

Performance Evaluation & Innovation (PEI)

2020 Customer Satisfaction Survey Results



Division of Senior and Adult Services (DSAS)
Department of Health and Human Services
December 2020

Cuyahoga County
Together We Thrive

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Executive Summary

To monitor client feedback and improve customer service, the Division of Senior and Adult Services (DSAS) Performance, Evaluation, and Innovation (PEI) Unit sends customer satisfaction surveys to clients who are enrolled in DSAS programs. These surveys are mailed on a random, annual basis. Clients receiving this survey are provided a postage-paid return envelope, but no other incentive. Clients may also provide specific comments about their services and are contacted if requested. For Adult Protective Services (APS), surveys are sent to the person making the referral to APS.

Due to the COVID-19 pandemic, numerous changes were made to the distribution of surveys in 2020. They included:

- To save postage and mailing costs, and due to fewer clients being served in some programs, the number of surveys mailed dropped to 1,500 from more than 4,000 in previous years.
 - Instead of approximately 40% of all served clients receiving a survey, in 2020, this percentage dropped to approximately 25% of all served clients.
- Due to most benefit check-up events being cancelled for Information Services staff and due to changes in case management activities, all clients served by the Information and Outreach Unit received the same survey based solely on their direct interaction with the case worker.
- The surveys for the Community Social Services program underwent the most dramatic changes that included:
 - The surveys focused on how clients adapted to their center being closed and not necessarily their satisfaction with programs and services.
 - Questions were asked about their ability to access technology; how they received services that they normally received through their center; and their concerns about returning to the center.
 - **Results from these respondents showed a strong need for services provided by community centers and a willingness to return once centers were able to re-open.**
- An overall score is provided for questions asked about satisfaction on a scale of 1 to 5, with 1 being “strongly disagree” and 5 being “strongly agree”. Questions in that calculation are marked with an “*”.

Key data highlights:

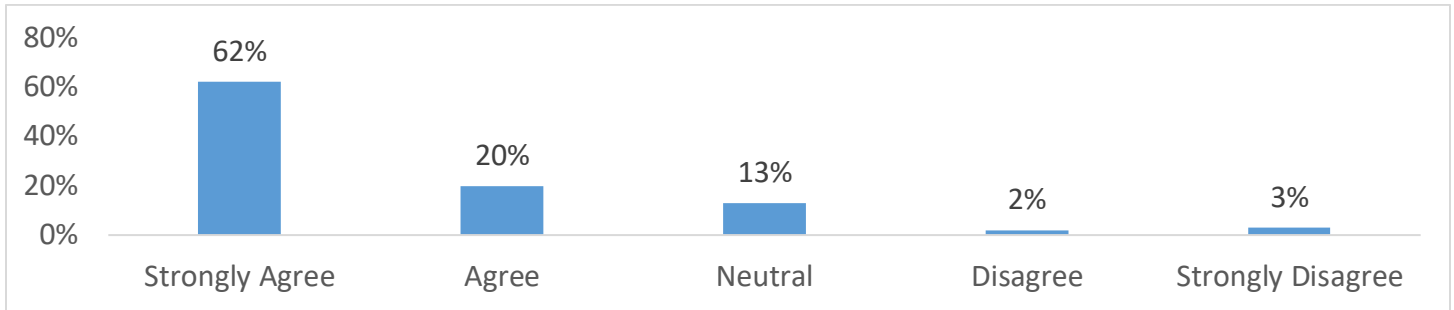
- In 2020, DSAS mailed 1,500 surveys. Sixty-eight were returned due to incorrect addresses and 404 were returned completed, a response rate of 28%. This is a decrease from 32% from 2019 which was not unexpected due to COVID-19.
- **Centralized Intake**
 - 87% of respondents indicated their call was answered promptly
- **Adult Protective Services**
 - 76% of respondents indicated the caseworker was professional
- **Home Support**
 - 100% of respondents indicated “strongly agree” or “agree” to the question “I am satisfied with the overall quality of services provided by Home Support”
- **Options for Independent Living**
 - 100% of respondents indicated the services that they receive through Options helps them to live independently
- **Information Services**
 - 84% of respondents indicated they better knew how to get benefits
- **Community Social Services Program**
 - 29% of respondents indicated they “strongly disagreed” with the statement, “I have enough and sufficient technology to participate in online/internet activities; Only 40% indicated “strongly agree” or “agree” *For this question, there was minimal difference between urban and suburban center locations.*

The two major areas of concern for all programs indicated in the surveys are a need for better follow-up about services requested or applications submitted, and a need for additional services (including more services offered by the DSAS program such as the need for more home-delivered meals, or services not offered through DSAS.) These comments have been a consistent theme for the last five years.

Findings

Centralized Intake Unit (56 surveys received; response rate of 20%) - Overall score of 4.4

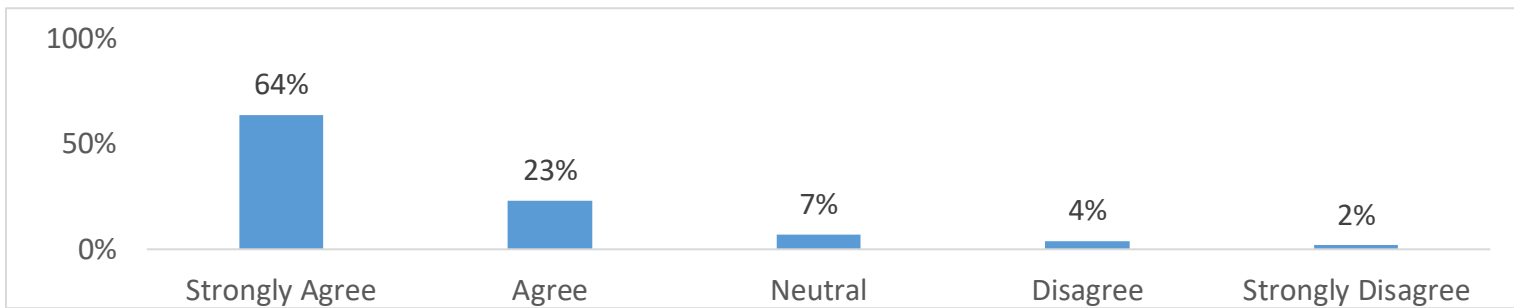
I am satisfied with the overall quality of services provided by the Centralized Intake Unit*



