

# 2005 Client Survey DSHS Clients Speak

## APPENDICES

April 2006  
Report 11.128A

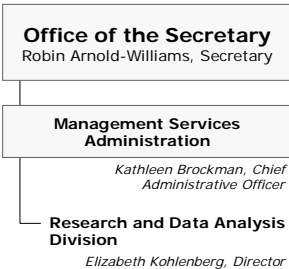


**RDA** Research & Data  
Analysis Division

# DSHS

WASHINGTON STATE  
**Department of Social  
and Health Services**

**Headquarters located at:**  
14<sup>th</sup> and Jefferson Street  
Olympia, WA 98504



## RDA

**DSHS Research and Data  
Analysis Division (RDA)**

**Director:** Elizabeth  
Kohlenberg, Ph.D.  
e-mail: [kohleer@dshs.wa.gov](mailto:kohleer@dshs.wa.gov)

14<sup>th</sup> and Jefferson Street  
PO Box 45204  
Olympia, WA 98504-5204  
360.902.0707

Order Publication:  
360.902.0701

**RDA's Online Library:**  
[www1.dshs.wa.gov/rda](http://www1.dshs.wa.gov/rda)

## Information About this Publication

**Title:** DSHS 2005 Client Survey – APPENDICES

**Abstract:** Between January and June 2005, DSHS surveyed 1,136 clients who had received services during state fiscal year 2004 (July 1, 2003 to June 30, 2004). These clients were asked about their satisfaction with DSHS services and recommendations for change. The great majority of clients expressed satisfaction with DSHS services and with their interactions with staff. Compared with previous surveys, fewer clients felt they were involved in making choices about services or that services were well-coordinated. There has been improvement in these areas, but some clients still report problems with access to services and reaching staff. Access to information continues to be an issue. The appendices to this report contain the technical information and research notes associated with the survey.

**Keywords:** DSHS, survey, client, customer, satisfaction

**Category:** DSHS issues

**Geography:** Washington State

**Research Time Period:** January 2005 through June 2005

**Publication Date:** April 2006

**Publication Number:** 11.128A

**Project Name:** DSHS Client Surveys

**Authors:** Nancy Raiha, Ph.D., Monica Stanley, B.A.

### Acknowledgments:

- DSHS clients and families
- DSHS executive management and program managers
- DSHS Deputy Secretary Liz Dunbar – project oversight
- Dynamic Language Center – administering multi-lingual surveys
- Andrea Stanley and Debbie Macy – analysis and staff support
- Hakan Axelsson and Barb Felver – Formatting and graphics
- DSHS Survey Team – John Hopper, Linda Marvel, Charles Pollock, Glen Randant, Olivia Garcia (Spanish), Natalia Filatova (Russian)

**Project Supported by:** Washington State Department of Social and Health Services Executive Leadership Team

**Cover Design by:** DSHS Research and Data Analysis Division

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DSHS . . . improves the quality of life  
for individuals and families in need in  
Washington State

DSHS currently serves  
**one in four** state  
residents



RDA . . . Brings data and analysis  
to the decision making agenda:

- Better work process
- Better decisions
- Better outcomes



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Photo: Microsoft public photo

**APPENDIX A**  
Methods, Purpose, Instrument, Response Rates and Weighting



## Methods

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### The Purpose of the Survey

The Washington State Department of Social and Health Services (DSHS) is committed to continuous quality improvement in services to its customers, the residents of Washington State. DSHS senior leadership commissioned the annual client survey in order to systematically include customer feedback into the agency's strategic planning process. This survey assesses clients' satisfaction with DSHS programs and provides recommendations for improvements that will assist agency leadership to chart a future course for DSHS.

While many individual DSHS programs have ongoing projects to measure client satisfaction and recommendations for change, this is the only DSHS-wide client survey. The measures in this survey are derived from the DSHS Balanced ScoreCard and many of them have been included in the agency's Accountability ScoreCard, the Governor's Performance Agreement, and GMAP (Government Management Accountability and Performance) reports. Beginning with the initial survey in 2001, the survey process provides baseline and repeatable measures. As the survey is repeated, change in client perceptions can be tracked across time. Additionally, open-ended questions are included in the survey to provide an opportunity for clients to communicate more specific perceptions, perceived problem areas and suggestions for improvement. This annual survey provides an avenue for client participation in program planning and evaluation.

### The Survey Instrument

A cross-department survey team led by DSHS Research and Data Analysis (RDA) Division developed the core set of survey questions for the first DSHS Client Survey in 2001. RDA staff completed an extensive review of the customer satisfaction literature and collected samples of customer satisfaction surveys from programs and regions throughout DSHS. The survey team used these reviews to identify the key attributes of client services to be addressed. The final interview consists of 21 basic questions which addressed all client satisfaction measures from the DSHS Balanced ScoreCard and all the major client satisfaction attributes identified by the team. The first 16 questions refer to specific programs. Lead-ins to the questions help clients identify what services they had received from that specific program, and the questions themselves are customized to reflect the specific program and the respondent's relationship to the client (self, parent, guardian, family member, etc.).<sup>1</sup> Thus, the final survey completed by each respondent is customized to reflect the identified client's service usage and the respondent's relationship to the client.<sup>2</sup> Clients who utilize more than one program answer the 16 basic questions several times – once for each program utilized. The final drafts of the lead-ins and questions were reviewed by DSHS leadership, each program and the survey team, and were pre-tested several times. A special effort was made to make the questions easily comprehensible.

### The Sample

RDA generated the stratified random sample using the Client Services Data Base (CSDB), which contains client service data from all DSHS programs. For each of the 9 identified client programs<sup>3</sup> listed below, RDA staff drew a random sample of all clients who received services

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<sup>1</sup> For example, Question 1 could be read to the client or their representative as: "I know what mental health services there are for me," or "I know what medical assistance services there are for my child." Certain questions are also rephrased for Children's Administration because many CA services are mandatory in nature. For example, Question 2, which usually reads, "It is easy to get help from (specific program)," is rephrased because clients from mandatory programs generally did not seek initial assistance. The customized question for CA reads: "If you need help from Child and Family Services, it is easy to get that help." Likewise, two questions about the Division of Child Support addressing client involvement were skipped because they were not applicable to this program.

<sup>2</sup> Appendix C contains a list of the standard wording for the basic 21 questions. Appendix D contains a sample survey for a hypothetical client who utilized all 8 programs. This sample script does not show all possible permutations of the survey. The script with all possibilities written out is more than 100 pages long with several versions of a question on each page.

<sup>3</sup> Some of these programs now belong to different administrations. Programs are listed as structured at the time of the survey. Clients are not selected from the caseload of the Juvenile Rehabilitation Administration (JRA). Experience has shown that a survey administered after youth are released from JRA supervision is not an effective or representative method to obtain JRA client feedback. JRA conducts surveys while youth are under their supervision. These surveys incorporate many of the client survey questions.

## Methods

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from that program during the month of June 2004. Sufficient clients were selected to reach the goal of at least 100 completed surveys from clients selected from each program area.

- Long Term Care - Home and Community and Residential Care Services Divisions, Aging and Disability Services Administration
- Children's Administration
- Division of Alcohol and Substance Abuse
- Division of Child Support, Economic Services Administration
- Division of Developmental Disabilities, Aging and Disability Services Administration
- Division of Vocational Rehabilitation
- Community Services Division, Economic Services Administration
- Medical Assistance Administration
- Mental Health Division

### Sampling Considerations

In the process of selecting the survey sample, certain selection rules determined who was included in the final sample:

- If a client selected in the initial samples drawn from the Mental Health Division or the Division of Alcohol and Substance Abuse was between the ages of 13 and 17 years old, that client was not included in the sample. This decision protects client confidentiality since youth between the ages of 13-17 are able to access mental health and substance abuse services without parental knowledge or consent. When clients between the ages of 13 and 17 were selected from other programs, such as Economic Services Administration or Medical Assistance Administration, these clients were included in the survey, but no questions were asked about mental health or substance abuse services.
- Only adult clients (age 18 and over) were selected in the sample from Children's Administration. As described previously, throughout the survey, parents or caretakers answered survey questions about services for children under the age of 18. The selection of adult Children's Administration clients ensured that all families receiving services from Children's Administration were included in the survey, because the Children's Administration database is organized by families and always includes co-residing parents. Survey questions regarding Children's Administration inquired about services for all family members. This sampling plan helped to decrease the number of times we selected a child client, only to find out that the responsible adult was an ineligible foster parent or state employee. In some cases, children who were selected as part of the survey sample from other program areas (for example, the Division of Developmental Disabilities or Medical Assistance Administration) also had received services from Children's Administration. In those cases, the responsible adult was asked about all DSHS services the selected child received, including services from Children's Administration.
- Clients were drawn from Children's Administration only if the family received one or more of the following services: Child Protective Services, Division of Licensing Resources Child Protective Services, Family Reconciliation Services, Home-Based Services or Foster Care Services.
- Clients for the Division of Child Support sample were drawn from among custodial parents (parents claiming child support because they have custody of children).



