

**SCSEP Host Agency  
Customer Satisfaction Survey**

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**HOST AGENCY CUSTOMERS**

The Older Worker Program, also known as the Senior Community Service Employment Program (SCSEP) or Title V of the Older Americans Act, wants to provide the highest quality services to its customers, even in the midst of the COVID-19 pandemic. You can help improve services by answering the following questions about your experiences as a host agency. Please base your answers on your entire experience as a host agency unless directed otherwise in a particular question.

Please be frank in your responses. Your answers will be kept private to the extent permitted by law and will be used for program evaluation and improvement only. No one in the agency will see your individual responses.

**Please fill in your response to each answer like this: ●, NOT this ☑**

Choose the number on the scale below each question that best represents your opinion. The last two questions allow you to express your ideas about the program in your own words. If there is someone else in your agency better suited to answer the survey, please give that person the survey to complete. Thank you in advance for your help.

- Utilizing the scale below, what is your overall satisfaction with the services provided by the Older Worker Program/SCSEP? (Choose one number)

Very dissatisfied											Very satisfied	Didn't receive
1	2	3	4	5	6	7	8	9	10	90		

- Considering all of the expectations you may have had about the services of the Older Worker Program/SCSEP, to what extent have the services met your expectations? (Choose one number)

Fall short											Exceed	Didn't receive
1	2	3	4	5	6	7	8	9	10	90		

- Now, think about the ideal services for people in your circumstances. How well do you think the services you received compare with the ideal services? (Choose one number)

Not at all close											Very close	Didn't receive
1	2	3	4	5	6	7	8	9	10	90		

**Please continue on other side**

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. Public reporting burden for this collection of information is estimated to average 10 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Completion of this survey is completely voluntary, and information collected will be kept private to the extent permitted by law and used for program evaluation purposes only. Thank you for your participation. If you have any comments regarding this estimate or any other aspect of this survey, including suggestions for reducing this burden; please send them to the U.S. Department of Labor, Office of Workforce Investment, Room C-4510, 200 Constitution Avenue, NW, Washington, DC 20210. (Please do not return surveys to this address.)

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4. The Older Worker Program/SCSEP staff make the process of assigning participants easy for me. (Choose one number)

Strongly disagree										Strongly agree	Don't know
1	2	3	4	5	6	7	8	9	10	10	90

5. The Older Worker Program/SCSEP staff who make the assignments have a good understanding of my business needs. (Choose one number)

Strongly disagree										Strongly agree	Don't know
1	2	3	4	5	6	7	8	9	10	10	90

6. I receive sufficient information about the backgrounds of the participants assigned to my agency. (Choose one number)

Strongly disagree										Strongly agree	Don't know
1	2	3	4	5	6	7	8	9	10	10	90

7. Consider the last time the Older Worker Program/SCSEP staff proposed an assignment for your agency. What choice did you feel you had at that time? (Choose one answer )

- I can accept the individual offered or not
- I have a choice among several potential participants
- I really have no choice

8. The participants assigned are a good match with my agency. (Choose one number)

Strongly disagree										Strongly agree	Don't know
1	2	3	4	5	6	7	8	9	10	10	90

9. Would you like the participants to have been better prepared in any of these areas? (Choose Yes, No, or N/A for each statement)

- |  |                              |                             |                              |
|--|------------------------------|-----------------------------|------------------------------|
| 1) Basic computer knowledge  | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| 2) Basic employability skills, like how to dress, how to interact with co-workers and supervisors, and punctuality | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| 3) Knowledge of what the assignment required   | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| 4) How to interact with the host agency's customers or clients   | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |

10. The Older Worker Program/SCSEP staff stay in touch with my agency throughout the assignment to make sure it goes well. (Choose one number)

Strongly disagree										Strongly agree	Don't know
1	2	3	4	5	6	7	8	9	10	10	90

**Please continue on next page**

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11. Do any of the older workers assigned to your agency need supportive services, such as assistance with transportation, uniforms, safety equipment, or medical care, to be successful in their assignments? (Choose one answer)

- |      |     |      |            |            |
|------|-----|------|------------|------------|
| 1    | 2   | 3    | 4          | 9          |
| None | Few | Many | Nearly all | Don't know |

12. Has the Older Worker Program/SCSEP removed any participants from your agency before you thought they were ready to leave? (Choose one number)

- |       |              |            |               |            |
|-------|--------------|------------|---------------|------------|
| 1     | 2            | 3          | 4             | 9          |
| Never | Occasionally | Frequently | Nearly always | Don't know |

13. Has your agency requested that the Older Worker Program/SCSEP remove a participant because the participant was not working out? (Choose one answer)

- Yes       No       Don't know

14. How has your participation in the Older Worker Program/SCSEP affected the amount of service your agency provides to the community? (Choose one answer)

- |                         |                    |                                 |                    |                         |            |
|-------------------------|--------------------|---------------------------------|--------------------|-------------------------|------------|
| 1                       | 2                  | 3                               | 4                  | 5                       | 9          |
| Decreased significantly | Somewhat decreased | Neither decreased nor increased | Somewhat increased | Increased significantly | Don't know |

15. What effects or challenges from the COVID-19 pandemic have you experienced as a SCSEP host agency? (Choose all that applied at any time over the last year)

- It was difficult to find out when, or if, participants would be returning to work
- Participants were not able to come to the workplace
- It was difficult to ensure the safety of participants who continued to work or returned to work
- It was difficult to find work for participants to do because our normal operations were greatly affected
- It was difficult to re-integrate participants into the organization after they were on hiatus due to COVID
- We experienced no serious effects from the COVID-19 pandemic

16. Based on your experience, what makes the Older Worker Program/SCSEP most effective?

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17. Based on your experience, what would you recommend to make the Older Worker Program/SCSEP more effective?

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**Thank you for taking the time to complete this survey.**