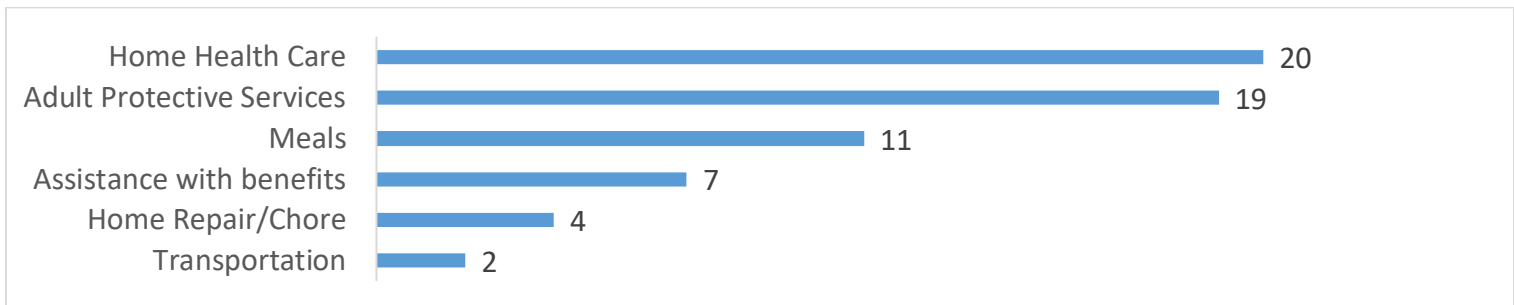
How did you find out about Centralized Intake?

- 40% of respondents indicated through a social worker; 31% through word of mouth; 13% through website

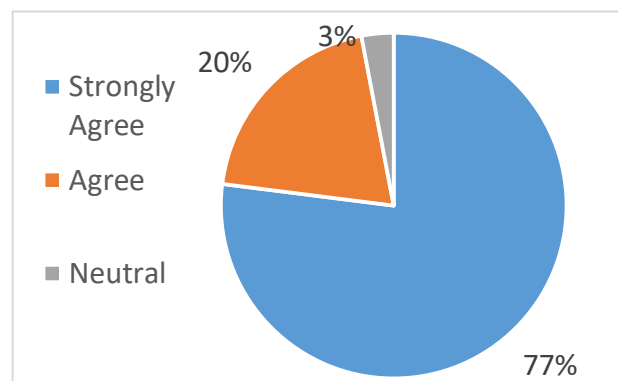
My call was answered promptly*



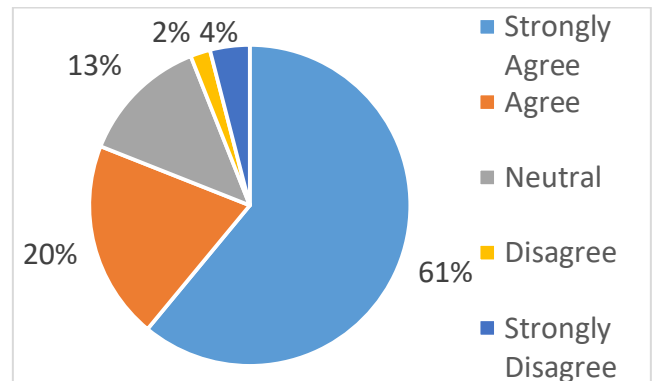
What was your reason for contacting the Centralized Intake Unit?



Staff was professional and polite*

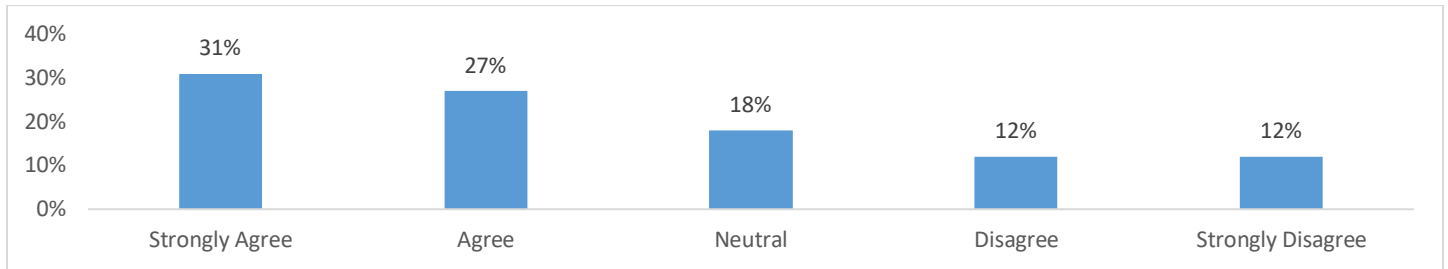


I received the assistance I needed*



Adult Protective Services (APS) (33 surveys received; response rate of 12%-survey mailed to individual who made the APS referral) - Overall score of 3.6

