginal or Torres Strait Islander origin?		No 1	Yes 2		
Do	you speak a language other than English at home?		No 1	Yes 2		anguage?
Ho	w long have you been in this service?		Less than month	1 1-3 months	4-6 months	Over 6 months
If	you have further comments about this service, plea	ase writ	e them d	own here	3;	
		<u> </u>	·			



Project name Cabramatta/Fairfield Family Worker
Service Specification ID 1-1228848670-

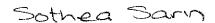
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1. m 2. I ch 3. I m	have started using another service to help me or	□ 1 ⊠ 1	⊠ ₂	3	4	 5
2. I ch 3. I m	have found out about services to help me or my hild/children			3	4	 5
ch 3. I m	hild/children	⊠ ₁				
m	have started using another service to help me or		 2	 3	\square_4	□ ₅
4. I	ny child/children			3	 4	X ₅
	am more likely to share feelings or seek advice on ealing with problems	1		 3	4	\square_5
	am happy with the service I received for myself or my family		⊠ 2	 3	 4	 5
6. I	would recommend this service to a friend	 1	\square_2	 3	4	 5
Abou	t you					
Are yo	ou of Aboriginal or Torres Strait Islander origin?		No 1	Yes		
Do vo	ou speak a language other than English at home?		No	Yes	Which language?	
<i></i>	a speak a language other than English at home:		4 1	⊠ 2	Khn	res
How I	ong have you been in this service?		Less than 1 month	l 1-3 months	4-6 months	Over 6 months
If you	u have further comments about this service, ple	ase writ	te them do	wn here:		





Project name Cabramatte/Fourfield Family Worker Service Specification ID 1-1228848670

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	Please state how much you agree or disagree with each of the statements below	Agree	Mostly agree	Mostly disagree	Disagree	Not an issue for my family
	nce attending this service have you observed a sitive change in the following areas:					
1.	my child/children and I are getting on better			\square_3	4	\square_{5}
2.	I have found out about services to help me or my child/children		 2	□ ₃	 4	 5
3.	I have started using another service to help me or my child/children		 2		\square_4	\square_5
4.	I am more likely to share feelings or seek advice on dealing with problems		 2	 3		 5
5.	I am happy with the service I received for myself or my family	4 1	þ	□ ₃	 4	□ ₅
6.	I would recommend this service to a friend			□ ₃	\square_4	 5
Αb	out you					
Are	e you of Aboriginal or Torres Strait Islander origin?		No 1	Yes		
Do	you speak a language other than English at home?		No D ₁	Yes /	Which I	anguage?
Но	w long have you been in this service? 2 YEAK		Less than month	1 1-3 months	4-6	Over 6
If of	you have further comments about this service, please of service of the service of	ase write	e them do	own here):	



Project name Cabramata/Parfield family Worker Service Specification ID 1-1228848670

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	Please state how much you agree or disagree with each of the statements below	Agree	Mostly agree	Mostly disagree	Disagree	Not an issue for my family
	nce attending this service have you observed a sitive change in the following areas:			VLB.		
1.	my child/children and I are getting on better	1	\square_2	\square_3	\square_4	□ 5
2.	I have found out about services to help me or my child/children		 2	Y ₃	Q ₄	 5
3.	I have started using another service to help me or my child/children	\mathbf{M}_{1}	 2	\square_3	 4	 5
4.	I am more likely to share feelings or seek advice on dealing with problems	1	 2	3	 4	Q ₅
5.	I am happy with the service I received for myself or my family	$\mathbf{\Delta}_{1}$		 3	 4	 5
6.	I would recommend this service to a friend	□ 1		 3	Q 4	
Αb	out you				***************************************	
Are	e you of Aboriginal or Torres Strait Islander origin?		No.	Yes 		
Do	you speak a language other than English at home?		No 1	Yes 2	Which I	anguage?
Но	w long have you been in this service?		Less than month	1 1-3 months	4-6 months	Over 6 months
If	you have further comments about this service, plea る が かいよんでごらん かかん	ase writ	e them do	own here	:	
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Project name Cabramouta/Fairfield Family Worker
Service Specification ID 1-1228848670

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	Please state how much you agree or disagree with each of the statements below	Agree	Mostly agree	Mostly disagree	Disagree	Not an issue for my family
	nce attending this service have you observed a sitive change in the following areas:					
1.	my child/children and I are getting on better			 3	 4	5
2,	I have found out about services to help me or my child/children			□ ₃	 4	 5
3.	I have started using another service to help me or my child/children	Q ₁	1/2	 3	\square_4	 5
4.	I am more likely to share feelings or seek advice on dealing with problems		Q ₂	\square_3	\square_4	 5
5.	I am happy with the service I received for myself or my family			1 / ₃	 4	 5
6.	I would recommend this service to a friend		12	 3	 4	
Αb	out you					
Are	e you of Aboriginal or Torres Strait Islander origin?		No 1	Yes 		
Do	you speak a language other than English at home?		No 1	Yes	Which I	anguage?
	w long have you been in this service?		Less than month	1 1-3 months	4-6 months	Over 6
	you have further comments about this service, ple	ase writ	e them do	wn here	:	
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	Please state how much you agree or disagree with each of the statements below	Agree	Mostly agree	Mostly disagree	Disagree	Not an issue for my family
	nce attending this service have you observed a sitive change in the following areas:					
1.	my child/children and I are getting on better		\square_2	□ ₃	4	 5
2.	I have found out about services to help me or my child/children			 3	Q 4	□5
3.	I have started using another service to help me or my child/children		☑ ₂	<u></u> 3	4	□5
4.	I am more likely to share feelings or seek advice on dealing with problems		\square_2	 3	 4	 5
5.	I am happy with the service I received for myself or my family	4 1	 2	□ ₃	4	□5
6.	I would recommend this service to a friend	d _t	\square_2	З	4	□5
Αb	out you					
Ar	e you of Aboriginal or Torres Strait Islander origin?		No 1	Yes		
Do	you speak a language other than English at home?		No □1	Yes	Which I	language?
Но	w long have you been in this service? 2 Year		Less than month	1 1-3 months	4-6 months	Over 6 months
If	you have further comments about this service, ple					w 675
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	2626 200 N	- N				n an ann an a
	\mathcal{V}			Thank v	ou for v	our particip



