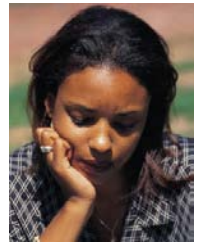


# 2011 Client Survey DSHS Clients Speak

August 2011  
Report 11.163



# DSHS

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Health Services**

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## Information About this Publication

**Title:** 2011 Client Survey: DSHS Clients Speak

**Abstract:** Between November 2010 and April 2011, DSHS surveyed 1180 clients who received services during calendar year 2009 (January 1, 2009 to December 31, 2009). These clients were asked about their satisfaction with DSHS services and recommendations for change. As in previous years, the great majority of clients expressed satisfaction with DSHS services and their interactions with DSHS staff. Complaints tended to target specific policies, procedures and staff actions. The effects of the economic recession – increasing client needs and declining Department resources and staff numbers – were seen throughout the survey. Clients reported more difficulties reaching Department staff by phone and expressed greater concern about cutbacks in benefits and services.

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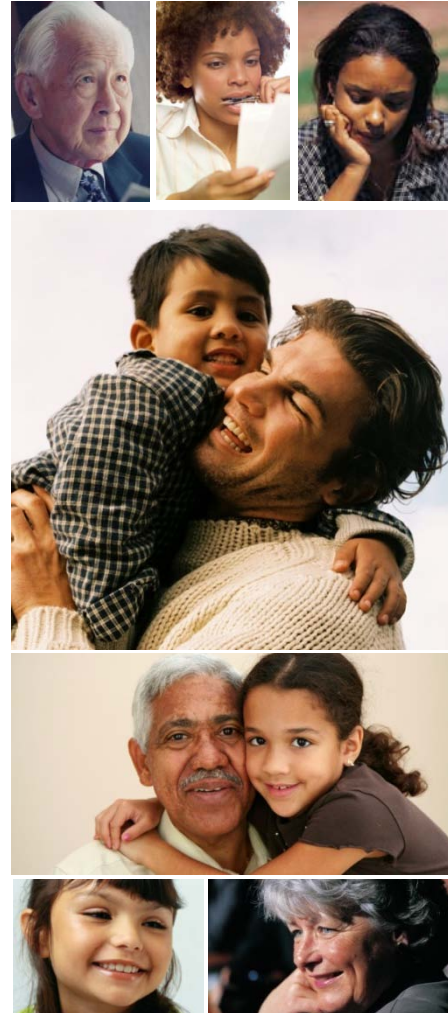
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**ON THE WEB . . .**

The appendices listed at left and a complete list of all comments can be found accompanying this report on the RDA website:

[www.dshs.wa.gov/RDA/](http://www.dshs.wa.gov/RDA/)

## Highlights of the Survey



### Survey Facts

The 2011 Client Survey is the seventh in a series of agency-wide client surveys initiated in 2001.

- The survey was conducted between November 2010 and April 2011.
- **1,180** clients were interviewed by phone.
- Clients were randomly selected from Department of Social and Health Services programs, and were asked about all DSHS services they utilized.
- The **85%** completion rate is extraordinarily high. DSHS clients are often transient and difficult to locate.
- The cooperation rate is also high. Of the clients who could be contacted, **96%** completed the survey.

## Context: The Department in a time of economic distress

Client survey responses always reflect the events and circumstances affecting the Department's clients and its programs. This is especially true of this survey, which was conducted during the worst recession in 80 years.<sup>1</sup>

- *Economic hard times are bringing more clients to DSHS, many of them first-time consumers of social services.*<sup>2</sup>

### DATA HIGHLIGHTS

- ▶ The number of Washington residents experiencing long-term unemployment tripled between 2008 and 2009.
- ▶ The proportion of children living in poverty increased 13% from 2008 to 2009. The proportion of adults in poverty increased by 11%.
- ▶ More families are hungry; the proportion of households experiencing food insecurity increased by 39% between 2005 and 2009.<sup>3</sup>
- ▶ The factors listed above make it more challenging to serve existing clients. High unemployment makes it more difficult to find jobs for clients and to get child support payments. Poverty, unemployment and food insecurity all have negative effects on family stability, crime, and physical and mental health.

- *As the need for client services increased, decreased tax revenues led to state cutbacks – with more cuts looming.*

### DATA HIGHLIGHTS

- ▶ Staffing fell throughout the Department due to funding cuts, a hiring freeze and temporary layoff days. The Department had 14% fewer employees in June 2011 than in June 2008 – and most of the remaining employees were working 5% fewer hours.
- ▶ The Community Services Offices are the face of DSHS for many clients. From Fiscal Year 2008 to 2011 they experienced the following changes: 14% decrease in staffing, 78% increase in Basic Food recipients, 30% increase in TANF clients, and 25% increase in Disability Lifeline clients.
- ▶ The long-term care caseload in Aging and Disability Services Administration increased 16% from 2008 to 2011, while staffing remained steady.
- ▶ The Developmental Disabilities caseload increased 6% while staffing decreased by 12%.
- ▶ Many programs were completely eliminated, while others reduced service hours and benefits.

## Changes reflect the times

Increasing caseloads and state cutbacks were reflected in survey trends.

- *Clients reported more difficulty accessing staff – especially by phone. Phone access was especially frustrating for customers of the Community Services Offices run by Economic Services Administration.*<sup>4</sup>

### DATA HIGHLIGHTS

- ▶ There were more negative and fewer positive comments made about phone and staff access in 2011. Negative comments increased by more than 50% from 2009. Among clients who utilize the Community Services Offices, negative comments increased by 68%.
- ▶ Only 38% of Community Services Office clients said that it is easy to get a live person on the phone – a 30% decrease from 2009.<sup>4,5</sup>
- ▶ Fewer Community Services Office clients said that it's easy to get services from Economic Services – a 13% decrease from 2009.<sup>5</sup>



- ***Loss – or potential loss – of services and benefits worries many clients***

DATA  
HIGHLIGHTS

- ▶ The number of clients expressing concern about medical and dental benefits increased by 66% from 2009. Among Community Services Office clients, the frequency of such comments almost doubled.
- ▶ The effects of cuts and increasing caseloads in the long-term care programs provided by Aging and Disability Services Administration showed up in questions reflecting client self-determination/choice. The number of long-term care clients who said they helped make plans and set goals about services fell by 19%, and those who know what services are available decreased by 25%.<sup>5</sup> A number of these clients specifically mentioned cuts in provider hours and medical support.

## Bright spots

**In spite of the many challenges listed above, the survey revealed some good news.**

- ***Overall satisfaction and satisfaction with Department’s services and staff remain high.***

DATA  
HIGHLIGHTS

- ▶ 91% of clients said that DSHS programs help them and their family – an increase from 2009.<sup>5</sup> More than 85% said that DSHS and its programs do good work – an increase from 2001.<sup>5</sup>
- ▶ The most common response to the survey’s open-ended questions was appreciation for DSHS helpfulness. More than half of the respondents praised the quality and helpfulness of DSHS or program services.
- ▶ Satisfaction with staff courtesy, respect, understanding, and listening has improved since 2001.<sup>5</sup> Fewer than 4% of clients gave negative answers to any of these staff-related questions.
- ▶ Positive comments about DSHS staff outnumbered negative comments. There were 15% fewer negative comments about staff than in 2009.

- ***Improvements in satisfaction were seen in several programs.***

DATA  
HIGHLIGHTS

- ▶ Custodial parents were more satisfied with the overall performance of the Division of Child Support, and with their access to that program. Six questions showed significant<sup>5</sup> gains from 2009, with positive responses increasing an average of 24%. Program staff credit these positive changes to a number of initiatives to improve access and outreach, and to de-emphasize punitive actions.
- ▶ 93% of Division of Developmental Disabilities clients said that “DD does good work” – up 11% since 2009.<sup>5</sup>
- ▶ Process issues – excluding phone access – caused less concern across the Department than in 2009. Among Community Services Office clients, there were 63% more positive comments and 13% fewer negative comments about processes. This suggests that the Community Services Office business-process redesign<sup>6</sup> helped the offices manage the influx of client visits triggered by the economic recession.
- ▶ In spite of the expanding caseloads in the Aging and Disability Services Administration, long-term care client satisfaction with access to services and staff attentiveness continued to be higher than in 2007.
- ▶ The Division of Vocational Rehabilitation continued an upward trend. Compared to 2007, 35% more were satisfied with the Division’s services, 65% more found it easy to get services, and 44% more got services as quickly as needed.

## Continuing challenges

Some issues will always be problematic for any large human services agency. These issues require consistent monitoring, constant vigilance, and continuing quality improvement. Although there were few significant changes in these areas, some level of discontent continues.

- **Getting Services.** *Clients complain about difficulty getting appointments, slow response to emergencies, hours of waiting in lobbies, unanswered phone calls, long wait lists, senseless bureaucratic requirements, and complex or redundant paperwork. Some find it difficult to know what programs and services are available – and whether they qualify.*

### DATA HIGHLIGHTS

- ▶ More than one-third of the respondents mentioned a need for improvements in processes or access to services.
- ▶ 12% said “No” to “Is it easy to get services from your DSHS program?”
- ▶ 17% said “No” to “Do DSHS staff return your calls within 24 hours?”

- **Staff.** *Clients sometimes encounter staff who appear rude, condescending, unresponsive, or uncaring. DSHS workers can seem too busy to listen or help.*

### DATA HIGHLIGHTS

- ▶ 3% said they are not treated with courtesy and respect.
- ▶ 9% reported that there had been a time when they felt DSHS staff treated them unfairly because of disabilities, race, culture, gender, age, or sexual orientation.

<sup>1</sup> This description of the recession is from Jill Satran, Governor’s Deputy Chief of Staff, June 23, 2011.

<sup>2</sup> See more information about these measures and recent changes in wellbeing of Washington citizens in the Population Section of the DSHS Core Metrics at <http://www.dshs.wa.gov/pdf/ppa/PopulationMeasures.pdf>

<sup>3</sup> Food insecurity would have been even higher without changes made by the Economic Services Administration starting in October 2008. They increased the food stamp eligibility level from 100% to 200% of the Federal Poverty Level, and increased food assistance outreach to struggling individuals and families.

<sup>4</sup> In recent months, after the survey was completed, Economic Services Administration has instituted changes in phone systems designed to make it easier for clients to reach Community Services Division staff.

<sup>5</sup> Changes are statistically significant at the .05 level. Unless otherwise noted, comparisons are to the 2009 survey.

<sup>6</sup> The Community Services Office redesign measures included having a “navigator” to assist clients in the waiting room, and providing kiosks for sign-in and to accomplish some functions.

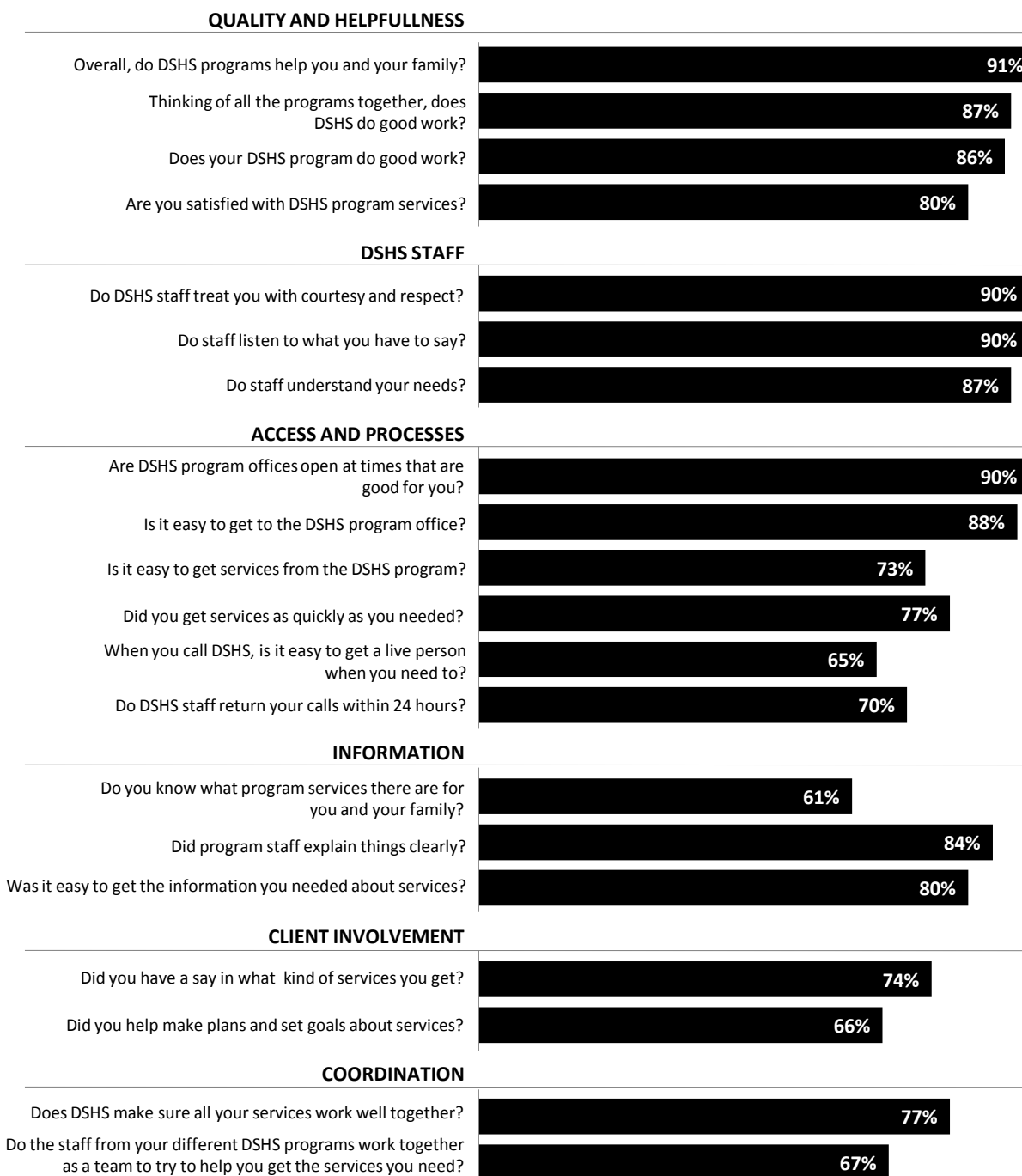


## Survey Results at a Glance

The survey analysis is based on two types of questions. The answers to the 20 standard questions are summarized in the chart below. The chart on page 6 summarizes the narrative responses to the three open-ended questions.

### 2011 Client Survey satisfaction rates

All DSHS Clients • Weighted Data



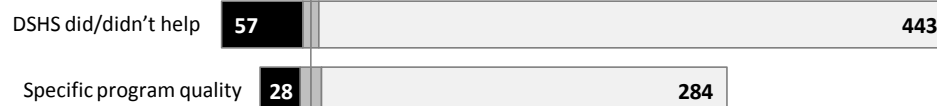
\* Percentage shown is the percent who answered "yes" or "strong yes." Data is weighted.

## Respondents who made positive, negative, or neutral/mixed comments<sup>\*</sup>

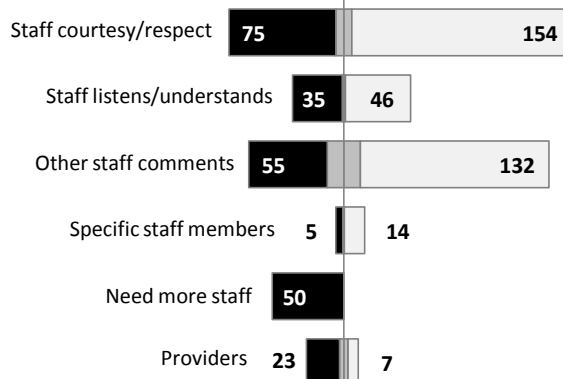
All DSHS Clients • Unweighted Data



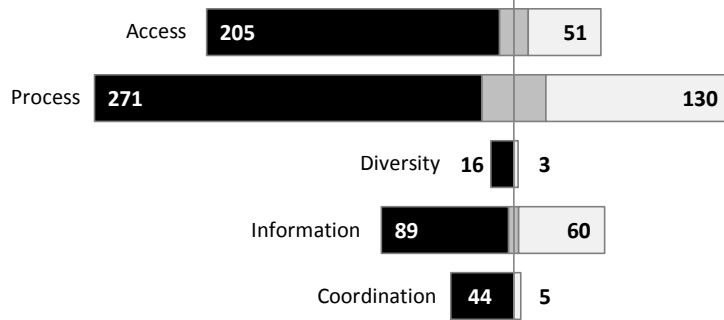
### QUALITY/HELP



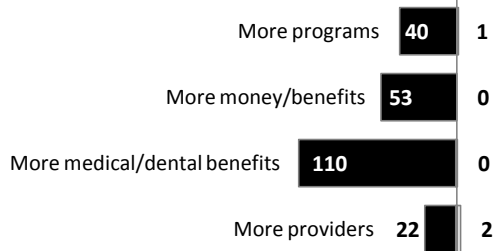
### STAFF



### SERVICE DELIVERY



### RESOURCES



<sup>\*</sup> Narrative comments were made in response to three questions:

- What do you like best about dealing with DSHS?
- What is the one thing DSHS can do to improve services?
- Do you have any additional comments?

A more detailed table showing themes from the narrative responses and a response glossary can be found in Appendix H.

# Quality and helpfulness



## Clients appreciate the Department of Social and Health Services

**The majority of clients expressed gratitude for the Department's services.** Often, even when registering complaints, survey respondents offered thanks for the services they received. Many clients believe that DSHS has improved their lives by providing them vital stability and support during difficult times.

**In the eyes of most DSHS clients, DSHS quality and helpfulness remain high.** The already high ratings for overall helpfulness showed an upward trend. This upturn is directly attributable to a sizeable increase in satisfaction among custodial parent clients of the Division of Child Support.

**This chapter focuses on the overall quality and helpfulness of the Department's services.**

- The first two pages highlight questions and comments regarding DSHS as a whole
- The remainder of the chapter addresses the quality of individual programs within the Department

**Subsequent chapters address more specific aspects** of service delivery and client involvement with DSHS. Although generally satisfied with their DSHS experience, clients offered a variety of suggestions for the improvement or expansion of the Department's services.



Photo courtesy of Microsoft, free domain.

**The majority of clients praised the general quality of DSHS work.**

"DSHS is a first class operation. They do an excellent job with the resources they have. I give them a clap on the back – they are great."

"Thanks for being there, and doing a great service for your fellow man."

"They do a very good job, even though they have a huge clientele and a lot of demands."

"I would be lost without the DSHS program. I think it's an outstanding organization all the way around."

"We've had a very positive experience with the staff and the organization as a whole."

"Keep up the good work."

"Don't change anything. Everything worked out great for me."

**Some clients had mixed reactions to DSHS work.**

"I am grateful the programs are there for folks like me, but they do need some improvement!"

"Overall DSHS does a good job, but I have some complaints regarding DDD."

"I am very pleased with the services that I am receiving. They need to provide better dental, like teeth cleaning, and vision."

"They do a good job overall – maybe a little faster."

**Others criticized DSHS work overall.**

"DSHS has been difficult for me. It is just real hard to work with DSHS."

"I really don't like anything about DSHS."

"They seem to be a wall that people run into. It is very difficult to get help when you need it."

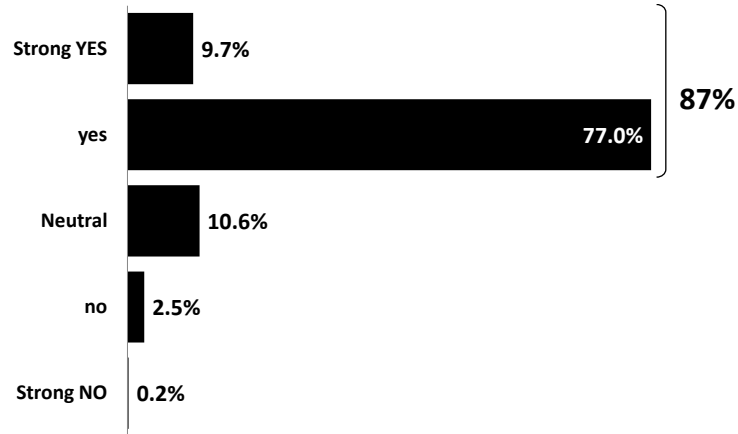
"Sometimes I feel that DSHS isn't really wanting to help me out. The system as a whole needs improvement."

"There is nothing really good about them."

"DSHS sucks sometimes."

**QUESTION | Thinking of all the programs together, has DSHS done good work?**

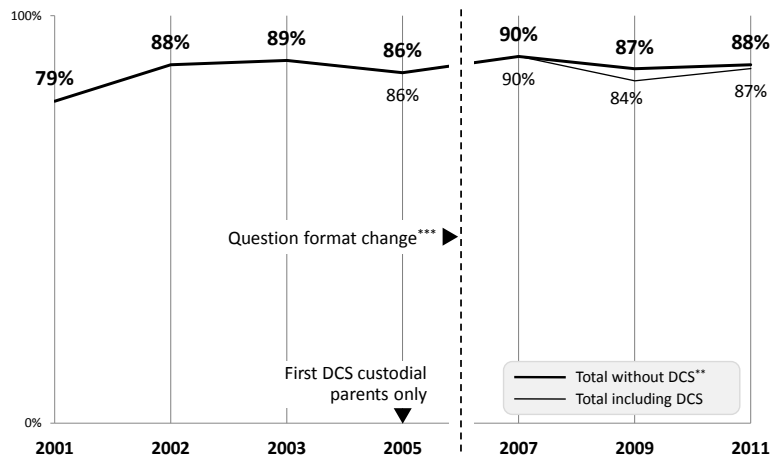
Nearly nine out of ten survey respondents (87%) told us that DSHS does good work. Less than one out of ten people (3%) disagreed.



**SUBGROUPS:** There were no significant differences between client subgroups for this question.\*

**Trend**

This chart shows the percentage of respondents who answered the above question positively from the 2001 survey to present. The increase from 2001 to 2011 is statistically significant.\*



\* All percentages are based on weighted data. Differences between subgroups and years are listed if significant at the .05 level.

\*\* The first three surveys (2001-2003) did not include child support (DCS) clients. Custodial DCS clients were added in 2005 and non-custodial in 2007. To look at trends for comparable groups, use the black line (without DCS) or compare 2007-2011 on the grey line (with DCS).

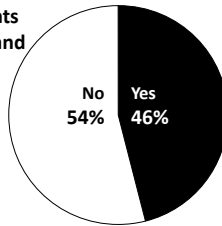
\*\*\* Question format changed between the 2005 and 2007 surveys, which may affect comparisons to previous years. See Appendix A.

NOTE: If a client utilized more than one program, the interviewer listed all the programs before asking this question. If a respondent utilized only one DSHS program, the answer to this question is the same as the answer to "Does your program do good work?"

## THEME | Quality and helpfulness of DSHS services

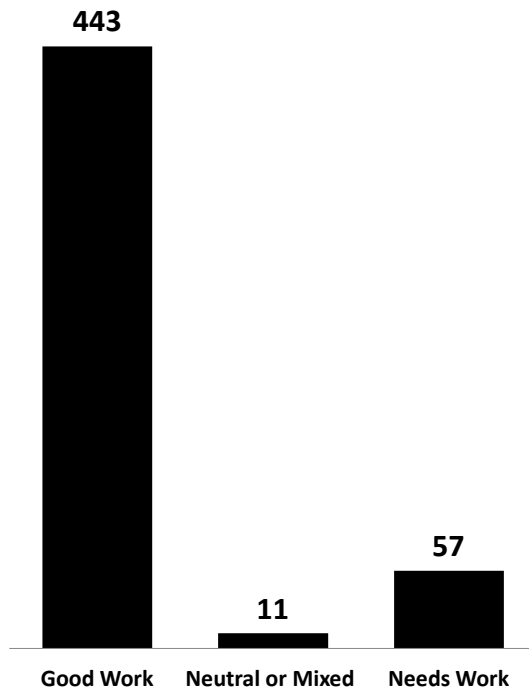
Comments about the overall quality and helpfulness of DSHS services (rather than specific programs or processes) were included in this category. Nearly half of the survey respondents made a general comment about the Department.

Made comments about quality and helpfulness?



511 of the 1102 survey respondents who made comments (46%) mentioned the quality and helpfulness of DSHS services.

Of those 511 clients who addressed DSHS quality and helpfulness, the overwhelming majority (87%) made positive comments.



The majority of clients commended DSHS helpfulness, and indicated they are grateful for the services they receive.

Many clients offered specific ideas for improving DSHS (discussed later in this report), but only a few made negative comments about DSHS overall. 30 clients replied “Nothing” to the question, “What do you like best about dealing with DSHS?” A small number offered examples of specific situations where DSHS had failed to respond to their needs.



Photo courtesy of Microsoft, free domain.

**Most clients are pleased with the quality of DSHS services.**

“The service is very good and I am happy with it.”

“I am happy and satisfied that DSHS helped me.”