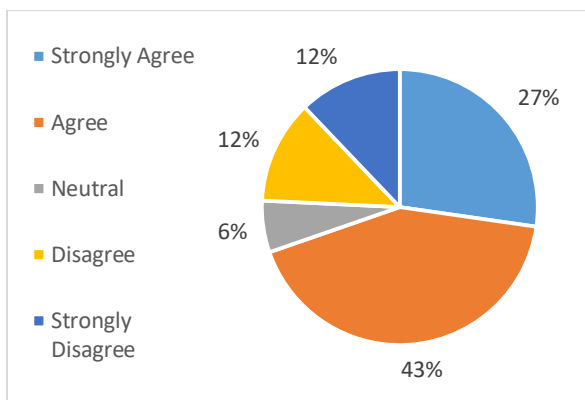
I am satisfied with the overall quality of services provided by Adult Protective Services*



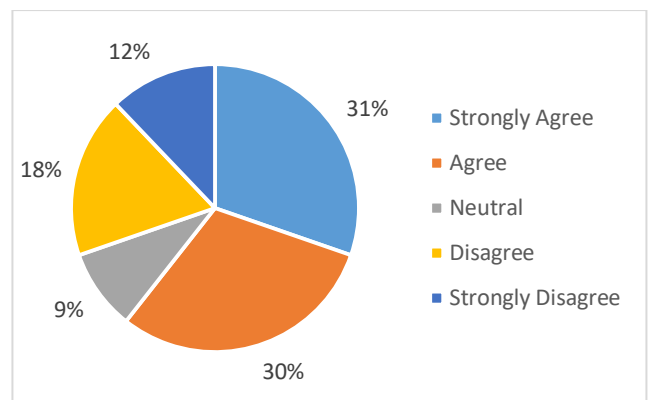
- Most respondents indicated they found out about APS through a professional association; 33 total responses; Professional Association indicated by 15 responses; 5 indicated a training/workshop; 4 through the County/DSAS website
- Relationship to client: Relative (10); Medical Professional (9); Social worker (7); Public Safety (5)
- 45% of respondents indicated that this was their first referral to APS; 24% indicated they have made 5 or more referrals.