## Methods

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### Eligibility Factors

Certain groups of clients were deemed to be ineligible for the client survey due to a high probability of being unable to respond to the survey or of being extremely difficult to reach. Clients were excluded from the survey whenever it was discovered that a client belonged to an excluded group. A few were identified during the sampling process; many more were identified during the process of finding phone numbers; and still more were identified when they were contacted by the interviewers. Clients were deemed ineligible for the survey under the following conditions:

- The client lives in a nursing facility (Clients residing in adult family homes and boarding homes were included in the survey.)
- The client is receiving long-term hospitalization, this includes state mental hospitals
- The client is physically or cognitively unable to complete the survey, and no guardian, family member or other person who handles their affairs was available
- The client is out of the country
- The client is a member of the military and currently deployed
- The client is incarcerated in a jail, prison or JRA institution
- The client is currently in an inpatient drug or alcohol detoxification program
- The client is homeless and could not be contacted through any means listed in DSHS records
- The responsible adult answering for a child client is a foster parent or state employee<sup>4</sup>
- The only possible respondent for a client is a DSHS provider
- The DSHS program has no record of the client, although the client appeared in the database sample from said program
- Case management services only – no actual contact with the program
- The client has a confidential address
- The client is deceased

### Interview Methods

Telephone interviews began in January 2005 and ended on June 30, 2005. If necessary, more than 20 attempts were made to contact each member of the sample. Before the interviews, DSHS-RDA sent all sample members a prior notification letter that (a) informed the client that an interviewer would be calling, (b) assured the client that all survey data would be confidential and not personally identifiable, (c) emphasized that the interview would be voluntary and would not affect the client's status or benefits in any way, (d) told the client that all respondents who completed the survey would be entered in a random drawing to win one of nine \$250 grocery certificates and (e) provided a toll-free number to call to decline participation in the study. Clients or their representatives were afforded an opportunity to send or call in their correct address and phone number and to request survey administration in a language other than English. If the client was a child (under 18 years of age) or an adult incapable of completing the interview accurately (due to cognitive or physical disabilities), then letters (and subsequent phone calls) were made to the person who acts as decision-maker for the client and/or interacts with DSHS on the client's behalf.

Interviews were conducted using a variation of the model script shown in Appendix D, tailored to the specific client's circumstances and pattern of DSHS service use. The length of the typical interview varied from 10 to 40 minutes, depending on the number of DSHS services utilized by the client. The interviews started with assuring the respondent of confidentiality and the voluntary nature of the survey, and informing the respondent that he or she may choose not to answer any question and may stop at any time. The interviewer then asked how strongly the respondent agreed or disagreed with statements about the accessibility of programs and services, about interactions with program staff, about involvement in decisions about services, and about overall satisfaction with and quality of programs and services.

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<sup>4</sup> Other DSHS client surveys address the issues of foster parents and state employees.

## Methods

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All English language interviews were conducted from the Research and Data Analysis office in Olympia, using the Computer-Assisted Telephone Interviewing (CATI) system. The CATI system displays survey questions on a computer monitor from which the interviewer can read the question to the respondent and then enter the response directly into the CATI database for storage on the server computer. Interviews in other languages were conducted using a written script customized to the specific respondent. These completed hard-copy interviews were then entered into the CATI.

### Response Rate

The overall cooperation rate for the survey was 94% and the completion rate was 83%.<sup>5</sup> These response rates are extraordinarily high for any survey, but are especially remarkable for a survey involving the particularly challenging population of DSHS clients. The main difficulties encountered in locating clients and completing interviews were the following:

- Many DSHS clients are transient and do not maintain a permanent residence. This is particularly true for young adult clients (18 to 21 years old) who have recently been released from foster care or substance abuse programs.
- Like many other Americans, many DSHS clients block non-personal calls, screen their calls through answering machines, or use cell phones instead of residential phones.
- Most DSHS clients are low income, and a number do not have home phones. (Unlike most telephone surveys, this survey included selected respondents without residential telephones in the sample and response rate calculations.)
- A number of the elderly clients receiving Aging and Disability Services were too tired to complete the survey, or found listening and responding too demanding.
- Some substance abuse clients found the survey difficult to comprehend, or did not wish to comment on their experiences.

Surveyors employed a number of measures to dramatically increase response rates.

- Skilled staff. All English language interviews were conducted by highly experienced interviewers who were chosen not only for their experience, but also because they were retired DSHS employees who had spent many years locating DSHS clients as part of Quality Assurance investigations. These interviewers were highly skilled at using DSHS records, the Internet and other public sources to find a client's current address and phone number. These interviewers located phone numbers for foreign language interviews before the translators conducted the interviews.
- Advance notice. Before clients were contacted by phone, they received a letter explaining the survey, stressing the importance of this opportunity to provide feedback, and assuring them of confidentiality. The letter also gave them an opportunity to send in updated phone numbers and addresses.
- Incentives. All clients who completed the survey were entered in a drawing for \$250 grocery certificates. They were informed of this opportunity in the initial letter and at the time of the interview.
- Multiple Attempts. Interviewers attempted to reach clients at many different times, and made 20 or more attempts to reach each client. If an answering machine was reached, interviewers left a message asking the client or representative to call them at a toll-free number.

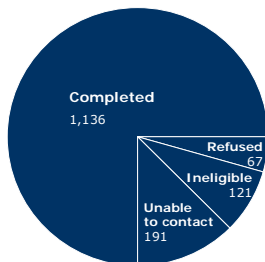
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<sup>5</sup> The cooperation rate is the ratio of the number of completed interviews to the number of eligible respondents who were actually contacted. The completion rate is the ratio of the number of completed interviews to the total number of potential respondents who are deemed eligible to complete the interview. See Appendix B for computation tables for the overall cooperation rate and completion rates for each program.

## Methods

- Alternate contact methods. Clients were given a toll-free number so that they could call in and complete the survey. Interviewers also worked with caseworkers, relatives and neighbors to make arrangements to administer the survey to clients at convenient times and locations. These strategies were particularly useful for clients who did not have a home phone.
- Languages. If selected clients spoke languages other than English, DSHS bilingual staff or translators from Dynamic Language Services administered the telephone survey. The survey was administered in 16 languages: English, Spanish, Russian, Bosnian, Korean, Mandarin Chinese, Cantonese Chinese, Vietnamese, Cambodian, Cebuano, Farsi, Japanese, Laotian, Punjabi, Somali, and Ukranian.

How clients responded  
TOTAL = 1,515



### RESPONDENTS

The chart at left shows the disposition of all those clients selected for the survey. In order to meet the goal of 100 completed surveys for each of the nine different programs, 1,515 clients were randomly selected as the survey sample. Of those, 1,136 people completed the telephone survey. A relatively small number, 191 of the selected clients, could not be reached. Of those who could be reached, 67 refused to complete the survey. Also, 121 of the selected people were found to be ineligible for the survey.

### Analysis and Weighting

Survey data were analyzed using ACCESS, SPSS, SAS and SUDAAN software. In order to obtain DSHS-wide results, clients' responses were weighted according to each client's service profile (the specific combination of services that the client used), so that the final weighted sample reflects the service usage of all DSHS clients.<sup>6</sup> The weighting table is displayed in Appendix E.

An additional type of weighting was utilized when answers to program-specific questions were combined to give an "All Program" response. When a client utilized multiple programs, he or she might answer the same question differently for each program utilized. For example, a client might strongly agree that it is easy to get Economic Services, but disagree that it is easy to get Mental Health Services. These answers are combined in this department-wide report, resulting in the following accounting for the client in this example: ½ of a client strongly agreed that "It is easy to get services from my program," while ½ of a client disagreed with the same statement.

<sup>6</sup> For example, 2.7% of all DSHS clients get services from this combination of programs: Economic Services, Medical Assistance, and Mental Health. For DSHS-wide analyses, the 50 responses from people who used this combination of programs were weighted so that they comprise 2.7% of the total survey responses.





Photo: Lloyd Wolf for the U.S. Census Bureau (used with permission)

## **APPENDIX B** Cooperation and Completion Rates



Cooperation Rates and Completion Rates<sup>1</sup>

	Total	AAS	CA	DASA	DCS	DDS	ESA	MAA	MHD	VR
A <b>Full Interview</b>	1136	126	119	110	105	118	132	206	112	108
B <b>Refusal</b>	67	6	1	10	5	11	9	5	13	7
C <b>Subtotal: Found Eligible (A + B)</b>	1203	132	120	120	110	129	141	211	125	115
D <b>Found Ineligible</b>	121	23	9	21	13	14	5	12	21	3
E <b>Subtotal: All Found (C + D)</b>	1324	155	129	141	123	143	146	223	146	118
F <i>% found ineligible (D/E)</i>	9%	15%	7%	15%	11%	10%	3%	5%	14%	3%
G <b>No Contact</b>	191	15	41	24	17	3	16	29	34	12
H <i>No Contact/Estimated to be ineligible (FxG)</i>	17	2	3	4	2	0	1	2	5	0
I <b>Subtotal: All Eligible (C+G-H)</b>	1377	145	158	140	125	132	156	238	154	127
J <b>Total in Sample (E+G)</b>	1515	170	170	165	140	146	162	252	180	130
K <b>COOPERATION RATE<sup>2</sup> (A/C)</b>	<b>94%</b>	<b>95%</b>	<b>99%</b>	<b>92%</b>	<b>95%</b>	<b>91%</b>	<b>94%</b>	<b>98%</b>	<b>90%</b>	<b>94%</b>
L <b>COMPLETION RATE<sup>3</sup> (A/I)</b>	<b>83%</b>	<b>87%</b>	<b>75%</b>	<b>78%</b>	<b>84%</b>	<b>90%</b>	<b>84%</b>	<b>86%</b>	<b>73%</b>	<b>85%</b>

<sup>1</sup> Often clients received services from several programs. For the purposes of response rate calculations, clients were categorized by the program from which the sample was drawn.

