**QDN Member Survey 2019**

**Background:**

QDN has created this survey to ask what is important to you as a **QDN member** and to find out information about your experiences of living in Queensland, including accessing necessary services and supports to enable you to socially and economically participate and be included and ‘thrive’ within your community. Your responses will inform our work going forward and our advocacy with governments, community and tertiary organisations.

This information will further assist us with our big picture policy work, as we will be able to make general comments about our members’ experiences. For example, “40% of QDN members surveyed reported challenges with activating their NDIS plans”. We may write some case studies based on the information you tell us but we will not use your name or any details that identify who you are.

**Instructions for Completing this Survey:**

Please answer the following questions. You may have a lot to say on some questions and not so much on others. That is okay. Feel free to provide as much information as you can in the spaces provided.

We may want to speak to you further about your answers. If you are happy for us to do this, please put your name and phone number in the space provided. If you would like to remain confidential, that is okay too. You do not need to let us know who you are.

You can ask for help to complete this survey if you need, either ask a support person or please phone QDN on **1300 363 783.**

**Please return the survey in the freepost envelope provided.**

**Survey Questions:**

This survey can be anonymous, however, there are prizes available as part of a random draw from the members who participate in the survey –

**3 x $50 gift cards and 3 x $25 gift cards**

To go into the draw, you need to provide your name and contact details below:

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes, I want to go in the draw for prize.  Name:  Contact Email:  Contact Phone Number: |  | No |

1. **About QDN and the issues that are important to you:**

Are you a member of a QDN Local Support Group?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No |
|  | I don’t know |  | I would like more information about Local Support Groups |

If you regularly attend a Local Support Group, why do you find it beneficial?  
What do you enjoy most about attending meetings?

|  |
| --- |
|  |

What could be improved with Local Support Groups?

|  |
| --- |
|  |

How would you like to be connected to new groups we may develop in the future?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Attending face-to-face meetings |  | Online: via Facebook groups or video meetings |
|  | Teleconferences |  | Other, please specify: |

What do you want to get out of being a member of a Local Support Group?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Increased knowledge and confidence |  | Connection with others |
|  | Ideas around NDIS supports and goals |  | Solving problems together |
|  | Making a contribution to your local community/ supporting others |  | Other, please specify: |

Are you a representative or consultant for QDeNgage?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No |
|  | I don’t know |  | I want more information about QDeNgage |

#### What training would assist you to be involved in QDeNgage activities? (For example: acting as a representative for the voice of people with disability, providing feedback and advice, taking on speaking roles etc.)

|  |
| --- |
|  |

How would you like to keep in touch with QDN and be involved in QDN activities?  
(Please mark all those that are relevant.)

|  |  |  |  |
| --- | --- | --- | --- |
|  | Email (eBulletin) |  | Phone |
|  | Post – I don’t have email (eBulletin) |  | Attending face-to-face events: Local Support Group meetings, workshops, QDN AGM |
|  | Online events: video meetings, webinars, member hub |  | QDN website |
|  | Social media: Facebook, Twitter, Instagram |  | Other, please specify: |

In what ways has being involved in QDN helped you get information, get connected or be part of leading and influencing change?

|  |
| --- |
|  |

Which of the following issues are important to you?  
(Please choose as many as you like. Please order them in terms of priority, for example:   
1. Housing, 2. NDIS, 3. Human Rights etc.)

|  |  |  |  |
| --- | --- | --- | --- |
|  | National Disability Insurance Scheme (NDIS) |  | Education |
|  | Community Inclusion |  | Disability Policy |
|  | Health |  | Access to Public Spaces/ Recreation |
|  | Housing / Building Standards |  | Women’s Issues |
|  | Accessible and Affordable Transport |  | Employment/ Income Support |
|  | The Royal Commission into Violence, Abuse, Neglect and Exploitation of people with disability |  | Justice and Legal Issues for people with disability |
|  | Employment |  | Essential services like electricity, water, telephone and internet services |
|  | Aboriginal and Torres Strait Islander Issues |  | Issues for people from a Culturally and Linguistically Diverse Background |
|  | Human Rights |  | Individual Capacity Building and Leadership |
|  | Advocacy |  | Other, please specify: |

In relation to the topics you have picked in the question above, what are some things QDN needs to know?  
(For example, there is no accessible housing in my community, I can’t use public transport where I live.)

|  |
| --- |
|  |

The Royal Commission into Violence, Abuse, Exploitation and Neglect of people with disability is starting soon. What support or information do you think we can tell government that would be most helpful to you during the Royal Commission?  
(Please mark all those that are relevant.)

