

2020 HENRY COUNTY SENIOR CENTER (HCSC) SURVEY

The Henry County Senior Center’s mission is “To empower and inspire older adults to thrive in every aspect of their lives”. We ask for your feedback to help us evaluate our effectiveness in accomplishing our mission. Thank you!

Gender: Female Male

Age: 60-74 75 or older

I am currently: Working Part-Time Working Full-Time Retired

1) Which of these programs and services offered at the Henry County Senior Center (HCSC) have you participated in? Please circle which offerings you have participated in, as well as how important that offering is for you.

	Participate? Yes or No	Extremely Important	Important	Not Important	N/A
Meals on Wheels	Y / N	3	2	1	0
Noon Meal	Y / N	3	2	1	0
Satellite Site (Deshler, Malinta, LC)	Y / N	3	2	1	0
Blood Pressure Screens	Y / N	3	2	1	0
Toenail Clinic	Y / N	3	2	1	0
Medicare Assistance	Y / N	3	2	1	0
Staff Assistance: (medical, legal, housing, food)	Y / N	3	2	1	0
Tax Services	Y / N	3	2	1	0
Volunteer Opportunities	Y / N	3	2	1	0
Support Groups (Caregiver, Grief, Mental Health)	Y / N	3	2	1	0
PROGRAMS/CLASSES/EVENTS:					
• Arts/Creative	Y / N	3	2	1	0
• After Hour Events	Y / N	3	2	1	0
• Book Club	Y / N	3	2	1	0
• Educational	Y / N	3	2	1	0
• Exercise/Fitness	Y / N	3	2	1	0
• Games/Cards	Y / N	3	2	1	0
• Health Related	Y / N	3	2	1	0
• Intergenerational	Y / N	3	2	1	0
• Quilting / Sewing	Y / N	3	2	1	0
• Social / Entertainment	Y / N	3	2	1	0
• Spiritual	Y / N	3	2	1	0
• Technology	Y / N	3	2	1	0
• Themed Events	Y / N	3	2	1	0
• Trips	Y / N	3	2	1	0
• Woodshop	Y / N	3	2	1	0

2) If you are 60 years or older and not currently participating, why not? Please indicate all that apply.

- | | |
|--|---|
| <input type="checkbox"/> I feel I am too young | <input type="checkbox"/> I am in poor health |
| <input type="checkbox"/> I am too busy/have no time | <input type="checkbox"/> Transportation is a problem for me |
| <input type="checkbox"/> The programs and events do not interest me | <input type="checkbox"/> I didn't know what the HCSC offered. |
| <input type="checkbox"/> I have caregiving responsibilities | <input type="checkbox"/> I can't afford it |
| <input type="checkbox"/> The times HCSC programs are offered are not convenient for me | <input type="checkbox"/> Other (please specify) |
-

3) Which is your preferred form of communication for finding programs and services?

- | | |
|---|---|
| <input type="checkbox"/> Local newspaper, (Northwest Signal, Deshler Flag, Liberty Press) | <input type="checkbox"/> Posting at my housing complex |
| <input type="checkbox"/> HCSC newsletter: <i>Golden Age News</i> | <input type="checkbox"/> Ask a friend/neighbor/relative |
| <input type="checkbox"/> HCSC Facebook page | <input type="checkbox"/> Church or place of worship |
| <input type="checkbox"/> HCSC website | <input type="checkbox"/> Email |
| <input type="checkbox"/> Internet (i.e. Google or Yahoo) | <input type="checkbox"/> Other (please specify) |
| <input type="checkbox"/> Telephone book | |
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4) How often do you usually come to the Henry County Senior Center (HCSC)?

- | | |
|--|---|
| <input type="checkbox"/> Every day | <input type="checkbox"/> 1-2 days a month |
| <input type="checkbox"/> 3-4 days a week | <input type="checkbox"/> Less than once a month |
| <input type="checkbox"/> 1-2 days a week | |

5) At what times are you more likely to attend a HCSC event? Check all that apply.

- | | |
|--|--|
| <input type="checkbox"/> Early Mornings (8:00-10:00 AM) | <input type="checkbox"/> Late Afternoon (3:00-5:00 PM) |
| <input type="checkbox"/> Late Mornings (10:00AM-12 Noon) | <input type="checkbox"/> Evening (5:00-9:00 PM) |
| <input type="checkbox"/> Early Afternoon (1:00-3:00 PM) | |

6) On what days are you more likely to attend a HCSC event. Check all that apply.

- | | |
|------------------------------------|-----------------------------------|
| <input type="checkbox"/> Monday | <input type="checkbox"/> Friday |
| <input type="checkbox"/> Tuesday | <input type="checkbox"/> Saturday |
| <input type="checkbox"/> Wednesday | <input type="checkbox"/> Sunday |
| <input type="checkbox"/> Thursday | |

7) Do trips appeal to you? If so, which one appeals the most?

- | | |
|--|-------------------------|
| <input type="checkbox"/> Not applicable | |
| <input type="checkbox"/> Short Trips (2-4 hours) | Trip Suggestions: _____ |
| <input type="checkbox"/> Day Getaways (5-10 hours) | |
| <input type="checkbox"/> Overnight Travel (2 days) | _____ |
| <input type="checkbox"/> Extended Travel (3-14 days) | |

8) On a scale of 1 – 5 (5 = Best), please rate the Hot Meals at the HCSC

5 4 3 2 1

9) On a scale of 1 – 5 (5 = Best), please rate the Salad Bar at the HCSC

5 4 3 2 1

10) Favorite Meal _____

Least Favorite Meal _____

One or two meal suggestions to offer / change _____

11) Favorite Part of the Henry County Senior Center: _____

12) What is one thing you would change about the Henry County Sr. Center

13) Of the following statements, please indicate all that apply for you.

“As a result of participating at the HCSC...

- My quality of life has improved.”
- I am better aware of proper nutrition”
- I see friends more often/make new friends.”
- I am more physically active.”
- I learn new things.”
- I have saved money.”
- I am better able to live independently in my home.”
- I would recommend the HCSC to my friends.”

14) If you have any suggestions regarding how we could improve the programs or services we provide or other programs you would like us to consider, please comment below. (Use the back if you need more space)

Thank you for your feedback! Please drop off or mail your responses to the
Henry County Senior Center, 203 Rohrs St. Napoleon, OH 43545