<sup>2</sup> The ratio of completed interviews to all potential respondents contacted.

<sup>3</sup> The ratio of completed interviews to the total number of potential eligible respondents. Computation assumes that the ineligible proportion of "no contacts" is equal to the ineligible portion of those that were found. The methodology is based on the definitions of response rates issued by the Council of American Survey Research Organizations (CASRO) and the American Association for Public Opinion Research (AAPOR).







Photo by Marty Lueders for the U.S. Census Bureau.

**APPENDIX C**  
Survey Questions



## Survey Questions

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The following is a standardized list of the basic questions in the survey. All questions were customized to fit the respondent's relationship to the client (self, parent, guardian, family member, etc.) The first 16 questions were customized for each program.<sup>1</sup> See Appendix D for a sample of the entire survey with sections for each client program.

1. I know what (*name of DSHS program*) services there are for me/my family.
2. It's easy to get services from (*program*).
3. It's easy to get to (*program*).
4. (*Program*) is open at times that are good for me/us.
5. (*Program*) returned my/our calls within 24 hours.
6. I/We got services as quickly as needed.
7. It was easy to get the facts I/we needed about services.
8. (*Program*) staff explained things clearly.
9. Staff treated me/us with courtesy and respect.
10. Staff listened to what I/we have to say.
11. Staff understood my/our needs.
12. I was/We were involved in making choices about services.
13. I/We helped make plans and goals about services.
14. I am satisfied with (*program*) services.
15. (*Program*) does good work.
16. Overall, (*program*) services have helped me/my family.

Two **Coordination of Services Questions** were asked only if a client was served by three or more programs:

17. DSHS makes sure all my/our services work well together.
18. Someone from DSHS helps me with services from all (3, 4, 5 or 6) programs.

An **Overall Rating** question was asked of any client who had received services from two or more DSHS programs:

19. Thinking of all programs together, DSHS has done good work.

Two **Open-ended Questions** were asked of all respondents to gain a sense of the client's experiences with DSHS services:

20. What do you like the most about dealing with DSHS?
21. What can DSHS do to improve services?

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<sup>1</sup> In addition to adding the name of the program and making wording consistent with program usage, a few questions were changed more substantively. Questions 2, 6 and 12 were rephrased for Children's Administration which often provides involuntary services. For example, Question 2 is rephrased because clients from involuntary programs generally did not seek initial assistance. The customized question for Children's Administration reads, "If you need help from Child and Family Services, it's easy to get that help." Division of Child Support clients were not asked questions 12 and 13. Appendix D shows all program-specific rephrasing.





Photo by Michelle Frankfurter for the U.S. Census Bureau

## **APPENDIX D**

### **Sample Survey for Hypothetical Client Using All Eight Programs**



## Sample Survey for Hypothetical Client Using All Nine Programs<sup>1</sup>

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Hello. May I speak to <<Client or Representative Name>>

Hello, this is <<Interviewer Name>>.

I have been asked by the Department of Social and Health Services to talk with people who have had contact with DSHS about how well DSHS serves the citizens of our state. You have received a letter explaining this survey.

The survey results will help DSHS make plans to improve services and to measure whether services improve in the future. You were randomly chosen from all people who have received services from or had contact with DSHS. Your participation is completely voluntary but is very important to us. We want to make sure the sample represents all the people who may come in contact with DSHS. Whether or not you participate in the survey will not affect any services you may receive from DSHS. All your answers will be kept in strict confidence. Please feel free to ask questions at any time. If I come to any question that you prefer not to answer, just let me know and I will skip over it.

**[If respondent is a parent, family member, guardian, or other decision-maker, say:]** You have been selected to receive this survey because you have helped deal with agencies or make decisions for \_\_\_\_\_ **[client name]**. We would like to ask about any experiences you may have had with DSHS while helping \_\_\_\_\_ **[client name]**.

**Write down the name of the person you are talking to:** \_\_\_\_\_.

**Check the relationship of this person to the client.**

- Self (the person you are talking to is the client)
- Parent of the client
- Other family member – lives in same household
- Other family member – does not live in same household
- Guardian, or other non-family Decision-Maker
- Foster Parent

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<sup>1</sup> This sample script does not include all possible permutations of the survey (for parents, guardians, family members and other representatives. Instructions to the interviewer are in bold font.

## Sample Survey for Hypothetical Client Using All Nine Programs

### DDD – Division of Developmental Disabilities (ADSA)

First/Now I'd like to ask you about DDD, the Division of Developmental Disabilities. DDD helps persons with developmental disabilities. We see that you have been helped by DDD. I'd like to ask about your experiences with DDD in the past two years.

**[If denies services from DDD or is unsure.]** *OK. Sometimes people get services and don't know the services were arranged by DDD. Let me tell you what kinds of services you might have received: You may live in a home for persons with Developmental Disabilities or someone may come to your house to help you with your daily activities. Someone may help you with your job or you may go to an activity during the day. You may have received therapies that were paid for with state money. You may have a case manager who helps you get services. Have you had any services like that in the past two years? Is it possible that these services may have been sponsored by DDD? OK. Let me ask you about your experiences with those services in the past two years.*

**[If denies any contact with DDD, mark "Denies contact." Skip the rest of DDD questions. Continue with next program or concluding questions unless DDD is the only service they received. If DDD is the only service, thank them for their help and conclude interview.]**

**Denies DDD Contact.**

For each statement, please tell me how much you agree or disagree. Your choices are: Strongly Agree; Agree; Neutral; Disagree or Strongly Disagree.

The first statement is "I know what DDD services there are for me." Do you strongly agree, agree, feel neutral, disagree or strongly disagree? **Mark Response Below.**

The next one is: "It's easy to get services from DDD." Do you strongly agree, agree, feel neutral, disagree or strongly disagree? **Mark Response Below.**

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
1. I know what DDD services there are for me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. It's easy to get services from DDD.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. It's easy to get to the DDD office.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. The DDD office is open at times that are good for me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. DDD staff returned my calls within 24 hours.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. I got services as quickly as I needed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. It was easy to get the facts I needed about services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. DDD staff explained things clearly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Staff who helped me treated me with courtesy and respect.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Staff who helped me listened to what I had to say.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Staff who helped me understood my needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. I was involved in making choices about my services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. I helped make plans and goals about services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. I am satisfied with DDD services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. DDD does good work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Overall, DDD has helped me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



## Sample Survey for Hypothetical Client Using All Nine Programs

### DVR – Division of Vocational Rehabilitation

First/Now I'd like to ask you about DVR, the Division of Vocational Rehabilitation. DVR helps people with disabilities get jobs. Have you talked to someone at DVR or received services from DVR in the past two years?

**[If denies services from DVR]** *OK. Sometimes people get services through some other agency and don't know the services came from DVR. Let me tell you what kinds of services you might have received: You might have had counseling about getting a job; help in looking for a job; an assessment of your job interests and skills; an evaluation to see what jobs you could do; job training or training in how to take care of yourself, manage money or use transportation; medical services or treatment needed for you to work; or help in getting things you need to go to work like: equipment, child-care, books, or supplies. Have you had any services like that in the past two years? Is it possible that these services may have been sponsored by DVR? OK. Let me ask you about those services.*

**[If denies any contact with DVR, mark "Denies contact." Skip the rest of DVR questions. Continue with next program or concluding questions unless DVR is the only service they received. If DVR is the only service, thank them for their help and conclude interview.]**

**Denies DVR Contact.**

I'd like to ask about your experiences with DVR in the past two years. For each statement, please tell me how much you agree or disagree. Your choices are: Strongly Agree; Agree; Neutral; Disagree or Strongly Disagree.

The first statement is "I know what DVR services there are for me." Do you strongly agree, agree, feel neutral, disagree or strongly disagree? **Mark Response below.**

The next one is: "It's easy to get services from DVR." Do you strongly agree, agree, feel neutral, disagree or strongly disagree? **Mark Response below.**

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
1. I know what DVR services there are for me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. It's easy to get services from DVR.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. It's easy to get to the DVR office.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. The DVR office is open at times that are good for me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. DVR returned my calls within 24 hours.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. I got services as quickly as I needed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. It was easy to get the facts I needed about services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. DVR staff explained things clearly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. DVR staff treated me with courtesy and respect.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. DVR staff listened to what I had to say.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. DVR staff understood my needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. I was involved in making choices about my services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. I helped make plans and goals about services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. I am satisfied with DVR services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. DVR does good work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Overall, DVR has helped me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Sample Survey for Hypothetical Client Using All Nine Programs

### ADSA – Aging and Disability Services – Home and Community and Residential Services

First/Now I'd like to ask you about Aging and Adult Services. Aging and Adult Services helps seniors and disabled adults by arranging a place for you to live or sending someone into your home to help you with personal care and medical needs. Their office is often called the Home and Community Services Office. We see that you have been helped by someone from Aging and Adult Services. I'd like to ask about your experiences with Aging and Adult Services in the past two years.

**[Read this paragraph only if denies services from AASA or is unsure]** *OK. Sometimes people get services and don't know the services were arranged by Aging and Adult Services or by Home and Community Services. Let me tell you what kinds of services you might have received: You may live in a special home for seniors or persons with disabilities. Or someone may come to your house to help you with medical needs, body care, shopping, housework or cooking. You may have a case manager who does assessments and helps you get services. Someone may have helped you fill out a Medicaid application or helped you get medical coupons for your medicines. Have you had any services like that in the past two years? Is it possible that these services may have been sponsored by Aging and Adult Services? OK. Let me ask you about your experiences with those services in the past two years.*

**[If denies any contact with AASA, mark "Denies AASA contact." Skip the rest of AASA questions. Continue with next program.]**

Denies ADSA Contact.