“They have helped me when I have needed help. It is my safety net and I very much need it.”

“I really appreciate DSHS helping me and other disabled folks.”

“I am grateful for the services that we received when we needed them.”

“I have been very happy with the service.”

“Well, so far I am fine with all of DSHS services. DSHS gives many services and I am very pleased.”

“DSHS is always there for me, and is helpful.”

“We appreciate the services that we receive.”

“They certainly provide services that I would not get otherwise.”

“I like all the services that are set up and DSHS takes care of all of it and the only time we have to communicate is for annual reviews.”

“It’s a really reliable resource.”

“They help me survive.”

**Some dislike DSHS services, or dislike their need to rely on DSHS.**

“Dealing with DSHS is very hard.”

“One time I went to DSHS for services and told them I had nothing to eat, no blankets, no heat for my family – they told me it was my problem.”

“The situation and reason for why we are there is not a good thing. But we have had no control over it and have had to use the services to survive. And I don’t want to be there and it is shameful for me to be there but I have no choice. I want to be able to depend on myself and not the Department.”

“They don’t really help out with kids or elderly people. They don’t give the help to those who really need it.”

“I don’t like dealing with DSHS. If I didn’t need them I wouldn’t go to them.”



Photo courtesy of Microsoft, free domain.

**Appreciation for DSHS help was the most common theme in the survey comments.**

"DSHS has been a lifesaver for me. Without the medical assistance that I get, I don't think I would be here today. It's a wonderful organization!"

"They are doing a good job for me and my family."

"Without DSHS I wouldn't be able to pay for my medical bills or live in my home."

"They helped us with the needs of the 29 foster children that we had."

"They have given me the help that I need for me and my children, like medical and food stamps."

"I am very happy with DSHS. They have really gone the extra mile for me and helped me out."

"I really like how they help my grandmother. Without them, she wouldn't be able to live here."

"They have helped me with my family and give me food stamps, medical, money and other services when I have needed them."

**However, not all clients find DSHS programs helpful.**

"Offer any assistance at all in the DVR program, as I feel like I was left in the dark. They didn't follow through."

"It could do better helping mentally ill people. I have a daughter who is mentally ill and she cannot get any help."

"DCS needs a complete overhaul, as my child has a dead beat dad who quits whenever DCS tries to contact him."

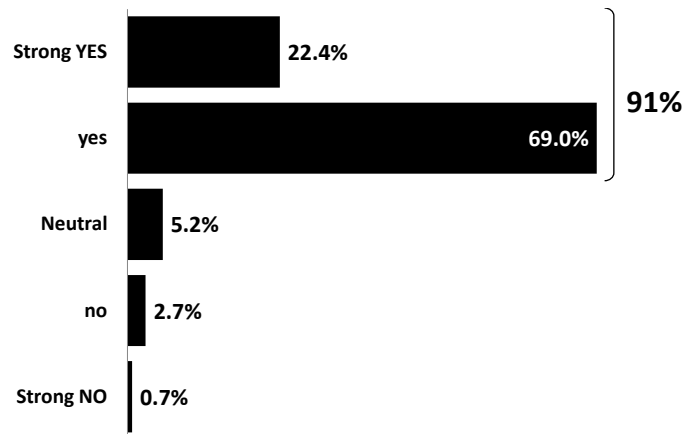
"I need new glasses and I cannot get them. Dental has also been cut."

"My dealings with CWS in Walla Walla County are terrible. My children have been in their custody for 17 months. It has been my worst nightmare."

"Over a 5 or 6 month period I still have not received the mental health help I am wanting. I had just gone through a divorce, I have 6 children, and was in a severe depression."

**QUESTION | Overall, have DSHS programs helped you and your family?**

More than nine out of ten survey respondents (91%) told us that DSHS programs have helped them or their families. Less than one out of ten people (3%) disagreed.

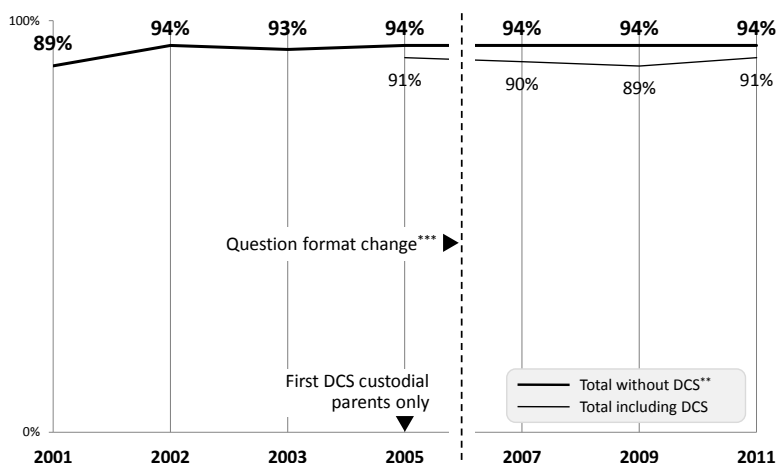


**SUBGROUPS:** Respondents were more likely to agree\* that DSHS programs help when:

- The client was Hispanic (95% agreed), compared to non-Hispanic Caucasian (90% agreed)
- The client was female (93%), rather than male (89%)
- The client was a child (96%), rather than an adult (89%)
- The respondent was a representative of the client (95%), compared to when the respondent was the client (88%)
- The client participated in two programs (93%), compared to three or more programs (89%)

**Trend**

This chart shows the percentage of respondents who answered the above question positively from the 2001 survey to present. The increase from 2001 to 2011 is statistically significant.\*



\* All percentages are based on weighted data. Differences between subgroups and years are listed if significant at the .05 level.

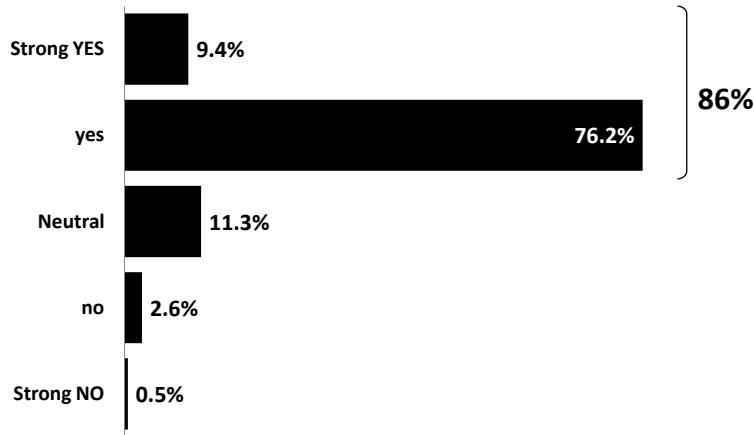
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\*\*\* Question format changed between the 2005 and 2007 surveys, which may affect comparisons to previous years. See Appendix A.



## QUESTION | Does your DSHS program do good work?

Almost nine out of ten survey respondents (86%) told us that the DSHS programs they used did good work. Less than one out of ten people (3%) disagreed.

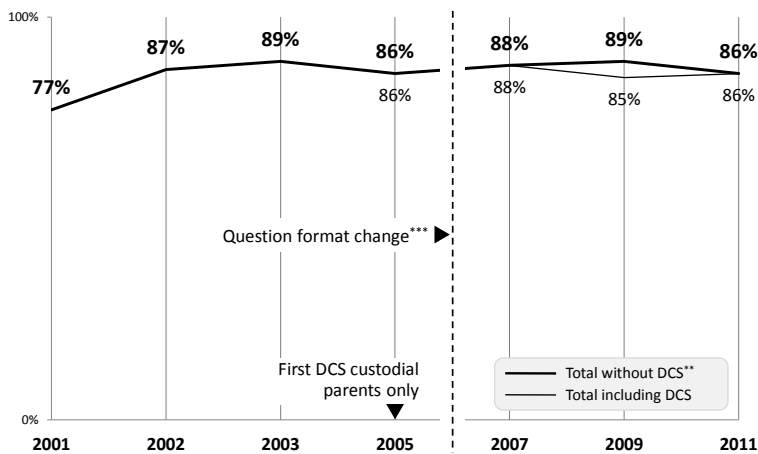


**SUBGROUPS:** Respondents were more likely to agree\* that DSHS programs do good work when:

- The client was Hispanic (92% agreed), compared to non-Hispanic Caucasian (85% agreed) or non-Hispanic minority (82% agreed)
- The client participated in two programs (87%), compared to three or more programs (82%)

## Trend

This chart shows the percentage of respondents who answered the above question positively from the 2001 survey to present. The increase from 2001 to 2011 is statistically significant.\*



\* All percentages are based on weighted data. Differences between subgroups and years are listed if significant at the .05 level.

\*\* The first three surveys (2001-2003) did not include child support (DCS) clients. Custodial DCS clients were added in 2005 and non-custodial in 2007. To look at trends for comparable groups, use the black line (without DCS) or compare 2007-2011 on the grey line (with DCS).

\*\*\* Question format changed between the 2005 and 2007 surveys, which may affect comparisons to previous years. See Appendix A.



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**Many clients gave high marks to a particular program or office.**

"I am really satisfied with Medicare and food assistance."

"They helped us adopt our children."

"They are really helpful and quick. They help you with whatever you need immediately. Port Angeles office."

"If it was not for the medical I would not have had the opportunity to go to inpatient treatment at St. Peter Hospital and now be in a clean and sober house."

"The DDD program was very helpful in providing in-home service for the birth-to-three program."

"They have provided me with a TANF grant and that has really helped me."

"I liked the fact that the Sky Valley CSO has a person that greets you when you arrive instead of just taking a number."

"They have provided a lot of mental health for me that has helped."

"I like that they have a new little room where you can go fill out forms on line, in the reception area (Everett CSO)."

**Some were impressed with one program or office, but not another.**

"It all depends on location. Downtown Seattle is horrible and seems understaffed. Whereas, Ballard is helpful, courteous and efficient in and out."

"The workers are very respectful at Yakima CSO, very caring and understanding. Sunnyside CSO not so much, the workers are disrespectful."

"I appreciate that they give me food assistance. I would like to get some help with housing. And be able to see my children."

"The CSO is very good for the most part. The only problem I'm having is that I'm having problems with TANF."

"DDD is more understanding with my children's disabilities that the CSO is."





Photo courtesy of Microsoft, free domain.

**Many clients commended DSHS program services.**

"I don't have to worry about not getting food; I don't have to worry about paying for the doctor. Everything is pretty much taken care of for her."

"I am going to school full time now, and DSHS is helping me with child care. If I didn't have that support I don't know what I would do."

"They have provided physical and speech therapy for my son, and I am very grateful for that."

"I was very happy and satisfied with the medical help when I was pregnant and immediately after my pregnancy."

"They have helped me with many services like mental health, drug and alcohol treatment, medical care and food stamps. Without their help I would not be here today."

"They have provided me with super excellent service with my child support."

"They are here to help us when we are in need with food, counseling and medical. DSHS can help people when they are in the worst of positions."

**Some suggested ways to improve particular program services.**

"More information about what they or DVR can do for clients. I would like them to get more help and options to their clients, and tell clients all the options up front."

"DCS needs to get their information correct."

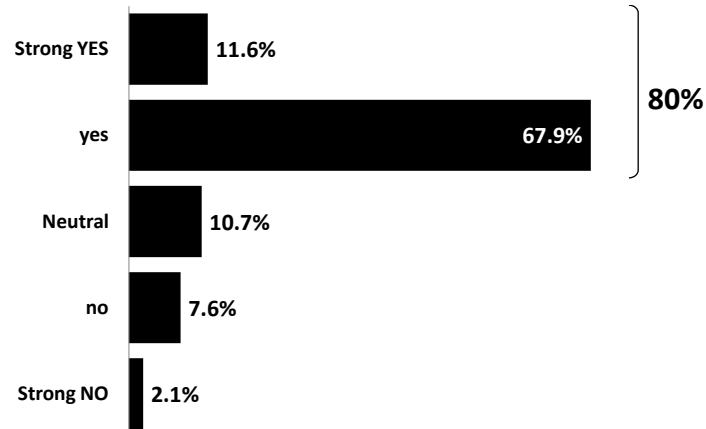
"Necessary dental work for client is very difficult to get!"

"All the mental health advocates ask, 'What kind of drugs do you want today?' I think there needs to be more counseling available."

"I went in to get more food assistance. There were lots of delays in getting an increase."

**QUESTION | Are you satisfied with DSHS program services?**

Eight out of ten survey respondents (80%) told us they were satisfied with services from their DSHS programs. One in ten people (10%) disagreed.

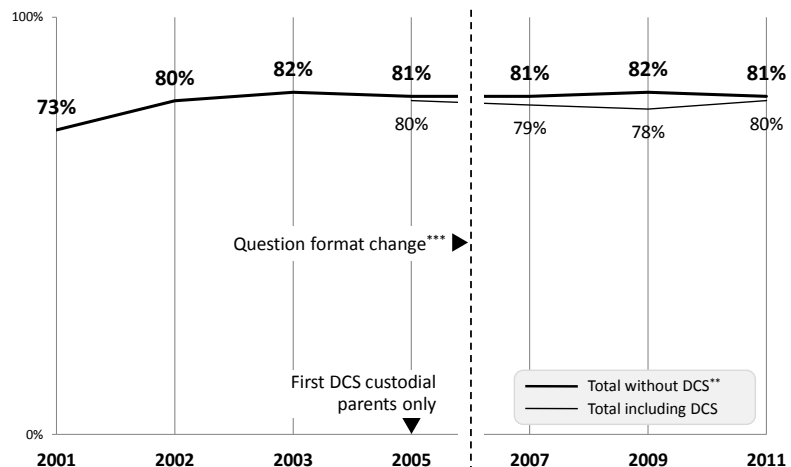


**SUBGROUPS:** Respondents were more likely to be satisfied\* with program services when:

- The client was Hispanic (91% agreed), compared to non-Hispanic Caucasian (77%) or non-Hispanic minority (77%)

**Trend**

This chart shows the percentage of respondents who answered the above question positively from the 2001 survey to present. The increase from 2001 to 2011 is statistically significant.\*



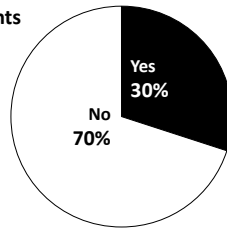
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\*\*\* Question format changed between the 2005 and 2007 surveys, which may affect comparisons to previous years. See Appendix A.

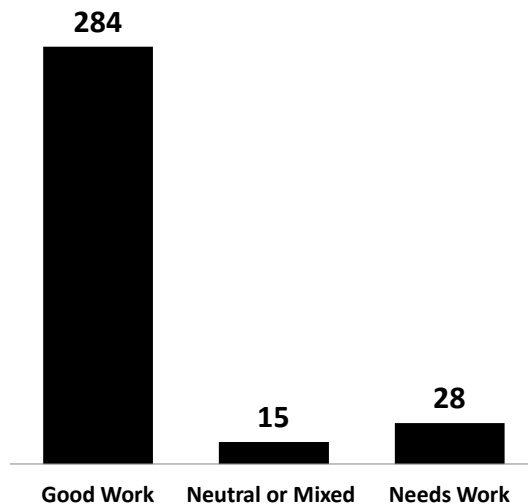
## THEME | Quality and helpfulness of specific programs, offices, locations

Made comments about specific program quality?



327 of the 1102 clients commenting (30%) mentioned the quality and helpfulness of specific DSHS services.

Of those 327 clients who addressed specific programs, offices, and locations, the overwhelming majority (87%) made positive comments. Nearly one in ten (9%) were critical or made suggestions for improvement.



Many clients offered enthusiastic assessments of the quality and helpfulness of DSHS programs and offices:

- 191 clients thanked DSHS for **medical** services
- 147 clients expressed gratitude for **food stamps**
- Clients also frequently praised **substance abuse, mental health, developmental disability, economic, and child support** services

Some suggested that individual programs or offices need improvement:

- 29 clients are dissatisfied by **poor service in their local DSHS office**
- 11 clients criticized **inefficient child support collection methods**
- Clients also lodged complaints about inadequate **medical, job placement, food assistance, daycare, and housing** services



Photo courtesy of Microsoft, free domain.

**A number of clients praised particular programs or offices for their quality services.**

"I am very thankful for the services that they have provided like medical, food stamps, TANF, my drug and alcohol treatment, and parenting classes."

"DASA was very helpful when I went into treatment."

"Since I have been dealing with Mental Health – they are very good at making sure I got what I really needed."

"We're VERY happy with Lakeland Village – a wonderful program."

"I love that they pay the pharmacy bills for my son! We could NOT pay for his prescriptions on our own and we are so grateful and happy that DD pays for them!"

"I like the drug and alcohol program."

"DDD is a good resource. As a parent, it is great to have a place to call for information and support."

"DVR is extremely helpful."

"I like the Omak CSO, as the workers are very positive."

"The Office of Child Support has been very helpful in providing services for me."

**Some clients registered complaints about a specific program or office.**

"Their employees could be a lot nicer in the Bremerton CSO. There are a couple of women who work there who are quite rude."

"I am a single mom with 5 kids - I work 60 hours per week. It takes way too much time to gather information for DSHS to get \$200 in food assistance. I have to sometimes take one day off work (unpaid) to do some of this."

"It is difficult to get in touch with the Bellingham office. I have to call Arlington instead and I am on hold 50 minutes!"

"DVR is messed up. The provider would keep changing and every time I would go I would be dealing with a different case worker which was very discouraging."



## Staff



### Clients want their dealings with Department staff to be positive and productive

As in previous years, the majority of survey respondents praised Department of Social and Health Services staff.

#### Clients appreciate staff who:

- Treat them with courtesy and respect
- Listen well, and understand their needs
- Respond to their needs quickly and effectively
- Know their jobs well, and work hard for their clients

#### Clients resent staff who:

- Are rude or judgmental
- Don't listen to them, or misunderstand them
- Fail to provide needed assistance
- Lack vital job knowledge or experience
- Appear disinterested in their clients' welfare

**Clients also commented on service providers** paid through DSHS. The compliments and criticisms clients made about providers were similar to those they made about DSHS staff.



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### Clients want staff to treat them with courtesy and respect.

"I like the kindness and the willingness to help."

"They need to have some type of courtesy requirements and people skills, because I have felt like my needs were not important."

"I like the people, they're very nice and always treat me with respect."

"The people at the front desk could have more pleasant attitudes, as they seem to be in a perpetual state that you are bothering them."

"They treated me like a real person. They didn't look down at me."

### They also want staff to hear and understand their needs.

"I've always been listened to and understood by DSHS workers."

"They could probably, in the future, try to get both sides of the story."

"The people are very courteous, and they listen."

"The worker needs to be more understanding with the client and the problems that they are dealing with."

"They listen to you."

### Clients like staff who are professional, knowledgeable, and work hard to help them.

"The caseworker we work with is a great guy and is very helpful and knowledgeable."

"They should have better training to explain what is available, and don't make me dig for answers."

"I like dealing with DSHS because his caseworker at DDD is knowledgeable about his needs."

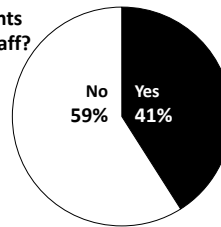
"If I go into the office they do a pretty good job of problem solving."

"Make sure workers have a better attitude toward helping those in need and treat them more like people, and not like they hate their jobs."

"DSHS moved quickly, efficiently, and has always been extremely professional and compassionate."

## THEME | All staff comments

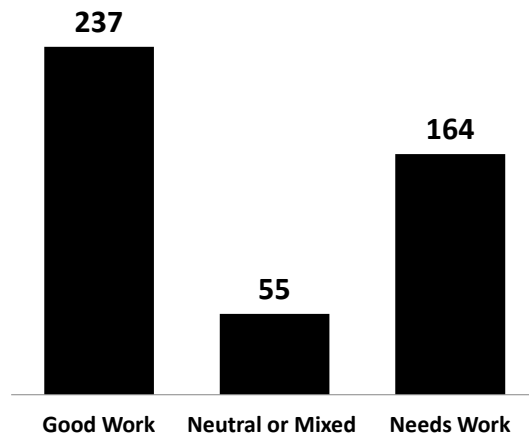
Made comments about DSHS staff?



456 of the 1102 respondents who made comments (41%) mentioned DSHS staff.

456 clients commented on their interactions with DSHS staff. The topics that clients mentioned most often are discussed in some detail later in this chapter.

More than half of the respondents who spoke about DSHS staff (52%) made positive remarks. More than one third (36%) made negative comments or suggestions for improvement. 12% made neutral or mixed comments.



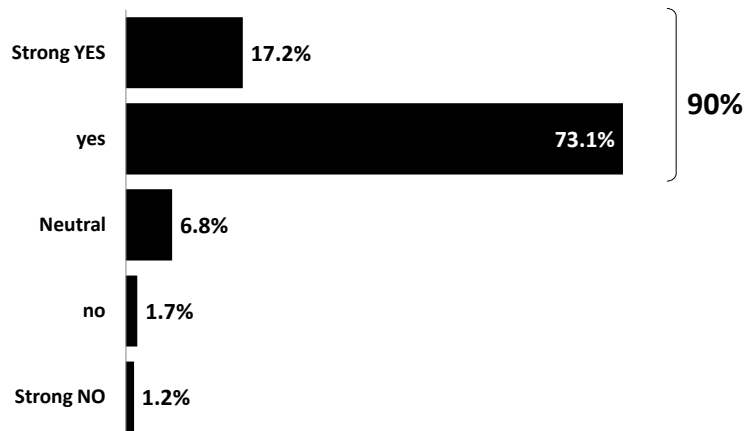
Comments about staff fall into four primary categories:

- Courtesy and respect. 240 clients addressed how they were treated by staff. See pages 17 and 18.
- Listening and understanding. 83 clients addressed these topics. See pages 19, 20 and 21.
- Other comments about staff – touching on topics like responsiveness, professionalism, and knowledge. 210 clients had both positive and negative observations in these areas. See page 22.
- Comments regarding particular staff. 20 clients complimented or complained about individual DSHS staff members. See page 23.

The last two pages of this chapter review client comments about DSHS providers (page 24) and the need for more DSHS staff (page 25).

## QUESTION | Do DSHS staff treat you with courtesy and respect?

Nine out of ten respondents (90%) said DSHS staff treat them with courtesy and respect. Less than 3% disagreed.

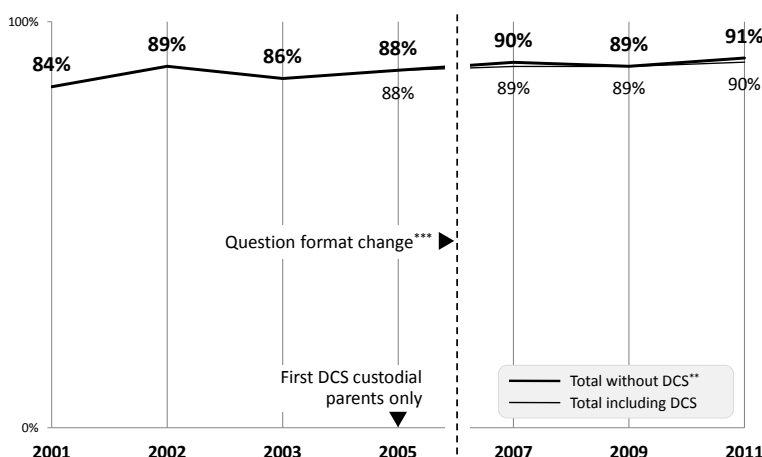


**SUBGROUPS:** Respondents were more likely to agree\* that DSHS staff are courteous and respectful when:

- The client participated in one program (93% agreed), compared to three or more programs (88% agreed)

## Trend

The chart below shows the percentage of respondents who answered positively from the 2001 survey to present. The increase from 2001 to 2011 is statistically significant.



\* All percentages are based on weighted data. Differences between subgroups and years are listed if significant at the .05 level.

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\*\*\* Question format changed between the 2005 and 2007 surveys, which may affect comparisons to previous years. See Appendix A.



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**The majority of clients noted staff's courteous and respectful behavior.**

"They always treat me with courtesy and respect."

"They are very friendly and compassionate."

"Staff truly care about those in need, and they treat me with respect."

"They are very friendly, and have helped us a lot."

"The DDD caseworker has a lot of empathy and is concerned."

"They are nice, and they are courteous."

**Some clients thought staff were rude or inconsiderate.**

"They don't treat you well, they treat you like you are wasting their time."

"Some of the staff need to be more open to people's feelings – some staff have been really rude."

"They could have customer service. I would like to see a little more compassion."

"They treated me very poorly. I felt like I was being herded through like cattle, there was no empathy."

"Customer service can be improved on. Sometimes they are very rude."

"They could work with their hearts a little bit more."

**Clients particularly resent feeling "judged" by staff.**

"They should not judge people when they walk into the office."

"Treat people with integrity. It's not always their fault that they are in need. It's very important for the workers at DSHS to remember that they can themselves be in our same shoes."