Satisfaction with procedures and process*

The procedures in the investigation were explained

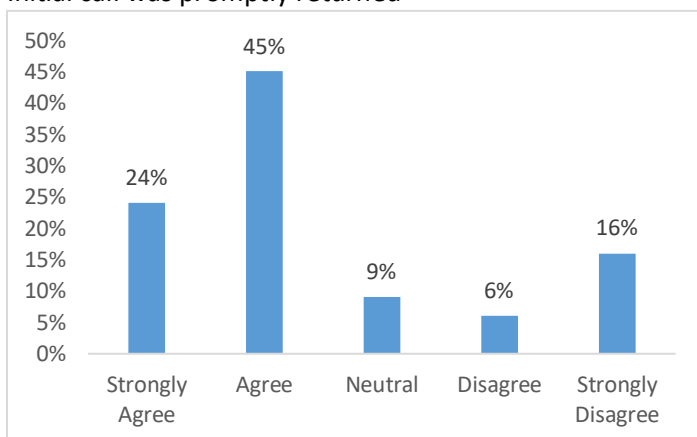


I was satisfied with the overall investigation process

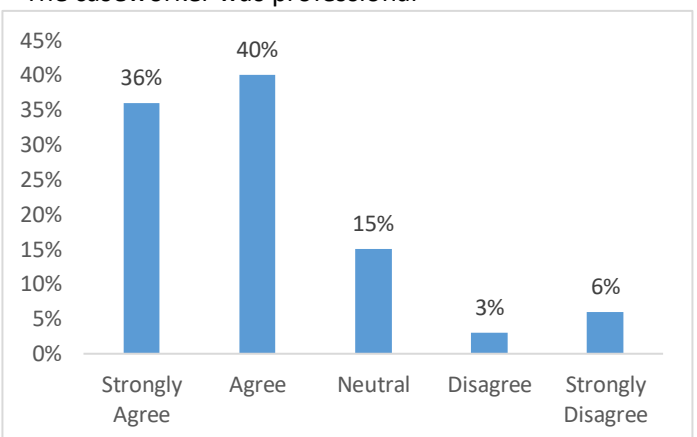


Contact with case worker*

Initial call was promptly returned

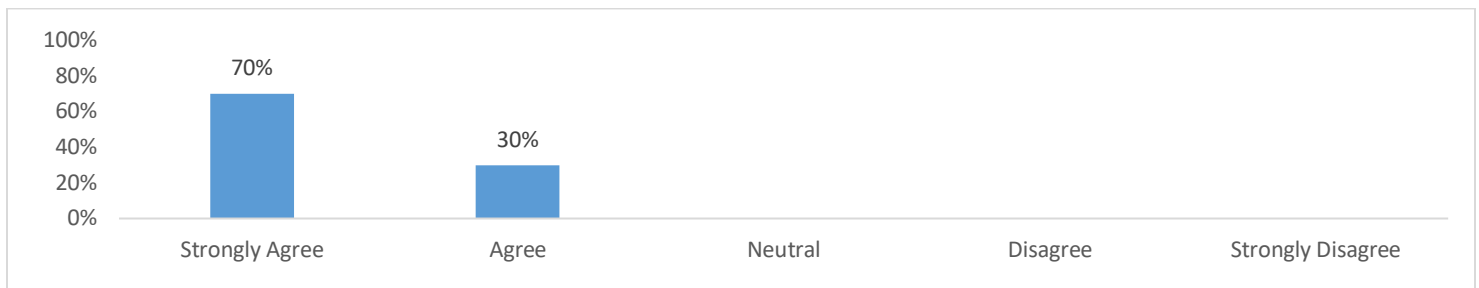


The caseworker was professional



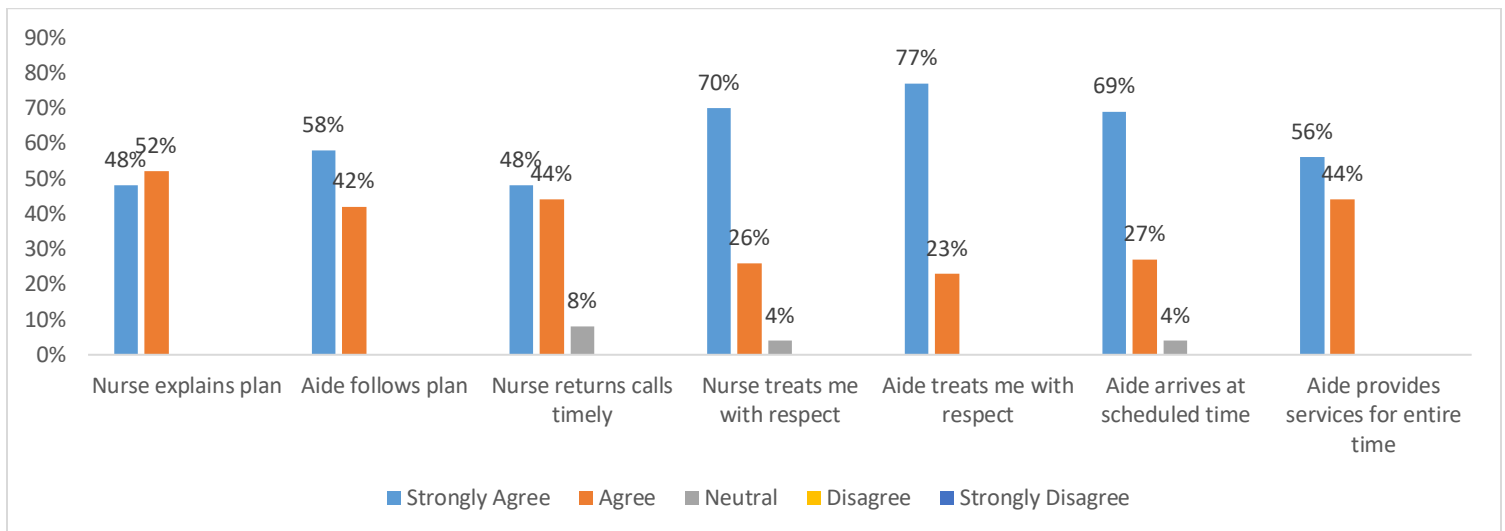
Home Support Services (27 surveys received; response rate of 41%) - Overall score of 4.6

I am satisfied with the overall quality of services provided by Home Support*

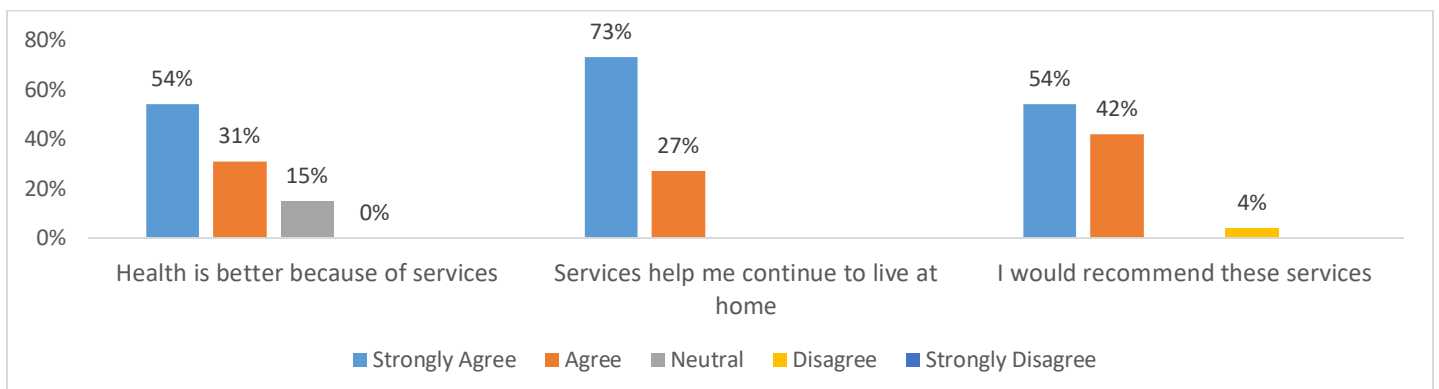


- Clients found out about Home Support through the following ways: Social worker (14); Medical professional (8); Word of mouth (5)
- 66% are in receipt of Social Security; 28%; Food Assistance; 19% Energy Assistance; 9% Medicaid
- In the last year, 36% of respondents indicated an emergency room visit; 31% indicated an overnight hospital stay; 12% indicated a nursing home stay
- 92% of respondents strongly agreed or agreed that a fill-in aide is offered if needed*
- 96% of respondents strongly agreed or agreed that the scheduling staff is courteous and helpful*