For each statement, please tell me how much you agree or disagree. Your choices are: Strongly Agree; Agree; Neutral; Disagree or Strongly Disagree.

The first statement is "I know what Aging and Adult services there are for me." Do you strongly agree, agree, feel neutral, disagree or strongly disagree? **Mark response below.**

The next one is: "It's easy to get services from Aging and Adult Services." Do you strongly agree, agree, feel neutral, disagree or strongly disagree? **Mark response below.**

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
1. I know what ADSA services there are for me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. It's easy to get services from DVD.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. It's easy to get to the ADSA office.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. The ADSA office is open at times that are good for me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. ADSA staff returned my calls within 24 hours.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. I got services as quickly as I needed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. It was easy to get the facts I needed about services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. ADSA staff explained things clearly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Staff who helped me treated me with courtesy and respect.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Staff who helped me listened to what I had to say.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Staff who helped me understood my needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. I was involved in making choices about my services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. I helped make plans and goals about services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. I am satisfied with ADSA services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. ADSA does good work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Overall, ADSA has helped me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Sample Survey for Hypothetical Client Using All Nine Programs

### MAA: Medical Assistance Administration

First/Now I'd like to ask you about the Medical Assistance Administration. Medical Assistance helps pay for medical services. They send you or someone in your family a green and white paper DSHS medical ID card. Some people call this card a coupon. You use this card to get medical care. A new card is sent every month.

Have you received this green and white paper medical ID card or coupon any time in the past two years?

**[Read this paragraph only if respondent says no or is unsure],** Has someone else in your family received this? Generally one card covers everyone eligible in your household. If anyone has gotten medical care paid for by the state, you probably got these cards. You might use this card to get care from a health care plan like Group Health or you might have got the card through a program like the Basic Health Plan, Healthy Options or CHIP. If you're not sure, is there someone you can ask? **If continues to deny receiving cards and denies getting medical care through a state program, mark "No Cards" and skip the MAA section. Go to ESA.**

No Cards

Have you called the 800 number on the back of the green and white medical ID card in the past two years?

No – Skip question A-C below

Yes

---

I'd like to ask your three questions about the people you talked with when you cancelled the 800 number. For each statement I read, please tell me whether you strongly agree, agree, feel neutral, disagree or strongly disagree.

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
1. Staff who helped me when I called the 800 number treated me with courtesy and respect.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. They listened to what I had to say.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. They explained things clearly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Have you used the green and white medical ID card to get medical services in the past two years?

Yes  
 No

**[If no or unsure]:** Has the state paid for any part of your medical care in the past two years? Is it possible that you used the state card or coupon to get that care?

Does anyone else in your household get medical care from the state with the medical ID card?

Yes  
 No

**[If neither the client nor any other household member has used the medical coupons to get services, skip the rest of MAA questions. Go to ESA. If MAA is the only service, thank them for their help and conclude interview.]**

I'd like to ask about these experiences with Medical Assistance in the past two years. When I ask about your medical provider I mean all doctors, nurses, dentists or other therapists who were paid by using a medical ID card or coupon. For each statement, please tell me how much you agree or disagree. Your choices are: Strongly Agree; Agree; Neutral; Disagree or Strongly Disagree.

The first statement is "I know what medical assistance services there are for my family." Do you strongly agree, agree, feel neutral, disagree or strongly disagree? Medical assistance services are all the types of medical care you can get from the state. **Record response below.**

The next one is: "It's easy to get services with our medical ID card." Do you strongly agree, agree, feel neutral, disagree or strongly disagree? **Record response below.**

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
1. I know what MAA services there are for me or my family.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. It's easy to get services with the medical ID card.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. It's easy to get to the medical providers' offices.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. The medical providers' office are open at times that are good for me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. The medical provider's staff returned my calls within 24 hours.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. I get services with the medical ID card as quickly as we needed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. It was easy to get the facts I needed about medical assistance services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Our medical providers and their staff explained things clearly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. The medical providers and their staff treated me or my family with courtesy and respect.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. The medical providers and their staff treated me or my family with courtesy and respect..	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. The medical providers and their staff understood our needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. My family and I were involved in making choices about medical care.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. My family and I helped make plans and goals with our providers about medical care.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. I am satisfied with MAA services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. MAA does good work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Overall, MAA has helped me or my family.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Sample Survey for Hypothetical Client Using All Nine Programs

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### ESA – Economic Services Administration

Now I'd like to ask you about the part of DSHS called Economic Services. Economic services sends money and food stamps from the state to individuals and families and also runs the WorkFirst program to help people getting state money find and keep jobs. When you talk to someone from Economic Services you usually call or go to a CSO, which is a Community Services Office. We see that you or someone in your family has received some state money in the past two years.

*[If denies or unsure], OK. Sometimes people get money or services they don't know came through DSHS. Let me tell you what types of help you or someone in your family may have received: You may have received food stamps, emergency assistance or TANF money, which is Temporary Assistance for Needy Families. You may have received General Assistance money because you were blind, pregnant, disabled, in an institution, or unemployable. You may have got supplemental Social Security or SSI payments from the state. You may have received some money because you were a refugee or because you needed childcare. You may also have been in the WorkFirst program which helps people on TANF find and keep jobs. [If they don't seem to be familiar with monies that may have supported a child, look for clues that there is someone else who is the "primary decision-maker" for this client. If so, talk to primary decision-maker. If continues to deny, skip the ESA section.] [If denies any contact with ESA, mark "Denies contact." Skip the rest of ESA questions. Continue with next program or concluding questions unless ESA is the only service they received. If ESA is the only service, thank them for their help and conclude interview.]*

#### Denies ESA Contact

Are you the only person in your family who gets state money, food stamps, or WorkFirst services from Economics Services?

- Yes  
 No

I'd like to ask about your experiences with Economic Services in the past two years. When we ask about Economic Services we are asking about the people who send you or your family state money or food stamps or run WorkFirst. This generally means the CSO staff which might include your financial worker, case manager or social worker. For each statement, please tell me how much you agree or disagree. Your choices are: Strongly Agree; Agree; Neutral; Disagree or Strongly Disagree.

The first statement is "I know what Economic Services there are for my family." Do you strongly agree, agree, feel neutral, disagree or strongly disagree? **[If there is any question, remind them that we are asking about both the treatment providers and the people who send the cards.] Mark the answer below.**

The next one is: "It's easy to get services from Economic Services." Do you strongly agree, agree, feel neutral, disagree or strongly disagree? **Mark the answer below.**  
**[Continue as below]**

Strongly Agree  
 Agree  
 Neutral  
 Disagree  
 Strongly Disagree  
 Does Not Apply

1. I know what ESA services there are for me or my family.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. It's easy to get services from ESA.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. It's easy to get to the CSO.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. The CSO is open at times that are good for me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. ESA staff returned my calls within 24 hours.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. My family got services as quickly as I needed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. It was easy to get the facts I needed about services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. ESA staff explained things clearly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Staff who helped me treated me or my family with courtesy and respect.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Staff who helped me or my family listened to what we had to say.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Staff who helped me or my family understood our needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. My family and I was involved in making choices about my services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. My family and I were involved in making choices about our services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. I am satisfied with ESA services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. ESA does good work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Overall, ESA has helped me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Sample Survey for Hypothetical Client Using All Nine Programs

### DCS – Division of Child Support

First/Now I'd like to ask you about the Division of Child Support, also known as Support Enforcement. The Division of Child Support enforces and collects court orders about child support. You could be involved with Child Support because you have a child that lives with you and you get support money for that child from another parent. I'd like to ask about your interactions with the Division of Child Support.

**[If denies contact with DCS or is unsure]** *OK. Have you received money from a child's parent to help support a child who lives with you? [If Yes to either.] Division of Child Support would collect that money from the parent and send it to you by check or electronic transfer. You also could have had contact with Division of Child Support because they tried to help you get child support payments.*

**[If still denies any contact with DCS, mark "Denies contact." Skip the rest of DCS questions. Continue with next program or concluding questions unless DCS is the only service they received. If DCS is the only service, thank them for their help and conclude interview.]**

**Denies DCS Contact**

I'd like to ask about your experiences with Division of Child Support in the past two years. For each statement, please tell me how much you agree or disagree. Your choices are: Strongly Agree; Agree; Neutral; Disagree or Strongly Disagree.

The first statement is "I know what child support services there are for my child and family." Do you strongly agree, agree, feel neutral, disagree or strongly disagree? **Mark Response Below.**

The next one is: "If you need help from the Division of Child Support, it's easy to get that help." Do you strongly agree, agree, feel neutral, disagree or strongly disagree? **[Note: If they never needed help from DCS, put N/A. Child Support clients are not asked questions 12 and 13.] Mark Response Below.**

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
1. I know what DCS services there are for me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. It's easy to get services from DCS.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. It's easy to get to the DCS office.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. The DCS office is open at times that are good for me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. DCS staff returned my calls within 24 hours.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. I got services as quickly as I needed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. It was easy to get the facts I needed about services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. DCS staff explained things clearly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Staff who helped me treated me with courtesy and respect.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Staff who helped me listened to what I had to say.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Staff who helped me understood my needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. I am satisfied with DCS services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. DCS does good work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Overall, DCS has helped me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Sample Survey for Hypothetical Client Using All Nine Programs

### MHD – Mental Health Division

Now I'd like to ask you about the part of DSHS called the Division of Mental Health. The Division of Mental Health helps to pay for counseling, medication and other mental health services. I'd like to ask about any experiences you or a family member had with services sponsored by the Division of Mental Health in the past two years.

