

## Member Survey Script - Interview with the Member

Things to **KNOW** before you do the survey:

You don't have to participate in the survey. It is your choice.

Your responses to the survey are private. Your name will not be on the survey.

Only a summary of the survey responses will be reviewed and reported.

The survey will help us understand what it is like to attend your employment program and help us understand what supports are provided to you. We want to hear about your services and how they help you to be independent, make decisions and choices.



The survey will take approximately 30 minutes.

Things to **THINK** about when you are answering the survey questions:

1. Think about where you **WORK**.

2. Tell us what it is like **WORKING**.

3. Tell us about the **CHOICES** you get to make.

4. You answer **YES**  or **NO**  to the questions. The person asking you the questions may write down any comments you make to help us understand more about what it is like to attend your employment program.

## Member Survey Script - Interview with the Member's Representative

Things to **KNOW** before you do the survey:

You don't have to participate in the survey. It is your choice.

You cannot be a staff person for your member.

Your responses to the survey are private. Your name will not be on the survey.

Only a summary of the survey responses will be reviewed and reported.

The survey will help us understand what it is like for the member to attend their employment program. We want to hear about their services and how they help the member to be independent, make decisions and choices.



The survey will take approximately 30 minutes.

Things to **THINK** about when you are answering the survey questions:

1. Think about where the AHCCCS member **WORKS** and what you have observed or know.

2. Tell us what it is like for the member to **WORK**.

3. Tell us about the **RIGHTS** they have and the **CHOICES** they get to make.

4. You answer **YES**  or **NO**  to the questions. The person asking you the questions may write down any comments you make to help us understand more about what it is like for the member to attend their employment program.

Member Survey Employment				
	Member/Representative Comments	Interviewer Comments and Observations	Yes	No
Does the individual have career exploration opportunities?				
<b>1. Employment</b>	1a. What kind of tasks do you do at work? Do you get to try different tasks at work? If yes, like what? If yes, skip to 1c.		<input type="checkbox"/>	<input type="checkbox"/>
	1b. If no, would you sometimes like to do other tasks at work? If yes, like what?		<input type="checkbox"/>	<input type="checkbox"/>
	1c. Do you get to learn about other jobs?		<input type="checkbox"/>	<input type="checkbox"/>
	1d. Describe how you get to and from work every day? Are you satisfied with how you get to and from work?		<input type="checkbox"/>	<input type="checkbox"/>
	1e. Would you like to become more independent when it comes to getting to and from work? Skip to 2a if no.		<input type="checkbox"/>	<input type="checkbox"/>
	1f. If yes, like what? Has anyone ever offered to teach you how to get to work on your own, such as riding the bus?		<input type="checkbox"/>	<input type="checkbox"/>
Does the individual interact with members of the larger community (people without disabilities, peers, etc.)?				
<b>2. Your Community</b>	2a. Who do you normally see everyday when you're at work? When you're at work, do you get to meet other people who don't normally work with you? Give us examples of who you get to see that you normally do not work with.		<input type="checkbox"/>	<input type="checkbox"/>
Has the individual been introduced to DB101 training?				

		Member/Representative Comments	Interviewer Comments and Observations	Yes	No
<b>3. Your Plan</b>	3a. Do you know that your benefits might change when you start getting a paycheck? Has staff at (the Provider) ever told you to not try and work because of these potential changes?			<input type="checkbox"/>	<input type="checkbox"/>
	3b. Would you like to learn more about how a job and your benefits are connected?			<input type="checkbox"/>	<input type="checkbox"/>
Is the individual treated with respect and dignity?					
<b>4. Your Rights</b>	4a. Does your staff listen to you to help you the way that you like at work? If no, what would you like them to do?			<input type="checkbox"/>	<input type="checkbox"/>

For Reference Only