|  |  |  |  |
| --- | --- | --- | --- |
|  | Information on the Royal Commission and how to give evidence |  | Information on what violence abuse, exploitation and neglect |
|  | Support to give evidence |  | Support after giving evidence, for example: counselling |
|  | Support to prepare evidence |  | Other, please specify: |

The Human Rights Act is in place in Queensland. What is important to you about the Human Rights legislation?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Finding out more about it |  | Knowing how it affects me and my rights and responsibilities |
|  | Knowing where I can go for help if my human rights are not being met |  | Other, please specify |

The Aged Care reforms are also big changes happening for QDN members over 65. What are the key things happening for you or people with disability over 65? What needs to change?

|  |
| --- |
|  |

1. **QDN Communications:**

Have you used QDN’s online Member Hub in the last 12 months?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No |

If no, why haven’t you used the QDN Member Hub?  
(Please mark only those that are relevant):

|  |  |  |  |
| --- | --- | --- | --- |
|  | I’ve forgotten my password |  | I don’t have internet access |
|  | It is difficult to use |  | I don’t know what the QDN Member Hub is? |
|  | Other, please specify |

QDN is funded to undertake ‘big picture’ advocacy and this means being able to give members information about issues important to you. It also means **hearing members’ feedback** about big picture issues happening on the ground. From the following table, please select ways you would find most useful to give and receive information:

|  |  |  |  |
| --- | --- | --- | --- |
|  | Regular policy updates – housing, transport, NDIS, employment etc. |  | Information on benefits, discounts, (for example: savings on electricity, government subsidies, gift cards for participating in member feedback activities) |
|  | An on-line forum to exchange information and ideas with other QDN members |  | QDN e-Bulletin |
|  | QDN Project updates/ promotions, for example: Peer to Peer Advocacy Project |  | Other, please specify: |
|  | Attending a Local Support Group |  |  |

How do you want to give us feedback on issues?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Email |  | Quick surveys/ polls on Facebook |
|  | Surveys on Survey Monkey |  | Participating either online or in-person in Communities of Practice or feedback sessions |
|  | Brief conversations over the phone |  | Other, please specify |

1. **The NDIS:**

Do you have an NDIS Plan?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No, I am not eligible for the NDIS |
|  | I am waiting to hear the outcome of my planning conversation |  | No, I don’t want to have an NDIS plan |
|  | I don’t know |

***If you have an NDIS plan, please answer the questions below that apply to you:***

How has your NDIS plan helped you to become more involved in the community?

|  |
| --- |
|  |

What has been good about your NDIS experience?

|  |
| --- |
|  |

What have been some issues/challenges with the NDIS?

|  |
| --- |
|  |

Have you had issues with any of the following regarding the National Disability Insurance Scheme?  
(Please mark all those that are relevant.)

|  |  |  |  |
| --- | --- | --- | --- |
|  | NDIS Access |  | Planning Conversation |
|  | Specialist Disability Accommodation |  | Supported Independent Living |
|  | Plan Review |  | Plan implementation/ activation/ what to do once I have my plan |
|  | Managing my plan |  | Finding a Supports Coordinator |
|  | Finding the services I need |  | NDIS Appeals and Reviews |
|  | Other, please specify: |

Would QDN be able to contact you to have a more detailed conversation about any of these topics or would you be willing to answer additional survey questions about the topics you marked in the above question?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | | Yes, I would prefer a conversation. I am available on the following date and time:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | Yes, I am happy to answer additional survey questions |
|  | No | |

Self-management is one approach to managing your NDIS plan that QDN has a project to work on this year. Would you like to receive information on self-management?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No |
|  | I don’t know |

What NDIS topics would be of interest to you?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Starting my new plan |  | Employing/ Managing Staff |
|  | Rural / Remote Issues |  | Other, please specify: |

What is your experience of self-management?

|  |  |  |  |
| --- | --- | --- | --- |
|  | I have no experience of self-management |  | I have heard about self-management and would like to know more |
|  | I have been self-managing my supports for a little while |  | I have been self-managing my supports for many years and have much experience |
|  | Other, please specify: |

Your age:

|  |  |  |  |
| --- | --- | --- | --- |
|  | 18 to 24 |  | 45 to 54 |
|  | 25 to 34 |  | 55 to 64 |
|  | 35 to 44 |  | 65+ |

How long have you been a member of QDN?

|  |  |  |  |
| --- | --- | --- | --- |
|  | 0-5 years |  | 6-10 years |
|  | 11-15 years |  | 15+ years (since QDN began) |

Thank you for taking the time to complete this survey.

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