**[Read this paragraph only if denies services from MHD or is unsure.]** *OK. Sometimes people get services and don't know the services were paid for by the Division of Mental Health. Let me tell you what kinds of services you or a family member might have received: You may have talked to a counselor or gone with someone in your family to talk to a counselor. You may have had a mental health assessment or received some treatment or medication. You may have had a hospitalization related to mental health issues. Is it possible that you or a family member might have had services sponsored by Mental Health in the past two years? OK. Let me ask you about your experiences with those services in the past two years. [If denies any contact with MHD, mark "Denies contact." Skip the rest of MHD questions. Continue with next program or concluding questions unless MHD is the only service they received. If MHD is the only service, thank them for their help and conclude interview.]*

**Denies MHD Contact**

For each statement, please tell me how much you agree or disagree. Your choices are: Strongly Agree; Agree; Neutral; Disagree or Strongly Disagree.

The first statement is "I know what Mental Health services there are for me." Do you strongly agree, agree, feel neutral, disagree or strongly disagree? **Mark answer below.**

The next one is: "It's easy to get services from Mental Health." Do you strongly agree, agree, feel neutral, disagree or strongly disagree? **Mark answer below.**

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
1. I know what Mental Health services there are for me or my family member.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. It's easy to get services from Mental Health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. It's easy to get to the mental health office.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. The mental health office is open at times that are good for me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Mental Health staff returned my calls within 24 hours.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. My family member or I got services as quickly as I needed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. It was easy to get the facts I needed about services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Mental Health staff explained things clearly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Staff who helped me or my family member treated me with courtesy and respect.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Staff who helped me or my family member listened to what I had to say.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Staff who helped me or my family understood our needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. My family members and I were involved in making choices about my services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. My family members and I helped make plans and goals about services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. I am satisfied with Mental Health services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Mental Health does good work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Overall, Mental Health has helped me and my family.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



## Sample Survey for Hypothetical Client Using All Nine Programs

### DASA – Division of Alcohol and Substance Abuse

Now I'd like to ask you about the part of DSHS called the Division of Alcohol and Substance Abuse. The Division of Alcohol and Substance Abuse helps to pay for assessment and treatment related to alcohol and other drugs. I'd like to ask if you have had any experience with a drug or alcohol treatment program. You may have talked to a counselor or gone to a drug or alcohol treatment group. You may have had an assessment to see if you have any problems with alcohol or drugs. You may have received some other type of drug or alcohol treatment or medication. You may have gone to an inpatient drug and alcohol treatment program. Unless you paid for this kind of service entirely by yourself or got it at the VA, the Division of Alcohol and Substance Abuse probably contributed money for your care. Is it possible that you might have had drug or alcohol services paid for or partly paid for by the Division of Alcohol and Substance Abuse? OK. Let me ask you about your experiences with those services.

**[If denies any contact with DASA, mark "Denies contact." Skip the rest of DASA questions (through question 16).**

Denies DASA Contact

For each statement, please tell me how much you agree or disagree. Your choices are: Strongly Agree; Agree; Neutral; Disagree or Strongly Disagree.

The first statement is "I know what drug and alcohol treatment services there are for me." Do you strongly agree, agree, feel neutral, disagree or strongly disagree?

**Mark response below.**

The next one is: "It's easy to get drug and alcohol treatment services." Do you strongly agree, agree, feel neutral, disagree or strongly disagree?

**Mark response below.**

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
1. I know what drug and alcohol treatment services there are for me or my family.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. It's easy to get drug and alcohol treatment services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. It's easy to get to the agency where I get drug and alcohol treatment services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. The drug and alcohol office is open at times that are good for me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Drug and alcohol staff returned my calls within 24 hours.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. I got services as quickly as I needed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. It was easy to get the facts I needed about services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Drug and alcohol staff explained things clearly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Staff who helped me treated me with courtesy and respect.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Staff who helped me listened to what I had to say.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Staff who helped me understood my needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. I was involved in making choices about my services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. I helped make plans and goals about services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. I am satisfied with drug and alcohol services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Drug and alcohol services do good work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Overall, drug and alcohol services have helped me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Sample Survey for Hypothetical Client Using All Nine Programs

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### CA – Children’s Administration

First/Now I’d like to ask you about the part of DSHS called Child and Family Services. Child and Family Services provides social services to children and families, such as helping families with run-away or difficult teens, looking into reports of child abuse or neglect, or providing child care, foster care and adoption support. We see that you or your child have had some contact with a worker from Child and Family Services. I’d like to ask about your experiences with Child and Family Services in the past two years.

**[Note to interviewers: The formal name of this program is “Children’s Administration—although few of our clients would recognize that name. Most of the services we ask about come under the Division of Child and Family Services (DSFC), but a few come under Division of Licensing Resources (DLR).]**

**[If denies services from DCFS or is unsure] OK.** *Sometimes people may not know that someone they talked to was related to Child and Family Services. We were asked to call you because you or your child have had some contact with Child and Family Services, but we don’t know—and don’t need to know-- what kind of contact that may have been. Let me tell you what kinds of contacts you might have received: A social worker may have talked to people in your family about your family situation or about some possible reports of abuse or neglect. Someone may have looked into possible child abuse or neglect involving you or your child – even if that possible abuse happened at school, daycare or somewhere else. You may have received help in dealing with conflicts with a teen-ager. Someone in your family may have received some kind of counseling, parenting training or other training. A child may have received child care because of special needs or because the parent is a teen-ager or a seasonal worker. Your child may have been placed in foster care or involved in an adoption. The services you got may have been called CPS (which stands for Child Protective Services), DCFS, Family Reconciliation Service, Child Welfare Services – or they may have been provided by a local agency. Have you talked to anyone like that in the past two years? Is it possible that these services may have been sponsored by DSHS?*

**[If parent does not know whether child has had any services and/or is not personally familiar with these services, try to find out whether there is another family member or decision-maker who is more familiar. Get GOOD name, address and phone numbers. We may replace this respondent with a more knowledgeable one.]**

**[If denies any contact with DCFS, mark “Denies contact.” Skip the rest of DCFS questions. Continue with next program or concluding questions unless DCFS is the only service they received. If DCFS is the only service, go to concluding questions.]**

#### Denies CA Contact

Think about your experiences with Child and Family Services. For each statement, please tell me how much you agree or disagree. Your choices are: Strongly Agree; Agree; Neutral; Disagree or Strongly Disagree.

The first statement is “I know what Child and Family Services there are for my family.” Do you strongly agree, agree, feel neutral, disagree or strongly disagree? **Mark Response on Next Page.**

The next one is: “If you need help from Child and Family Services, it’s easy to get that help.” Do you strongly agree, agree, feel neutral, disagree or strongly disagree? **Mark Response on Next Page.**

Strongly Agree  
 Agree  
 Neutral  
 Disagree  
 Strongly Disagree  
 Does Not Apply

1. I know what CA services there are for me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. It's easy to get services from CA.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. It's easy to get to the CA office.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. The CA office is open at times that are good for me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. CA staff returned my calls within 24 hours.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. When we asked for help, we got it as quickly as we needed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>[Note: If they never asked for help, put N/A]</i>						
7. It was easy to get the facts I needed about services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. CA staff explained things clearly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Staff who helped me treated me with courtesy and respect.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Staff who helped me listened to what I had to say.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Staff who helped me understood my needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. I was involved in making choices about my services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. I helped make plans and goals about services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. I am satisfied with CA services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. CA does good work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Overall, CA has helped me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Sample Survey for Hypothetical Client Using All Nine Programs

### CONCLUDING QUESTIONS

**Clients receiving services from 3 or more programs ONLY:**

We have talked about services you get from three [four, five, six] DSHS programs. They are \_\_\_\_\_, \_\_\_\_\_ and \_\_\_\_\_. The next two questions ask about how these services work together.

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
17. DSHS make sure all my services work well together.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Someone from DSHS helps me with services from all 3 [4,5,6] programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Thinking of all the program together, DSHS has done good work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**At the End – Clients receiving services from 2 programs ONLY.**

We have talked about services you get from two DSHS programs. They are \_\_\_\_\_ and \_\_\_\_\_. Now we'd like you to think about the services you got from both programs together.

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
19. Thinking of both programs together, DSHS has done good work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**AT the Very End - All Participants**

20. What do you like best about dealing with DSHS?  
*[Open-ended question. Record response.]*

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21. What is one thing DSHS can do to improve services?  
*[Open-ended question. Record response.]*

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Now I have a few questions for background purposes.

22. What is your [the client's] age? *[Record numeric answer, Don't Know or Refuse]*  
\_\_\_\_\_years

23. [Ask if necessary. Otherwise, just record.] Are you [the client] . . . [Record: Male, Female or Refuse]

- Male
- Female
- Refuse to Answer

**AT the Very End - All Participants**

25. Are you [Is the client] Hispanic?

- Yes
- No
- Don't Know,
- Refuse

24. What racial or ethnic group best describes you [the client]? [Mark main one for each category. Read if necessary.]

RACE:

- Asian American or Pacific Islander
- American Indian or Native American
- Black or African American
- White or Caucasian
- Other [Open-ended Response]
- Don't Know
- Refuse

That's my last question. Thank you for your time and cooperation. If you have any additional comments or questions about this survey or DSHS, I can note them now.