"Pay more attention to what their clients say, and don't just judge them and think that they are lazy."

"They could have nice and more respectful staff. They tend to look at you with judgment."

"I felt like they treated me like a loser."





Photo courtesy of Microsoft, free domain.

### Clients want staff to be courteous and friendly.

"They are really courteous and understanding."

"They could have better customer service because they always seem tired and angry, which ends up making me feel bad and I have mental disabilities. SO it is very hard to go into their office."

"When I had to get help when I got my granddaughter, they helped me and were very courteous."

"The front desk lady could be a lot friendlier."

"They were really friendly, knowledgeable and helpful."

### They also want staff's respect, regardless of their current situation.

"They are attentive and treat you with respect."

"The personnel seem to take out what happens to us on us...the client."

"The worker and staff do not look down on the people coming in for benefits."

"They could have respectful people receiving you and talking to you in the reception area."

"I think they are respectful and understand my needs."

"They tend to 'look down' at people applying for assistance."

### Clients value staff who show them caring and concern.

"They are caring, concerned, and want to be helpful."

"I think they should take into consideration people that have mental illness. It is difficult for me to follow through on the DSHS programs and my caseworker pretty much said she didn't care."

"The caseworkers really seem to care about the kids."

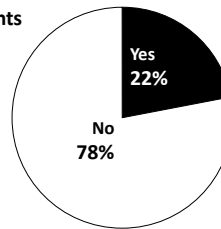
"The workers are very rude, they don't care about your time."

"I like the care and the response of the caseworkers."

"I am very happy with the quality of the staff. They seem concerned."

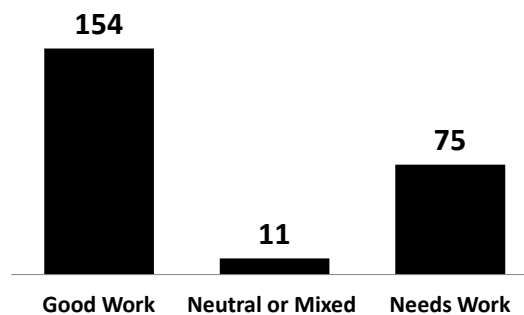
## THEME | Staff courtesy and respect

Made comments about staff courtesy and respect?



240 of the 1102 clients commenting (22%) mentioned staff courtesy and respect.

The most commonly mentioned staff issue in the survey was courtesy and respect. Of the 240 clients who commented on staff courtesy and respect, the majority (64%) were complimentary. Nearly one in three (31%) made criticisms or suggestions for improvement.



Most clients who commented mentioned one or more of the following:

- DSHS staff are friendly, and willing to help
- Staff show respect for clients, whatever their circumstances
- Staff truly care about their clients

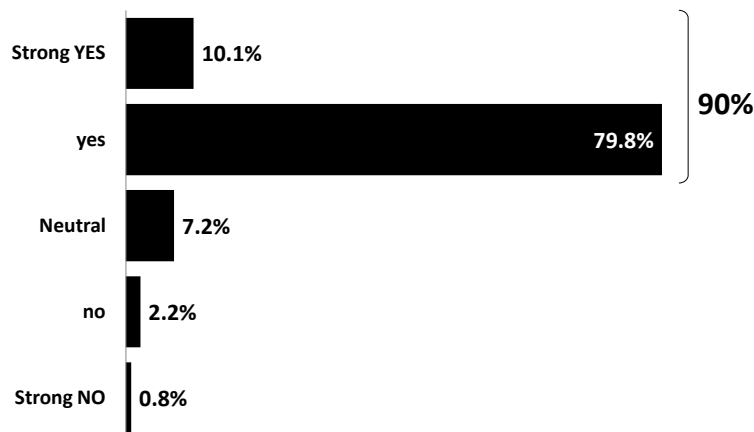
Some suggested these improvements:

- Staff should not be rude or dismissive to clients, even when working under pressure
- Staff should never "talk down" to clients, or treat them as if their concerns don't matter
- Staff should exhibit more warmth and compassion when interacting with clients



## QUESTION | Do staff listen to what you have to say?

Nine out of ten respondents (90%) feel that DSHS staff listen to them. Only 3% disagreed.

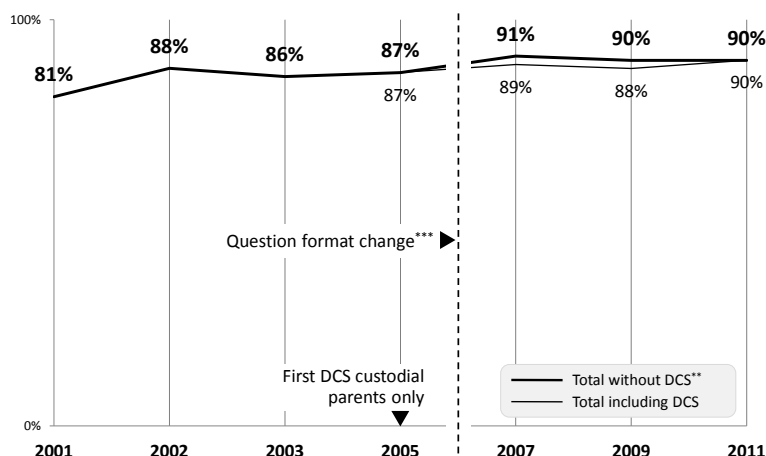


**SUBGROUPS:** Respondents were more likely to agree\* that staff listen to them when:

- The client was Hispanic (95% agreed), compared to non-Hispanic Caucasian (89%)
- The client participated in one program (93%), compared to two programs (88%) or three or more programs (86%)

## Trend

The chart below shows the percentage of respondents who answered positively from the 2001 survey to present. The increase from 2001 to 2011 is statistically significant.



\* All percentages are based on weighted data. Differences between subgroups and years are listed if significant at the .05 level.

\*\* The first three surveys (2001-2003) did not include child support (DCS) clients. Custodial DCS clients were added in 2005 and non-custodial in 2007. To look at trends for comparable groups, use the black line (without DCS) or compare 2007-2011 on the grey line (with DCS).

\*\*\* Question format changed between the 2005 and 2007 surveys, which may affect comparisons to previous years. See Appendix A.



Photo courtesy of Microsoft, free domain.

### Clients like staff who are good listeners.

"They listen to our problems, and like to help and understand what we try to say to them."

"They listen to me and help my son who is disabled."

"I like the support that they give me, and the listening skills that they give to me."

"We are able to deal with them, and they listen to the needs."

"The woman who helped us at DDD was friendly and helpful and easy to talk to."

"They are really open to hear what you have to say."

"I like that they are nice and courteous and always willing to listen."

### Some clients feel staff don't listen well.

"They could listen to you. They could treat you like a civil human being."

"They need to listen to the foster parents since they [the children] are with us 24-7. It seems like when we asked for resources for the children, such as counseling, etc., it was like we were talking to a brick wall."

"DSHS staff don't listen to the whole problem and take that into consideration."

"Be better listeners, and explain things better."

"They need to listen to both sides and then make a decision. Not make a decision before they know the facts. Not all the facts that they have been told are the truth. They need to verify these facts before making a decision."

"Listen to the clients more."

"Listening to the person applying and being a little more personal, and understand what is going on instead of just doing paperwork."

"DCS did not listen very well to me, and always threatened me with the court and/or jail."

"Listen to people more, and not be so difficult."



Photo courtesy of Microsoft, free domain.

### The majority of clients feel that staff understand their needs.

"I like his social worker. He understands my son's needs well, and is open to any questions that we have."

"They are understanding of the situation, and they try to help with the situation."

"The times I have been there, the staff have been very kind and very human, and understand my situation."

"I have a hearing loss and they understood the problem and were very good at helping me accomplish what I wanted."

"They helped me out with my medical bills. They were understanding and approved my surgeries."

"I have suffered from depression – they treat me nice and I like the people. They are fair and understand my needs."

"I like the person that I worked with – they were very understanding."

"The people are very friendly and understanding with my needs, and are willing to help me if they can."

### Some clients feel staff should have a better understanding of their circumstances.

"The caseworkers do not understand the situation that the client is in, and they don't treat them like they should. They need to understand the situation."

"They need to understand what you are there for, and that you need the assistance that you are asking for."

"They needed to listen to the client a little closer, and understand needs."

"They could be more understanding. If you don't have a job it is hard to pay the child support and your own personal bills."

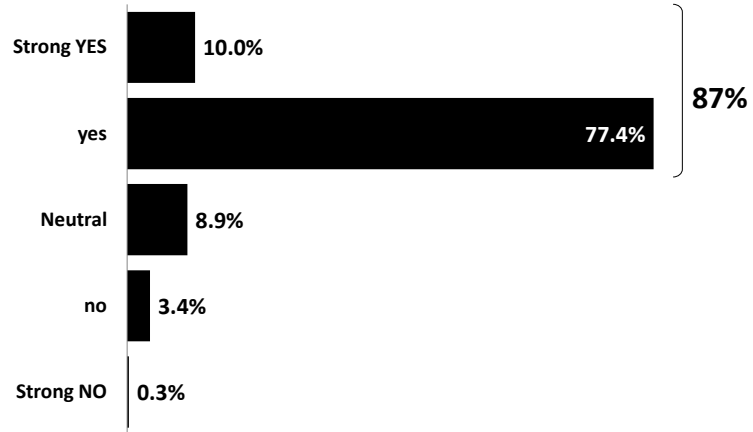
"They could understand their clients' needs better."

"They need to listen to the client closer and understand the needs."

"They could focus more on what people need and take care of their needs, instead of doing what they think that person needs."

## QUESTION | Do staff understand your needs?

Nearly nine out of ten respondents (87%) feel that DSHS staff understand their needs. Just 4% disagreed.

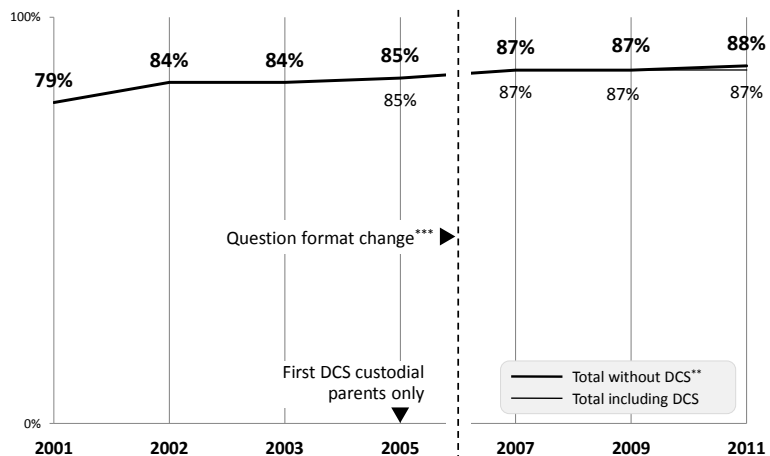


**SUBGROUPS:** Respondents were more likely to agree\* that staff understand their needs when:

- The client was a child (91% agreed), rather than an adult (85% agreed)
- The respondent was a representative of the client (90%), compared to when the respondent was the client (85%)
- The client participated in one program (91%), compared to two programs (85%) or three or more programs (84%)

## Trend

The chart below shows the percentage of respondents who answered positively from the 2001 survey to present. The increase from 2001 to 2011 is statistically significant.



\* All percentages are based on weighted data. Differences between subgroups and years are listed if significant at the .05 level.

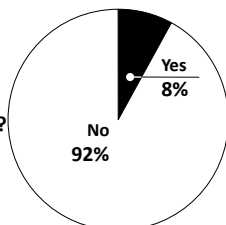
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\*\*\* Question format changed between the 2005 and 2007 surveys, which may affect comparisons to previous years. See Appendix A.

NOTE: Non-custodial parents were not asked this question about services from the Division of Child Support services as the question is not applicable for these clients.

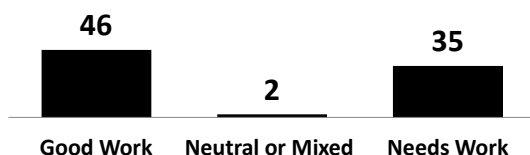
## THEME | Staff listen/understand

Made comments about staff listening or understanding?



83 of the 1102 respondents who made comments (8%) mentioned staff listening or understanding.

More than half (55%) of the clients who addressed staff listening and understanding made positive remarks. About four out of ten (42%) offered criticisms or suggestions for improvement.



Some clients offered DSHS staff one or more of the following compliments:

- DSHS staff are good listeners
- Staff ask for and use client input when service decisions are made
- Staff understand the individual needs of their clients

Others suggested the following improvements:

- Staff need to listen more carefully
- Staff should give clients a stronger voice in their service plans
- Staff should remember that each client's situation is unique
- Staff should recognize that one-size services do **not** fit all

For more insight into client/staff interaction, see the "Client Involvement" chapter (Chapter 5).



Photo courtesy of Microsoft, free domain.

**Clients want staff to hear and understand the information they share.**

"They do listen when I have something to say."

"The staff don't seem to understand the problems that I have very well."

"They understand what I need – they are very helpful and very caring."

"The Support Enforcement Officer is pretty much being unfair to us because of the situation. He didn't want to hear what I had to say."

"They are cooperative, and pretty understanding."

**They also want a strong voice in decisions about their services.**

"Division of Child Support understood my financial situation and they were really good working with me. When I contacted them about reducing the amount, they cut it in half and they take it out of my SSA disability automatically."

"They need to follow up with the client, find out what's going on, and don't make decisions for the client."

"They seemed to be on the same approach as me, and we did what made sense, to use the skills I had and added ones that I needed (DVR)."

"Work with the people. When we had foster children, they would help us half of the time and the other half they wouldn't."

"I really appreciate that they are willing to work with me."

**Clients want staff to see them, and their circumstances, as "one of a kind."**

"The people I worked with listened to my specific circumstances and made decisions based on those. I didn't feel like I was placed into a category."

"They could actually understand my situation better, instead of comparing me to someone else."

"It's personal – you get personal care and attention and I'm pleasantly surprised by that care."

"I like them to understand the people, and their circumstances."



Photo courtesy of Microsoft, free domain.

#### Clients want staff to respond to their specific needs.

"The caseworkers are good and responsive."

"It's nearly impossible to get someone to answer basic questions over the phone."

"He has an excellent caseworker, and he is always there for him."

"The people at the counter need to understand that everyone has a different problem that sometimes needs to be treated in different ways."

"They are always right there for you and answer any questions. They were very helpful in planning for my son's future."

#### They appreciate staff who go the "extra mile" when providing service.

"The people that we have dealt with have been outstanding and helpful."

"They were very helpful, courteous, and answered all the questions that I had. They were very good about returning paperwork, etc."

"Their customer service was very good and very supportive!"

"The staff are wonderful, they are very nonjudgmental, they are very service-oriented, and quick to produce positive results."

#### Clients like dealing with professional staff who know their job well.

"The staff I have worked with have been very professional and treated me well."

"They should have better training for the staff, so all have a better understanding of what their own programs are about."

"A lot of workers are unprofessional."

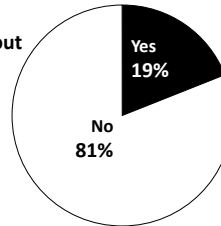
"They can't think on their own, and don't follow up with plans as stated."

"I absolutely have had no problems. The big part of it is knowing what you need and having a knowledgeable caseworker – my caseworker is WONDERFUL!"

## THEME | Other comments about staff

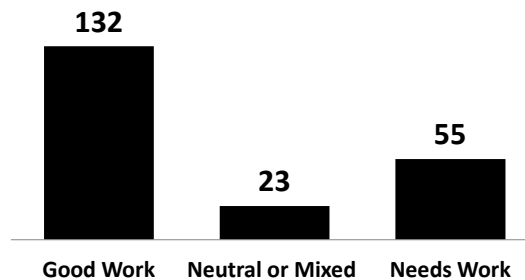
All comments about staff which did not refer to courtesy, respect, listening, or understanding were categorized as "Other" staff comments.

Made other comments about staff?



210 of the 1102 clients commenting (19%) made other comments about staff.

Most of the 210 clients (63%) made positive comments about DSHS staff. More than one quarter (26%) made criticisms or suggestions for improvement.



The majority of comments that did not address courtesy, respect, listening, or understanding mentioned one of these points:

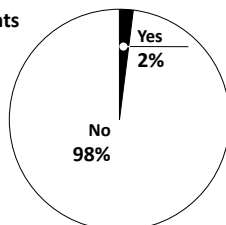
- DSHS staff try hard to respond to clients' needs
- Staff provide excellent customer service
- Staff conduct themselves as professionals
- Staff are knowledgeable, and skilled in the work they do

Some comments suggested the following:

- Staff should be more responsive to client questions and requests
- Staff should know more about their own programs
- Staff should be more professional in their dealings with clients

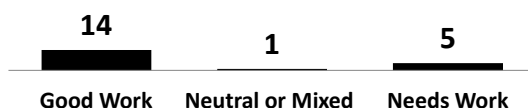
## THEME | Specific staff members

Made comments  
about specific  
staff  
members?



20 of the 1102 respondents who made comments (2%) named specific staff members.

Most of the clients who mentioned particular staff members (14 of 20) made positive comments. Six made negative or neutral remarks.



The majority of clients who commented praised particular staff members for:

- Their willingness to help
- Their responsiveness to client needs
- Their quality work
- Their ability to collaborate with clients
- Their strong support

The few who made negative comments feel that certain staff members should be:

- More compassionate
- More honest
- More reliable
- More professional



Photo courtesy of Microsoft, free domain.

### Some clients praised particular staff members.

"My caseworker, Jen Sibley, she is awesome and I love her – she does really good work for me."

"I like her caseworker, Paul Snow. He does his best and tries to accommodate us and get what she needs. He calls back very quickly."

"I like my caseworker, Teresa Bisette, a lot - she is very helpful."

"My social worker, Pamela Lyons, in the Vancouver office is very good!"

"Joy Shields is an awesome person and has been very helpful and has given me the confidence I needed."

"Kim Gibson is our caseworker and she is very accommodating, thorough, efficient, and personable."

"My worker – Candice Spencer – she is always helpful and is very good at her job."

"I like working with our caseworker, Diana Woods."

"My mom's social worker, Heather Dagg, is the best."

"I like my AAA caseworker, Rochelle Sunberg, a lot."

### A small number of clients disliked the behavior of certain staff members.

"I did NOT say I used drugs, and passed a drug test saying I was clean. My initial caseworker was terrible. Everything she wrote was 100% lies."

"My worker needs to retire or be fired. She takes the tiny bit of authority she has and abuses it."

"I think my original caseworker is on some pills...she acts that way and talks that way... a pill pumper."

"I was disappointed with my DVR counselor. She doesn't follow through on issues, money owed to me, certain paperwork. I leave her messages and she doesn't return the calls."



Photo courtesy of Microsoft, free domain.

**Some clients spoke highly of the service they receive from DSHS providers.**

"The network of doctors is great."

"Thank you! DVR contracted with a private agency to give my son assistance in completing a resume. They were fabulous, and my son got a job."

"I like my services from Columbia River Mental Health."

**Most clients indicated that service from providers could improve.**

"The clinics like Seamar that DSHS contracts with are somewhat of a third world – bottom of the barrel – medical care clinics. DSHS should try and get better medical healthcare clinics for their clients."

"The job coach was not good at service options that were available."

"The Adult Family Home situation needs to be totally overhauled. It is a complete racket! She has lived in three of them and I had to take her out of all three."

"Give me a woman care provider so I can take showers."

"When she was admitted to the hospital for a urinary tract infection, we told them she could not walk and was end-stage Alzheimer's. They assisted her in walking anyway, and ended up breaking her foot."

"Emergency response teams outside of business hours needs to be addressed. They are simply not available."

**Clients want respect from the providers who serve them.**

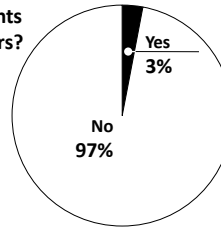
"The doctor I saw about 1 year ago, her nurse had me weighed and I weighed too much for her scale and she made rude comments to me."

"The mental health workers do not need to be so RUDE in communication with their clients."

"It seems like when I had to take my son to the emergency room, they looked down on me because I had coupons."

## THEME | Providers

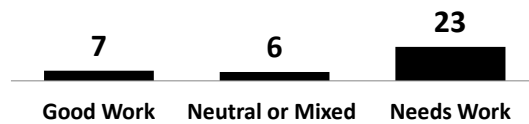
Made comments about providers?



36 of the 1102 clients commenting (3%) spoke about DSHS providers.

In addition to comments about DSHS staff, 36 clients commented on the quality of services received from providers paid through DSHS.

Of those who commented on DSHS providers, 23 (64%) offered negative comments or suggestions for improvement. Seven (19%) made positive remarks.



The majority of clients who made comments (many about medical or mental health providers) had specific complaints, such as:

- Providers are incompetent
- Providers are disrespectful
- Providers are unresponsive to client needs

Those who made positive comments appreciate:

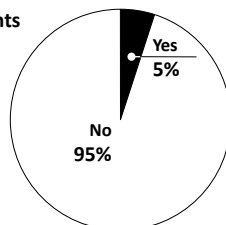
- Providers who are skilled at their jobs
- Providers who are attentive and understanding
- Providers who are a good "match" for their specific needs

The most frequent complaint regarding providers is that it is too hard to find a provider who accepts medical/dental coupons. This complaint is addressed in the Resources chapter (Chapter 7), page 63.



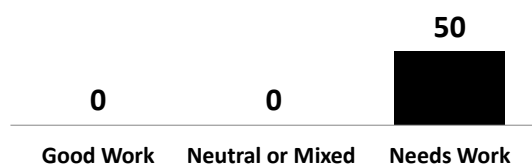
## THEME | Need more staff

Made comments  
about the  
need for  
more staff?



50 of the 1102 respondents who made comments (5%) noted the need for more staff.

All of the 50 clients who made comments addressed the need for more DSHS employees.



The majority of those who commented made one or more of the following points:

- More staff lead to better service
- More staff would give clients more personalized service
- More staff would decrease wait times in the office
- More staff would make it easier to get a “real person” on the phone



Photo courtesy of Microsoft, free domain.

### Clients want more DSHS staff hired to improve customer service.

“Have the caseloads small enough to handle the problems that occur with foster children.”

“It would be nice if he could see his DD caseworker more often. I know she has a very heavy caseload, and I know that she doesn’t have time to see her clients more than once or twice a year.”

“They need to personalize it more – when I call it is impossible to get a real person on the phone. Maybe they are understaffed – they need help in this area.”

“Some staff seem overworked and act like they don’t want to be there – which sometimes makes it hard when asking for help, mostly with alcohol and drug needs.”

“I think they don’t work efficiently. You are supposed to have a social worker, and the social worker never calls you back. They seem to be understaffed.”

### They believe an increase in staff will lead to a decrease in wait times, both in offices and on the phone.

“Maybe having more workers, because sometimes they leave you on hold for a very long time.”

“Have more personnel so clients can be seen quicker.”

“Have more clerks – long waits.”

“More people in call centers, and shorter wait times on the phone and in the office.”

“They could have more workers. Sometimes when you are at their office, you are there for 6 hours average. It seems like they are understaffed.”

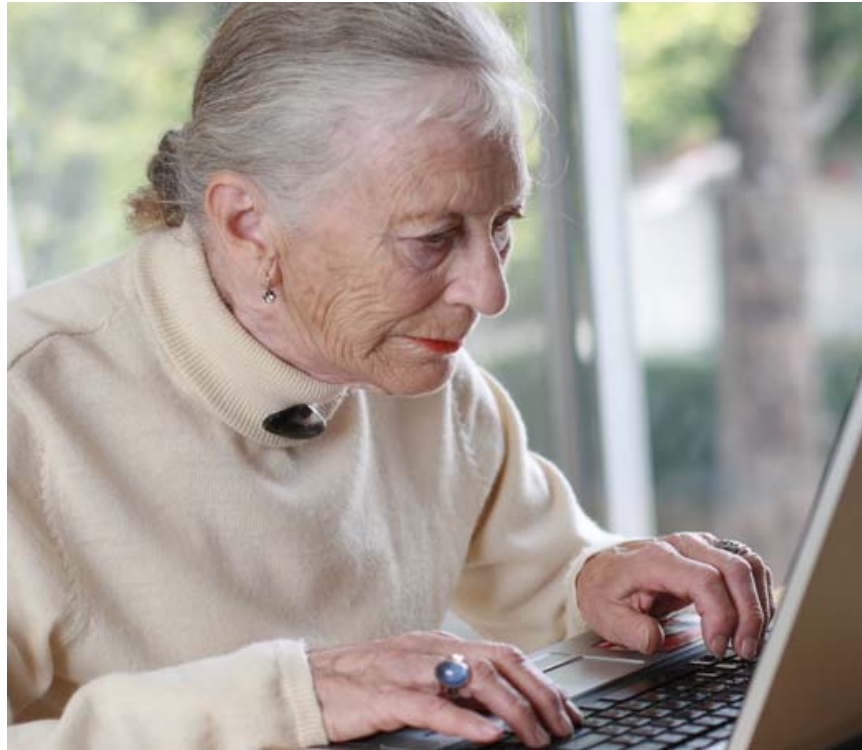
“Smaller caseloads so that the response time in answering questions is better.”

