
**PALS INTERPRETATION SERVICES
EVALUATION SURVEY**

CLIENT'S ASSIGNMT #: _____
INTERVIEWER NAME: _____
INTERVIEW LANGUAGE: _____
DATE COMPLETED: ____/____/00

Hello, my name is _____ and I am calling for the Pacific Asian Language Services Program, also known as PALS. To improve PALS' services for you in the future, I would like to ask you a few questions about the services you received from our program. In return for your time answering these questions, you will receive a Vons grocery coupon worth \$10.

Your answers to these questions will be completely confidential, and will no way affect your use of services in the future. You will be participating in research, your participation is completely voluntary, you have the right to stop participating at any time, and you can decline to answer any question. Can you participate by answering a few short questions at this time? (IF NOT A GOOD TIME, ASK WHEN TO CALL BACK AND WRITE DATE ON **TELEPHONE LOG**)

1. CLIENT'S ETHNICITY [CIRCLE ONE NUMBER] → FOR VIETNAMESE CLIENTS, ASK WHAT ETHNICITY THEY ARE.

- CHINESE 1
- KOREAN 2
- THAI 3
- VIETNAMESE 4
- OTHER 5 → WHAT ETHNICITY? _____

2. CLIENT'S GENDER [CIRCLE ONE NUMBER]

- MALE 1
- FEMALE 2

3. First, please tell me for what medical service did you use our interpretation service on the date of _____?

4. Did you ever have a similar medical appointment prior to this one? → YES NO

a. IF YES: Did someone interpret for you at that prior appointment? → YES NO

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- b. IF YES: Who? _____
5. At any time in the past, have you ever ask the medical staff (such as a doctor or nurse) for an interpreter to be provided to you? → YES NO
6. At any time in the past, did a medical staff (such as a doctor or nurse) ever ask you to bring an interpreter with you? → YES NO
- a. IF YES: Where or what facility? _____
7. Have you ever used another interpretation service besides PALS? → YES NO
- a. IF YES: What service? _____
8. How did you learn about PALS' interpretation service?
- _____
9. Why did you decide to use PALS' interpretation service this time?
- _____
- _____

Now I'd like to ask you some questions about the services you received from PALS. Please remember that your answers are confidential, that your name is not being written down anywhere on this survey, and that your answers will not be shared with any individual interpreter. Please feel free to give me your true and honest feelings about PALS' interpretation services.

10. First, I would like to know what you thought about the most recent interpretation service you received from PALS. Please tell me if you believe the following statements are true, false, or not applicable.

	TRUE	FALSE	N/A
a. The interpreter came to the appointment on time.	1	2	7
b. The interpreter looked professional.	1	2	7
c. The interpreter interpreted everything I said to the provider.	1	2	7
d. The interpreter interpreted everything the provider said back to me.			
e. The interpreter helped me to schedule another	1	2	7

appointment.

	TRUE	FALSE	N/A
f. The interpreter went with me to other clinic departments.	1	2	7
g. The interpreter stayed with me for as long as I needed.	1	2	7

11. Now I would like to know what effect you believe the interpretation service had on your medical care. Please tell me if you strongly agree, agree, disagree, or strongly disagree with each of the following statements.

	STRONGLY AGREE	AGREE	DIS-AGREE	STRONGLY DISAGREE	N/A	DK
a. The interpreter helped me to <u>better</u> understand what the medical staff were saying.	1	2	3	4	7	8
b. If PALS had not provided an interpreter, I would have had to find someone else to interpret for me.	1	2	3	4	7	8
c. If PALS had not provided an interpreter, I would have gone to my appointment anyway.	1	2	3	4	7	8
d. If I didn't have an interpreter, I probably would have cancelled my appointment and rescheduled for another time when an interpreter is available.	1	2	3	4	7	8
e. The interpreter helped me to better understand the medication I need to take.	1	2	3	4	7	8
f. If I didn't have an interpreter, I would probably not have gone for any of my medical services.	1	2	3	4	7	8
g. With an interpreter present, the medical staff spent more time listening to me and my concerns.	1	2	3	4	7	8
h. With an interpreter present, I was able to express my concerns and ask questions easier.	1	2	3	4	7	8
i. I will use an interpreter for any follow-up medical services.	1	2	3	4	7	8

12. Do you think the interpreting service helped to improve your health in any way? YES
NO

a. IF YES: How? _____

13. Would you recommend the PALS interpretation service to anyone else?→ YES
NO

14. Is there anything else you would like to tell me to help improve the services we provide to you in the future?

Thank you for you participation. If you have any questions about this survey, you can call Dr. Sora Tanjasiri at the University of California Irvine. Her number is (949)824-7422. You can also call the University of California's Office of Research Administration at (949)824-6068.

As part of our thank you to you, I would like to send you a \$10 grocery coupon. Would you like to receive this coupon? Where would you like me to send this coupon? (WRITE NAME AND ADDRESS ON THE **COUPON LOG**.)

PLEASE NOTE:

EVERY WEEK, PLEASE FAX YOUR COMPLETED TELEPHONE LOG AND COUPON LOG TO SORA TANJASIRI AT (949)654-1255.

EVERY 5-6 SURVEYS, PLEASE MAIL YOUR COMPLETED SURVEYS IN A LARGE MANILA ENVELOPE TO SORA AT: 10 Wickland, Irvine, CA 92620

**PALS Interpretation Services Evaluation
Evaluation Telephone Log**

CLIENT'S NAME	ASSIGNMT#	VISIT DATE	TELEPHONE #	FIRST CALL		SECOND CALL		THIRD CALL	
				DATE	OUTCOME*	DATE	OUTCOME*	DATE	OUTCOME*
1.									
2.									
3.									
4.									
5.									
6.									
7.									
8.									
9.									
10.									
11.									
12.									
13.									
14.									
15.									
16.									
17.									

* Outcomes: Wrong number, No answer, Left message, Call back (write new date in next column), Refused, Not Completed, Completed