Photo by Tom Edwards for the U.S. Census Bureau

**APPENDIX E**  
Weighting





## Weighting

Clients' responses were weighted according to each client's service profile (the specific combination of services that the client used), so that the final weighted sample reflects the service usage of all DSHS clients. This survey analysis used two different weighting schemes:

1. Using all survey respondents—used for all analyses looking only at 2005 survey data
2. Using all survey respondents except those selected from Child Support clients – used for all comparisons with previous surveys (since previous surveys did not include clients chosen from the child support caseload)

### Weighting Scheme 1 – Including Child Support

The table below shows weighting for the combination of programs utilized in the left-hand column. For example, the highlighted row of the chart (AEM) shows that 48 clients in the completed sample used Aging and Disability, Economic, and Medical Services (4.2291% of the 1,136 completed surveys). In the total population of all DSHS clients in fiscal year 2004<sup>1</sup>, 17,927 (1.0649% of the total) used this combination of services. The responses of the 48 survey respondents were weighted by a factor of 0.2518. Thus, in the weighted sample 12.0865 of the 1,136 respondents utilized Aging and Adult services—comprising 1.0649% of the sample population. The proportion of clients with this service profile in the weighted sample equals the proportion with this service profile in the overall DSHS population.

Programs	SAMP_N	SAMP_PC	POP_N <sup>1</sup>	POP_PC	WT	WT_N	PROGRAMS:
A	2	0.1762	2602	0.1546	0.8771	1.7543	A: ADASA – Home & Comm, Res
ACEM	3	0.2643	172	0.0102	0.0387	0.1160	C: Children's Administration
ACEMZ	3	0.2643	144	0.0086	0.0324	0.0971	D: Developmental Disabilities
ADEHM	1	0.0881	339	0.0201	0.2286	0.2286	E: Economic Services
ADEHMOV	2	0.1762	100	0.0059	0.0337	0.0674	H: Mental Health
ADEM	2	0.1762	1334	0.0792	0.4497	0.8994	M: Medical Assistance
ADEMOV	1	0.0881	257	0.0153	0.1733	0.1733	S: Alcohol & Substance
ADEMZ	1	0.0881	17	0.0010	0.0115	0.0115	V: Vocational Rehabilitation
ADHM	3	0.2643	501	0.0298	0.1126	0.3378	Z: Child Support
ADHMOV	2	0.1762	124	0.0074	0.0418	0.0836	<b>SAMP_N:</b> Number of clients who completed survey using this combination of programs
ADM	25	2.2026	3703	0.2200	0.0999	2.4966	<b>SAMP_PC:</b> Percentage of the clients who completed the survey using this combination of programs
ADMV	4	0.3524	562	0.0334	0.0947	0.3789	<b>POP_N:</b> Number of clients in FY2004 using this combination of programs
AEHM	12	1.0573	3744	0.2224	0.2104	2.5242	<b>POP_PC:</b> Percentage of FY2004 clients using this combination of programs
AEHMS	3	0.2643	204	0.0121	0.0458	0.1375	<b>WT:</b> Weight to produce N of 1,136 with program distribution equal to population program distribution (adjusted for empty cells)
AEHMOV	1	0.0881	150	0.0089	0.1011	0.1011	<b>WT_N:</b> Number using this combination of programs after applying WT
<b>AEM</b>	<b>48</b>	<b>4.2291</b>	<b>17927</b>	<b>1.0649</b>	<b>0.2518</b>	<b>12.0865</b>	
AEMV	2	0.1762	286	0.0170	0.0964	0.1928	
AEMZ	4	0.3524	821	0.0488	0.1384	0.5535	
AHM	11	0.9692	4898	0.2909	0.3002	3.3023	
AHMZ	1	0.0881	51	0.0030	0.0344	0.0344	
AM	53	4.6696	30994	1.8411	0.3943	20.8964	
AMV	2	0.1762	154	0.0091	0.0519	0.1038	
AMZ	3	0.2643	281	0.0167	0.0632	0.1895	
C	33	2.9075	73065	4.3402	1.4928	49.2611	
CDEHM	1	0.0881	244	0.0145	0.1645	0.1645	
CDEM	3	0.2643	990	0.0588	0.2225	0.6675	
CDHM	1	0.0881	347	0.0206	0.2340	0.2340	
CDM	1	0.0881	1296	0.0770	0.8738	0.8738	
CE	9	0.7930	4339	0.2577	0.3250	2.9254	
CEHM	8	0.7048	7553	0.4487	0.6365	5.0923	
CEHMS	2	0.1762	1205	0.0716	0.4062	0.8124	
CEHMSZ	5	0.4405	1005	0.0597	0.1355	0.6776	
CEHMOV	2	0.1762	150	0.0089	0.0506	0.1011	

<sup>1</sup> Includes the 99.7% of the DSHS population (including DCS clients) whose service profile was represented in the client survey sample.

Programs	SAMP_N	SAMP_PC	POP_N	POP_PC	WT	WT_N
CEHMOVZ	1	0.8810	143	0.0085	0.0964	0.0964
CEHMOVZ	8	0.7048	1987	0.1180	0.1675	1.3397
CEM	17	1.4978	43153	2.5634	1.7114	29.0941
CEMS	7	0.6167	2340	0.1390	0.2254	1.5776
CEMSZ	8	0.7048	2319	0.1378	0.1954	1.5635
CEMV	1	0.0881	259	0.0154	0.1746	0.1746
CEMOVZ	3	0.2643	255	0.0151	0.0573	0.1719
CEMZ	28	2.4670	11007	0.6538	0.2650	7.4210
CEZ	3	0.2643	2239	0.1330	0.5032	1.5096
CHM	4	0.3524	4722	0.2805	0.7959	3.1836
CHMS	2	0.1762	609	0.0362	0.2053	0.4106
CHMSVZ	1	0.0881	5	0.0003	0.0034	0.0034
CHMZ	1	0.0881	121	0.0072	0.0816	0.0816
CHSZ	1	0.0881	18	0.0011	0.0121	0.0121
CHZ	1	0.0881	101	0.0060	0.0681	0.0681
CM	6	0.5286	23373	1.3884	2.6264	15.7583
CMSZ	3	0.2643	126	0.0075	0.0283	0.0850
CMZ	2	0.1762	1217	0.0723	0.4103	0.8205
CSZ	1	0.0881	115	0.0068	0.0775	0.0775
CV	1	0.0881	145	0.0086	0.0978	0.0978
CZ	16	1.4097	6593	0.3916	0.2778	4.4451
D	16	1.4097	5999	0.3564	0.2528	4.0446
DEHM	14	1.2335	1071	0.0636	0.0516	0.7221
DEHMSV	2	0.1762	14	0.0008	0.0047	0.0094
DEM	25	2.2026	5202	0.3090	0.1403	3.5072
DEMV	6	0.5286	533	0.0317	0.0599	0.3594
DEMVZ	1	0.0881	18	0.0011	0.0121	0.0121
DHM	1	0.0881	809	0.0481	0.5454	0.5454
DHMOV	4	0.3524	99	0.0059	0.0167	0.0667
DM	28	2.4670	8972	0.5330	0.2160	6.0490
DMV	7	0.6167	650	0.0386	0.0626	0.4382
DV	3	0.2643	246	0.0146	0.0553	0.1659
DZ	1	0.0881	28	0.0017	0.0189	0.0189
E	28	2.4670	118532	7.0410	2.8541	79.9154
EH	1	0.0881	2010	0.1194	1.3552	1.3552
EHM	45	3.9648	30896	1.8353	0.4629	20.8304
EHMS	19	1.6740	5455	0.3240	0.1936	3.6778
EHMSVZ	2	0.1762	100	0.0059	0.0337	0.0674
EHMSZ	6	0.5286	979	0.0582	0.1100	0.6601
EHMV	14	1.2335	2606	0.1548	0.1255	1.7570
EHMVZ	1	0.0881	460	0.0273	0.3101	0.3101
EHMZ	9	0.7930	5486	0.3259	0.4110	3.6987
EHS	1	0.0881	298	0.0177	0.2009	0.2009
EHV	1	0.0881	124	0.0074	0.0836	0.0836
EHZ	1	0.0881	206	0.0122	0.1389	0.1389
EM	105	9.2511	426483	25.3338	2.7385	287.5387
EMS	25	2.2026	11934	0.7089	0.3218	8.0460
EMSV	3	0.2643	674	0.0400	0.1515	0.4544
EMSVZ	2	0.1762	125	0.0074	0.0421	0.0843
EMSZ	12	1.0573	3103	0.1843	0.1743	2.0921
EMV	17	1.4978	4504	0.2675	0.1786	3.0366
EMVZ	6	0.5286	1135	0.0674	0.1275	0.7652
EMZ	40	3.5242	63282	3.7591	1.0666	42.6653
ES	4	0.3524	2719	0.1615	0.4583	1.8332
ESZ	3	0.2643	203	0.0121	0.0456	0.1369
EV	8	0.7048	1668	0.0991	0.1406	1.1246