“Make it so the clients do not sit out in the lobby for days at a time. Need more workers in the front office to help the clients.”





## Access and Process



### Clients want DSHS services to be accessible and easy to use

**Access to staff has become a huge issue in this time of increasing client need and decreased staff.**

- Negative comments about phone and staff access increased by more than 50% from 2009, with most of these negative comments (76%) coming from Community Service Office (CSO) customers
- 22% of all clients – and 40% of CSO clients – said that it is NOT easy to get a live person when needed
- Clients want faster and less frustrating ways to interact with staff by phone, mail, or e-mail
- They *particularly* want call center systems that are easier to use

**Clients expressed more satisfaction with some aspects of business processes.**

- Positive comments about processes – excluding phone and staff access - increased by 27% from 2009
- Negative comments about process decreased by 10%
- Compared to 2009, more Division of Child Support clients reported that services were easy to access and were provided quickly, and staff returned phone calls in a timely manner

**Complicated and confusing processes continue to frustrate clients.** They would like DSHS to:

- Make online services more “user friendly”
- Decrease and simplify paperwork
- Streamline eligibility processes, and reduce program waiting lists
- Provide quick and easy ways to schedule and complete appointments
- Decrease wait-times in DSHS offices



Photo courtesy of clipart.com.

**While most clients responded positively to questions about DSHS program office hours, only two made favorable comments on this topic.**

"I like the hours they are open."

"I like the location, hours, and the staff of the office that I go to."

**Most comments about office hours were requests for extended hours.**

"Extend evening operating hours."

"I think that they need to have services 24 hours per day so that when there is an emergency the client can talk to someone to try and solve the problem."

"They could maybe have a little longer hours."

"Be open 24 hours a day!"

"It would be nice if they were available to answer the 1-800 medical question phone longer hours."

"Lengthen the hours they are open."

"Keep the offices open five days a week!"

"Be open more hours."

**Working clients want DSHS hours to accommodate their schedule.**

"I work nearly the same hours as the DSHS office so it's difficult to get there or get them on the phone."

"The furlough day is sometimes the only day I can run errands."

"Maybe have different times available to come in for the interviews – before 8:00 AM and after 5:00 PM would be very nice, maybe even weekends. I had to take time off work to actually do the interview at the CSO."

"They need to be available to people who work during the day."

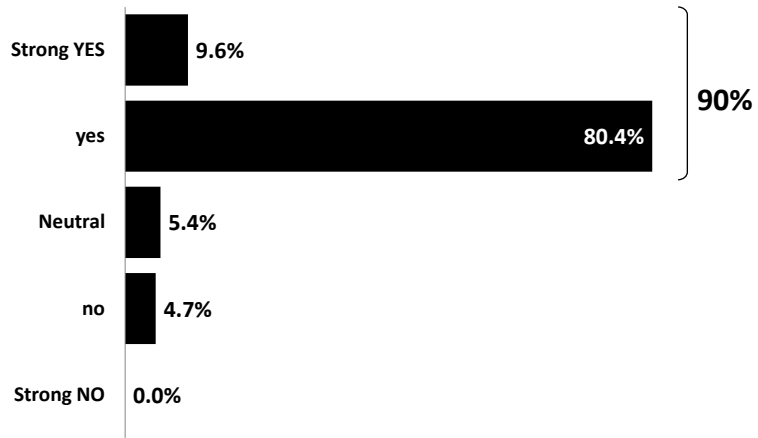
"DSHS might have longer office hours. I work and get off at 5 pm, which makes it difficult to get to the DSHS office before closing. Maybe consider staying open until 6 or 7 in the evening."

"They could be more supportive of working people, and have hours where those clients can either get into the office or contact someone by phone."

"They set everything up for DSHS's schedule and forget that people are working for a living."

## QUESTION | Are DSHS program offices open at times that are good for you?

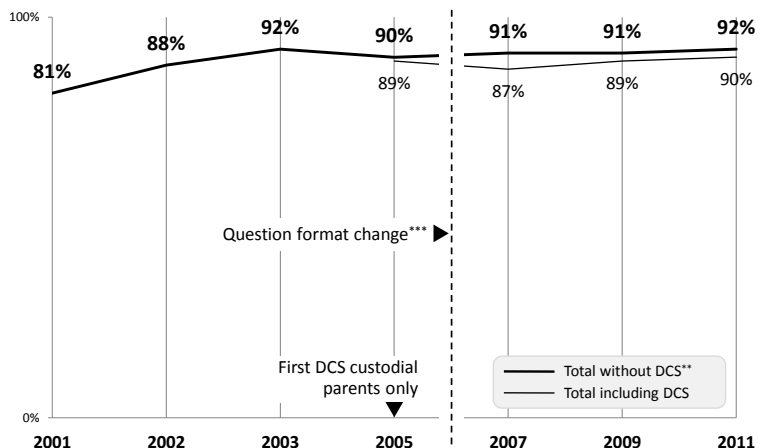
Nine out of ten survey respondents (90%) told us that DSHS programs are open at convenient times for them. Less than one out of ten people (5%) disagreed.



**SUBGROUPS:** There were no significant differences between client subgroups for this question.\*

## Trend

This chart shows the percentage of respondents who answered the above question positively from the 2001 survey to present. The increase from 2001 to 2011 is statistically significant.\*



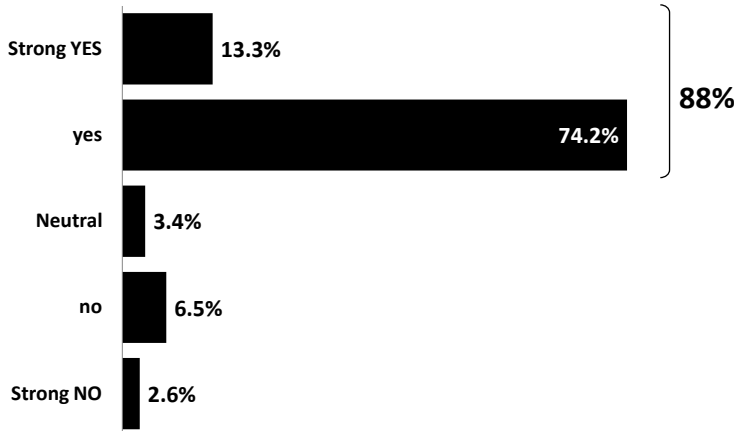
\* All percentages are based on weighted data. Differences between subgroups and years are listed if significant at the .05 level.

\*\* The first three surveys (2001-2003) did not include child support (DCS) clients. Custodial DCS clients were added in 2005 and non-custodial in 2007. To look at trends for comparable groups, use the black line (without DCS) or compare 2007-2011 on the grey line (with DCS).

\*\*\* Question format changed between the 2005 and 2007 surveys, which may affect comparisons to previous years. See Appendix A.

**QUESTION | Is it easy to get to the DSHS program office?**

Almost nine out of ten survey respondents (88%) agreed that it is easy to get to DSHS program offices, while nearly one in ten people (9%) disagreed.

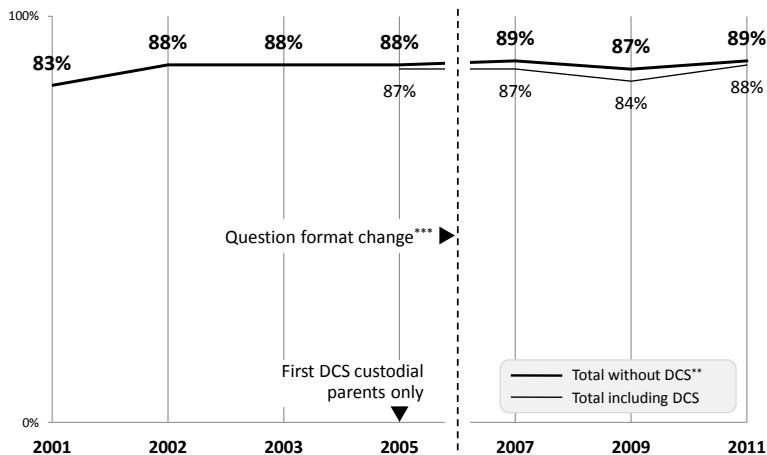


**SUBGROUPS:** Respondents were more likely to agree\* that offices are easy to get to when:

- The client was a child (91% agreed) rather than an adult (86% agreed)
- The respondent was a representative of the client (91%), compared to when the respondent was the client (84%)

**Trend**

This chart shows the percentage of respondents who answered the above question positively from the 2001 survey to present. The increase from 2001 to 2011 is statistically significant.\*



\* All percentages are based on weighted data. Differences between subgroups and years are listed if significant at the .05 level.

\*\* The first three surveys (2001-2003) did not include child support (DCS) clients. Custodial DCS clients were added in 2005 and non-custodial in 2007. To look at trends for comparable groups, use the black line (without DCS) or compare 2007-2011 on the grey line (with DCS).

\*\*\* Question format changed between the 2005 and 2007 surveys, which may affect comparisons to previous years. See Appendix A.



Photo courtesy of Microsoft, free domain.

**Although most clients reported that DSHS office locations are convenient, only a few made positive comments about location.**

"I like the accessibility."

"There are so many locations to get help."

"Their office is right by my house, and easy to get to."

"They are everywhere, and are easy to find."

**Some clients are dissatisfied with office locations, and offered suggestions for improvement.**

"The north end of Seattle needs another DSHS office to help clients."

"They get pretty backed up in Wapato – they may need more staff and a bigger office space."

"They need a bigger parking place at the CSO on Edison in Kennewick!"

"My DSHS office is really crowded – it is on N. Maple Street in Spokane. They need a bigger office!"

"I would like to have a representative that is closer – have offices more convenient to access. My officer is in Bellingham, which is about three hours away!"

**Other clients addressed transportation issues.**

"It would be a lot simpler if there were an easier way to get transportation. We have to use DART and you need a week's notice. For MERCY, you need advance notice for that transportation as well."

"Transportation is a very great need I have."

"It would be good if a CSO was located closer to me. I have to ride a ParaTransit vehicle for one hour each way to and from the CSO."

"It is a bit of a drive."

"Explain where they are and where the building is and how to use public transportation to get there."

"Sometimes there is no transportation in order to get to the office, and they need to make exceptions for this."



Photo courtesy of Microsoft, free domain.

**A small number of clients made favorable comments about DSHS offices, or office locations.**

"It's easy access."

"They are redoing the office, and it is getting less crowded."

"I like the fact that DSHS is close by."

"[The] office is very clean."

"It was easily accessible."

"They are easy to get to."

**Clients dissatisfied with location or hours offered more – and more specific – comments.**

"I don't like to go all the way downtown to Seattle to get MH services. I'd rather get them in the Shoreline area."

"Extend their hours for employed persons."

"Let people know when the office is closed on those special days; it is 40 miles one way. It would be nice to have an office closer."

"Have more locations."

"They need to have an evening where the clients that are employed and can't get off work are able to come into the office."

"Open more branches and make more phone lines available."

"It would be nice to have extended office hours for those of us who work and good coverage on the noon hour."

"Move to better locations."

"The office is only open until 4:30 or 5, and I am unable to come into the office; so they should keep it open later when you go to school or work."

**Some clients recommended changes for DSHS offices.**

"Make the office bigger. The waiting room is very crowded all the time."

"Make a bigger parking lot."

"They could put soap and toilet paper in their bathrooms."

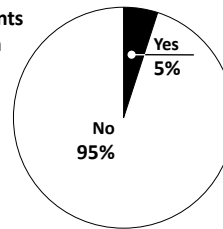
"Expand their office, or have more workers for when they're really busy."

"They need to have a bigger waiting room and a place where children can go to be entertained."

"The office hours are difficult if you work during the day."

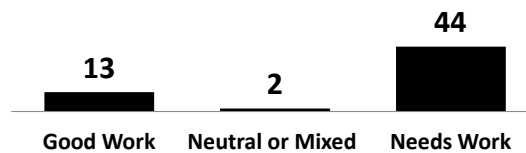
## THEME | Location and hours

Made comments about location and hours?



**59 of the 1102 clients commenting (5%) mentioned office location and hours.**

**Of those 59 clients who commented on location and hours, three quarters (75%) were critical or made suggestions for improvement. Less than one quarter (22%) made positive remarks.**

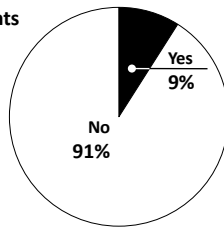


Clients who commented on location and hours often underscored the need for:

- More DSHS offices, or a DSHS office closer to their home
- Bigger waiting rooms and larger parking lots
- Expanded evening or weekend hours
- More, and more convenient, options for transportation to DSHS offices

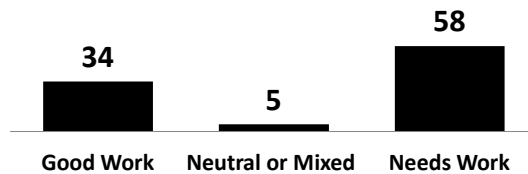
**THEME | Appointment processes**

Made comments  
about the  
appointment  
process?



**97 of the 1102 respondents who made comments (9%) mentioned the appointment process.**

**Of those 97 clients who commented on the appointment process, six out of ten (60%) were critical or made suggestions for improvement. About one third (35%) made positive remarks.**



Those who made negative comments about appointment processes frequently raised these concerns:

- Difficulty in scheduling office or phone appointments that fit their schedule
- Inability to schedule appointments in DSHS offices, leading to long wait times to resolve simple matters
- Long waits before scheduled office appointments
- Long “hold times” before telephone appointments

Those who made positive comments about appointment processes often noted one of the following:

- Prompt and well-organized in-office service
- The option to do business by phone or mail
- The ability to do business by e-mail or on the website



Photo courtesy of Microsoft, free domain.

**Some clients like the multiple ways they can conduct business with DSHS.**

“I really like being able to call in and talk to a live person and interview over the phone.”

“I like that they have services on the Internet which makes it easy to do necessary paperwork online.”

“They are concise. You go in, get what you need, and you are gone.”

“[I like] the new system where you can come early before 11 and they will take you in without an appointment.”

“I like the efficiency of the KIOSK system.”

“It helps that they sent the paperwork that needs to be completed in the mail instead of me having to go into the office.”

**Others are unhappy with the appointment process, and offered suggestions for improvement.**

“It would be nice to be able to do the interview over the phone instead of in person or Internet, because some people don’t have access to Internet or time availability during the day.”

“Make more reminder phone calls to clients regarding appointments.”

“More people in call centers, and shorter wait times on the phone.”

“They should be there at the window to talk to us when we come in.”

**Lengthy wait times in DSHS offices are a common complaint.**

“I have to wait too long in the office.”

“Better service when you go into the DSHS office. You should not have to wait hours to be seen.”

“It is hard when I have to take my young daughter in there and wait for such a long time.”

“Shorter waiting time...maybe appointments!”

“When I go there, they take a long time to see me because there are so many applicants there.”

“Too much waiting – it is a whole day event.”





Photo courtesy of Microsoft, free domain.

#### Most clients find DSHS services easy to access.

"It has been very simple and straightforward so far."

"I like if I need help of some kind, all I got to do is call up and see if I'm covered with medical."

"My child support shows up, and I can track it."

"I think they are very efficient about dealing with people. They are there to make sure people's needs are met."

"I only have to deal with them once a year and they have provided me with cash, medical and food stamps."

"It is easy to get help when you go there."

#### Some reported problems accessing DSHS services.

"I had a horrible time getting onto SSI. I finally had to get an attorney and got on SSI after that."

"I have a hard time getting replacement parts for my son's wheelchair."

"Going through the whole process of getting services is miserable!"

"I've been going through hell trying to get my partner to see a doctor, as he is disabled but can't get an appointment or voucher to see a doctor to confirm his disability."

"If there was a caseworker I was in regular contact with, I wouldn't feel like we were on our own navigating the bureaucratic jungle! The caseworker contact was sporadic at best, and it made me feel like I had to be the squeaky wheel to get service."

#### Some clients think DSHS services should be harder to obtain.

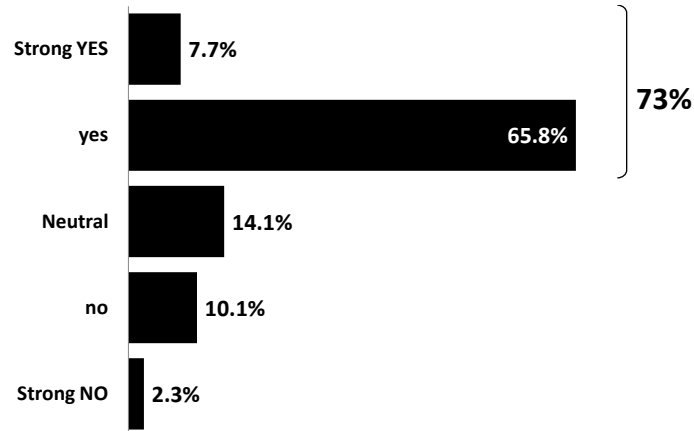
"I don't like the fact that illegal aliens can get assistance so easily."

"They help some people that really do not need the benefits."

"Investigate some of the people on food stamps and medical. I think that there are a lot of people who are taking advantage of the system and should not be getting the benefits."

## QUESTION | Is it easy to get services from the DSHS program?

Nearly three quarters of survey respondents (73%) feel it is easy to get the DSHS services they need. More than one in ten people (12%) disagreed.

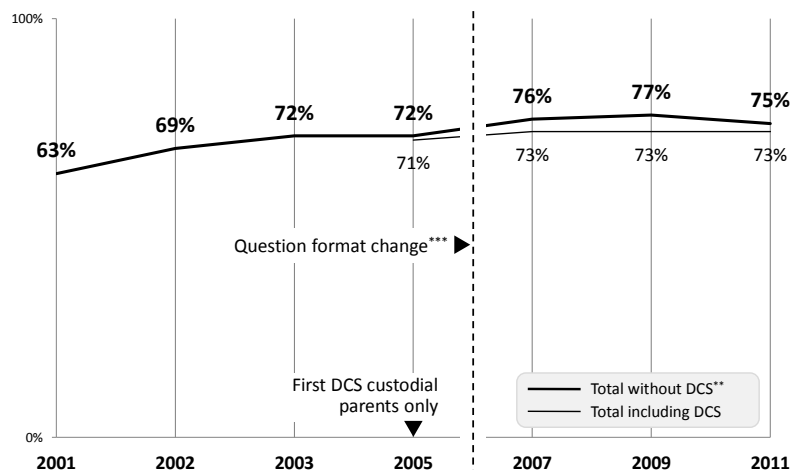


**SUBGROUPS:** Respondents were more likely to agree\* that services are accessible when:

- The client was Hispanic (83% agreed), compared to non-Hispanic Caucasian (71% agreed) or non-Hispanic minority (71% agreed)

## Trend

This chart shows the percentage of respondents who answered the above question positively from the 2001 survey to present. The increase from 2001 to 2011 is statistically significant.\*



\* All percentages are based on weighted data. Differences between subgroups and years are listed if significant at the .05 level.

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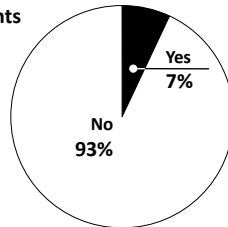
\*\*\* Question format changed between the 2005 and 2007 surveys, which may affect comparisons to previous years. See Appendix A.



## THEME | General processes

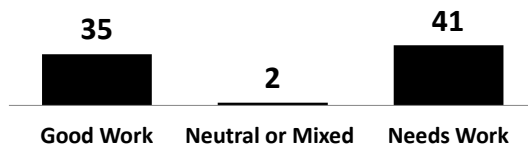
All comments that addressed DSHS processes overall – efficiency, bureaucracy, errors, and the need to take individual differences into account – were categorized as “general processes.”

Made comments about general processes?



78 of the 1102 clients commenting (7%) mentioned general processes.

Of the 78 clients who spoke generally about DSHS processes, over half (53%) made criticisms or suggestions for improvement. Nearly half (45%) offered compliments.



Clients who made positive comments about DSHS processes praised these aspects:

- They are quick and efficient
- They are consistent and dependable
- They provide easy access to the information and advice clients need

Unhappy clients mentioned the negative aspects they had encountered in DSHS processes:

- They are too complex, and hard to understand
- They are poorly organized
- They take too long
- They are too impersonal



Photo courtesy of Microsoft, free domain.

### Some clients like the quality of DSHS processes.

“I like all the services that are set up and DSHS takes care of all of it and the only time we have to communicate is for annual reviews.”

“It has been pretty seamless for the things that mom has needed.”

“Their service has improved over the years. I have gone to the CSO in Tumwater and they have streamlined their services. The wait time has significantly shortened over the past 2 years.”

“They work fast – they are efficient.”

“Continuity of care has been very good.”

“It is simple and direct. The services are fast and efficient.”

“They don’t waste a lot of my time.”

### Others feel strongly that DSHS processes need improvement.

“Large organization and a lot of problems. More coordination of stuff for individual people. They are very overworked with large caseloads.”

“Not have so much red tape!”

“If there is any way to simplify the process and make the contact with DSHS more personal – I would be in favor of that.”

“They could do their job better and faster.”

“Be a little more organized! I had to resend paperwork several times.”

“I’ve received questionnaires to assist in finding my ex-husband. With all the resources DSHS staff have at hand, why can’t they find him themselves?”

“Get your records up to date.”

“The last time I visited DSHS I had to wait too long while DSHS found my paperwork.”

“DSHS broad brushes everything they do and uses a general form by lumping all sorts of clients together. That doesn’t always serve the best purpose of individual clients.”

“Update information I provide, and information within their own systems.”

“They have helped at times, but I think they could do a lot better.”

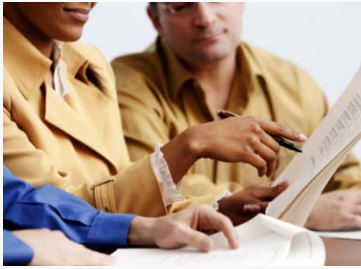


Photo courtesy of Microsoft, free domain.

**Clients like processes that are efficient and easily understood.**

"I like, when the benefits are almost expired, that they notify me in time so there is no interruption of benefits."

"They provide complete accountability of the support that I receive and that is very helpful."

"I like that lots of things are automated – if you follow the rules everything goes well. I love the Qwest card and the automatic recharging. The deposit to my card account is timely and very efficient."

"I only have to do the paperwork once a year and the staff is very good."

"You can use the [medical] card right away, and you don't have to wait for the coupon to come in the mail."

"I like their new way of streamlining your needs by going into the 'KIOSK' little machines in the reception area."

**They also like processes designed with clients in mind.**

"I like when they take care of my children while I have an appointment with my other daughter."

"They help me when I need it, and they take me to the doctor when I need to."

"They are very lenient about giving time to get documentation."

"Once you have a case person you can continue to contact that person when you need help."

**They prefer processes that keep office visits to a minimum.**

"They assist with care needs and come to my place to do the evaluations."

"They have this help line to call for questions and that is good because you get a person and they are really helpful."

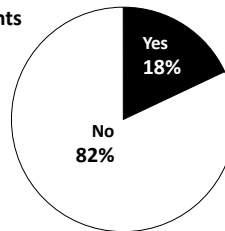
"I like the yearly evaluation and home visits done by the DDD caseworker. He is very helpful in providing information."

"I like that you can call in and find out your balance on your EBT card."

"I like that I don't have to deal with DSHS, I just send my check in."

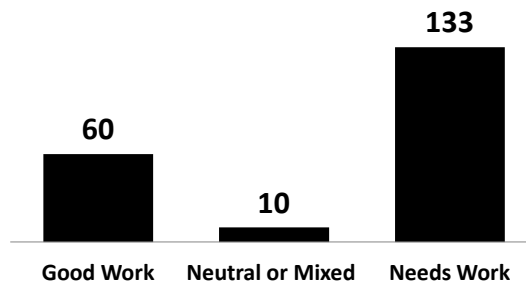
## THEME | Specific processes

Made comments about specific processes?



203 of the 1102 respondents who made comments (18%) addressed specific processes.

Almost seven out of ten (66%) of the 203 clients who commented on specific processes offered criticisms or suggestions for improvement. Three out of ten (30%) made positive comments.



Clients who made positive comments are grateful for the following:

- Simple processes for using or changing services
- The option to do business by mail, phone, or e-mail, or in their home
- Staff available to guide and support them through processes

The column at left lists some of the specific comments describing helpful processes.

Those who made negative comments often made detailed suggestions for process improvement. Some of these comments, arranged by category, can be found on the next page.

## THEME | Specific processes, *continued*

Whenever possible, clients prefer to deal with a single caseworker or provider on an ongoing basis. They dislike processes that are inefficient, or designed to fit the agency rather than the clients. They see a clear need for improvement of many DSHS processes, including paperwork and online services. Many of their specific suggestions for improvement can be found below.