Services provided by Nurses and Home Health Aides*

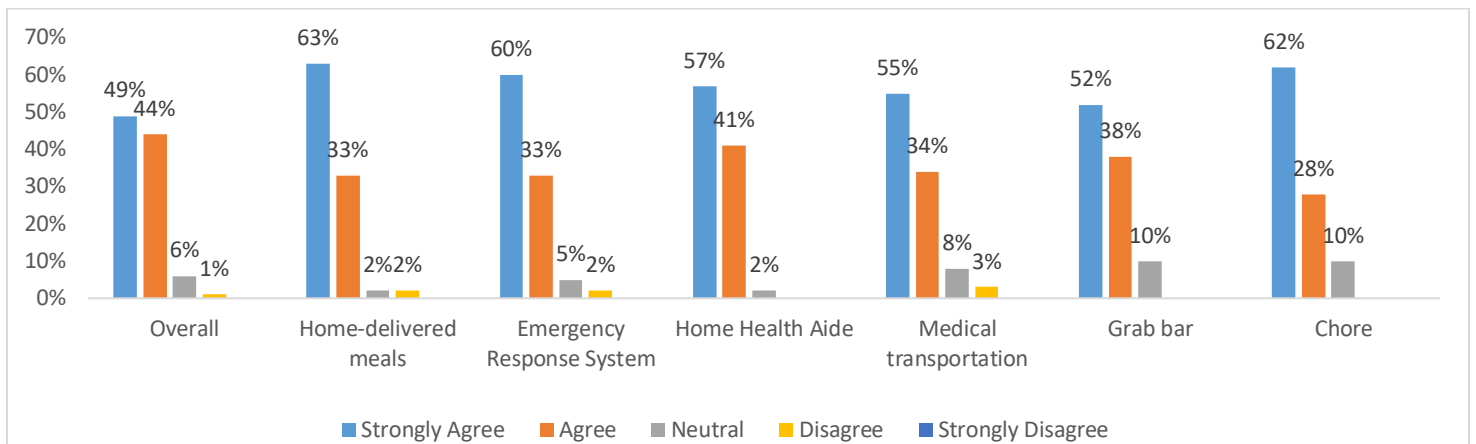


Overall Health and Well-Being*



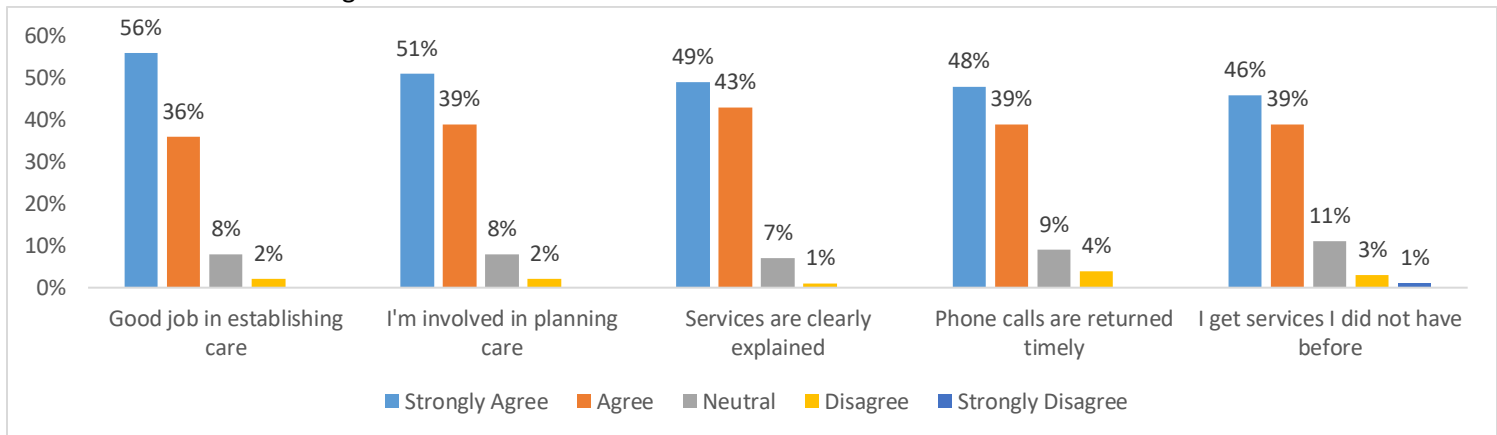
Options for Independent Living (90 surveys received; response rate of 46%) - Overall score of 4.4

I am satisfied with the overall quality of services provided by Options for Independent Living*

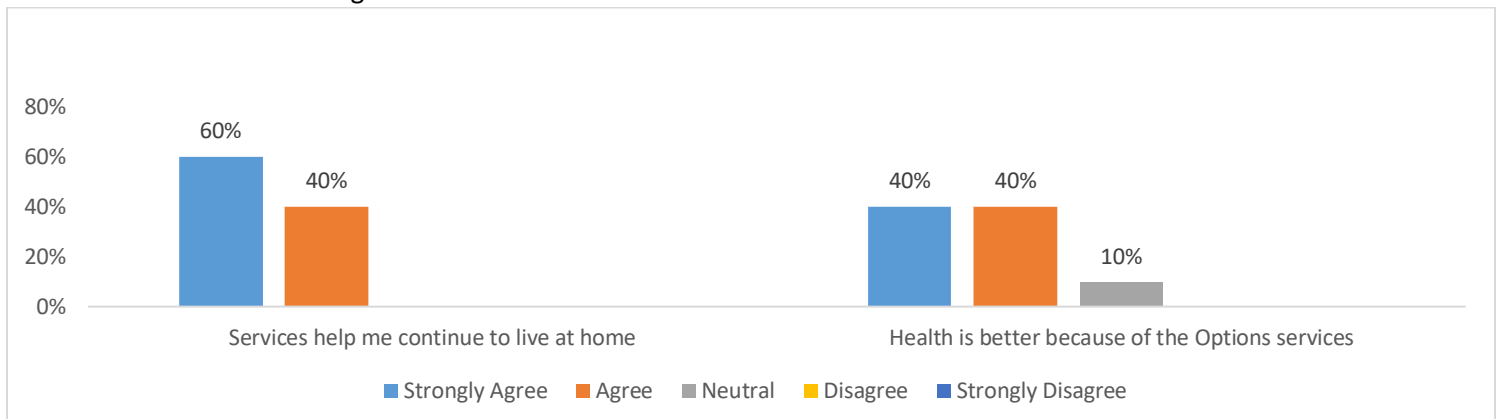


- Clients found out about Options for Independent Living through the following ways: Social worker (46); Word of mouth (30); Medical professional (10)
- 73% of respondents are in receipt of Social Security; 43% Food Assistance; 41% Medicaid; 29% Housing Assistance; 21% Energy Assistance; (respondents may indicate more than 1 response)
- In the last year, 45% of respondents indicated an emergency room visit; 29% indicated an overnight hospital stay; 5% indicated a nursing home stay