Weighting Scheme 1 –  
Including Clients Chosen  
from Child Support  
Continued

	SAMP_N	SAMP_PC	POP_N	POP_PC	WT	WT_N
EVZ	3	0.2643	155	0.0092	0.0348	0.1045
EZ	14	1.2335	18643	1.1074	0.8978	12.5693
H	2	0.1762	18522	1.1002	6.2439	12.4877
HM	14	1.2335	13375	0.7945	0.6441	9.0175
HMS	2	0.1762	1097	0.0652	0.3698	0.7396
HMSV	1	0.0881	50	0.0030	0.0337	0.0337
HMV	2	0.1762	626	0.0372	0.2110	0.4221
HV	1	0.0881	281	0.0167	0.1895	0.1895
HVZ	1	0.0881	12	0.0007	0.0081	0.0081
M	133	11.7181	465330	27.6414	2.3589	313.7297
MS	6	0.5286	4271	0.2537	0.4799	2.8795
MSV	80	0.0047	0.004752135	1.0000	0.0881	0.0539
MSZ	1	0.0881	285	0.0169	0.1921	0.1921
MV	4	0.3524	1705	0.1013	0.2874	1.1495
MZ	6	0.5286	13321	0.7913	1.4969	8.9811
S	19	1.6740	13108	0.7786	0.4651	8.8375
SZ	1	0.0881	350	0.0208	0.2360	0.2360
V	31	2.7313	8537	0.5071	0.1857	5.7557
VZ	4	0.3524	374	0.0222	0.0630	0.2522
Z	59	5.1982	156303	9.2847	1.7861	105.3809

**Weighting Scheme 1 – Including Clients Chosen from Child Support**  
Continued

**Weighting Scheme 2 – Without Clients Selected from Child Support.**

This weighting scheme is used for any analyses that compare the current survey to previous surveys (which did not include any clients selected from the child support caseload).

**PROGRAMS:**

- A: AD SA – Home & Comm, Res
- C: Children’s Administration
- D: Developmental Disabilities
- E: Economic Services
- H: Mental Health
- M: Medical Assistance
- S: Alcohol & Substance
- V: Vocational Rehabilitation

Programs	SAMP_N	SAMP_PC	POP_N <sup>2</sup>	POP_PC	WT	WT_N
A	2	0.1942	2612	0.1705	0.8781	1.7561
ACEM	6	0.5825	316	0.0206	0.0354	0.2125
ADEHM	1	0.0971	343	0.0224	0.2306	0.2306
ADEH MV	2	0.1942	101	0.0066	0.0340	0.0679
ADEM	3	0.2913	1351	0.0882	0.3028	0.9083
ADEM V	1	0.0971	261	0.0170	0.1755	0.1755
ADHM	3	0.2913	504	0.0329	0.1130	0.3389
ADH MV	2	0.1942	124	0.0081	0.0417	0.0834
ADM	25	2.4272	3716	0.2426	0.0999	2.4984
ADM V	4	0.3883	565	0.0369	0.0950	0.3799
AEHM	12	1.1650	3956	0.2582	0.2216	2.6597
AEHMS	3	0.2913	218	0.0142	0.0489	0.1466
AEH MV	1	0.0971	173	0.0113	0.1163	0.1163
AEM	51	4.9515	18748	1.2238	0.2472	12.6048
AEM V	2	0.1942	314	0.0205	0.1056	0.2111
AHM	12	1.1650	4949	0.3230	0.2773	3.3273
AM	55	5.3398	31275	2.0415	0.3823	21.0270
AM V	2	0.1942	160	0.0104	0.0538	0.1076
C	48	4.6602	79658	5.1996	1.1158	53.5561
CDEHM	1	0.0971	264	0.0172	0.1775	0.1775
CDEM	3	0.2913	1054	0.0688	0.2362	0.7086
CDHM	1	0.0971	347	0.0227	0.2333	0.2333
CDM	1	0.0971	1303	0.0851	0.8760	0.8760
CE	11	1.0680	6578	0.4294	0.4021	4.4226
CEHM	16	1.5534	9540	0.6227	0.4009	6.4140
CEHMS	7	0.6796	2210	0.1443	0.2123	1.4858
CEH MV	3	0.2913	293	0.0191	0.0657	0.1970
CEM	43	4.1748	54160	3.5353	0.8468	36.4131

**SAMP\_N:** Number of clients who completed survey using this combination of programs

**SAMP\_PC:** Percentage of the clients who completed the survey using this combination of programs

**POP\_N:** Number of clients in FY2004 using this combination of programs

**POP\_PC:** Percentage of FY2004 clients using this combination of programs

**WT:** Weight to produce N of 1,136 with program distribution equal to population program distribution (Adjusted for empty cells)

**WT\_N:** Number using this combination of programs after applying WT

<sup>2</sup> Includes the 99.5% of the DSHS population (not including DCS clients) whose service profile was represented in the client survey sample.

Programs	SAMP_N	SAMP_PC	POP_N	POP_PC	WT	WT_N
CEMS	14	1.3592	4659	0.3041	0.2237	3.1324
CEMV	3	0.2913	514	0.0336	0.1152	0.3456
CH	1	0.0971	911	0.0595	0.6125	0.6125
CHM	5	0.4854	4843	0.3161	0.6512	3.2561
CHMS	2	0.1942	653	0.0426	0.2195	0.4390
CHMSV	1	0.0971	8	0.0005	0.0054	0.0054
CEHMZ	8	0.7048	1987	0.1180	0.1675	1.3397
CHS	1	0.0971	106	0.0069	0.0713	0.0713
CM	8	0.7767	24590	1.6051	2.0666	16.5325
CMS	3	0.2913	933	0.0609	0.2091	0.6273
CS	1	0.0971	795	0.0519	0.5345	0.5345
CV	1	0.0971	178	0.0116	0.1197	0.1197
D	17	1.6505	6027	0.3934	0.2384	4.0521
DEHM	14	1.3592	1097	0.0716	0.0527	0.7375
DEHMSV	2	0.1942	15	0.0010	0.0050	0.0101
DEM	25	2.4272	5288	0.3452	0.1422	3.5553
DEMV	7	0.6796	551	0.0360	0.0529	0.3705
DHM	1	0.0971	812	0.0530	0.5459	0.5459
DHMV	4	0.3883	100	0.0065	0.0168	0.0672
DM	28	2.7184	8996	0.5872	0.2160	6.0482
DMV	7	0.6796	656	0.0428	0.0630	0.4410
DV	3	0.2913	246	0.0161	0.0551	0.1654
E	35	3.3981	137175	8.9540	2.6350	92.2263
EH	1	0.0971	2216	0.1446	1.4899	1.4899
EHM	54	5.2427	36382	2.3748	0.4530	24.4605
EHMS	24	2.3301	6434	0.4200	0.1802	4.3257
EHMSV	2	0.1942	711	0.0464	0.2390	0.4780
EHMV	15	1.4563	3066	0.2001	0.1374	2.0614
EHS	1	0.0971	316	0.0206	0.2125	0.2125
EHV	1	0.0971	132	0.0086	0.0887	0.0887
EM	120	11.6505	489765	31.9691	2.7440	329.2815
EMS	36	3.4951	15037	0.9815	0.2808	10.1098
EMSV	5	0.4854	799	0.0522	0.1074	0.5372
EMV	23	2.2330	5639	0.3681	0.1648	3.7912
ES	6	0.5825	2922	0.1907	0.3274	1.9645
EV	11	1.0680	1823	0.1190	0.1114	1.2256
H	2	0.1942	19023	1.2417	6.3948	12.7896
HM	14	1.3592	13824	0.9024	0.6639	9.2942
HMS	2	0.1942	1144	0.0747	0.3846	0.7691
HMSV	1	0.0971	55	0.0036	0.0370	0.0370
HMV	2	0.1942	661	0.0431	0.2222	0.4444
HV	2	0.1942	293	0.0191	0.0985	0.1970
M	137	13.3010	478651	31.2436	2.3490	321.8093
MS	7	0.6796	4556	0.2974	0.4376	3.0631
MSV	1	0.0971	84	0.0055	0.0565	0.0565
MV	4	0.3883	1848	0.1206	0.3106	1.2425
S	20	1.9417	13458	0.8785	0.4524	9.0482
V	35	3.3981	8911	0.5817	0.1712	5.9911