### VOICES . . .

#### **Clients dislike frequent changes of staff and providers.**

"Don't change case managers as often as they do."

"They change her mental health doctor too often."

"Stop changing caseworkers. They make plans and set goals with us, but they don't follow up with all of the goals that they stated they would."

#### **They resent processes that are inefficient, inconvenient, or insensitive.**

"I have to go into the office to pick up the check, and if the first of the month falls on a weekend it is not convenient. They don't have the cards that they put money on here at the tribal TANF."

"Try not to be so bloody politically correct, and be more focused on the child's welfare and not the biological parent. It pisses me off how the system treats a lot of foster children."

"It's not fun having people coming into your home evaluating you."

"The people on the 800 number don't have access to current records. They had a 4-year-old medical that was cancelled, and it took a lot to get it all straightened out."

"Make the 800 number on the back of the medical ID card more efficient. Talk to a person who knows something, instead of a machine."

#### **Clients are frustrated by confusing and redundant paperwork.**

"Provide paperwork that can be understood by the client, and give the client enough time to respond to the requests that are asked."

"Quit sending out so much duplicate paperwork – a lot of trees are dying."

"Send out the correct paperwork the first time!"

#### **They also wish online services were more user-friendly.**

"They could make the website easier to use."

"Simplify and improve online services. DSHS website is not user friendly. It needs to be updated and easier to navigate, i.e., when putting in a search term such as 'change of circumstance,' I would LOVE to get a link to both the form to complete and the online version. I only got the 'Rules & Regulations' in my results."

"The Internet site could be improved a bit. When I wanted to update information, it was difficult to find the right spot to do it and the system took me and made me fill out a new application."

"I was not successful on their website and it kept shutting down before I got the form completed and I would have to start over again, so I just went to the office."

"Make the Internet site more user-friendly and less confusing."

#### **Clients suggested a variety of ways to improve DSHS processes.**

"I get my food stamps on the 9<sup>th</sup>. It would be really nice to get them on the first of the month when I get my Social Security."

"They could improve the orientation of knowledge received for foster parenting."

"I think they need to do mandatory unexpected drug tests for all clients applying for any service!"

"I visited the DSHS office regarding an overpayment and I was supposed to get a call back and never did. It would be nice to have a reference number for the transaction so I could call and get it resolved."

"Maybe if they had more staff to come into the home. It's difficult to go into the office when you have several children."

"DSHS should realize that their clients grow up, and need to change over from children's programs to adult services."

"Pay their providers sooner to get their money on time so that we don't lose our doctors."

"I arrived after 5 pm and the door was locked at the CSO. It would be very nice if there were a secure drop box where I could leave requested paperwork."

"Have jobs listed by disability. For instance, they don't have jobs listed that one-legged people can do."

"Stop penalizing me because I live with a family member. DSHS reduces the amount of caregiver hours because I live with my mother."



Photo courtesy of Microsoft, free domain.

**Some clients applauded DSHS's eligibility processes.**

"They are willing to help anybody, they don't turn anyone away."

"I like the speed at which they respond to problems. When situations have changed for me, they have been real good and accurate so I don't lose my benefits."

"It was easy to apply – it's pretty straightforward."

"It is great to be able to apply for assistance on the computer."

"They will give you services you need. I have a small child and they gave me food stamp services that day."

**Others are convinced that the eligibility processes need work.**

"DSHS is extremely slow at giving benefits to clients, but they are very fast at taking them away."

"When the reviews come up, make it not so difficult. During my last review, they made a mistake with some numbers and tried to throw me out of the system!"

"Make it easier to talk to somebody real. I don't mind getting letters, but I don't like just getting a letter to tell me my services are terminated without my input."

**Clients want eligibility processes that are easy to understand and negotiate.**

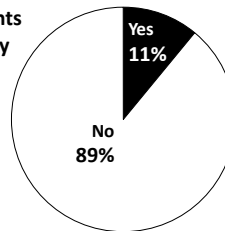
"How do I go back and get my benefits back? I've called several times and I have to wait on HOLD and it's frustrating."

"It seems like they have you do a lot of requirements just to keep [GAX or GAU] benefits. Some requirements seem to be a little over the top just to maintain eligibility."

"Better communication – they never let me know the status of our case. I was told they didn't receive the paperwork and closed our case! I sent the information on time, so I don't understand. We are approved for food stamps, but we don't get any. We qualify for zero dollars of food stamps. How does this make any sense?"

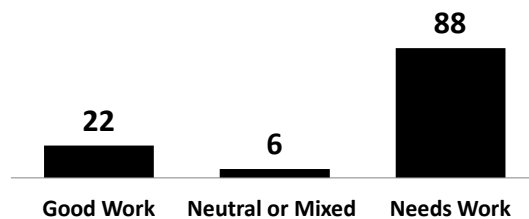
## THEME | Eligibility processes

Made comments about eligibility processes?



**116 of the 1102 respondents who made comments (11%) mentioned eligibility processes.**

**Of the 116 clients who remarked on eligibility processes, most (76%) offered criticisms or suggestions for improvement. Only 22 clients (19%) made positive comments in this area.**



Most of those who made positive comments about the eligibility process mentioned one of the following:

- How easy it is to apply for DSHS services
- How quickly DSHS services can be obtained, or changed
- How clients can apply for services by telephone, mail, or e-mail

Most negative comments contained very specific suggestions for process improvement. Some of these comments can be found in the column to the left. Additional comments, organized by category, can be found on the next page.

## THEME | Eligibility Processes, *continued*

Clients want the ability to earn more money and still qualify for DSHS services. They would like eligibility processes to be easier to negotiate. At the same time, they feel that an individual's current circumstances should always be considered when eligibility is established. Some clients suggested that certain groups deserve more DSHS services. Others made the point that some individuals do not deserve the services they are receiving.

### VOICES . . .

#### Clients want higher income limits for DSHS benefits.

"Look better at a person's needs more than looking at the income he has. About \$100 over the limit and he can't get services, despite the fact that he really needs the kinds of services that DD provides."

"DSHS does not let people who get jobs get on their feet before they cut your support totally off. They seem to cut you off as soon as they find out you have a job, which sets them up for failure, and they are right back needing support services."

"They could improve their food stamp program, they need to consider people's bills. They need to figure out a way to increase the food stamps to meet people's needs."

"Those of us who barely hit the poverty line – we qualify for nothing or very little. Medical coverage would be helpful – we are not seniors and have no kids so it's hard to qualify."

#### They also want simpler eligibility processes.

"Let me know when my 6 month period is coming up. I have absolutely no idea when that time is up. How can I get that information before my six months is over to reapply and not have a lapse in getting my food stamps? I don't know when I need to go into the office or if I just need to fill out a paper and send it in. It's so confusing."

"Computer program for DSHS info/application is very confusing, as it takes a while to figure out and to get where you want to go."

"I think we have to update info every six months. It would be nice not to have to update so often."

"When my job ended due to disability they didn't explain that I could be added onto grandchildren's grant. Initial visit was that I wouldn't qualify for anything. The process was very confusing."

#### They believe eligibility rules should take individual circumstances into account.

"I had surgery – was out of work for 6 weeks and couldn't pay my mortgage. They felt that I came in too late to ask for help, but I really needed their help and it really got me behind. I work hard and I don't want to be on welfare, but sometimes people really need help for a short time."

"Support Enforcement needs to be flexible in the amount of child support they are demanding. Should be able to go to court and reduce the amount if you are unemployed and unable to pay the support."

"Maybe overlook other people's situations. Like if someone goes to school full time and I don't get food stamps, but I need them."

#### Clients believe certain groups deserve more DSHS support and services.

"When my daughter turned 18 she was dropped from all the services she was receiving. It's like when she turned 18 she disappeared to them."

"Don't take all the budget cuts out on the people who really need help! People who are old, disabled, or sick are the ones that are getting benefits cut – it's not fair."

"They need to extend the length of time that a client gets assistance that has a baby because they need to stay home with the child and not go out and look for work. The babies are too little to go to daycare at the age of newborns."

"They are helping the wrong cross-section of people. They are talking about not helping the drug addiction group of people, who are the ones who need it most."

#### At the same time, they also believe some DSHS clients should have their services reduced or eliminated.

"There are people who abuse the system – cut them first."

"It irritates me that people who don't go out and work get a couple hundred worth of food stamps and they don't even have to work for it."

"Start helping the people that really need it instead of the ones that are taking advantage of the services and don't need them."

"I think they should do a little bit heavier screening. Some people that qualify shouldn't be qualified."

"Monitor food stamps better – some people who don't need them get them, and the people who really need it, don't get it. Many people are just using the food stamps for drugs, not food."

"There are some people who take advantage of the system and don't take care of their family with the benefits that they receive and this is not right. There are also people who really need the benefits but can't get any assistance. This needs to be checked into."

"Cut out all the people who really don't need food stamps or other support!"



Photo courtesy of clipart.com.

**Clients want paperwork that can be easily understood and completed.**

"Provide paperwork that can be understood by the client, and give the client enough time to respond to the requests that are asked"

"Make the paperwork easier."

"Clearer forms, like forms that a normal person can understand."

"If we need help they help us, and the paperwork goes smoothly."

"You get many letters that are very confusing and one will say one thing and the other will say something different."

"I don't always understand the letters they send."

"Simplify their mailings. I have to call on letters I don't understand."

**They don't want to deal with unnecessary paperwork, but do want important papers to arrive on time.**

"Our son lives with us and we get 3 letters - one for my son, one for my husband and one for me! It would be nice to receive 1 letter with all our names on it."

"Sometimes not take forever to get some things done – for example, slow paperwork process."

"I like that they only send a monthly statement instead of sending something every time I get a check."

"Streamline the amount of paperwork that is involved in an application."

"Less paperwork. If you are sending me a letter for each person in my family, send it in one envelope, not ten."

**Overall, they feel DSHS requires far too much paperwork.**

"Cut back on the paperwork that is necessary to apply for assistance."

"Not demand so much paperwork to get the services."

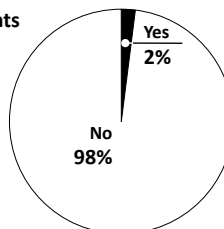
"Too many layers of bureaucracy and paperwork."

"Not have so much paperwork."

"Decrease the paperwork involved in getting assistance."

## THEME | Paperwork

Made comments about paperwork?



**26 of the 1102 respondents who made comments (2%) mentioned paperwork.**

**Not surprisingly, most (92%) of the 26 clients who commented on paperwork made criticisms or suggestions for improvement. Only 2 offered positive comments.**



Negative comments or suggestions for improvement mentioned the following:

- Excessive paperwork
- Paperwork that is hard to understand
- Paperwork that is difficult to complete in the time allotted

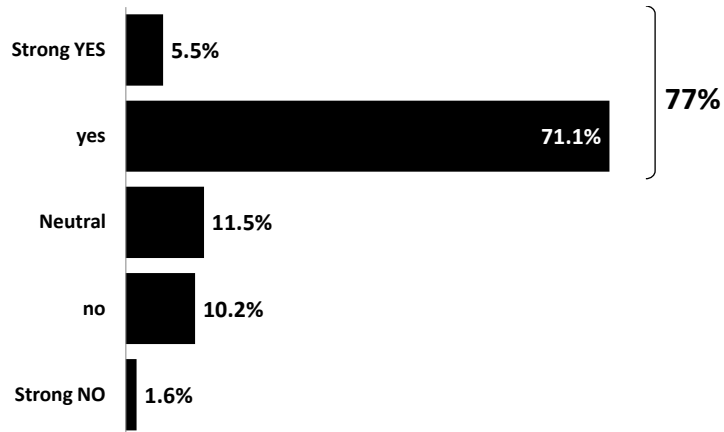
The 2 positive comments complimented:

- An efficient paperwork process
- A paperwork process that consistently provides only *necessary* paperwork



## QUESTION | Did you get services as quickly as you needed?

More than three quarters of survey respondents (77%) thought that they received DSHS services quickly. Over one in ten people (12%) disagreed.

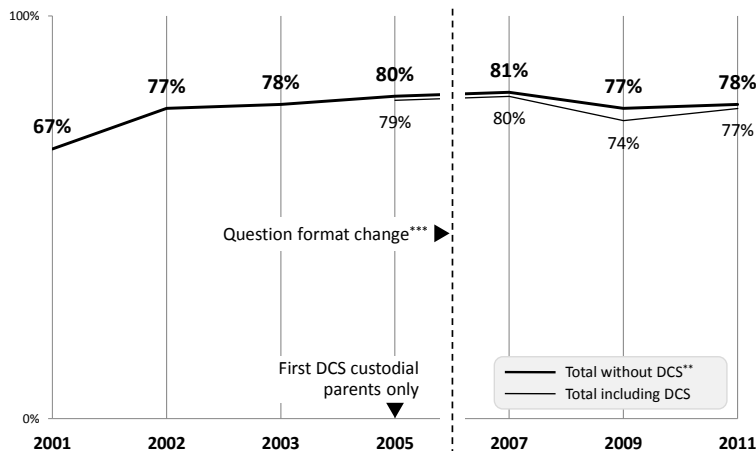


**SUBGROUPS:** Respondents were more likely to agree\* that services are timely when:

- The client was Hispanic (87% agreed), compared to non-Hispanic Caucasian (76% agreed) or non-Hispanic minority (66% agreed)
- The client was non-Hispanic Caucasian (76%), compared to non-Hispanic minority (66%)

## Trend

This chart shows the percentage of respondents who answered the above question positively from the 2001 survey to present. The increase from 2001 to 2011 is statistically significant.\*



\* All percentages are based on weighted data. Differences between subgroups and years are listed if significant at the .05 level.

\*\* The first three surveys (2001-2003) did not include child support (DCS) clients. Custodial DCS clients were added in 2005 and non-custodial in 2007. To look at trends for comparable groups, use the black line (without DCS) or compare 2007-2011 on the grey line (with DCS).

\*\*\* Question format changed between the 2005 and 2007 surveys, which may affect comparisons to previous years. See Appendix A.



Photo courtesy of Microsoft, free domain.

**Many clients were pleased to receive DSHS services quickly.**

"The service is fast."

"I like their speed and accuracy when handling my case."

"I like how fast they responded in sending in-home care workers to me. I had a couple that didn't work out but they were quickly replaced by DSHS."

"They are timely in their paperwork and their re-certifications."

"I like the fact they changed their program to let you know right away if you are eligible for benefits and you can get those benefits (food stamps) right away."

"If you qualify for their services, they are right on it."

"When I need help I go directly to the office and they help me right away."

"They are usually fast to figure out what you need, and get the services to you pretty quickly."

**For some clients, the long wait for services has been an upsetting experience.**

"Waiting to talk to someone in the CSO takes several hours and there is no child care, so there are many miserable people waiting for long periods of time in the waiting room. Waiting to hear about services, waiting on paperwork, etc. — I wish this whole process could be faster!"

"Every July the support check comes 3 weeks later and this makes it hard on the family because we cannot pay the bills on time and buy food."

"I went in to get more food assistance because my ex-husband stopped paying child support. There were lots of delays in getting an increase."

"It's frustrating to spend a whole day in the office. Appointment lines don't seem to move much quicker. Also, it's nearly impossible to get someone to answer basic questions over the phone. You have to go to the office and wait in line every time."

"The medical has helped us a lot, but if anything goes wrong then it is very time consuming and confusing to correct the problem."

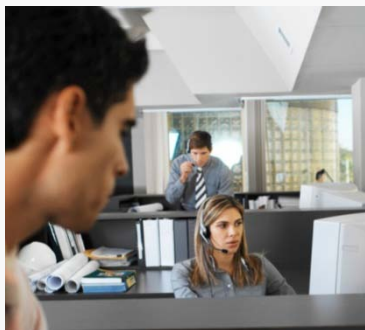


Photo courtesy of Microsoft, free domain.

**Clients want rapid processing of their applications for DSHS services.**

"They do respond quickly when you request assistance."

"We had to wait for 4 ½ months to find out if we could get the help we needed. We didn't know what was happening and didn't feel that we were kept informed."

"The food stamp review is taking two-and-a-half months, so far."

"I like how professional they were and how fast we got services."

"It takes a long time to process an application, and that needs to be corrected."

**They also want to receive benefits, services, and information in a timely manner.**

"They could shorten the approval process to get medical equipment. It shouldn't take 30-60 days to get equipment."

"They knew what to do and how to get me food stamps fast."

"Child Support hasn't been supportive by doing things in a timely manner. It was very frustrating."

"You can call on them, and they provide services quickly."

"It took 2 to 3 months to renew my child's medical, it would be nice if it didn't take so long."

"They take a lot of time in the office or on the phone to help out the person. They take too much time to get the information. The client has to wait a very long time."

**Clients praise staff who act quickly when problems arise.**

"I think they are friendly, helpful and prompt. They help me a lot."

"I like that they do everything on time."

"I like that they are pretty timely."

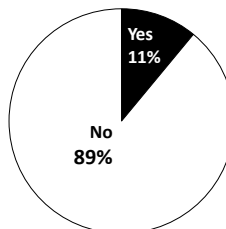
"People are pretty cool and it is a quick process."

"They work fast...they are efficient."

"They are very quick, and want to help."

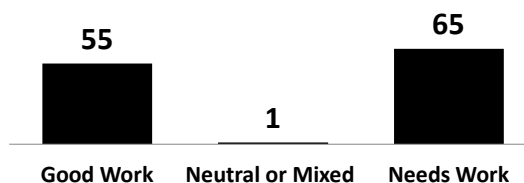
## THEME | Timeliness of services

Made comments about timeliness of services?



121 of the 1102 clients commenting (11%) addressed timeliness of services.

Over half (54%) of the clients who commented on timeliness of services offered criticisms or suggestions for improvement. A somewhat smaller percentage (45%) made positive comments.



Those making positive comments appreciated:

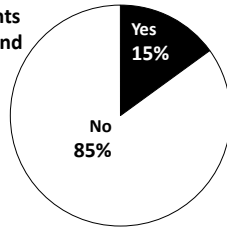
- Efficient application processes
- Ready access to established benefits and services
- DSHS staff who respond promptly to clients' needs

Some clients objected to:

- Lengthy application processes
- Wait-times for established benefits and services
- Staff who are slow to resolve clients' issues

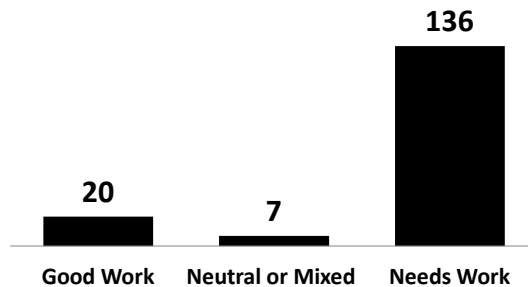
**THEME | Phone and staff access**

Made comments  
about phone and  
staff access?



**163 of the 1102 respondents who made comments (15%) mentioned phone and staff access.**

**Of the 163 clients who commented on phone and staff access, the majority (83%) were critical or made suggestions for improvement. Just over one in ten (12%) made positive remarks.**



Clients place importance on the ability to contact DSHS staff when their help is needed. Although some clients said they can reach DSHS staff without problems, the majority who made comments reported difficulty in connecting quickly with DSHS staff. Clients want staff to:

- Answer phone calls promptly
- Return phone calls in a timely manner
- Quit relying on automated phone systems
- Increase online options for sharing information

Negative comments about phone and staff access increased by more than 50% from 2009. This trend was particularly marked among clients who utilize the Community Service Offices (CSOs). In this group, negative comments increased by 68%. However, since the survey was completed, the CSOs have started an initiative to make their call center system simpler and more user-friendly.



Photo courtesy of Microsoft, free domain.

**Many clients criticized DSHS phone services.**

"It takes 2 to 3 days before the case manager calls back when a message is left."

"I called about services yesterday and I was put on hold, and they had 14 people in front of me. That was not a good experience."

"I have spent my whole lunch hour waiting on the phone."

"It is difficult to get a live person to help you work through the systems to get an appropriate person to help you."

"It's hard to get through on the phone."

**They want more "real people" answering DSHS phones.**

"I wish they'd get rid of those dang phones and have real people talk to me so I don't have a stroke."

"They need to have more people working to answer the 800 number regarding Medicaid questions."

"Having more staff to minimize the time I wait on the phone."

"They could increase their phone lines so someone could answer it."

**Some clients appreciate the phone service they receive.**

"When I call I get someone who understands the issues and is willing to work with me."

"They usually respond back when you call. They have been very helpful with job training and medical."

**Others like having online options.**

"I like that you can use the computer to get information, and that I don't have to use a phone to be given automated answers or wait on the phone or be put on hold for 30 minutes."

"I like that they have a new little room where you can go fill out forms online, in the reception area (Everett CSO)."

"I like how accessible they are now on the Internet."

"I like how you can get applications off the Internet, because I don't always have a chance to call them before they close the office."



Photo courtesy of Microsoft, free domain.

**The majority of clients reported that DSHS staff return phone calls in a timely manner.**

"They are very helpful. They will check on issues and call me back within 24 hours if they don't have an answer on the spot."

"They have responded back to me as quick as possible."

"They get back to you right away when you need help."

"They have responded to me within 24 hours. When I needed them they were there for me."

"They always get back to me in a timely manner."

**Some clients feel return calls come too slowly.**

"Answer the phone calls within 24 hours."

"When I call Medical I never get a call back in 24 hours, and I don't understand Spend Down – no one has really explained to me. I don't know who's paying for the doctor visits, and it's confusing and frustrating."

"They could respond more timely to phone calls."

"Return phone calls within 24 hours."

"Respond back to the clients a lot quicker than they do."

**Others insist their calls are seldom or never returned.**

"The social worker never returned phone calls, I would have to go to the Guardian ad Litem and they would be helpful."

"I called the caseworker on 3 different occasions and I never got a call back."

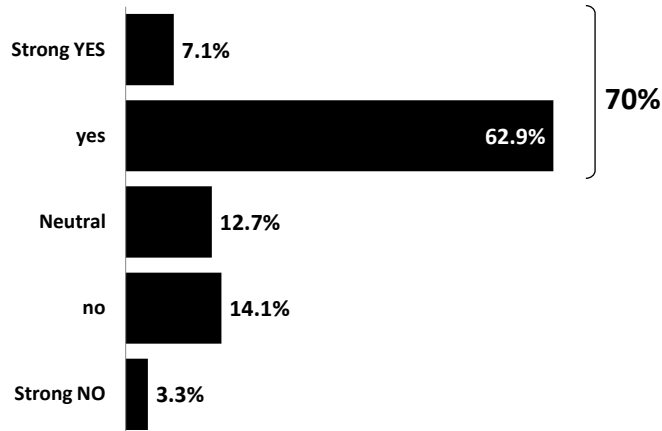
"The Child and Family caseworker could be more accessible. It is very difficult to reach her, and I have had parents and others try to reach her as well, and I seldom get a response or a return call."

"The last couple of months the worker that I have has not returned any calls."

"Returning phone messages should be more important. They should be more considerate of client schedules and their needs."

## QUESTION | Do DSHS staff return your calls within 24 hours?

Seven out of ten survey respondents who talked about phone services (70%) said DSHS staff returned calls in a timely manner. But nearly two in ten people (17%) reported that DSHS staff failed to return calls within 24 hours.

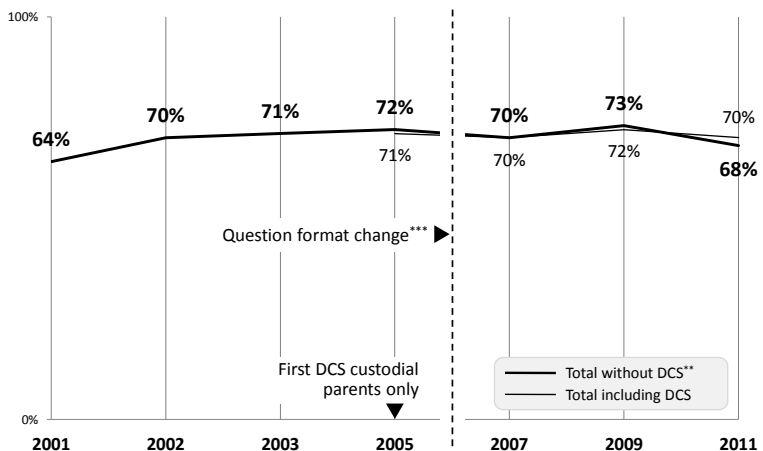


**SUBGROUPS:** Respondents were more likely to agree\* that return calls are timely when:

- The client participated in one program (67% agreed), compared to two programs (61% agreed)

## Trend

This chart shows the percentage of respondents who answered the above question positively from the 2001 survey to present.\*



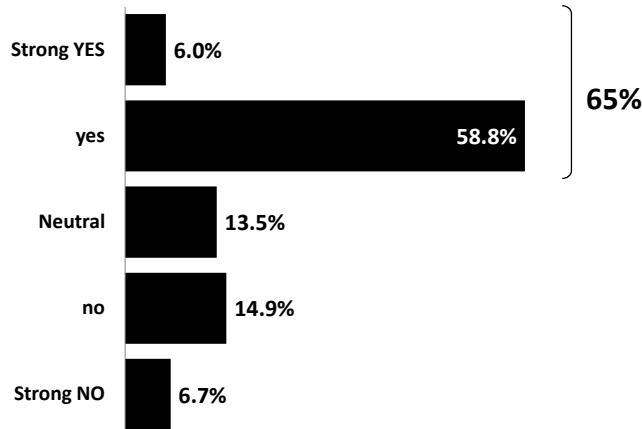
\* All percentages are based on weighted data. Differences between subgroups and years are listed if significant at the .05 level.

