

Tell us about your service

The national client satisfaction follow-up study on services for older people 2024

Survey for the residents of 24/7 sheltered housing



Dear client of services for older people

This is a client survey on services for older people.
Please respond to the survey.

The survey will be conducted by
the Finnish Institute for Health and Welfare (THL).
The survey will be sent to all clients of services
for older people around Finland.

You can answer the survey yourself or
you can answer with a close relative or friend
or an assistant.

You can also ask a close relative or friend
to complete the survey on your behalf.
The answer must be your opinion
even when someone helps you
in completing the survey or
completes the survey on your behalf.

Participation in the survey is entirely voluntary.
You can decide whether you want to respond
to the survey.

Whether you respond or not will not
affect the service you receive.

You can respond to the survey
on paper or electronically.
With the survey, you will find instructions on
how to submit the survey.

What is asked in the survey?

The survey contains just over 10 questions.
You can answer either all the questions or
select which questions you wish to and can answer.
The questions are related to the service
you are provided and your everyday life.
We will not ask your name or
other personal information.
We will not be able identify who you are.

Why is the survey conducted?

The survey will produce information on

client satisfaction in services for older people and help in developing these services.

We will combine the answers with the information from the service unit.

We will examine how the unit's operating methods affect client satisfaction.

All responses will be put together and made into publications.

It will not be possible to identify the responses of individual respondents from the publications.

You can read the results on THL's website, for example with a close relative.

Your service unit can also utilise the results of the survey.

Do you have any questions?

For more information, visit: thl.fi/kerropalvelustasi

If you have any questions about the survey, please contact us by e-mail or phone.

E-mail: kerropalvelustasi@thl.fi

Phone number: **029 524 6188**

The phonenumber is open from Monday to Wednesday 9 a.m. to 11 a.m.

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The Welfare State Research and Reform Unit, THL

**Thank you for taking
part in the survey.**

**Please welcome to
complete the survey.**

Tell us about your service – The national client satisfaction follow-up study on services for older people 2024

Survey for the residents of 24/7 sheltered housing

You can answer either on a paper or an electronic survey.
The web address and login-ID for the electronic survey are:

link: tutkimus.thl.fi/tunnukset/kerro24/ _____

login-ID: _____

Responding to the survey

1. How do you answer to the survey?

Instruction: select one option.

- Independently without the help of others
- With a close relative or friend
- With a familiar nurse
- With another nurse or assistant
- The questions were answered by
a close relative or friend with the client's permission

Instruction: a close relative or friend answering the questions
according to client's wishes.

Service and provision of help

Instruction: select one option for each question.

2. How likely are you to recommend the service you received to a close relative or friend?

Instruction: select the appropriate number between 0 and 10.
0 means that you would not recommend the service at all.
10 means that you would warmly recommend the service.

0	1	2	3	4	5	6	7	8	9	10
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I would not
recommend

I would warmly
recommend

3. My wishes are taken into account in my care and service.



Completely disagree



Pretty much disagree



Neither agree or disagree



Pretty much agree



Completely agree

4. I receive enough help and services.



Completely disagree



Pretty much disagree



Neither agree or disagree



Pretty much agree



Completely agree

5. The nurses have enough time for me.



Completely disagree



Pretty much disagree



Neither agree or disagree



Pretty much agree



Completely agree

Loneliness

6. Do you suffer from loneliness?

Instruction: select one option.

- Never
- Rarely
- Often
- All the time

Safety and security

7. I feel safe.

Instruction: select one option.



Completely disagree



Pretty much disagree



Neither agree or disagree



Pretty much agree



Completely agree

Recreation and outdoor activities

Instruction: select one option for each question.

8. There are enough recreational activities available that I like.



Completely disagree



Pretty much disagree



Neither agree or disagree



Pretty much agree



Completely agree

9. I get to go outdoors often enough.

Instruction: outdoor activities, for example alone, with a close relative or friend, a nurse, or another assistant.



Completely disagree



Pretty much disagree



Neither agree or disagree



Pretty much agree



Completely agree

Meal

10. I am satisfied with the food.

Instruction: select one option.



Completely disagree



Pretty much disagree



Neither agree or disagree



Pretty much agree



Completely agree

Life satisfaction

11. I am satisfied with my current life.

Instruction: select one option.



Completely disagree



Pretty much disagree



Neither agree or disagree



Pretty much agree



Completely agree

Open feedback

12. Would you like to comment on something else concerning the care services you have received?

Instruction: you can freely express your thoughts and opinions.

Thank you for completing the survey.