Weighting Scheme 2 –  
Without Clients Chosen  
from Child Support  
Continued

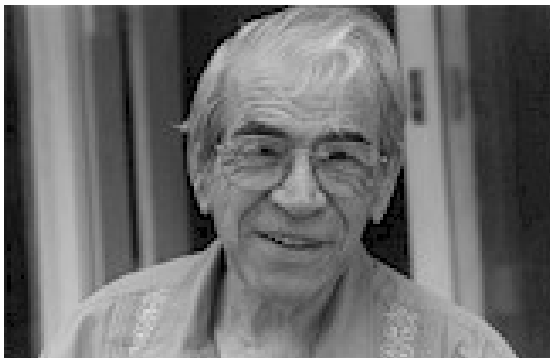


Photo by Lloyd Wolf for the U.S. Census Bureau

**APPENDIX F**  
Responses by Client Sub-Group



**Responses by Client Sub-Group (includes Child Support clients)**

	Client Gender		Client Age		Race   Ethnicity			Race Differences		
	Male	Female	Adult	Child	White	Other Minority	Hispanic	C-O	C-H	O-H
<b>QUALITY</b>										
Overall, DSHS program services have helped me and my family	92%	90%	88%	96%*	92%	89%	93%			
DSHS does good work	85%	85%	83%	89%	86%	80%	91%			*
My DSHS program does good work	84%	86%	84%	88%	86%	80%	89%			*
I am satisfied with DSHS program services	78%	81%	78%	83%	79%	73%	91%		*	*
<b>STAFF</b>										
Staff treated us with courtesy and respect	86%	89%	87%	88%	89%	81%	90%	*		*
Staff listened to what we have to say	86%	88%	87%	87%	88%	80%	90%	*		*
Staff understood our needs	83%	86%	83%	88%*	86%	76%	90%	*		*
<b>ACCESS</b>										
The DSHS program offices are open at times that are good for us	90%	89%	88%	91%	89%	91%	88%			
It's easy to get to the DSHS program	86%	87%	85%	89%	86%	81%	94%		*	*
We got services as quickly as we needed	79%	79%	75%	85%*	81%	74%	80%			
It's easy to get to the DSHS program	71%	72%	70%	74%	71%	64%	79%			*
My DSHS program returned calls within 24 hours	68%	74%	68%	76%*	74%	65%	70%	*		
<b>INFORMATION</b>										
Program staff explained things clearly	82%	82%	80%	87%*	82%	77%	90%		*	*
It was easy to get the facts we needed about services	76%	73%	73%	76%	75%	63%	85%	*	*	*
I know what DSHS program services there are for me and my family	75%	79%	76%	80%	80%	60%	87%	*		*
<b>CLIENT INVOLVEMENT</b>										
We helped make plans and goals about services	67%	73%	67%	75%*	71%	65%	74%			
We were involved in making choices about services	71%	77%	71%	77%	75%	67%	77%			
<b>COORDINATION</b>										
DSHS makes sure our services work well together	75%	73%	76%	60%	74%	76%	68%			
Someone helps us with services from all programs	79%	72%	75%	70%	75%	71%	74%			

\* Statistically Significant Difference (p.<.05)

**Summary of Client Sub-Group Trends**

**By Gender** – No statistically significant differences.

**By Client Age** – On several questions, children’s guardians reported more satisfaction than did adult respondents.

**By Race/Ethnicity** – Hispanic clients were generally most satisfied, followed by Caucasian clients. Other minority clients tended to be less satisfied.







Photo by Lloyd Wolf for the U.S. Census Bureau

**APPENDIX G**  
Responses by Program Sub-Group



## Responses by Program Sub-Group (includes Child Support clients)

	Completed By		Mandatory		Number Programs Used			Differences		
	Client	Other**	Yes	No	1 prgm	2 prgms	3 +	1-2	1-3	2-3
<b>QUALITY</b>										
Overall, DSHS program services have helped me and my family	88%	95%*	76%	93%*	94%	93%	87%		*	*
DSHS does good work	84%	87%	65%	88%*	89%	86%	79%		*	
My DSHS program does good work	85%	86%	67%	88%*	89%	85%	84%			
I am satisfied with DSHS program services	77%	84%*	65%	82%*	84%	79%	76%		*	
<b>STAFF</b>										
Staff treated us with courtesy and respect	88%	87%	74%	89%*	91%	85%	85%	*	*	
Staff listened to what we have to say	89%	85%	70%	89%*	92%	82%	83%	*	*	
Staff understood our needs	85%	85%	73%*	87%*	91%	78%	81%	*	*	
<b>ACCESS</b>										
The DSHS program offices are open at times that are good for us	88%	90%	82%	90%*	91%	90%	87%			
It's easy to get to the DSHS program	86%	87%	83%	87%	90%	86%	82%		*	
We got services as quickly as we needed	75%	84%*	61%	81%*	85%	77%	73%	*	*	
It's easy to get to the DSHS program	68%	75%*	63%	72%	75%	70%	69%			
My DSHS program returned calls within 24 hours	67%	76%*	57%	73%*	76%	68%	69%	*	*	
<b>INFORMATION</b>										
Program staff explained things clearly	81%	84%	72%	84%*	86%	79%	82%	*		
It was easy to get the facts we needed about services	73%	77%	73%	75%	80%	68%	76%	*		*
I know what DSHS program services there are for me and my family	76%	79%	73%	78%	82%	71%	78%	*		*
<b>CLIENT INVOLVEMENT</b>										
We helped make plans and goals about services	67%	73%	63%	72%	75%	64%	75%	*		*
We were involved in making choices about services	70%	77%	60%	76%*	80%	67%	74%	*		
<b>COORDINATION</b>										
DSHS makes sure our services work well together	77%	66%	67%	76%		75%	73%			
Someone helps us with services from all programs	73%	77%	77%	73%		73%	75%			

\* Statistically Significant Difference (p.<.05)

\*\* Client Representative

### Summary of Client Sub-Group Trends

**By Status of Respondent** – In general, those who responded on behalf of children or incapacitated clients were more satisfied with access and specific program services than were client respondents.

**By Nature of Program** – Participants in voluntary (rather than mandatory) programs were more likely to indicate satisfaction on all questions concerning quality and staff.

**By Number of Programs** – In general, those who participated in only one DSHS program were more satisfied than those participating in two or more programs.





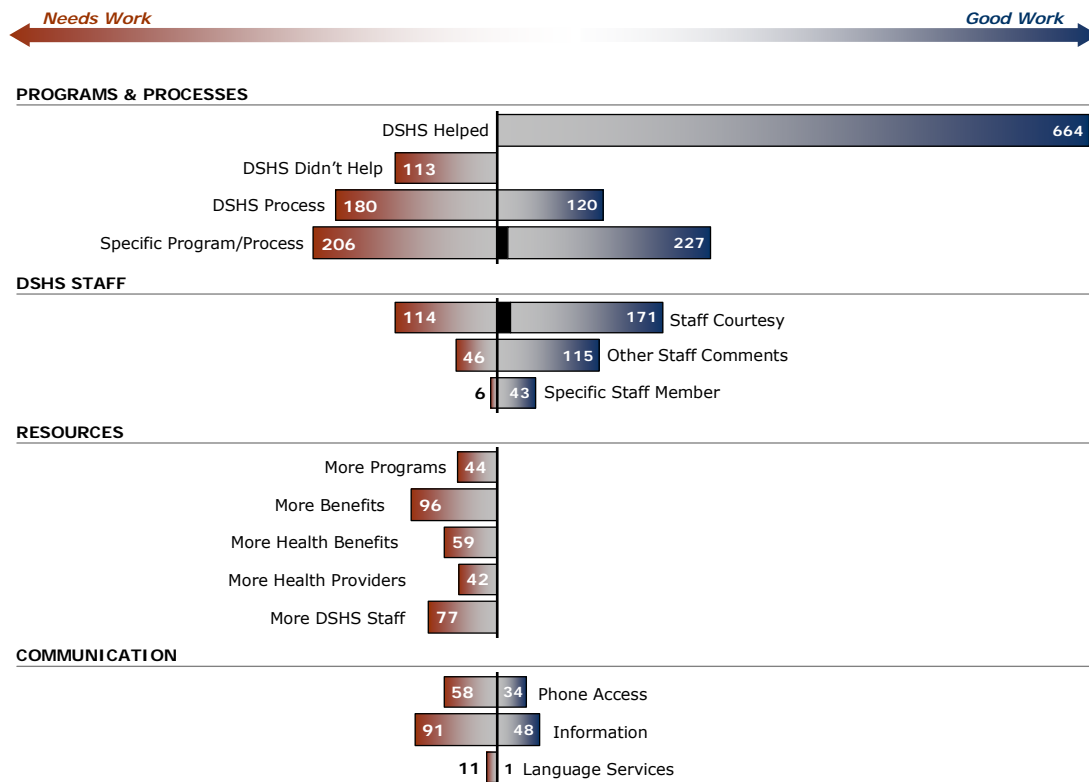
Photo by the U.S. Census Bureau.

## **APPENDIX H**

### Themes from Narrative Questions: Detail and Glossary



## Number of Positive, Negative, or Neutral Comments by Topic



### Response Glossary – Responses to Open-ended Questions

PROGRAMS/PROCESSES	Typical Response Example
DSHS Helped	DSHS has helped me/my family; good service overall; grateful for help; appreciative; likes DSHS
DSHS Didn't Help	DSHS didn't help; don't like dealing with DSHS; must deal with DSHS to get benefits or services
DSHS Process	Compliments or complaints about coordination, efficiency, bureaucracy, paperwork, timeliness
Specific Program/Process	Named a specific program or procedure that helped/didn't help or liked or should change – includes comments about location and hours
<b>STAFF</b>	
Staff Courtesy	Compliments or complaints regarding staff courtesy, helpfulness, attitude, sensitivity
Other Staff Comments	Other or miscellaneous comment directly relating to DSHS staff
Specific Staff Member	Named a specific staff person who helped/didn't help
<b>RESOURCES</b>	
Need More Programs	Availability of non-medical programs; expand or don't cut certain programs
More Money/Benefits	Need more money, non-medical benefits; ease eligibility or waitlists
More Health Benefits	Need more medical, dental and/or mental health services/benefits; don't cut
More Health Providers	Need more dental, medical, mental health, pharmacy and vision service providers who take coupons
Need More DSHS Staff	Need more staff; reduce turnover; lower caseloads
<b>COMMUNICATION</b>	
Phone Access	Phone access; voicemail; return calls
Information	Information about programs or eligibility; answering questions; advertising services
Language Services	Need more interpreters/bilingual staff; better interpreter system; native English-speakers
<b>OTHER</b>	
Other	Miscellaneous comments that don't fit elsewhere



2005 Client Survey  
**DSHS Clients Speak**  
APPENDICES



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**RDA** Research & Data  
Analysis Division