\*\* The first three surveys (2001-2003) did not include child support (DCS) clients. Custodial DCS clients were added in 2005 and non-custodial in 2007. To look at trends for comparable groups, use the black line (without DCS) or compare 2007-2011 on the grey line (with DCS).

\*\*\* Question format changed between the 2005 and 2007 surveys, which may affect comparisons to previous years. See Appendix A.

## QUESTION | When you call DSHS, is it easy to get to a live person when you need to?

More than six out of ten survey respondents (65%) feel like they have managed to talk to a live person when needed. However, more than two out of ten (22%) complained about difficulty reaching someone when they needed help.

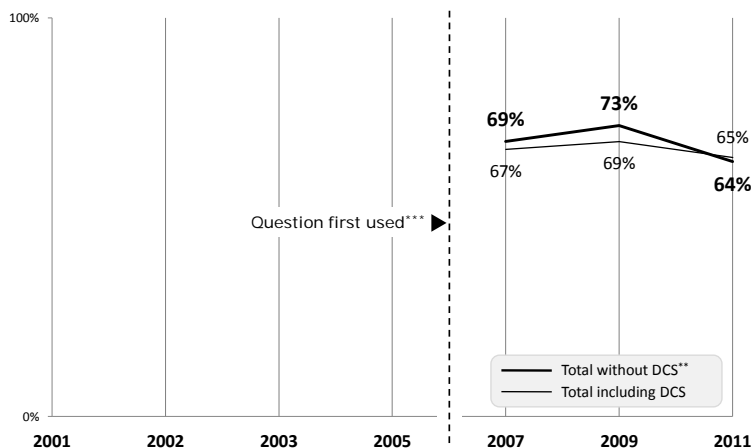


**SUBGROUPS:** Respondents were more likely to agree\* it is easy to get a live person on the phone when:

- The client was Hispanic (73% agreed), compared to non-Hispanic Caucasian (68% agreed)

## Trend

When the client survey started in 2001, most clients were concerned about their caseworker returning their call. This question about the ability to reach a live person was added in 2007 due to increased use of call centers and automated phone systems. The chart below shows the percentage of respondents who answered the question positively in 2007, 2009 and 2011. The decrease from 2009 to 2011 (with DCS respondents excluded) was statistically significant.\*



\* All percentages are based on weighted data. Differences between subgroups and years are listed if significant at the .05 level.



Photo courtesy of Microsoft, free domain.

### Clients want to talk to a live person when they call DSHS.

"Let me talk to a real person when I call."

"I think it would be better if you could get a live person when you call in, and not an automated machine."

"Put a body on the phones."

"When I have to call about questions (CSO) it is impossible to reach a live person."

"When you call the 800# you need to be talking to a live person instead of the answering machine, who cannot talk to you."

"When I call, I want to speak to a live person – not a computer!"

### They are frustrated by automated phone systems.

"Their automated system is long and frustrating."

"Get rid of the push buttons on the phones to try to talk to a real person."

"When I dial the 800 number, you must push a lot of buttons, wait, and sometimes get disconnected. I would much prefer to speak directly with a person – not a computer."

"Make sure that there is somebody to help folks like me that have a brain injury and cannot think or comprehend very well. The automated phone system is awful."

"The automated telephone NEEDS TO GO!"

### They particularly dislike being placed on hold for long periods of time.

"Make more phone lines available. Sometimes when I call it takes more than an hour to get in touch with someone."

"Have less wait times on the phone."

"The phone waiting time is so long and inconvenient when you have kids."

"It is very difficult to get through and I am on hold for over 30 minutes."

"Have more workers, because sometimes they leave you on hold for a very long time."





## Information



### Clients want clear and complete information

**Clients appreciate DSHS staff who are willing and able to provide them needed information.** For the most part, they are happy with the quality of information they receive – especially explanations from staff. However, some see the need for improvement. A significant number are unsure what program services are available for them.

**Suggestions for improvement include:**

- Provide complete and up-to-date information about **all** DSHS services
- Make sure information is easy for clients to understand
- Distribute information in multiple ways, so clients can access it easily
- Make current lists of medical and dental providers serving DSHS clients readily available
- Expand and improve interpreter services



Photo courtesy Microsoft, free domain.

**Some clients are pleased with DSHS's efforts to direct them to available resources.**

"They are very good about answering our questions and helping steer me in the right direction."

"I like that I can go talk to my social worker and, even if it's not within their scope, they can direct me to someone to help me."

"They are pretty straightforward about what is available."

"I like all the different options and different programs they have. They're pretty good about referring you where you can get help."

"I've always gotten referrals to specialists when needed."

"It is nice to know about treatment that is available. They helped me get into treatment within a week. And then they helped me find a program that would help me pay for treatment after the 6 months that ADATSA paid for treatment, which was very helpful."

**Others find the information provided about resources inadequate.**

"I believe that DSHS should do a better job in making clients know what is available."

"Child Support Services processed the claim, but then were not very helpful after the fact. They did not offer advice which I was requesting. They also did not refer me to the food stamp or cash divisions or any other agencies."

"There is a real lack of information about what's available to me."

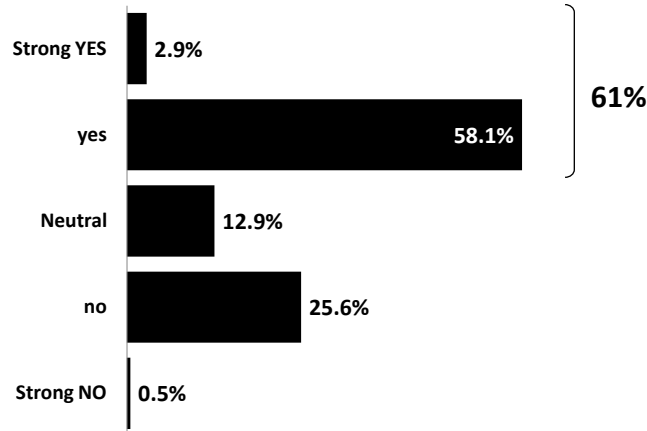
"Full disclosure of services up front, rather than me trying to pull teeth to find out what my son is eligible for (DDD)."

"They are not very forthcoming with information. I could have received free diapers - I found out later through another foster parent."

"I had to learn on my own what programs would be helpful to me. They did not offer any advice about resources."

## QUESTION | Do you know what program services there are for you and your family?

Over six out of ten respondents (61%) told us that they know what services are available. More than one quarter (26%) disagreed.

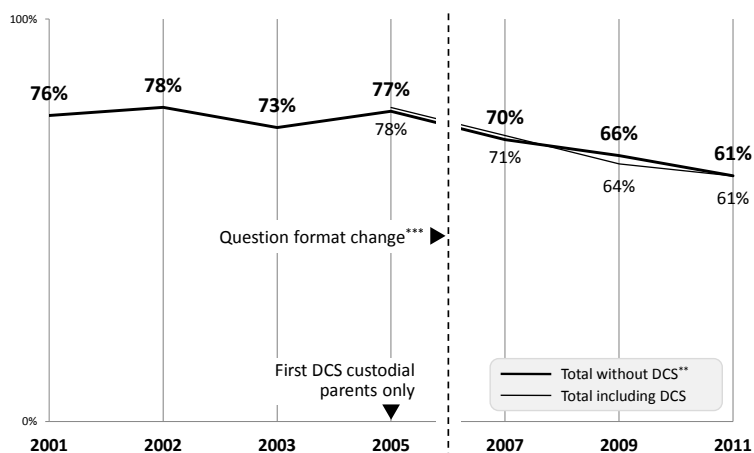


**SUBGROUPS:** Respondents were more likely to agree\* that they know what program services are available when:

- The client was non-Hispanic Caucasian (64% agreed), compared to Hispanic (50% agreed)

## Trend

This chart shows the percentage of respondents who answered the above question positively from the 2001 survey to present. The decrease from 2001 to 2011 is statistically significant.\*



\* All percentages are based on weighted data. Differences between subgroups and years are listed if significant at the .05 level.

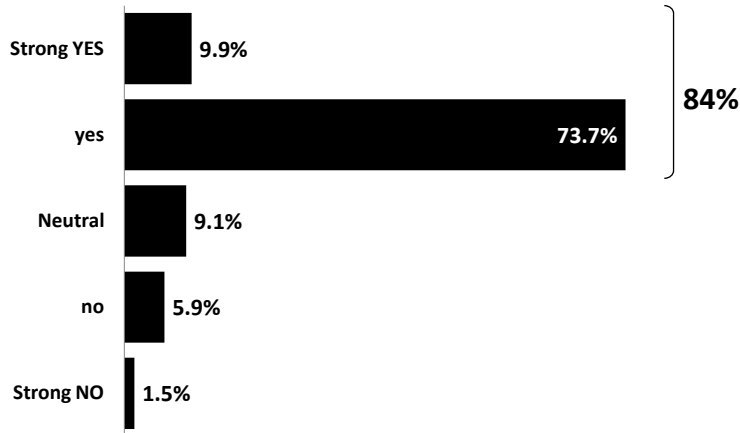
\*\* The first three surveys (2001-2003) did not include child support (DCS) clients. Custodial DCS clients were added in 2005 and non-custodial in 2007. To look at trends for comparable groups, use the black line (without DCS) or compare 2007-2011 on the grey line (with DCS).

\*\*\* Question format changed between the 2005 and 2007 surveys, which may affect comparisons to previous years. See Appendix A.

NOTE: Non-custodial parents were not asked this question about services from the Division of Child Support services as the question is not applicable for these clients.

## QUESTION | Did program staff explain things clearly?

More than eight out of ten survey respondents (84%) told us that DSHS program staff explain things clearly. Less than one out of ten people (7%) disagreed.

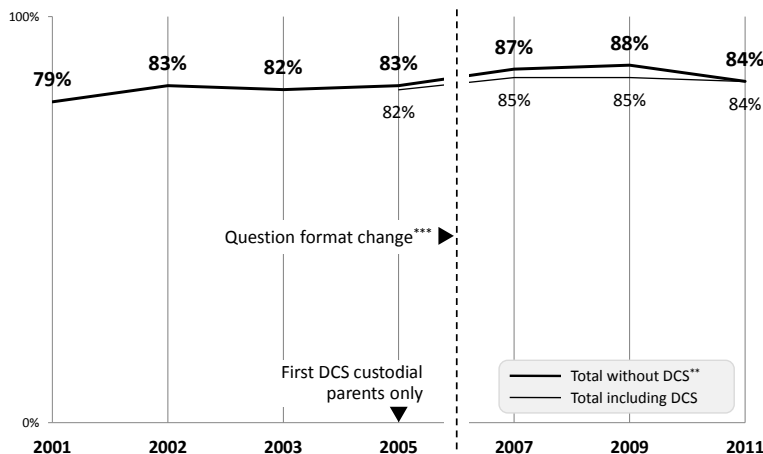


**SUBGROUPS:** Respondents were more likely to agree\* that staff explain things clearly when:

- The client was male (86% agreed) rather than female (81% agreed)
- The client participated in one program (86%), compared to three or more programs (81%)

## Trend

This chart shows the percentage of respondents who answered the above question positively from the 2001 survey to the present.\*



\* All percentages are based on weighted data. Differences between subgroups and years are listed if significant at the .05 level.

\*\* The first three surveys (2001-2003) did not include child support (DCS) clients. Custodial DCS clients were added in 2005 and non-custodial in 2007. To look at trends for comparable groups, use the black line (without DCS) or compare 2007-2011 on the grey line (with DCS).

\*\*\* Question format changed between the 2005 and 2007 surveys, which may affect comparisons to previous years. See Appendix A.



Photo courtesy Microsoft, free domain.

### Most clients praised the clear explanations provided by DSHS staff.

"The caseworker that is working with me now has been very helpful in explaining the actions that are being taken against my case."

"They explain a lot of things to me."

"They explained very well what they could do for the kids."

"It gave me hope that our daughter could get better. We got a lot of help and information and very professional. What we learned from them really helped."

"They are pretty good at explaining things (i.e., their forms, etc.)."

"I like they can give me whatever I need and they explain that to me."

"The worker that I had was very helpful in explaining everything that I needed to know about my case."

### Some would like clearer explanations.

"They need to explain when they change medical programs as to what is covered and what is not covered."

"They could explain more and quit giving me the runaround. They shut me off TANF and said I don't qualify for a hardship extension. They told me previously I did qualify."

"Be clearer when they provide answers to my questions."

"They need to be more helpful in explaining what they offer and how they can help you."

"They could be more specific, especially when they need something from you."

"Make the custodial and non-custodial parent more aware of what their child support agreement actually states. There are too many statements on the child support order that can be interpreted too many different ways."

"Make the programs clear for people like me that don't know anything about services, and explain things a lot clearer than they do."

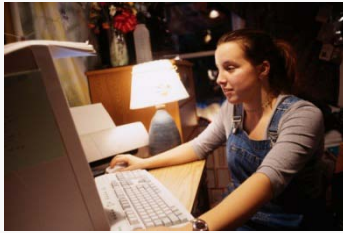


Photo courtesy Microsoft, free domain.

**Many clients are satisfied with the information they receive from DSHS staff.**

"I have been really satisfied with the information that I have gotten about programs, and the staff have been really good about keeping me informed about what is happening."

"I like that they give very clear information."

"I have never had problems with DSHS in my dealings. I am pretty well informed about what I can get or not get."

"I like that they are pretty timely and provide enough information when I ask or need it."

"They were very helpful in finding doctors and dentists and that kind of thing."

"I can get information from the caseworker when I need it."

**Some report difficulty in getting the information they need.**

"Sometimes it is difficult to deal with CSO staff - it is unclear what I am expected to do."

"Keep people more informed of the services that they offer."

"They could be more forthcoming with information, possibly information mail outs, i.e., my daughter turns 18 in a few weeks and I'm not sure how the support works with the continuing education."

"Let the clients know about any other resources that are available to them."

"DSHS could improve the method for providing information to families. Needed information for daughter and her special needs, and felt like I got the runaround."

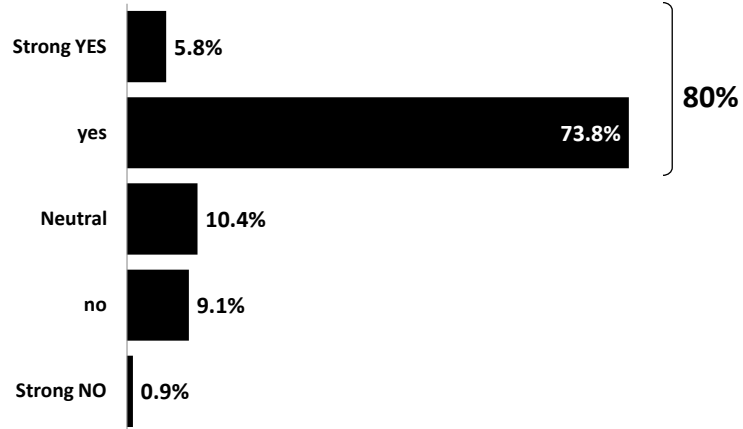
"Better information – they never let me know the status of our case."

"More information about the services that they offer. The worker does not have to be rude with me."

"They could clarify communication about services and the process. Sometimes information is not very easy to understand."

## QUESTION | Was it easy to get the information you needed about services?

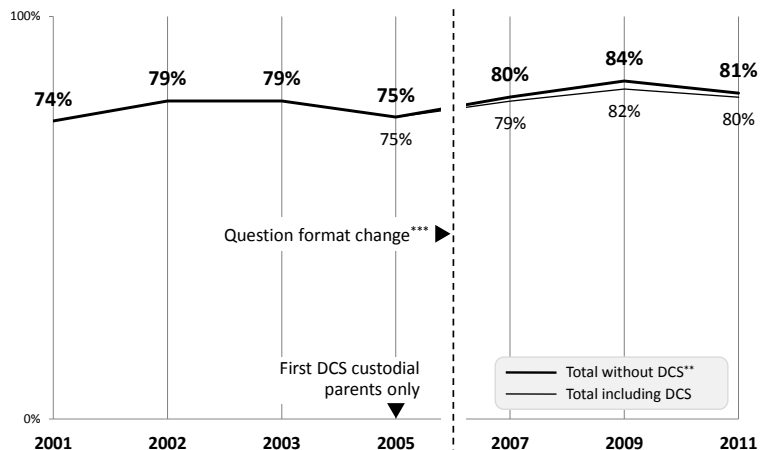
Eight out of ten of survey respondents (80%) told us that information was easy to get. One out of ten people (10%) disagreed.



**SUBGROUPS:** There were no significant differences between client subgroups for this question.\*

## Trend

This chart shows the percentage of respondents who answered the above question positively from the 2001 survey to present. The increase from 2001 to 2011 is statistically significant.\*



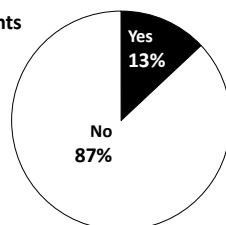
\* All percentages are based on weighted data. Differences between subgroups and years are listed if significant at the .05 level.

\*\* The first three surveys (2001-2003) did not include child support (DCS) clients. Custodial DCS clients were added in 2005 and non-custodial in 2007. To look at trends for comparable groups, use the black line (without DCS) or compare 2007-2011 on the grey line (with DCS).

\*\*\* Question format changed between the 2005 and 2007 surveys, which may affect comparisons to previous years. See Appendix A. Also, in 2009, the word "information" replaced the previous word "facts." Many phone respondents thought they heard "fax."

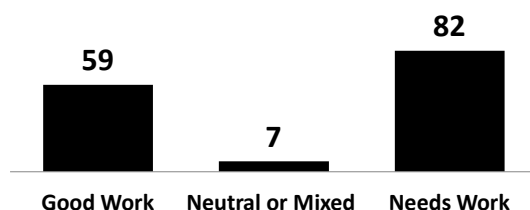
## THEME | General information

Made comments  
about  
information?



148 of the 1102 clients commenting (13%) mentioned the information they receive from DSHS.

Of those 148 clients who addressed information, more than half (55%) made criticisms or suggestions for improvement. Four in ten (40%) responded favorably.



Clients offered the following suggestions for improving communication between DSHS staff and clients:

- Provide more, and more up-to-date, information about all DSHS services available
- In particular, provide complete and current lists of medical and dental providers available to DSHS clients
- Provide information in a variety of formats – including print, online, *and* person-to-person – and distribute it widely
- Make sure all staff have, and can clearly explain, information about their programs and other DSHS services available to their clients
- Encourage staff to take the initiative in offering information, as clients do not always know what questions to ask

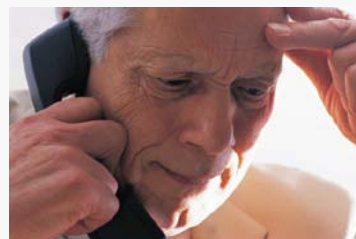


Photo courtesy Microsoft, free domain.

**Some clients had no trouble getting the information they needed.**

"When I call I always get the answers that I need."

"The people that I came into contact with at DSHS were very courteous. If I had a question, they always made sure they got the proper answer for it."

"Most of the workers give me a lot of helpful information."

"People are friendly and give good advice and services."

"Whenever I have called them they have provided me with the information that I needed."

"Most of the people are very helpful and showed me what I needed to do and what was available and not. For me, I have appreciated the personal help."

"I am able to get information pretty easily."

**Others had more difficulty accessing information, and offered suggestions for improving communication.**

"Provide more information in general. A lot of times we are unsure what to ask."

"I don't know where to go to get services. It would be really nice if DSHS put out a list of what's available and what vendors are available. What's covered? How do I find a dentist?"

"When they see people my age, they should provide pamphlets and more information about services, especially about aging services. DSHS staff should make more efforts to contact aging folks when they are in their 80s or 90s!"

"They could let you know if you move to another office you may have to change medical providers. I had to take my child into the emergency room because I didn't know this."

"Put better persons in the office that understand the cases, and answer really relevant questions!"

"They could communicate more, and do one-on-ones. I don't always understand the letters they send."



Photo courtesy Microsoft, free domain.

**A number of clients remarked on the need for specific language resources, or resource improvements.**

"Need better interpreters for the deaf."

"DDD could send letters in Spanish so we could understand. It would be great to have interpreter services there."

"Sometimes I get frustrated with the interpreters provided – they sometimes are difficult to understand."

"They need to have someone who can communicate in American Sign Language."

"You have to ask them to get a form in English."

"Provide more interpreter services."

"They could have more Spanish interpreters; the office has only has one."

**Some clients commented on their problem understanding DSHS staff.**

"They speak too fast, and I am Chinese and learning English and it would be nice if they had more patience."

"Get some more English-speaking workers in the office."

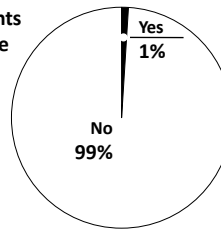
"They could be more easily accessible by phone. And have persons who are easily understood (i.e., some workers from different countries are sometimes very difficult to understand.)"

**Only one client commented positively on language services.**

"I like it that sometimes there are people who speak Spanish."

## THEME | Language services

Made comments about language services?



**10 of the 1102 respondents who made comments (1%) mentioned the quality and helpfulness of language services.**

**Of those 10 clients who addressed DSHS language services, nine of ten (90%) made criticisms or suggestions for improvement. Only one client made a positive comment.**



Clients who commented on language services or language issues want DSHS to:

- Expand and improve interpreter services for non-English speaking clients
- Provide more, and better, interpreter services for deaf clients
- Make DSHS publications available in more languages

They want staff in DSHS offices to:

- Be more patient in their dealings with clients who are not native English speakers
- Speak English clearly, and well



## Client Involvement



### Clients want a voice in planning their services

**Most clients reported that they had a role in creating their service plans.** They like being involved in planning and decision-making, and having a real voice in which services they receive.

**Some clients suggested ways to increase client involvement, such as:**

- Having DSHS staff who hear, understand, and act on their clients' needs
- Allowing staff to “flex” standard processes to meet an individual client's needs
- Making sure each client has easy access to a primary caseworker

**Some clients struggled to answer the questions about client involvement,** because the services they want have a waiting list, have been cut back based on a set formula, are currently unavailable, or will soon be unavailable due to economy-driven program cutbacks.



Photo courtesy of Microsoft, free domain.

**Some clients had a good experience working with DSHS staff to make plans and set goals.**

"They have helped me to set goals to better myself, and they have provided me with food stamps and medical and cash."

"My caseworker always treats me like a peer and has given me the encouragement to press forward."

"Division of Child Support understood my financial situation and they were really good working with me."

"They let me know what I need, and they were able to help me and work with me and my son."

"I've dealt with many of the social workers and they are real about children and they are very easy to work with."

**Others feel that DSHS creates roadblocks that slow down or stop clients' personal progress.**

"CPS needs to get their facts straight before they pull kids. They need to listen to a person, and seriously consider what is best for the kids. They make rush decisions and take action before they get all the facts. It ends up messing up the kids."

"I have had a few [caseworkers] who don't fully understand the rules/regulations and have actually been told that I HAD to quit-claim my house to keep my benefits. Not true."

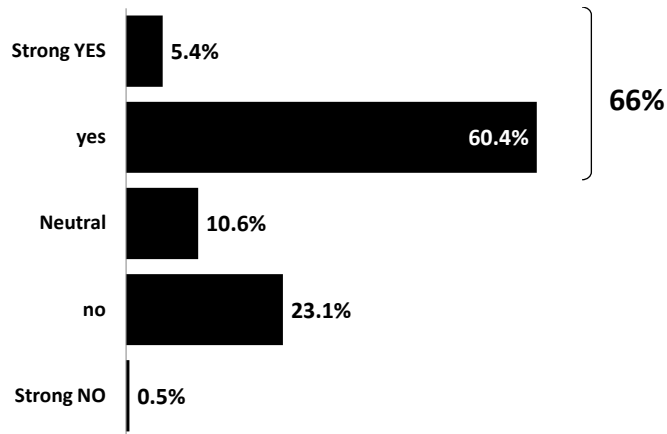
"I just hope there is a change in the system and that grandparents get some rights to their grandchildren."

"So often Mental Health just says, 'It's not our area' and it's nobody else's area either, so you are left without help. He was delusional and suicidal and was hearing voices, and the Community Designated Mental Health Professional from Mental Health said it was not a mental health issue. There seems to be a struggle between DD and Mental Health, leaving the client without services, a place to live, etc."