Project name Cabramontal fairfield family Worker Service Specification ID 1-122884-8670

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	nce attending this service have you observed a sitive change in the following areas:		,			
1.	my child/children and I are getting on better	\square_1	\square ₂	□ ₃	 4	 5
2.	I have found out about services to help me or my child/children	Пı	 2	3	Q 4	
3.	I have started using another service to help me or my child/children		Q ₂	Y ₃	 4	\square_5
4.	I am more likely to share feelings or seek advice on dealing with problems		□ 2	3	Q ₄	 5
5.	I am happy with the service I received for myself or my family		ا ء	□ 3	Q 4	 5
6.	I would recommend this service to a friend	1		3	\square_4	 5
ΑĿ	out you					
Ar	e you of Aboriginal or Torres Strait Islander origin?		Nø 1	Yes 2		
Do	you speak a language other than English at home?	ACCESS AND	No □1	Yes V		anguage? ∕∿€√
Но	w long have you been in this service?		Less than month	1 1-3 months	4-6 months	Over 6 months
If	you have further comments about this service, ple	ase wri	te them d	own here	:	
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Project name Cabramatta/Fairfield Family Worker

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Thinking about the service you attended, how much do you agree with the following statements?

	Please state how much you agree or disagree with each of the statements below	Agree	Mostly agree	Mostly disagree	Disagree	Not an issue for my family
Sir po	nce attending this service have you observed a sitive change in the following areas:	,				
1.	my child/children and I are getting on better		2	\square_3	4	_ 5
2.	I have found out about services to help me or my child/children		2	3	4	5
3.	I have started using another service to help me or my child/children	1	2	□ ₃	4	5
4.	I am more likely to share feelings or seek advice on dealing with problems	1			4	5
5.	I am happy with the service I received for myself or my family		2	 3	4	□ 5
6.	I would recommend this service to a friend		2	3	4	
Αŀ	oout you					
Ar	e you of Aboriginal or Torres Strait Islander origin?		No 1	Yes		
Do	you speak a language other than English at home?		No I	Yes 2	<i>'</i>	language?
Ho	ow long have you been in this service?		Less than month	1 1-3 month	4-6 ns monti	

If you have further comments about this service, please write them down here:

Thank you for your participation



Project name Cabramatta/Eairfield Eamily Worker

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2.	I have found out about services to help me or my child/children	l i	Δ_2	□ 3	4	 5
3.	I have started using another service to help me or my child/children		⊿ 2	3	4	 5
4.	I am more likely to share feelings or seek advice on dealing with problems		\(\) 2	3	4	 5
5,	I am happy with the service I received for myself or my family		Ø,	3	4	\square_5
6.	I would recommend this service to a friend		△ 2	3	4	 5
ΑĿ	out you					
Ar	e you of Aboriginal or Torres Strait Islander origin?		No M ₁	Yes		
Do	you speak a language other than English at home?		No 🔲 1	Yes	Which に い	language?
Ho	w long have you been in this service?		Less than month	1 1-3 month:	4-6 s month	Over 6 months
Ιf	you have further comments about this service, ple	ease wri	te them d	own her	e:	
						~ -



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Not an issue e for my family
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Thank you on behalf of Families NSW.

	lease state how much you agree or disagree with each of he statements below	Agree	Mostly agree	Mostly disagree	Disagree	Not an issue for my family
	ce attending this service have you observed a itive change in the following areas:	TO THE STATE OF TH		V-11-11-11-11-11-11-11-11-11-11-11-11-11		
1.	my child/children and I are getting on better	1		\square_3	4	□ ₅
	I have found out about services to help me or my child/children	⊠′₁		Пз	 4	□5
	I have started using another service to help me or my chiid/children	\(\) _1		\square_3	 4	□5
	I am more likely to share feelings or seek advice on dealing with problems	⊠ ₁	 2	 3	 4	□5
	I am happy with the service I received for myself or my family	⊠ ₁	_ 2	З	 4	۵s
5.	I would recommend this service to a friend			З	 4	□5
Abo	ut you			•		TO THE TO LOCAL PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY AND ADDRESS OF THE PROPERTY AND ADDRESS OF THE PROPERTY A
Are	you of Aboriginal or Torres Strait Islander origin?		No M ₁	Yes		
Эо у	ou speak a language other than English at home?		No 1	Yes X 2	Which	language?
How	long have you been in this service?		Less than month	1 1-3 months	4-6 months	Over 6 months
	ou have further comments about this service, ple	ase writ	e them do	wn here	21	TO STATE OF THE ST