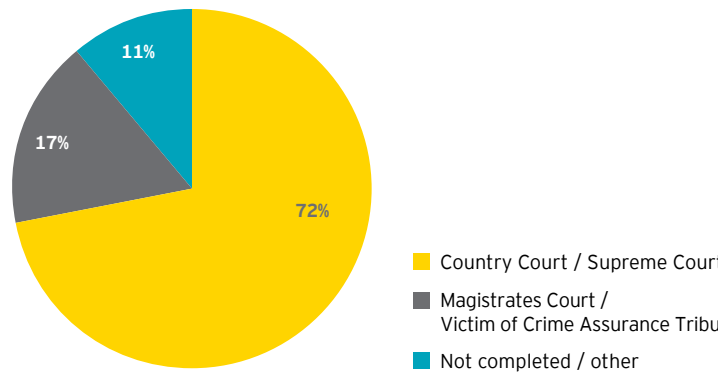


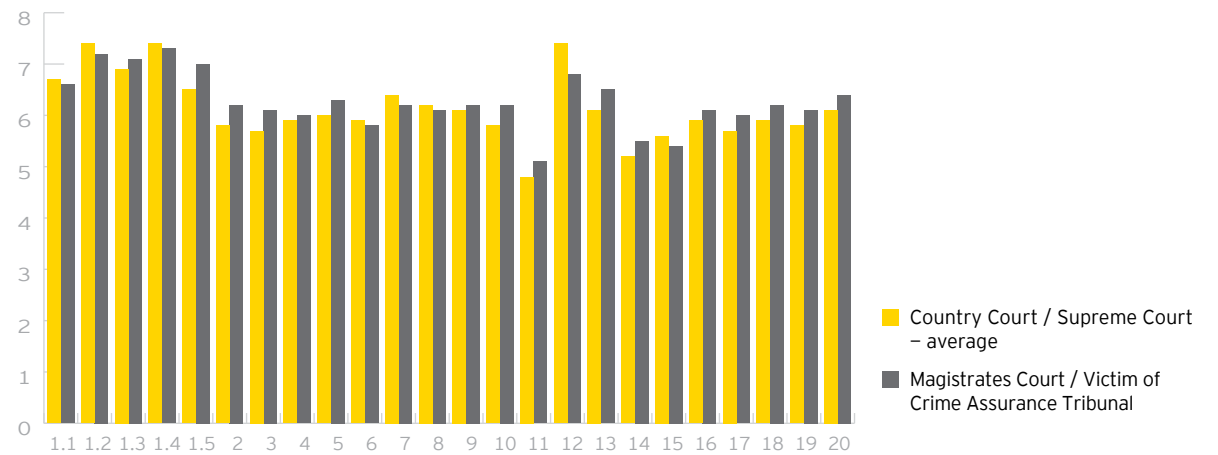
Appendix 4 – Average and Median Results by awarding Court

	1.1	1.2	1.3	1.4	1.5	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	Sample
County Court/ Supreme Court – Average	5.8	5.0	5.5	5.2	5.8	5.7	5.3	5.7	5.8	5.8	6.2	6.0	6.0	5.7	4.3	4.1	6.0	5.1	5.3	5.8	5.5	5.7	5.6	5.8	129
County Court/ Supreme Court – Median	7	5.5	6	6	7	6	6	6	7	7	7	7	7	6	4	4	7	6	6	6	6	7	6	6	
Magistrates Court/ Victims Tribunal – Average	4.4	4.3	5.3	5.0	5.3	5.1	5.0	5.1	5.4	5.2	5.5	5.3	5.7	5.6	4.3	3.8	5.8	5.1	4.7	5.6	5.4	5.6	5.6	5.6	31
Magistrates Court/ Victims Tribunal – Median	4	4	5	5	6	6	6	6	6	6	6	6.5	6.5	6	4.5	4	6	6	5	7	6	7	6	6	
Not Completed																									19
Total																									179