"The WorkFirst services are very hard to deal with. They make it impossible for the clients to comply. "

**QUESTION | Did you help make plans and set goals about program services?**

Two out of three survey respondents (66%) told us that they helped make plans and set goals about their services. Nearly one quarter (24%) disagreed.

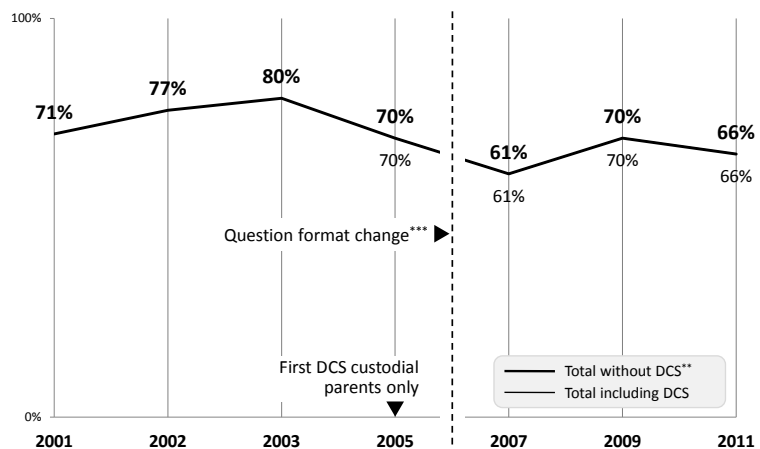


**SUBGROUPS:** Respondents were more likely to agree\* that they help make plans and set goals about their services when:

- The client was non-Hispanic minority (73% agreed), compared to non-Hispanic Caucasian (62% agreed)
- The client was a child (71%), rather than an adult (62%)

**Trend**

This chart shows the percentage of respondents who answered the above question positively from the 2001 survey to the present.\*



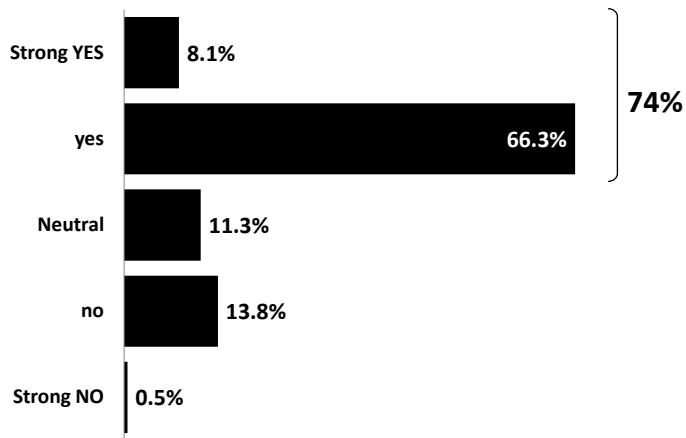
\* All percentages are based on weighted data. Differences between subgroups and years are listed if significant at the .05 level. This question was not asked in connection with child support services since child support requirements are not set by DSHS.

\*\* The first three surveys (2001-2003) did not include child support (DCS) clients. Custodial DCS clients were added in 2005 and non-custodial in 2007. To look at trends for comparable groups, use the black line (without DCS) or compare 2007-2011 on the grey line (with DCS).

\*\*\* Question format changed between the 2005 and 2007 surveys, which may affect comparisons to previous years. See Appendix A. Also, in 2009 the word "set" was added to this question to improve question clarity.

## QUESTION | Did you have a say in what kind of services you get?

Nearly three quarters of survey respondents (74%) told us that they had a say in the services they got. More than one out of ten people (14%) disagreed.



**SUBGROUPS:** Respondents were more likely to agree\* that they have a say in the services they receive when:

- The client was Hispanic (84% agreed), compared to non-Hispanic Caucasian (70% agreed)
- The client participated in one program (79%), compared to three or more programs (70%)

## Trend

This question was new in the 2009 survey. It replaced the question: "Were you involved in making choices about your services?" This change was made to improve survey clarity. There was no significant change between 2009 and 2011.\*

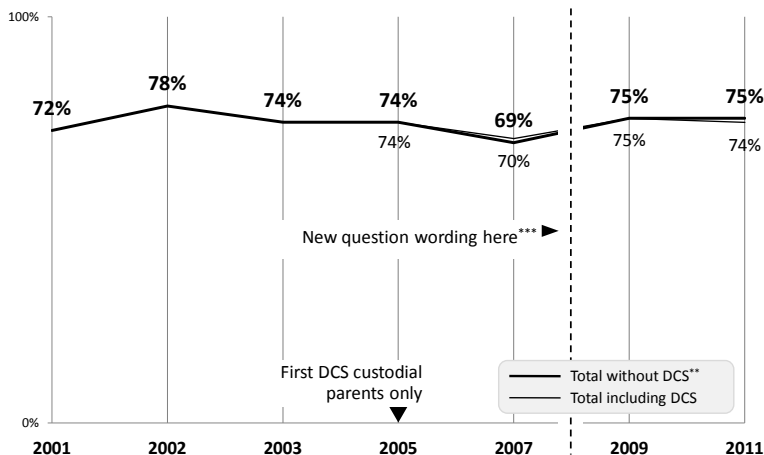


Photo courtesy of Microsoft, free domain.

**The majority of clients feel they have input into which services they receive.**

"They are cooperative, and pretty understanding."

"They are very responsive, and very fair to me."

"You actually work with the person."

"They were friendly and understanding about helping me and my brother get into a safe home."

"I like how they find out what you need."

"The worker that I have is very helpful. We have a great relationship in which I've been able to receive support."

**Some clients feel limited in their ability to make choices about needed services.**

"Their services are getting harder and harder to get. DVR is messed up, the provider would keep changing, and every time I would go in I would be dealing with a different caseworker, which was very discouraging. So I didn't continue with them and really never got any services."

"It is very difficult to find primary care physicians and dentists that will accept DSHS medical cards."

"A person requesting drug treatment needs to be able to get the treatment immediately and not have to wait 6 months. The drug person needs it NOW."

"The cuts coming in January are so great that my son is not going to be able to live independent and will have to move back home, which is a financial problem for the family. He has no dental anymore and has co-payments that he cannot afford. He will be alone without any support because of the personal care hours, and this is very dangerous."

"They should have person-centered planning, used to help persons with disabilities make their own decisions."



Photo courtesy of Microsoft, free domain.

**Some clients offered suggestions about ways DSHS can improve services and give them a stronger voice in planning and decision-making.**

"Better communication with the client. Don't be so rude. Be more understanding."

"DSHS should have more live bodies answering the phones. Once I talk to someone, sometimes the staff person doesn't know what to do or what is permitted."

"Social workers should have smaller caseloads."

"I think they need to be more attentive with information clients give them, and try not to make so many mistakes, it's a headache."

"I think they need to monitor the mental health agencies more appropriately because we are being treated with disrespect and ignored."

"More funding and more employees to help the people that need it."

"They could explain more, and quit giving the runaround."

"Allow the client and provider to sit with the case manager when they do a comprehensive assessment."

"Less wait time in the office for scheduled appointments and for walk-in visits."

"Provide dental care for the clients."

"I think in the foster care program, they need more houses with less staff and less children rather than houses with more children and more staff. So kids could get more individualized attention."

"The website needs to be easier to understand."

"Need not to change their program as often. When you get into a program they terminate you and start up another program. They keep changing everything so I'm not able to finish what they wanted me to do before they change it again."

## THEMES related to client involvement

Other sections of this report address issues closely related to client involvement. They include client suggestions that DSHS provide:

- **Assessments and service plans tailored to individual needs.** Clients dislike rigid formulas for determining benefits and services, as they can block access to the help they need. (See the "Getting Services" section of Chapter 3, pages 32-40.)
- **Long-term caseworkers who are on their "team."** Clients want to be known, listened to, and understood by caseworkers. They also want to partner with their caseworker in planning services. Once they establish a good relationship with a caseworker, they want that relationship to continue as long as possible. (See Chapter 2, pages 15-25, and Chapter 6, pages 55-58.)
- **Better access to health care.** Clients want coverage for the health services they need, and access to providers willing to accept medical coupons. (See Chapter 7, pages 62 and 63.)
- **Processes and paperwork which are efficient, error-free, and easy to understand.** Clients are frustrated by complex, confusing, and poorly coordinated processes and paperwork that stand between them and needed services. (See the "Getting Services" section of Chapter 3, pages 32-40, and Chapter 6, pages 55-58.)
- **Benefits adequate to meet their needs.** Many clients find current benefits insufficient to meet their needs, or fear they will lose the benefits they depend on. Others want certain programs to be expanded, or fear their current services will be cut. (See Chapter 7, pages 60-63.)

## Coordination



### Clients want their programs to work together

Clients who receive services from three or more DSHS programs were asked about coordination between those programs. As in previous years, the majority of clients reported that the programs they deal with coordinate well with one another.

Most comments about coordination were complaints or suggestions for improvement. Some clients see a clear need for:

- More effective partnerships among DSHS programs
- Increased connection between DSHS programs and other social service organizations
- Stronger lines of communication between staff in different DSHS programs who have clients in common



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**Many clients served by multiple programs rated coordination between services highly, but only two volunteered positive comments about coordination.**

“They communicate with the different agencies in providing services.”

“They really did seem to have great interaction with the special education teachers at the high school (DVR).”

**Some clients commented on the overall need for better coordination and communication among DSHS programs and services.**

“Coordinate and communicate with each other.”

“The coordination between divisions could be pulled together a little better.”

“The different departments need to communicate better.”

“Make every department work together so that you get the services that you need and each department knows what the other department is doing.”

“I think that the five programs I accessed should have better linkage between programs so clients don’t have to provide the same information over and over.”

“They could combine all the divisions, they seem to be distant from each other.”

**Others remarked on the need for improved connections between particular programs or offices.**

“I wish they could interconnect and talk, including SSI and DDD and all DSHS.”

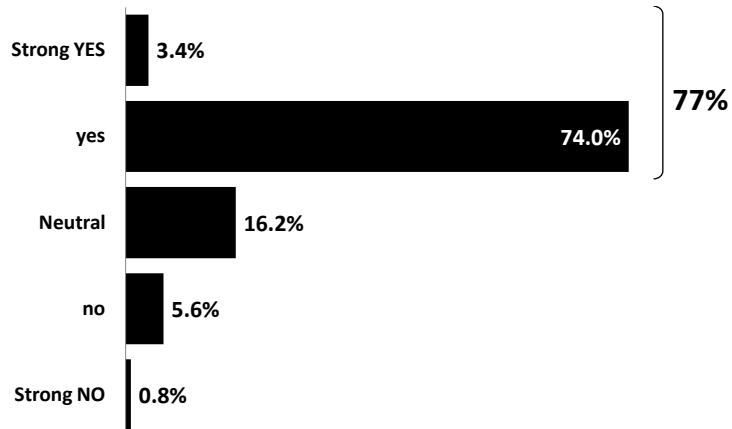
“DVR approved me for disability services but the CSO has not, they are terminating me. If I am not on financial, I have to go back to work, and I don’t get DVR services.”

“Better communication with other states, i.e., I pay child support through Oregon, but Washington started to collect as well. I had to call them.”

“Child Support, Food Assistance, and DASA were so different and didn’t seem to communicate with one another.”

## QUESTION | Does DSHS make sure all your services work well together?

**More than three quarters of those who commented (77%) feel that DSHS services work well together. Less than one in ten (6%) disagreed.**

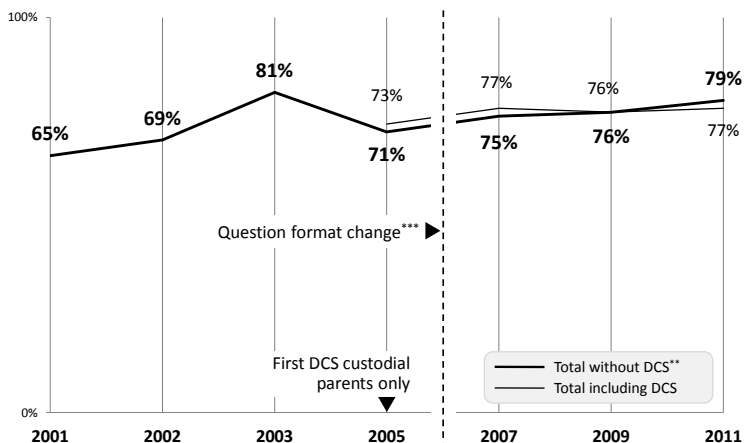


**SUBGROUPS:** Respondents were more likely to agree\* that DSHS makes sure their services work well together when:

- The client was female (82% agreed) rather than male (70% agreed)

## Trend

**The chart below shows the percentage of respondents who answered positively from the 2001 survey to present. The increase from 2001 to 2011 is statistically significant.\***



\* All percentages are based on weighted data. Differences between subgroups are listed if significant at the .05 level.

\*\* The first three surveys (2001-2003) did not include child support (DCS) clients. Custodial DCS clients were added in 2005 and non-custodial in 2007. To look at trends for comparable groups, use the black line (without DCS) or compare 2005-2011 on the grey line (with DCS).

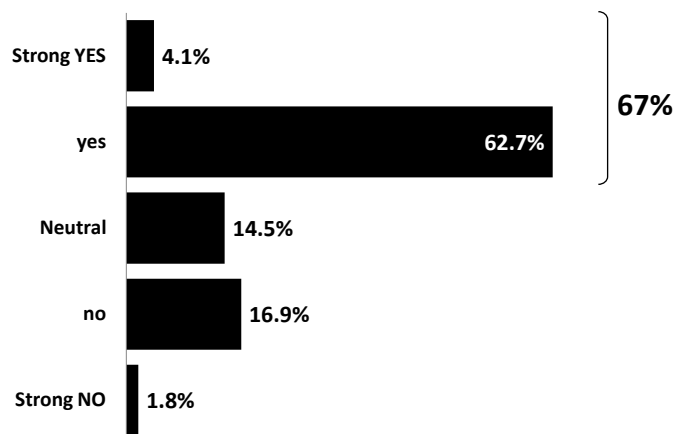
\*\*\* Question format changed between the 2005 and 2007 surveys, which may affect comparisons to previous years. See Appendix A.

NOTE: Only clients who received services from three or more programs were asked this question.



## QUESTION | Do the staff from your different DSHS programs work together as a team to try to help you get the services you need?

Nearly seven out of ten survey respondents (67%) reported that staff from different DSHS programs work well together. Nearly two out of ten (19%) disagreed.

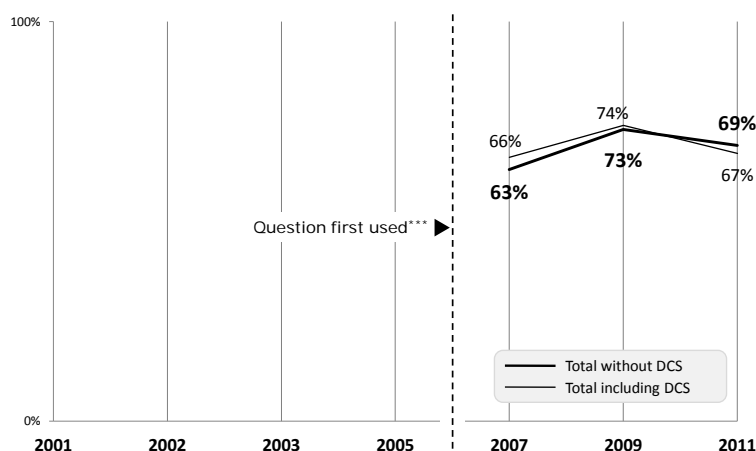


**SUBGROUPS:** Respondents were more likely to agree\* that staff from different programs work together to help them when:

- The client was Hispanic (90% agreed), compared to non-Hispanic Caucasian (63% agreed) or non-Hispanic minority (73% agreed)

## Trend

The chart below shows the percentage of respondents who answered positively from the 2007 survey to present.\*\*



\* All percentages are based on weighted data. Differences between subgroups are listed if significant at the .05 level.

\*\* This question was first asked in 2007. It replaced a previous question about coordination that was confusing to respondents.

NOTE: Only clients who received services from three or more programs were asked this question.



Photo courtesy of Microsoft, free domain.

### One client praised teamwork among caseworkers in the same agency.

"We had three different caseworkers (DCS) the years we were collecting child support. The service was always good, communication between the new caseworkers, they were sensitive, and pro-active when my daughter passed away."

### Clients like dealing with the same DSHS worker over time.

"I think they should have one person to help with all the various DSHS services."

"I only had one worker, and this helped."

"If you call and actually talk to somebody, you can never get the same person you spoke with before, so you have to start all over."

"It is hard to establish a trusted relationship when you have several workers through a process."

### They want all the DSHS programs and DSHS staff they deal with to be on the "same page."

"There seems to be confusion in the office, from worker to worker. I talked to the call center and they told me I was not eligible for GAU because I had minor children, and then when I talked to my social worker she said I was eligible for GAU. I am still being sent back and forth and waiting to see if I am eligible."

"It seems like one hand doesn't know what the other is doing sometimes."

"It would be helpful if the right person called with the correct information. I have talked to different people who provide different information. No one is completely correct; it seems to muddle up the system."

"Everybody being on the same page. One time you go in, a worker tells you one thing, the next time a different worker tells you something different."

"It's hard to deal with them. Sometimes it's like they don't talk to each other."



Photo courtesy of Microsoft, free domain.

**Clients want DSHS programs and offices to coordinate their efforts.**

"The different departments need to work together and share information."

"There needs to be more of a connection between the different divisions. Sometimes it is really complicated when you have to call one number for this and another number with the same information."

"It would be wonderful if the various divisions worked better with one another."

"Coordinate together between departments."

**They also want to see coordination between DSHS programs and other organizations.**

"We had difficulties with DVR and employment agencies interacting to try to help with son's employment and training. Finally, after 2 years, we pulled son out and went to a different agency."

"Interstate communication could be a lot better."

"Coordinate better with the doctors."

"L & I doesn't communicate with DSHS, and that resulted in an overpayment to my ex which I cannot recover."

**Some clients noted a lack of coordination among the DSHS workers they deal with in different programs and offices.**

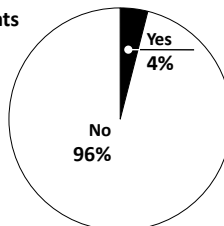
"They need to be more effective in being a team when you talk to one person and then the next person and the next person. They should be aware of what each person is saying. The social worker that I have tells me one thing and then I get a call from another lady telling me something else."

"They can communicate and work better together and with other branches of DSHS. They don't follow through with what they said they are going to do."

"They make you wait a long time, and have you running in circles. They send you to different people, and seems like they give you the runaround."

**THEME | All coordination comments**

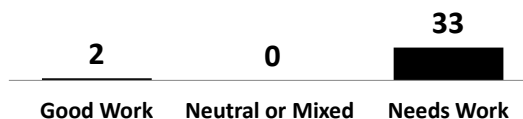
Made comments about coordination?



49 of the 1102 clients commenting (4%) mentioned coordination.

35 of the 49 clients who commented on this issue remarked on coordination between programs and offices. 17 spoke about coordination between workers.\* All but five of the 49 comments addressed the need for better coordination.

***Between programs and offices***

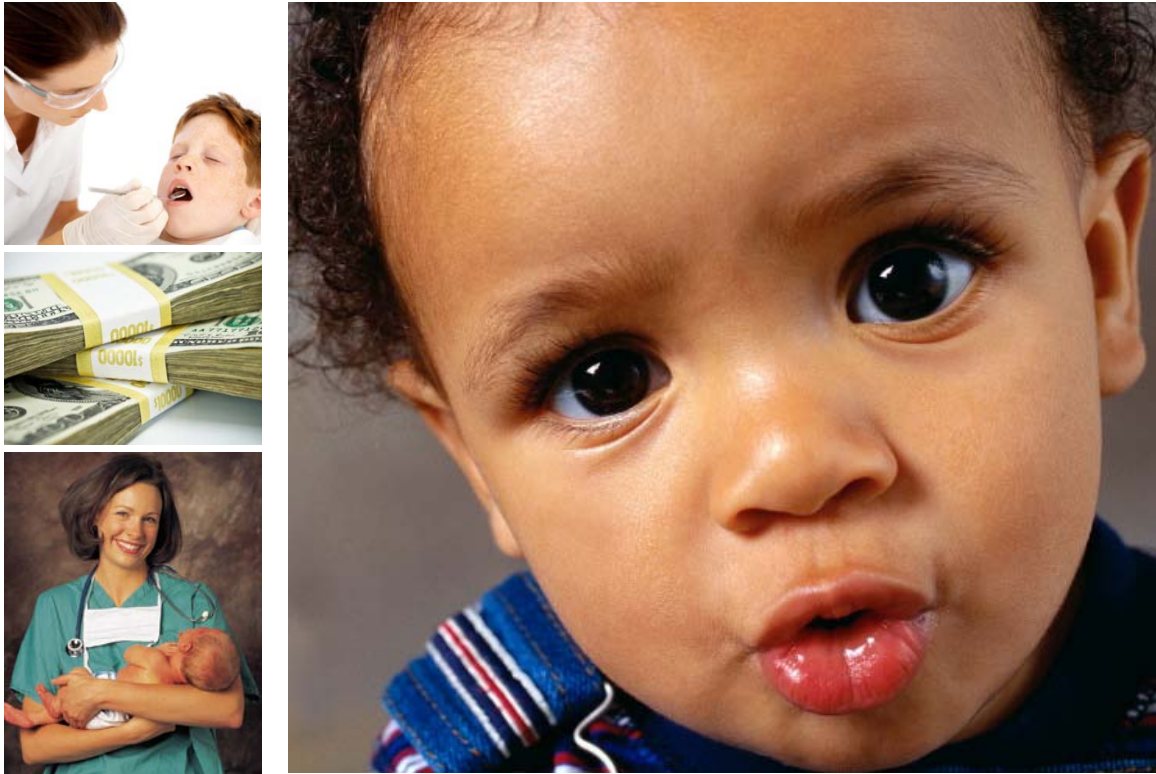


***Between workers***



\* Total is more than 49 because some clients spoke about both coordination between programs and office, and about coordination between workers.

## Resources



### Clients want dependable access to needed resources

While many clients are grateful for DSHS assistance, most clients who commented about resource issues indicated it is stressful when needed resources are hard to obtain, in short supply, or simply unavailable. Clients suggested the following:

- Expand existing programs' services to meet client needs
- Establish new programs to address unmet needs
- Provide more money and benefits to keep pace with cost-of-living increases
- Stop proposed cuts to cash grants, benefits and services
- Provide more medical services, including dental and vision
- Give DSHS clients ready access to more health care providers

#### Client concerns about resources reflect tough economic times.

- Compared to 2009, more clients spoke about the need for greater resources or about fear of losing benefits and programs
- Fewer clients in 2011 complained about an inability to find a medical or dental provider who accepts Medicaid coupons.

\*Note: This chapter is based on client comments made in response to open-ended questions. Specific questions about resources were not included in this survey because DSHS often has little control over the amount of resources available from federal and state sources. Clients also commented on the need for more DSHS staff. See Chapter 2, page 25.



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#### Clients see a clear need for more programs, or expanded programs.

"Increase the birth-to-three program until maybe they are 5 instead of 3. It would have been helpful if we had the support until she started school."

"Give more education and job training."

"Offer some disabled people more services – food assistance, cash and medical."

"Provide dental and vision services for adults."

"Have more group homes available."

"Daycare needs to be provided on the weekends and in the evenings so that people can go to work."

"If DVR had resources for computer training, that would be better."

#### They are very concerned about DSHS budget cuts, and the impact of those cuts on vital services.

"I think it would be best to continue to do everything and not cancel any services."

"I am very disappointed that they have had to cut the services to my daughter. Society is going to suffer because of all these cuts."

"These cutbacks in social services are going to affect the livelihood of people that really need the help, and in the long run cause more problems because they have nowhere to go."

"It's hard to get on a program, and then it's cut."

"We are really concerned about the letters we've been receiving and the news we've been reading about the cuts that are going to be taking place in the near future for DD clients."

"I wish DSHS would stop cutting services, but they probably won't."

"Maintain the services that have been available without any cuts."

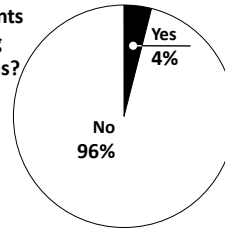
"I think they are isolating a huge population of people with the cutbacks."

"We are concerned about cutbacks mentioned in the newspaper and how those cutbacks will affect us."

"Don't cut people off when they still need the service."

