

Table 3
Eastern Nebraska Veterans Home
Summary of MEMBER Satisfaction Survey Responses
2010

Number of Survey Responses = 24

Living Environment (Facility Wide)	YES		NO		UNSURE	
	#	%	#	%	#	%
1. Is your living environment comfortable?	22	91.7%	1	4.2%	1	4.2%
2. Do you have enough privacy?	20	83.3%	1	4.2%	3	12.5%
3. Are your personal belongings safe here?	19	82.6%	1	4.3%	3	13.0%
4. Is the home clean and tidy?	23	100%	0	0%	0	0%
5. Is your room arranged the way you would like it to be?	23	95.8%	1	4.2%	0	0%
6. Does your room include some of your personal possessions?	23	95.8%	1	4.2%	0	0%
7. <i>If you were ill or injured, is it possible staff would not know it?</i>	<u>5</u>	<u>20.8%</u>	<u>16</u>	<u>66.7%</u>	<u>3</u>	<u>12.5%</u>
8. <i>Does the level of noise in the facility bother you?</i>	<u>0</u>	<u>0%</u>	<u>24</u>	<u>100%</u>	<u>0</u>	<u>0%</u>
9. <i>Is the facility in need of repair?</i>	<u>4</u>	<u>21.1%</u>	<u>13</u>	<u>68.4%</u>	<u>2</u>	<u>10.5%</u>
10. Are the grounds clean, well kept and attractive?	24	100%	0	0%	0	0%
11. Are the sidewalks and parking lot surfaces smooth and safe to walk on?	23	95.8%	1	4.2%	0	0%
12. Does the facility accommodate a good nights sleep?	22	91.7%	2	8.3%	0	0%

Dining Experience	YES		NO		UNSURE	
	#	%	#	%	#	%
13. Is food available whenever you are hungry?	19	90.5%	1	4.8%	1	4.8%
14. Do you feel you have enough time to eat?	22	100%	0	0%	0	0%
15. If you need assistance to eat, is there enough staff available to assist you?	17	81.0%	1	4.8%	3	14.3%
16. Are you served the types of foods you like?	16	69.6%	2	8.7%	5	21.7%
17. Are there enough different kinds of food to choose from?	19	90.5%	2	9.5%	0	0%
18. Do you get enough food to eat during meals?	22	100%	0	0%	0	0%
19. Are the temperatures of the meals you receive okay?	18	85.7%	1	4.8%	2	9.5%
20. Is the food you receive prepared to your liking?	13	61.9%	3	14.3%	5	23.8%
21. Do you feel the environment in the dining room helps you to enjoy your meals?	16	94.1%	1	5.9%	0	0%

Activities	YES		NO		UNSURE	
	#	%	#	%	#	%
22. Does the facility offer meaningful activities that you like to participate in?	23	100%	0	0%	0	0%
23. Is there enough opportunity to do self-directed activities such as reading, watching TV, or enjoying the outdoors etc?	22	100%	0	0%	0	0%
24. Are you informed of the activities available to you?	22	95.7%	1	4.3%	0	0%
25. Are you able to travel to off-campus outings when you want to?	18	81.8%	3	13.6%	1	4.5%
26. Does the facility offer sufficient entertainment for you to enjoy?	19	82.6%	4	17.4%	0	0%
27. Are there enough activities to choose from to meet your interests?	18	81.8%	0	0%	4	18.2%
28. Are activities offered during convenient time schedules?	20	90.9%	2	9.1%	0	0%
29. Do you get the help you need to attend activities?	20	90.9%	2	9.1%	0	0%
30. Do you have the opportunity to exercise and stay fit?	22	91.7%	1	4.2%	1	4.2%
31. Do you participate in facility-sponsored activities?	19	79.2%	5	20.8%	0	0%

Staff	YES		NO		UNSURE	
	#	%	#	%	#	%
32. Do the staff show they care about you?	23	100%	0	0%	0	0%
33. Do the staff respect your wishes?	18	85.7%	0	0%	3	14.3%
34. Do the staff understand what you are feeling or going through?	15	68.2%	4	18.2%	3	13.6%
35. Do the staff help you when you need it?	22	100%	0	0%	0	0%
36. When staff come into the room, do they tell you why they have come?	19	90.5%	1	4.8%	1	4.8%
37. Are the staff skilled and knowledgeable about how to take care of people?	17	85.0%	0	0%	3	15.0%
38. Do the staff answer your call light promptly?	13	65.0%	3	15.0%	4	20.0%
39. Do the staff follow-through with decisions that you make?	17	85.0%	2	10.0%	1	5.0%
40. Do staff knock before entering your room?	22	95.7%	1	4.3%	0	0%

