

We are continually seeking ways to improve this service and ensure women have access to high quality supported accommodation. This feedback is reviewed regularly and changes are made accordingly, so we appreciate your input. Thank you!

## YOU DO NOT HAVE TO PUT YOUR NAME ON THIS FORM

For all questions please tick all of the answer/s that represents your experience.

| Q1. What was your experience of your first contact with Nova?   |               |                |                 |  |
|---|---------------|----------------|-----------------|--|
| ☐ Fair  | ☐ Appropriate | 2              | ☐ Respectful    |  |
| ☐ Unfair  | ☐ Inappropria | te             | ☐ Disrespectful |  |
| Comment   |               |                |                 |  |
|   |               |                |                 |  |
| Q2. Do you feel you have been given enough information to make informed decisions about your involvement with Nova? |               |                |                 |  |
| □ Yes   | □ No          |                |                 |  |
| Comment   |               |                |                 |  |
|   |               |                |                 |  |
| Q3. When communicating with Nova do you find it: -  |               |                |                 |  |
| □Easy   | □Clear        | □Respectful    | □Helpful        |  |
| □Difficult  | ☐ Confusing   | □Disrespectful | □Unhelpful      |  |
| Comment   |               |                |                 |  |
|   |               |                |                 |  |

| Q4. Has Nova been respectful of your cultural needs? |  |  |
|--|--|--|
| □Yes   | $\square$ No   |  |
| Comment  |  |  |
|  |  |  |
|  | sitional Accommodation Do you have any complaints about any aspect of that |  |
| experience with nova                                 | for Women and Children?  |  |
|  |  |  |
|  |  |  |
| Q6. If you were in Inte                              | rim Accommodation (refuge/crisis) did you feel you were given a            |  |
| · · · · · · · · · · · · · · · · · · ·                | ion (shown around the accommodation, informed of emergency procedures      |  |
|  |  |  |
|  |  |  |
| Q7. Did you feel safe a                              | t the Interim Accommodation (refuge/crisis)?                               |  |
|  |  |  |
|  |  |  |
| Q8. Was the Interim A                                | ccommodation clean?  |  |
|  |  |  |
|  |  |  |
| Q9. Did you find the st                              | aff helpful?   |  |
|  |  |  |
|  |  |  |

| Q10. Did you feel that your children were supported?   |
|--|
|  |
| Q11. Do you have any complaints about any aspect of the support you have received from Nova?                               |
|  |
|  |
|  |
|  |
|  |
| Thank you for filling in this evaluation. Please use the stamped, addressed envelope enclosed to return this form to Nova. |

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For more information: visit www.novawomen.org.au or email nova@novawomen.org.au