Satisfaction with Case Manager*

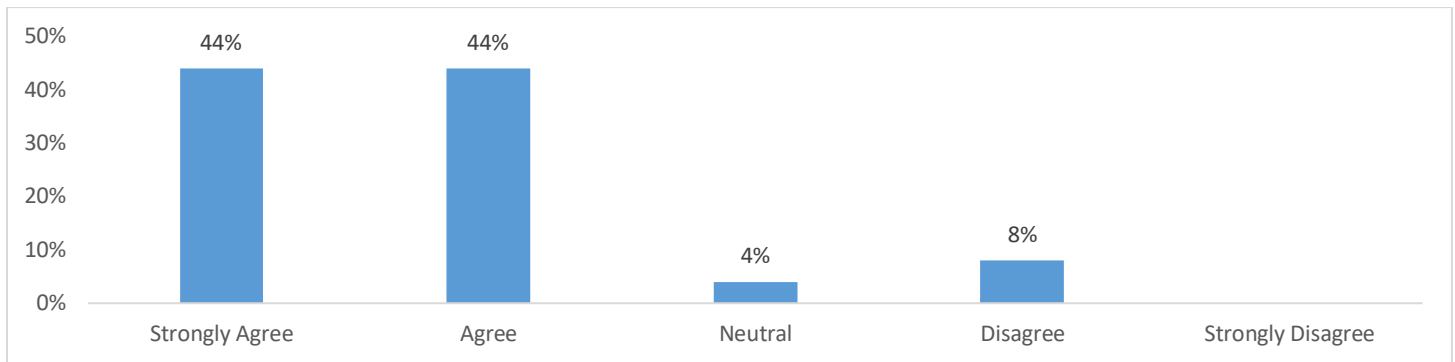


Overall Health and Well-Being*



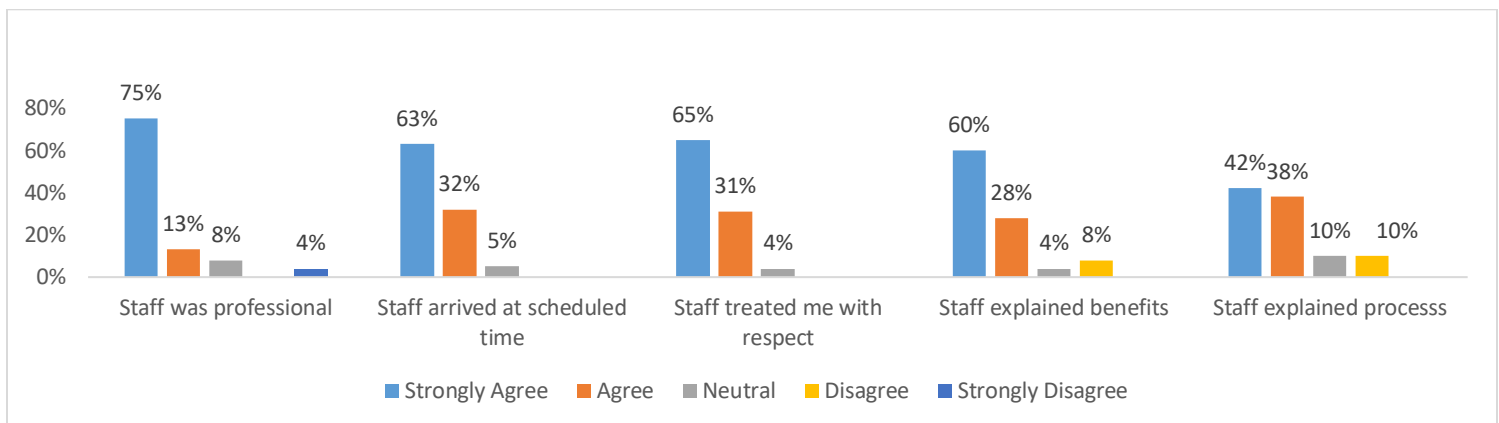
Information Services Unit Aging and Disability Resource Center (ADRC)- 28 surveys received; response rate of 19%) - Overall score of 4.3

I am satisfied with the overall quality of services provided by the Information Services Unit*