% respondents by awarding Court

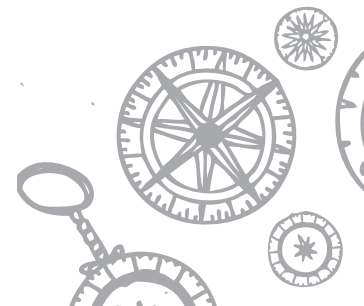


Average responses – awarding Court



Appendix 5 – Description of Sample

	2012	2009	2006	2003	2000
Total surveys sent out	1000	1000	1580	483	438
Total surveys returned	179	233	371	192	220
Percentage returned	18%	23%	23%	40%	50%



Appendix 6 – Copy of Survey Issued

Client Satisfaction Survey

In a genuine effort to understand what we have to do to provide you with quality service, we would appreciate it if you would take the time to complete this satisfaction survey.

We will use your feedback to improve our service so that it can best meet your requirements.

Please think of the service you have received and respond to all sections in the spaces provided. Your answers are totally confidential, your name is not required.

Thank you for your time and cooperation.

Please tick the relevant box

Are you a:

- Person for whom funds are held (the “beneficiary”)
- Family member carer of beneficiary
- Non-family member carer of beneficiary

Frequency of Contact with Senior Master’s Office (approximate):

- Daily
- Weekly
- Monthly
- Yearly
- Once Only
- Never

Your Trust Officer/Contact(s) at the Senior Master’s Office:

Which court were your funds awarded from?

- County Court / Supreme Court
- Magistrates Court / Victims of Crime Assistance Tribunal

All responses will be vetted independently and not provided to individual Trust Officers/Contacts.

The written response to each question listed below represents opposing viewpoints. Please tick on the scale of 1 to 8 which best describes your experience of the service that you have received from the Senior Master’s Office.

Service Levels

1. Have you had any dealings with the following services, and how would you rate their service?

Trust Section	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>	7. <input type="checkbox"/>	8. <input type="checkbox"/>
Legal Section	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>	7. <input type="checkbox"/>	8. <input type="checkbox"/>
Tax Section	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>	7. <input type="checkbox"/>	8. <input type="checkbox"/>
Investment Section	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>	7. <input type="checkbox"/>	8. <input type="checkbox"/>
Client Liaison Officer	1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>	7. <input type="checkbox"/>	8. <input type="checkbox"/>
	Not good, needs to be improved			OK, at level expected			Excellent, couldn't be better	N/A or unsure

2. How do you view the accessibility of staff and services at the Senior Master's Office?

1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>	7. <input type="checkbox"/>	8. <input type="checkbox"/>
Not good, needs to be improved			OK, at level expected			Excellent, couldn't be better	N/A or unsure

3. How do you view the range of services offered to you?

1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>	7. <input type="checkbox"/>	8. <input type="checkbox"/>
Not good, needs to be improved			OK, at level expected			Excellent, couldn't be better	N/A or unsure

4. How do you view the standards and professionalism of service that you received?

1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>	7. <input type="checkbox"/>	8. <input type="checkbox"/>
Not good, needs to be improved			OK, at level expected			Excellent, couldn't be better	N/A or unsure

5. How would you assess the overall relationship between you and the staff?

1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>	7. <input type="checkbox"/>	8. <input type="checkbox"/>
Not good, needs to be improved			OK, at level expected			Excellent, couldn't be better	N/A or unsure

6. Do you feel satisfied with the service you received?

1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>	7. <input type="checkbox"/>	8. <input type="checkbox"/>
No, not at all			Somewhat			Yes, completely	N/A or unsure

7. Were you treated with dignity and respect?

1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>	7. <input type="checkbox"/>	8. <input type="checkbox"/>
No, not at all			Somewhat			Yes, completely	N/A or unsure

8. Were your needs and wishes listened to in a sensitive manner?

1. <input type="checkbox"/>	2. <input type="checkbox"/>	3. <input type="checkbox"/>	4. <input type="checkbox"/>	5. <input type="checkbox"/>	6. <input type="checkbox"/>	7. <input type="checkbox"/>	8. <input type="checkbox"/>
No, not at all			Somewhat			Yes, completely	N/A or unsure

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