



CLIENT EVALUATION OF NONRESIDENTIAL PROGRAMS AND SERVICES

Please complete this questionnaire and help us to improve the quality of our programs.

Your answers are *anonymous and confidential*; do not hesitate to give sincere responses.

Today's Date: ____/____/____

County: Cuyahoga

ORAS Risk Level: Low/Moderate

Please indicate program:

Summit

High/Very High

Day Reporting <input type="checkbox"/>	Transitional Services <input type="checkbox"/>	Municipal Drug Court <input type="checkbox"/>	Turning Point/Felony Drug Court <input type="checkbox"/>	Family Intervention Program <input type="checkbox"/>	Family Intervention Court <input type="checkbox"/>	Re-Entry Court <input type="checkbox"/>	Criminal NonSupport <input type="checkbox"/>	Other _____
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If you attended any of these **ORIANA HOUSE** programs, please indicate **ALL** that you attended:

IOP <input type="checkbox"/>	Family Matters <input type="checkbox"/>	Treatment Readiness <input type="checkbox"/>	Aftercare <input type="checkbox"/>	Anger Management <input type="checkbox"/>
Booster Class <input type="checkbox"/>	Thinking Errors <input type="checkbox"/>	Thinking for a Change <input type="checkbox"/>	GED <input type="checkbox"/>	Employment Services <input type="checkbox"/>

Please fill in only **ONE BUBBLE** for each question like this ●

Age:	25 & Under <input type="checkbox"/>	26-35 <input type="checkbox"/>	36-45 <input type="checkbox"/>	46-55 <input type="checkbox"/>	Over 55 <input type="checkbox"/>	Gender:	Male <input type="checkbox"/>	Female <input type="checkbox"/>		
								! <input type="checkbox"/>	☹ <input type="checkbox"/>	
Race:	Caucasian (White) <input type="checkbox"/>	African American (Black) <input type="checkbox"/>	Multiracial <input type="checkbox"/>	Other (Specify) _____			Yes <input type="checkbox"/>	No <input type="checkbox"/>		
							Hispanic/Latino:	☉ <input type="checkbox"/>	● <input type="checkbox"/>	
Number of Times Entered into a Residential or Non-residential Oriana Program including current stay:				1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4+ <input type="checkbox"/>	Veteran:	☉ <input type="checkbox"/>	● <input type="checkbox"/>
Highest Level of Education Completed:						Employed at Time of Arrest:	☉ <input type="checkbox"/>	● <input type="checkbox"/>		
Less than High School <input type="checkbox"/>	GED <input type="checkbox"/>	High School Degree <input type="checkbox"/>	College Degree <input type="checkbox"/>							
						Employed at Time of Release:	☉ <input type="checkbox"/>	● <input type="checkbox"/>		

Intake/Getting Started:

1. My intake process was informative and answered my questions.
2. I was satisfied with how fast I was able to attend classes and programs.
3. I was treated respectfully.

Overall Programming:

4. The programming I received here will help me stay out of trouble in the future.
5. I achieved the goals I set for myself.
6. My work/personal schedule was taken into consideration when appointments/classes were scheduled for me.
7. I learned why some behaviors are rewarded and some are sanctioned.
8. After attending programming, I learned that I'm responsible for my actions.

In-House Drug and Alcohol Treatment:

9. My counselor and I created treatment goals that were realistic and meant to help me.
10. My treatment counselor was helpful and available.
11. The treatment programming helped me stop using drugs/alcohol.
12. Treatment here helped me create a plan to keep me drug and alcohol free after I finish the program.