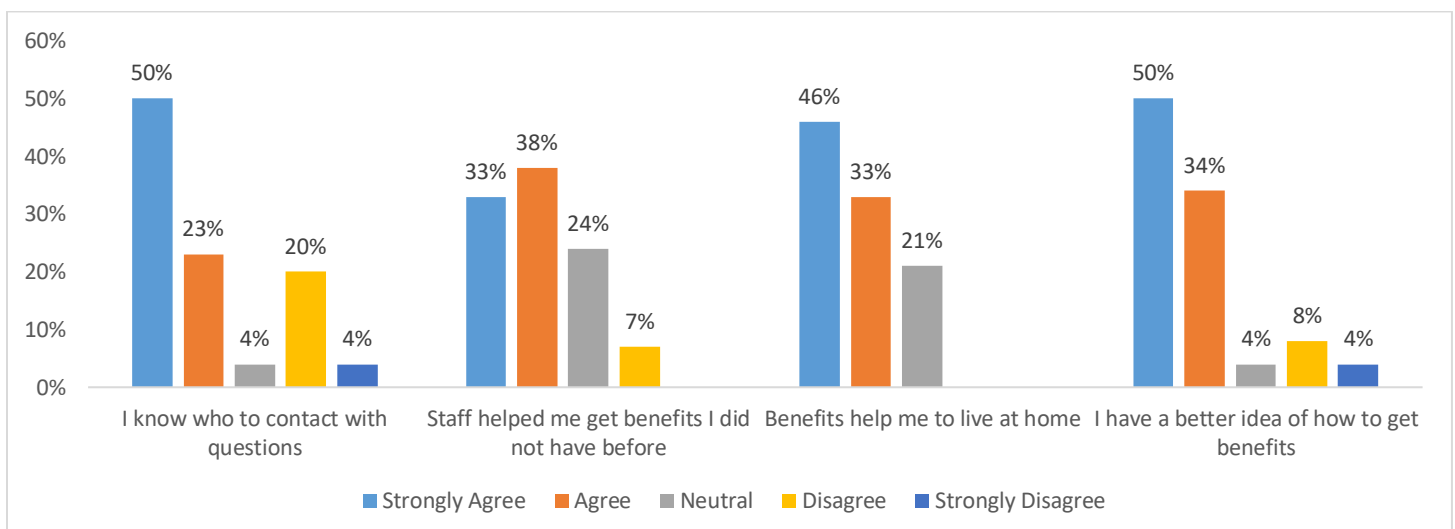


- Clients found out about services provided through the Information Services Unit: Community organization (13); Family (5); United Way 211 (2); Friend/neighbor (2)
- 52% of respondents indicated they qualified for the benefit for which they applied; 28% did not qualify; and 20% had their application pending

Satisfaction with Staff*

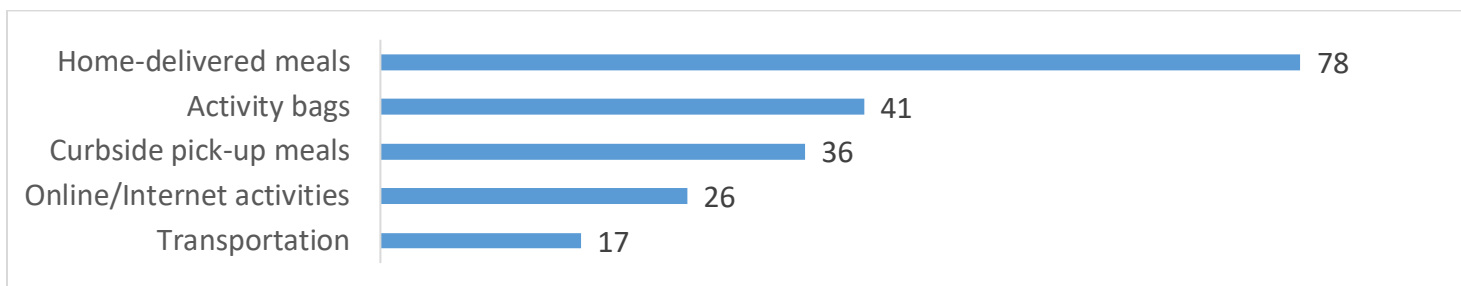


Knowledge and Satisfaction with Benefits*



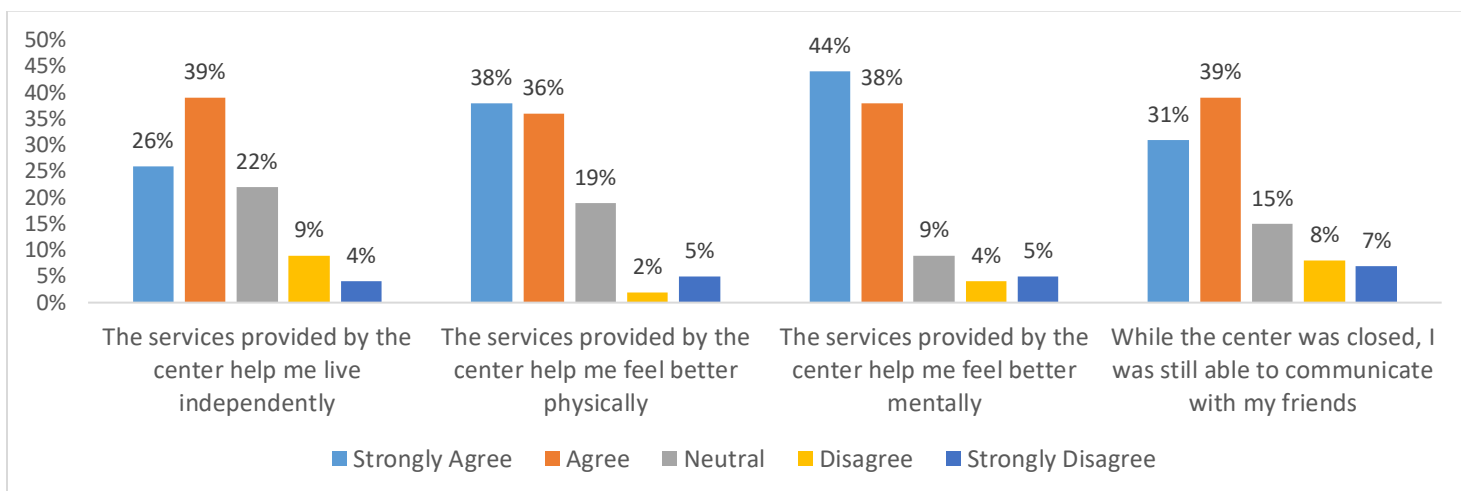
Community Social Services Program-(170 surveys received; response rate of 36%)

Services received while the center was closed:



