

Sample Foster Caregiver Satisfaction Survey

You Are (optional)
<input type="radio"/> Male <input type="radio"/> Female

Your Age (optional)
<div style="display: flex; justify-content: center; gap: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center;"> </div> <div style="border: 1px solid black; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center;"> </div> </div>

Name: (optional)	Please respond based on your most recent experiences.			
	Ratings (Please circle your response)			
Date:	Non Performance 0	Partial Performance 1 2 3	Satisfactory performance 4 5 6	Superior Performance 7 8 9
1. Agency staff has related to you as a team member by recognizing your contributions.	0	1 2 3	4 5 6	7 8 9
2. Agency staff has related to you as a team member by soliciting your input and appreciated your opinions.	0	1 2 3	4 5 6	7 8 9
3. Agency staff has related to you as a team member by keeping you informed about all aspects of the case.	0	1 2 3	4 5 6	7 8 9
4. Staff at agency responded to my request for services support, and is accessible 24 hours a day 7 days a week.	0	1 2 3	4 5 6	7 8 9
5. If I have concerns that cannot be resolved by my caseworker, I feel comfortable talking with the worker's supervisor.	0	1 2 3	4 5 6	7 8 9
6. My Children's Resource Records (CRR)/Medical Books are up to date with all the necessary documentation.	0	1 2 3	4 5 6	7 8 9
7. I feel comfortable with the frequency of my caseworker's visits.	0	1 2 3	4 5 6	7 8 9
8. I feel that Agency appreciates the work I do as a AGENCY foster parent.	0	1 2 3	4 5 6	7 8 9
9. The caseworker makes every effort to provide me with written and verbal information on the children prior to their placement.	0	1 2 3	4 5 6	7 8 9
10. Agency staff has supported me and provided needed services upon request.	0	1 2 3	4 5 6	7 8 9
11. Please list any suggestions as to how Agency could improve services to your family:				