	Strongly Agree	Agree	Disagree	Strongly Disagree	Does Not Apply
1. My intake process was informative and answered my questions.	? <input type="checkbox"/>	✓ <input type="checkbox"/>	✗ <input type="checkbox"/>	? <input type="checkbox"/>	● <input type="checkbox"/>
2. I was satisfied with how fast I was able to attend classes and programs.	? <input type="checkbox"/>	✓ <input type="checkbox"/>	✗ <input type="checkbox"/>	? <input type="checkbox"/>	● <input type="checkbox"/>
3. I was treated respectfully.	? <input type="checkbox"/>	✓ <input type="checkbox"/>	✗ <input type="checkbox"/>	? <input type="checkbox"/>	● <input type="checkbox"/>
4. The programming I received here will help me stay out of trouble in the future.	? <input type="checkbox"/>	✓ <input type="checkbox"/>	✗ <input type="checkbox"/>	? <input type="checkbox"/>	● <input type="checkbox"/>
5. I achieved the goals I set for myself.	? <input type="checkbox"/>	✓ <input type="checkbox"/>	✗ <input type="checkbox"/>	? <input type="checkbox"/>	● <input type="checkbox"/>
6. My work/personal schedule was taken into consideration when appointments/classes were scheduled for me.	? <input type="checkbox"/>	✓ <input type="checkbox"/>	✗ <input type="checkbox"/>	? <input type="checkbox"/>	● <input type="checkbox"/>
7. I learned why some behaviors are rewarded and some are sanctioned.	? <input type="checkbox"/>	✓ <input type="checkbox"/>	✗ <input type="checkbox"/>	? <input type="checkbox"/>	● <input type="checkbox"/>
8. After attending programming, I learned that I'm responsible for my actions.	? <input type="checkbox"/>	✓ <input type="checkbox"/>	✗ <input type="checkbox"/>	? <input type="checkbox"/>	● <input type="checkbox"/>
9. My counselor and I created treatment goals that were realistic and meant to help me.	? <input type="checkbox"/>	✓ <input type="checkbox"/>	✗ <input type="checkbox"/>	? <input type="checkbox"/>	● <input type="checkbox"/>
10. My treatment counselor was helpful and available.	? <input type="checkbox"/>	✓ <input type="checkbox"/>	✗ <input type="checkbox"/>	? <input type="checkbox"/>	● <input type="checkbox"/>
11. The treatment programming helped me stop using drugs/alcohol.	? <input type="checkbox"/>	✓ <input type="checkbox"/>	✗ <input type="checkbox"/>	? <input type="checkbox"/>	● <input type="checkbox"/>
12. Treatment here helped me create a plan to keep me drug and alcohol free after I finish the program.	? <input type="checkbox"/>	✓ <input type="checkbox"/>	✗ <input type="checkbox"/>	? <input type="checkbox"/>	● <input type="checkbox"/>

In-House Cognitive Skills/Thinking for a Change, Employment and Education Programming:	Strongly Agree	Agree	Disagree	Strongly Disagree	Does Not Apply
13. The role playing helped me practice what I learned in class.	?	✓		?	●
14. The role playing helped me identify my high risk thoughts/thinking errors.	?	✓		?	●
15. I used the skills I learned in classes in my everyday life.	?	✓		?	●
16. Employment services taught me the value of having a job instead of participating in criminal activities.	?	✓		?	●
17. Employment readiness class helped me find a job that is a good fit for me.	?	✓		?	●
18. Education Services helped me forward my education.	?	✓		?	●
My Caseworker...					
19. ... helped me create realistic goals.	?	✓		?	●
20. ... helped me identify my triggers/targets.	?	✓		?	●
21. ... helped me create a plan to address my triggers/targets.	?	✓		?	●
22. ... acknowledged my behavior and explained why it was positive or negative.	?	✓		?	●
23. ... gave me worksheets that were helpful.	?	✓		?	●
24. ... acknowledged my concerns, opinions and feelings.	?	✓		?	●
25. ... had respect for my ethnic, cultural and racial background	?	✓		?	●
26. ... treated me respectfully.	?	✓		?	●
27. If my staff/caseworker was unavailable, another staff/caseworker met with me.	?	✓		?	●
At Court Appearances:					
28. The Judge clearly explained how the program worked and what was expected of me.	?	✓		?	●
29. The positive reinforcement helped motivate me to change my behavior.	?	✓		?	●
30. Receiving sanctions helped me change my behavior.	?	✓		?	●
31. Sanctions to residential programs helped me change my behavior.	?	✓		?	●
32. The judge, prosecutor, caseworker, and I worked as a team to achieve my treatment goals.	?	✓		?	●
33. The Judge acknowledged my concerns, opinions, and feelings.	?	✓		?	●
34. Watching other clients receive sanctions made me want to change my behavior.	?	✓		?	●
35. Watching other clients' graduations and testimonials made me want to change my behavior.	?	✓		?	●
Post Release/Upon Leaving:					
36. I was given referrals in order to maintain my sobriety after leaving the program.	?	✓		?	●
37. I was informed of community agencies that can help me stay out of the criminal justice system.	?	✓		?	●
Facility:					
	Never	Seldom	Frequently	Always	
38. I was approached to buy drugs on facility grounds.	●	?			

1. Why would you recommend or not recommend this program to others? _____

2. What did you like about the program? _____

3. What did you dislike about the program? _____

4. The following staff helped me most: _____

Thank you for your time! Please return this survey to staff at reception.

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