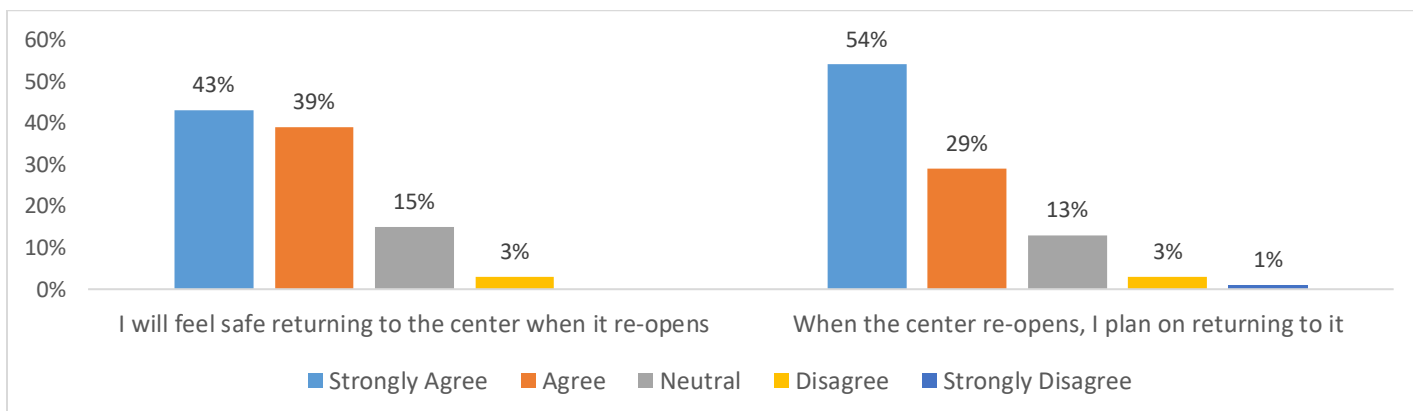
- 74% of respondents indicated “strongly agree” or “agree” to the statement “Staff at the community center contacted me when it was closed to notify me of upcoming activities and programs.”
- 58% of respondents indicated “strongly agree” or “agree” to the statement “I have felt lonelier while the community center has been closed.”

Physical and Mental Well-being



- **29% of respondents indicated they “strongly disagreed” with the statement, “I have enough and sufficient technology to participate in online/internet activities; Only 40% indicated “strongly agree” or “agree”**
 - *For this question, there was minimal difference between urban and suburban center locations*

Returning to the Center



Comments Received

Clients receiving surveys may provide comments about their services and DSAS staff member or senior center employees. In some instances, clients indicated a specific issue or complaint that was forwarded to the appropriate DSAS manager for immediate assistance. Comments received range from positive statements about the program or DSAS staff member to negative comments or problems with their services. In some instances, respondents indicated an issue getting a response to their question or concerns, or also reported needing additional services.

Examples of *positive comments* included:

- “My full compliments to the APS was worker. She is thorough, relentless, and followed through on my brother's situation. I believe he listened to her and respected her. Every profession needs more people like her. APS is lucky to have her.” (APS)
- “I was shocked with how much they did help me. Now, any questions I have, this is who I call first.” (Centralized Intake)
- “Excellent services. Prompt follow-up from assigned social worker.” (Centralized Intake)
- “I'm thankful for the help I received. It gives me an understanding of who to reach out to when I need help again.” (Information Services)
- “You provide great service. I would probably be in a nursing home without you. My aide and nurse are the best. I don't know how I would function without these services.” (Home Support)
- “I am very grateful for the help I have received” (Options)

Examples of *negative comments* included:

- “The time frame was two weeks before a call was returned. The sensitivity of the staff was lacking. I found it to be unacceptable.” (Centralized Intake)
- “There is more interest in avoiding work by the workers and they need a lot of training on aging issues.” (APS)

Examples of *poor follow-up or clients needing additional services*:

- “I never received any follow-up after the referral” (APS)
- “I need the services of a home health aide, but I don't like the idea of different people coming.” (Options)
- “Although I really appreciate what you provide, my transportation provider will not stop at the pharmacy so I can get my meds. Please can you help solve this problem?” (Home Support)

Comments about how clients handled the closure of community/senior centers:

- “Fatima is great about keeping in touch. Each day I receive a call from the staff. To me, they are family. They are very caring, and I can't wait to return to the center.”
- I was so grateful to receive the email about the free food pickup. The staff were wonderful about contact free pickup. The produce they provided lasted me a month. So grateful since I am on a fixed income and live on my own.”
- “The staff is doing a great job in spite of the difficulties. I miss going there very much.”
- “I missed using the computers at the center. I have no smart phone or home computer. Staying in touch with family became more difficult. I missed having a safe space for activities and to see people during meals.”
- “This was one of the worst times of my life with the exception my husband and two children's deaths. The apartment became a jail with nice furniture.”

Recommendations and Conclusion

Recommendation/Conclusion 1:

Senior and community centers play a vital role in providing key services to clients, and lack of technology is an issue for seniors. Many comments from the survey indicated a lack of internet and computer usage and a reliance on community centers for activities, companionship, food, and transportation. Most survey respondents indicated a willingness to return to their center once it was deemed safe to do so.

Recommendation/Conclusion 2:

In 2021, survey distribution should be expanded to prior years. Not only does the survey provide key information on the success and challenges of each DSAS program, but many clients also use the survey as an opportunity to express the need for additional services and other issues they are experiencing. In 2020, more than 50 surveys required follow-up from a case manager or unit supervisor to address an area of concern. In some instances, clients needed immediate assistance to address a financial, food or housing issues.

Recommendation/Conclusion 3:

Data from the Customer Satisfaction Survey collects data consistent with national performance measures for case management and home health services. These measures include:

- Connection to benefits that a client did not previously receive
- Overall satisfaction with programs
- Reduction in ER, hospitalization, and nursing home visits and stays
- The ability to remain living independently

In 2021, DSAS will begin reporting data from surveys on a semi-annual basis as a part of the SeniorStat initiative that tracks and monitors performance outcomes and measures.