

## QUALITY OF SERVICE SURVEY TAXI PASSENGERS WITH DISABILITIES

The Victorian Equal Opportunity and Human Rights Commission is undertaking research into the experiences of people with disability using taxi services in Victoria. Market Solutions is conducting this survey on behalf of the Commission.

The survey examines a range of issues relating to the quality of taxi services. It is a follow up to a similar survey we conducted in 2006. That research informed the Commission's report *'Time to Respond'* which made recommendations to government and the taxi industry about how to improve taxi services.

Three years on we are very keen to find out if things are getting better (or worse) on the ground. We are interested in learning about your experiences using taxis over the past 6 months.

### How to complete the survey

- Online at [www.humanrightscommission.vic.gov.au](http://www.humanrightscommission.vic.gov.au). (If you choose this option you do not need to send or email your form).
- If you have received the survey electronically - complete and save the word version and email it to:  
[contact@marketsolutions.com.au](mailto:contact@marketsolutions.com.au)
- Or print the PDF or word version, complete and mail to Market Solutions at:  

Market Solutions  
Replied Paid 70353  
Moonee Ponds Vic 3039
- Or fax to Benjamin Ognjanov at Market Solutions on 9372 8411

- By telephone – please contact Liesl Oliver on 9032 3435. If you require an interpreter please call 1300 152 494 (or TTY 1300 289 621).

**Please note that the closing date for the survey is Friday 26 February 2010.**

### **How the information will be kept and used**

The information you provide will be managed in accordance with the Privacy Information Act 2000. Your answers will be combined with those of all survey participants and no individual responses will be identified. No names or addresses are required.

The information gathered will be used to guide improvements to the taxi industry. In particular, results will be included in a progress report on *Time to Respond*, due for release in June 2010.

If you require more copies of the survey, large font version, or a copy of this information sheet in Braille, please email [liesl.l.oliver@veohrc.vic.gov.au](mailto:liesl.l.oliver@veohrc.vic.gov.au) or telephone the Commission on 9032 3435. If you require an interpreter please call 1300 152 494, or TTY 1300 289 621.

If you have any other queries about the survey please contact Benjamin Ognjanov at Market Solutions on 9372 8400.

Thank you for your participation.

Yours faithfully



Dr Helen Szoke  
Commissioner

**HOW TO COMPLETE THIS QUESTIONNAIRE:**

Example Question 1:

Q.1. Which of the following best describes today's weather?  
 (Choose one only)

Sunny	1
Partly cloudy	2
Overcast	3
Raining	4
Thunderstorm	5

**Example Question 2**

Q.2. Do you have any particular difficulties with any of the following?

	YES	NO	N/A	Specify the nature of the difficulty
a) Using a computer	1	2	3	
b) Playing piano	1	2	3	<i>I have difficulty in seeing the notes</i>

## SECTION 1: USE OF THE TAXI SERVICE

Q.1. Thinking about the past 6 months, how often do you catch taxis?

(Choose one only)

More than 5 times per week	1
3 to 5 times per week	2
Once or twice a week	3
Once or twice a month	4
Less than once or twice a month	5

Q.2. If you were not using a taxi, what other form of transport would you use? (Choose one only)

Train	1
Tram	2
Public bus	3
Community transport (E.g. Bus)	4
You would drive	5
Friend/family member would drive you	6
I have no other form of transport	7
Other (Specify below)	8

Specify 'other':

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Q.3. Do you usually use taxis in...? (Choose one only)

Melbourne metropolitan area	1
Regional city (E.g. Geelong, Ballarat or Bendigo)	2
Rural town (E.g. Healesville or Moe)	3
Rural area (not in a town)	4

## SECTION 2: ACCESS TO THE TAXI SERVICE

Q.4.a. Do you have any particular difficulties with any of the following?

	YES	NO	N/A	Specify the nature of the difficulty
a) Booking a taxi using the automated telephone service	1	2	3	
b) Hailing a taxi in the street	1	2	3	
c) Using a taxi with a guide, hearing or assistance dog	1	2	3	
d) Getting in and out of taxis	1	2	3	

Q.4.b. Do you have any particular difficulties with any of the following?

	YES	NO	N/A	Specify the nature of the difficulty
e) Transferring from a wheelchair or scooter to a seat in the taxi	1	2	3	
f) Securing your wheelchair or scooter in the taxi	1	2	3	
g) Communicating with the driver	1	2	3	
h) Your physical comfort in the vehicle	1	2	3	
i) Feeling safe during the journey	1	2	3	

Q.4.c. Do you have any particular difficulties with any of the following?

	YES	NO	N/A	Specify the nature of the difficulty
j) Having the driver refer to the street directory when locating your destination	1	2	3	
k) Handling various payment methods	1	2	3	
l) Signing your name	1	2	3	
m) How long you need to wait for a taxi to arrive	1	2	3	
n) Other – Please Specify:  _____	1	2	3	



Q.5. Thinking about the past 6 months, how would you rate taxi drivers' response to the needs of people with disabilities?

Excellent	1
Very Good	2
Good	3
Fair	4
Poor	5

Q.6. Why did you rate drivers' response to the needs of people with disabilities in this way? Please use specific examples.

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Q.7. Thinking about the past 6 months, please describe the last time that you received **good service** from a taxi driver and explain what made it particularly memorable for you.

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Q.8. Thinking about the past 6 months, please describe the last time that you received **poor service** from a taxi driver and explain what made it particularly memorable for you.

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Q.9. Other than aspects which you have already mentioned in this questionnaire, what suggestions do you have for improving the quality of the taxi service for passengers with disabilities?

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**SECTION 3: DEMOGRAPHICS**

These are just some questions to help us analyse all the responses.

Q.10. Are you a member of the Multi-Purpose Taxi Program (MPTP) which can give members half price taxi fares?

Yes	1
No	2
Don't know/ not sure	3

Q.11. Are you of Aboriginal or Torres Strait Islander descent?

Yes	1
No	2
Don't know/ not sure	3

Q.12. Are you from a culturally or linguistically diverse (CALD) background?

Yes	1
No	2
Prefer not to answer	3

Q.13. And do you normally speak another language other than English in your household?

		Specify other language
No (English)	1	
Yes (Specify)	2	
Prefer not to answer	3	

Q.14. Do you reside in...?  
 (Choose one only)

Melbourne metropolitan area	1
Regional city (E.g. Geelong, Ballarat or Bendigo)	2
Rural town (E.g. Healesville or Moe)	3
Rural area (not in a town)	4

Q.15. Please indicate your postcode:

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Q.16. Please indicate your gender:

Male	1
Female	2

Q.17. Which age group are you in?

Under 18 years of age	1
18 to 25 years	2
26 to 35 years	3
36 to 45 years	4
46 to 55 years	5
56 to 65 years	6
Over 65 years old	7

Q.18. Which of the following best describes your disability?  
 (Circle all that apply)

Vision	1
Hearing	2
Physical	3
Intellectual	4
Mental illness/ Psychosocial	5
Neurological (E.g. Acquired Brain Injury)	6
Other (Specify below)	7

Specify 'other':

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Thank-you for your time and input.