Dignity	YES		NO		UNSURE	
	#	%	#	%	#	%
41. Do the staff call you by the name you prefer?	22	95.7%	1	4.3%	0	0%
42. Do the staff ensure that your personal hygiene is maintained?	19	86.4%	2	9.1%	1	4.5%
43. Is your personal physical privacy respected by staff?	16	80.0%	2	10.0%	2	10.0%
44. Do you have opportunities to help or support others?	16	76.2%	1	4.8%	4	19.0%
45. Do you feel a part of the daily activities of the home?	19	86.4%	2	9.1%	1	4.5%
46. Do you feel useful?	11	55.0%	3	15.0%	6	30.0%
47. Do you feel staff allow enough time for you?	18	81.8%	2	9.1%	2	9.1%
48. <u>Are you ever placed in a situation that makes you feel uncomfortable?</u>	<u>8</u>	<u>38.1%</u>	<u>10</u>	<u>47.6%</u>	<u>3</u>	<u>14.3%</u>
49. Do you feel staff are attentive to your needs?	19	86.4%	1	4.5%	2	9.1%
50. Are you treated with respect by staff?	23	100%	0	0%	0	0%

Autonomy	YES		NO		UNSURE	
	#	%	#	%	#	%
51. Are you encouraged to participate in decisions about your care?	18	81.8%	2	9.1%	2	9.1%
52. Do you decide what you are going to do each day?	20	87.0%	2	8.7%	1	4.3%
53. Do you express feelings and opinions around here?	19	86.4%	0	0%	3	13.6%
54. Is equipment available that allows you to be more independent? (e.g., wheelchairs, walkers, bars)	21	100%	0	0%	0	0%
55. Do you feel you can come and go as you please?	19	82.6%	3	13.0%	1	4.3%
56. <u>Do staff get back at you if you say or do something they don't like?</u>	<u>6</u>	<u>28.6%</u>	<u>10</u>	<u>47.6%</u>	<u>5</u>	<u>23.8%</u>
57. <u>Would you choose to have a different roommate?</u>	<u>2</u>	<u>9.5%</u>	<u>19</u>	<u>90.5%</u>	<u>0</u>	<u>0%</u>
58. Can you choose when to have your bath or shower?	17	77.3%	3	13.6%	2	9.1%
59. Are you free to make choices such as wear the clothes you want to wear or go to bed and get up when you wish?	22	95.7%	1	4.3%	0	0%
60. Are your spiritual or religious needs provided for?	22	95.7%	0	0%	1	4.3%
61. Do you feel you are given enough opportunity to be connected to the community?	20	87.0%	1	4.3%	2	8.7%

Medical Care and Treatment	YES		NO		UNSURE	
	#	%	#	%	#	%
62. Are you helped if you are in pain or uncomfortable?	18	78.3%	2	8.7%	3	13.0%
63. Can you talk to your doctor when you need to?	20	87.0%	1	4.3%	2	8.7%
64. Do you receive the treatments and medications you need?	19	86.4%	2	9.1%	1	4.5%
65. If you are not feeling well, do you get medical help when needed?	20	87.0%	2	8.7%	1	4.3%
66. Do you receive therapy if you need it?	21	91.3%	2	8.7%	0	0%
67. Would you recommend this Home to others?	19	82.6%	2	8.7%	2	8.7%

Background information

	Less than 6 mos	6 mos to 1 year	1 - 3 years	More than 3 years	
68. How long have you lived at this Veterans Home?	2	3	10	6	
Percent?	9.5%	14.3%	47.6%	28.6%	

	<65 Years	65 - 74 Years	75 - 84 Years	85+ Years	
69. What is your age?	2	3	7	8	
Percent?	10.0%	15.0%	35.0%	40.0%	

	Male	Female	
70. What is your gender?	18	4	
Percent?	81.8%	18.2%	

	YES	NO	UNSURE	
71. If you could go back in time, would you make the same decision to move to this Veterans Home again?	18	2	2	
Percent?	81.8%	9.1%	9.1%	

	YES	NO	UNSURE	
72. Would you recommend this Veterans Home to your family and friends?	18	2	1	
Percent?	85.7%	9.5%	4.8%	