## THEME | More programs

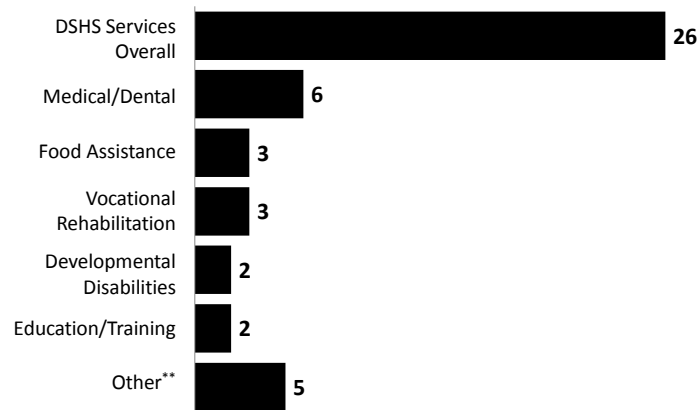
Made comments about needing more programs?



41 of the 1102 respondents who made comments (4%) mentioned that DSHS needs more programs.

Given the nature of this category, it is no surprise that all but one of the clients who made comments (40 of 41) offered suggestions for improvement.

According to clients, more programs and resources are needed for\*:



The majority of those who commented fear that the programs they depend on may be cut or eliminated. They also registered concerns about:

- Existing programs that should be expanded, as they don't meet all their needs
- Programs that should be created to address needs that aren't currently being met by any DSHS program
- Their lack of safety and stability without specific types of assistance from DSHS

As shown in the chart above, some clients expressed a need for more **medical** and **dental** programs. This need is closely linked to the requests for more medical and dental services, benefits and providers discussed on pages 62 and 63.

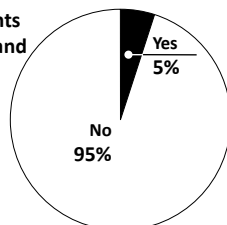
Other clients requested more assistance with **food, education and training, job placement, and developmental disability services**.

\* Numbers in these categories add up to more than 40 because in 7 cases the respondent mentioned more than one program.

\*\* Other includes requests for more group homes, daycare, drug treatment, and assistance for children of immigrants.

## THEME | More money and benefits

Made comments about money and benefits?



53 of the 1102 clients commenting (5%) mentioned DSHS money and benefits.

All of the 53 clients who addressed the need for more money and benefits made criticisms or suggestions for improvement.

Clients want to see increased money and benefits – or no cuts – in the following areas\*:



Clients often addressed these issues:

- Cuts to money or benefits (expected or unexpected) disrupt client's lives and cause difficulties and emotional stress
- Concerns about cuts yet to come cause additional stress
- Cash grants are not enough to pay for decent housing and other basic necessities
- Food stamp allotments are inadequate to cover rising food costs
- Food stamps should cover non-food items such as diapers and paper products
- Clients need more caregiver hours than currently allowed, and caregivers need and deserve an hourly pay increase

\* Numbers in these categories add up to more than 53 because in 2 cases the respondent mentioned more than one issue, and several respondents mentioned resources in answer to more than one survey question.

\*\* Other includes two requests for higher wages for caregivers, one request for more early intervention services for special needs children, and two expressions of concern about upcoming budget cuts.



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**Some clients want an increase in money or benefits.**

"My mother needs more hours of care and the providers need a higher hourly rate."

"The \$85 SSI doesn't go very far! It would be very good to get a larger amount."

"TANF has you work 30 hours a week and they only pay you 300 dollars. Besides earnings, they need to raise the TANF benefits."

"Up the child support a family can get if needed."

**They especially want to see an increase in food stamps.**

"Give me some more foods stamps."

"Put more money on my food stamp card."

"People could use a few more food stamps."

"Give a little more food stamps."

"Increase the amount of food stamps that you get, because it's not enough to make it through the month."

**They are struggling to cope with benefit cuts and reductions.**

"It used to be that my caregiver could take me to dinners, but now they say they cannot do it because it's a social thing and it's not allowed. My sight is too poor to go by myself."

"The cuts that are happening in January will really affect our family. Our hours have been decreased, and we will have a hard time adjusting."

"Give me back the hours for my respite, as I have to maintain my own health and doctor appointments."

"I am appalled by all the proposed budget cuts to state services."

"Not take services away from people that need it, or cut their money back. GAX is \$339, because I pay \$200 rent a month, and now I will only get \$226 a month."

"Cut in the grant down to \$197.00. You cannot live on that."

"They just cut my monies \$70 a month, and that was a hit."





Photo courtesy of Microsoft, free domain.

**Clients often highlighted the need for broader coverage and eligibility.**

"It is necessary to provide dental, hearing aids, eye vision, foot care, outpatient physical therapy, and the Medicare Part D copayment for the clients."

"Bring back all the services that have been cut, like dental and vision."

"Provide medical for elderly people who are not eligible for Medicare."

"Dental coverage and treatment should be expanded."

**A large number of comments underscored the need for dental care.**

"Add dental care. It is very important to my health."

"Dental coverage is terrible – routine cleaning should be covered always."

"I wish they could have dental coverage."

"They totally annihilated much of the dental services, like crowns."

"All our dental has been cut off, and I was in the process of getting my tooth fixed where my nerve is exposed. So now I am stuck."

**Some mentioned other specific care needs.**

"Wish that physical therapy was available for her."

"DSHS used to provide for wheelchairs and bath equipment, and they no longer do."

"They could pay for expensive medications my son needs for asthma, ADHS, cerebral palsy, and seizures."

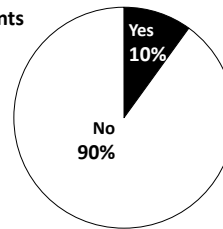
"Pay for him to go see the psychiatrist. We'll no longer have health insurance beginning January, and he needs this help."

"I have a medical need to lose the weight. [Weight loss surgery] is not covered. My back condition will continue to worsen if I can't get help."

"Due to cuts, hospice care is not available now. Everyone deserves a peaceful, painless death."

**THEME | More medical and dental services/benefits**

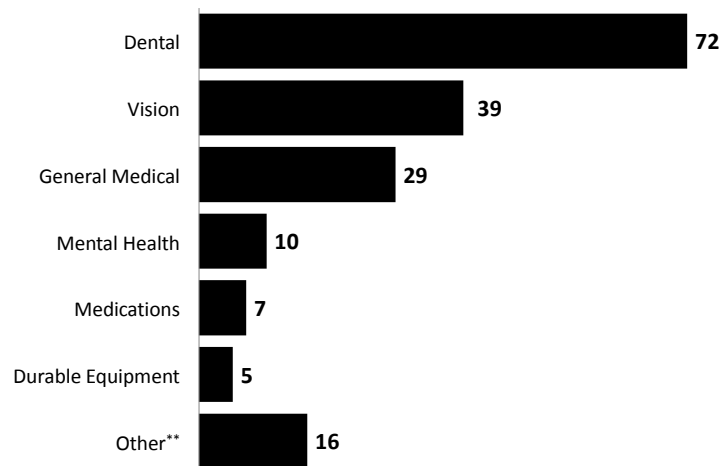
Made comments about medical and dental services/benefits?



111 of the 1102 respondents who made comments (10%) mentioned medical and dental services.

**All but one of the 111 clients who commented in this category highlighted the need for more medical and dental services/benefits.**

Clients would like more benefits in the following areas\* :



Comments about medical and dental benefits increased by 66% from 2009 – most discussing dissatisfaction with service cuts or fear of future cuts. Clients made their desire for the following services and benefits very clear:

- Comprehensive dental coverage, including regular checkups and preventative procedures
- Vision coverage, including eye examinations and "hardware" (such as eyeglass frames and lenses, and contact lenses)
- Medical coverage, including primary care and hospitalization
- Mental health coverage, including evaluation and treatment for both chronic and emergent mental health problems
- Prescription coverage, including medications for both physical ailments and mental health issues
- Coverage for specialized equipment such as wheelchairs and hearing aids, and specialized services such as physical therapy and substance abuse treatment

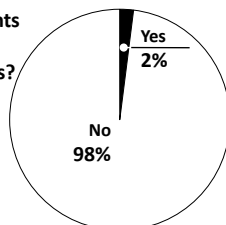
\* Numbers in these categories add up to more than 110 because in 52 cases the respondent mentioned more than one type of benefit.

\*\* Other includes physical therapy (3), foot care (3), hearing aids (3), hospice (2), weight loss surgery (2), substance abuse treatment (2), allergy testing (1), dermatology (1), TMJ treatment (1), and holistic medicine (1).



## THEME | More health care providers

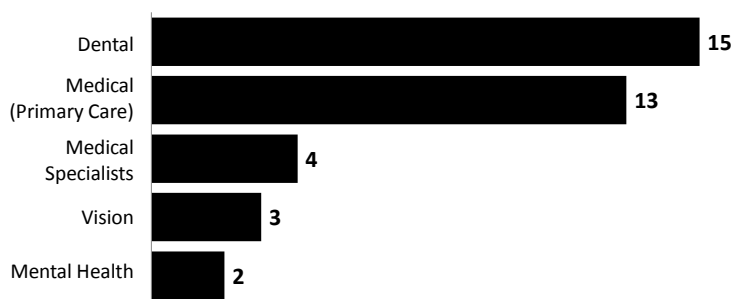
Made comments  
about needing  
more providers?



**25 of the 1102 clients commenting (2%) mentioned the need for more providers who accept DSHS medical payment.**

Most of the clients (22 of 25) who mentioned this issue requested more providers who would accept DSHS medical coupons. Two comments were positive, and one comment was neutral on the subject.

Clients want more providers in these areas\* :



The lack of health care providers is frustrating and discouraging to many clients. They often point out that:

- It is hard, if not impossible, to find a dentist in their area who is willing to accept DSHS coupons
- It is also difficult to find local primary care doctors and medical specialists who will serve them
- Options for vision care – if it is covered at all – are limited
- Competent mental health providers are also hard to find
- DSHS is slow to pay providers, and this is one reason why providers are reluctant to serve DSHS clients
- DSHS could do a better job of providing clients with complete and current lists of available providers

It appears that fewer clients are experiencing difficulty finding providers who accept medical coupons. Comments about this difficulty decreased by 66% from 2009 to 2011.

\* Numbers in these categories add up to more than 25 because in 14 cases the respondent mentioned more than one issue.

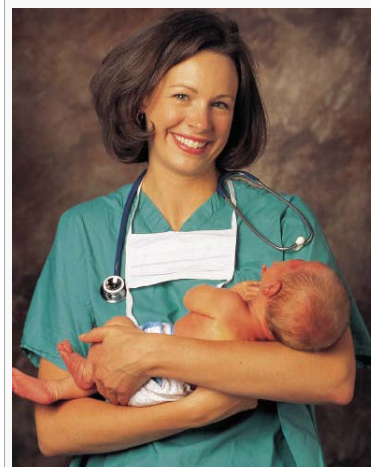


Photo courtesy of Microsoft, free domain.

**The need for more providers who accept DSHS payment was a common cause of frustration.**

"Dental services are real hard to get. Not very many dentists accept the medical coupon or card."

"It is difficult to get doctors, etc., to accept the DSHS medical card."

"Lots of dentists won't take the Medicaid card."

"When I needed to find a doctor for my pregnancy, it was hard to find one that would take the coupons."

"It is real hard to get medical assistance because there are many places that do not accept medical cards or coupons."

"Only a few clinics accept DSHS, it would be nice to have more. Nobody close accepts DSHS for dental."

**Many clients have problems finding primary care doctors, dentists, and other health care providers.**

"Nowhere near enough dental providers."

"It is very difficult to get appointments for doctors and medical specialists – they have a very long backlog of patients."

"There aren't many choices in the optometry, dermatology, and allergy fields."

"It would be nice if there were more options in places that you could go for mental health."

**They want complete, up-to-date information on available health care providers.**

"Provide a list of doctors and dentists that take the medical card."

"I need a list of providers to look at!"

"Provide a list of dentists that will accept the medical coupons so that you do not have to call."

"Need a website list!"



## Diversity



### A detailed look at diversity issues

Relatively few clients made survey responses highlighting diversity. However, because DSHS leadership takes its commitment to diversity very seriously, we carefully reviewed each of the responses citing diversity concerns. The reader may find this chapter different than previous chapters in its approach. Rather than looking at broad trends, it focuses on including every client voice.

When asked what DSHS does well and could do better to serve clients, only 18 clients mentioned diversity issues; 3 praised DSHS's commitment to equality, and 15 suggested areas for improvement. An additional 98 reported mistreatment when asked specifically about any unfair treatment because of race, culture, age, gender, sexual orientation, or disabilities.

- The most common perceived factor causing unfair treatment was disability, frequently involving developmental disabilities or mental health
- Respondents reporting mistreatment based on race were almost evenly divided between white and minority clients
- All the complaints about gender-based discrimination related to unfair treatment to men
- Concerns about age-based mistreatment were almost always combined with other issues, such as being a young mother, disability, race, or economic situation
- Others who answered "Yes" to the diversity question discussed a variety of issues, including religious issues, income level, immigrant status, communication difficulties, and rude treatment

Standard questions showed that Hispanic clients generally reported higher satisfaction than other clients.



Photo courtesy of Microsoft, free domain.

### Three clients praised DSHS for helping everyone equally.

"I like that they don't discriminate and help all people and they are very helpful."

"I really commend the DSHS employees that work in the Kitsap County Office – they are a wonderful group of people! I've taken people who are from the islands, that don't speak English very well, to the DSHS office to apply for assistance, and everyone in the office has always been so helpful. The people from the front desk to the financial worker have gone through every avenue to try and help these clients and I'm so impressed by the staff's professionalism and their caring spirit. I just want the staff to know how much they are appreciated."

"I like that they help just about anybody. They really helped us when we needed it."

### In response to the diversity question, other clients complained staff are rude and disrespectful.

"Sometimes the CSO workers and receptionists seem to talk down to you."

"The lady went off on me, and my husband was with me at the time. The lady was yelling at us about finding work and I have disabilities that make it hard for me to work."

"CPS worker said 'You don't help your wife at all.' She did not know me from Adam. And the statement she said was definitely wrong and out of left field and she said this in front of 20 people. She was not professional."

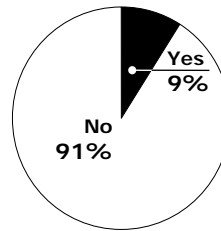
"They wouldn't listen to him. He tried to tell them that he had a learning disorder. They just treated him worse and worse. DVR, Economic Services mainly are the agencies that did this."

"The WorkFirst worker was very rude. She did not understand my disability and the problems that I was having."

"They just think that we are lazy and don't want to take part in their program. But they don't consider that we may not have transportation. So they look down on us and act like they don't want to waste their time."

## QUESTION | In the past two years has there been a time when you felt DSHS staff treated you unfairly because of your race, culture, age, gender, sexual orientation, or disabilities?

Felt unfair treatment because of protected group status?



102 of the 1,180 clients replied "Yes" when asked this question. The majority (1,078) responded "No." These percentages were the same in 2009.

In addition to the 102 clients who responded "Yes" to the question above, this chapter incorporates all clients who addressed diversity issues in answering three more general questions in the survey.\*

A total of 113 clients reported that DSHS staff treated them unfairly. The majority (96) said that the unfair treatment was related to membership in one or more protected groups based on disabilities, race, gender, age, and sexual orientation. Some feel unfair treatment was wholly or partly due to other factors.

### Unfair treatment related to DISABILITIES:



40 clients said they were mistreated because of their disabilities, and the majority (29) feel this mistreatment was due to their disabilities alone. 11 clients spoke of disabilities along with membership in other protected groups. (See more on page 68.)

### Unfair treatment related to RACE:



39 clients spoke of unfair treatment due to their race. Most (25) of these clients feel the mistreatment was due solely to their race, while 14 also related it to membership in one or more additional protected groups.

Of the 39 clients who said that they were ill-treated based on race, nearly half (17) believe they were victims of reverse discrimination because they are not part of a minority group. (See more on page 69.)

Footnotes and legend are on adjacent page.

**Unfair treatment related to GENDER:**

23 clients feel they experienced discrimination because of their gender; most (18) feel gender was the only reason for unfair treatment. All of those complaining about gender discrimination were men. (More on page 70.)

**Unfair treatment related to AGE:**

13 clients reported their mistreatment was related to their age; only 5 feel it was due solely to their age. (See more on page 71.)

**Unfair treatment related to SEXUAL ORIENTATION:**

1 client reported unfair treatment due to sexual orientation. (See more on page 70.)

**Unfair treatment related to OTHER FACTORS:**

17 of the 113 clients who said they had encountered diversity-related problems did not identify any reason related to membership in protected groups. These clients spoke about problems related to communication difficulties, religious beliefs, income level, immigrant status or rude and disrespectful behavior.

5 clients chose the “Other” category along with membership in one or more protected groups. Narrative comments related to the “Other” category are discussed further on page 72.

**LEGEND**

\* The two main open-ended narrative questions (“What do you like best about dealing with DSHS?” and “What is one thing DSHS can do to improve services?”) were asked before the question that asked specifically about diversity issues. When asked these two general open-ended questions, clients were unaware that there would be a later question specifically about diversity. The final opportunity for narrative comments (“If you have any additional comments or questions about this survey or DSHS, I can note them now.”) was offered immediately after the question about diversity.



Photo courtesy of Microsoft, free domain.

**Some clients were upset they could not get needed services, or their services were cut off.**

“I received a notification that since I am a student, I should be able to receive food assistance. I filled out the paperwork and believed I would get over \$100 per month. Since I am over 50, I did not qualify as a student even though I am actually in school and am a student regardless of my age!”

“They lied to me about my benefits. They cut my benefits/SSI.”

“I am a single male and can't get much DSHS service.”

“DDD evaluated my son and said he wasn't eligible for services. My friend's son has about 50% of the disability and received services from DDD. I had to fight for services for my son even though he should have easily qualified. He was cut off DDD services and is not receiving services now. DSHS staff said due to cutbacks they had to cut off some clients.”

“I don't feel like my daughter got the services she needed, since she is developmentally disabled, especially those agencies who focus on disabilities.”

“My son is autistic. They were supposed to help him with anger management and they did not help him. They have not had any classes available for my son, such as yoga, etc., they claim to have for clients.”

**Several clients complained about long wait times and discourteous service.**

“They could have more workers. Sometimes when you are at their office, you are there for 6 hours average. It seems like they are understaffed. The time it takes to get food stamps when I bring in all the required verification is very long.”

“The DSHS staff just don't want to listen. They act like they are too busy to deal with people - very short with their answers. They act like they are very rushed.”





Photo courtesy of Microsoft, free domain.

**Many clients wish staff understood their disabilities and were more helpful and compassionate.**

"It was two years ago – I went to see my new DVR counselor. I came to the office in my wheelchair and the counselor said I could not be a teacher since I was in a wheelchair. I appealed to his supervisor and asked for a new counselor and got one."

"And regarding disabilities the first time I walked into a CSO, the worker said 'This program is for the disabled not people like you.' Just because I can walk and talk does not mean I do not have disabilities. I spoke to that worker's supervisor and the supervisor basically just blew me off about my complaint."

"I felt like the initial counselor when I signed up really understood my situation as far as bringing in resources for brain injury. With the new counselor I felt like the issues that I dealt with the brain injury were not understood. I didn't feel like he was open to learning about my injuries and was defensive about this. I felt he claimed to know about my injury then cancelled the things that I felt were being beneficial."

"I applied for cash assistance and I was denied. Not only was I denied, I felt that DSHS staff made me feel like I didn't know what I was talking about. I have some disability issues and DSHS should have paid more attention to me. I got the distinct feeling that staff didn't want to hear about it and it wasn't right!... DSHS needs to have more compassion even if the documents are not yet available - help the client prove he is disabled or not."

**Several were upset they didn't qualify for needed services because they were unable to fulfill the work requirement.**

"They denied me TANF benefits because I could not do WorkFirst because of my disability."

"When I applied when I was going to school, they would not allow me to have medical. Even though I am young my disabilities don't allow me to work, and I was not eligible for services if I didn't work while I was going to school, and I felt like this was unfair."

## THEME | Discrimination based on a client's disabilities

The 40 clients who reported discrimination based on their disabilities were asked to describe the unfair treatment they experienced. Some comments concerned specific disabilities, such as developmental disabilities and mental health. Many did not specifically describe their disability.

### Unfair treatment related to DEVELOPMENTAL DISABILITIES:



8 of the 40 clients perceived unfair treatment related to developmental disabilities. In addition to clients with learning disabilities, this group included clients with autism and deafness.\*

### Unfair treatment related to MENTAL HEALTH:



6 clients who described unfair treatment based on disabilities described their disability as a mental health issue. Clients spoke about panic anxiety attacks and bipolar disorder.

### Unfair treatment related to OTHER SPECIFIED DISABILITIES:



5 clients reported discrimination due to other specified disabilities. Clients spoke about unfair treatment related to their sleep disorder, brain injury, bad back, obesity, and being in a wheelchair.

### Unfair treatment related to OTHER UNSPECIFIED DISABILITIES:\*



21 of the clients who told interviewers they were treated unfairly because of their disabilities did not specify the type of disability. 13 just spoke about their disability in general terms, and 8 did not mention anything about a disability in their description of the unfair treatment.

#### LEGEND

	Disabilities = is the only factor		Disabilities plus = additional protected group
--	-----------------------------------	--	--

\* According to the CDC, developmental disabilities are a group of severe chronic conditions that are due to mental and/or physical impairments. People with developmental disabilities have problems with major life activities such as language, mobility, learning, self-help, and independent living. This includes autism spectrum disorders, cerebral palsy, hearing loss, intellectual disability, and vision impairment.



## THEME | Discrimination based on a client's race

Of the 39 clients who reported unfair treatment based on race, ethnicity, or language, 25 feel discrimination was based solely on their race/language.\* Others said mistreatment was due to race along with membership in other protected groups.

### Unfair treatment related to being WHITE:



18 of the 787 white non-Hispanic clients who took the survey (2.3%) said they were mistreated because of their race. The 18 white clients reported reverse discrimination, believing minorities get better treatment.

### Unfair treatment related to being AMERICAN INDIAN:



7 of the 56 American Indians who responded to the survey (12.5%) described treatment they feel was unfair. They talked about denial of services, unequal access to services, and the child placement process.

### Unfair treatment related to being AFRICAN AMERICAN:



6 of 103 black survey respondents (5.8%) feel they experienced discrimination because of their race. 3 spoke of demeaning, non-respectful behavior. 2 were upset about denial of benefits.

### Unfair treatment related to being HISPANIC:



5 of 154 Hispanic survey respondents (3.2%) reported ill-treatment based on their race/ethnicity. All were parents (4) or family members (1) of young children. 4 feel they were treated disrespectfully solely due to their race. 1 felt the rudeness was due to a language problem.

### Unfair treatment related to being ASIAN AMERICAN:



3 of 73 Asian American survey respondents (4.1%) reported mistreatment based on their race. 2 spoke of unequal availability of services. 1 guardian complained that the client was not provided an interpreter.

#### LEGEND



\*As detailed on this page, the rate of complaints about racial discrimination ranged from 2.3% for white respondents to 12.5% for American Indian respondents. The difference between the rate of complaints for white non-Hispanic respondents and minority respondents was statistically significant ( $p=.05$ ). 18 of 787 white non-Hispanic respondents reported racial discrimination (2.3%). 21 of 388 minority respondents reported racial discrimination (5.4%).



Photo courtesy of Microsoft, free domain.

### Many white clients complained members of minority groups are favored for services.

"It seems the 'white' get shoved back to the end of the line nowadays."

"Unfair treatment about race, my Hispanic friends have no problem getting financial help or daycare."

"If you are Hispanic, you get services and benefits faster... It feels racist if you are white."

### Some white clients wish staff spoke English and complained paperwork and information are not in English.

"They need to be more clear and nicer and have more people that speak English. I needed help but staff didn't believe me. They had Asians there who didn't seem to work very much. There is too much rudeness and waiting at DSHS."

"Decrease the wait time when calling on the phone and have smarter employees who speak English."

"Most of their paperwork is in Spanish and the information on the information board is in Spanish."

"The office caters to Hispanics. This is a recent development. It was difficult to find English paperwork and English signs."

### Several minority clients feel they were treated poorly due to their race.

"I am Spanish and I feel that they treat me wrong."

"When you go into DSHS, they look at how old you are and your nationality – if they don't like you – they don't like you. Many other Asians and Mexicans feel the same as I do about this. I feel they treat Caucasians better than minority applicants."

"The DSHS caseworker – from Child Support – said that because I am Native American I should be dealing with TANF or the tribal staff instead of her office. She was wrong. After a struggle, we got it resolved."

**See page 73 for more on the concerns of minority clients**



Photo courtesy of Microsoft, free domain.

**Many men complained that women are favored over men.**

"The timeframe to get a change takes a long time. Mothers have a lot of help, but fathers don't have as many services and they feel that they don't know what questions to ask and where to look. Helping both parents would be beneficial to the children. Many fathers just feel like they can't get the same help and may just disappear."

"I can't get any medical benefits and I don't have a job nor medical insurance. I have been unemployed for about two years. I cannot find a job. There should be some kind of program that assists men as it does women and children."

"They will help a woman in a second, but when it comes to a man, they won't help him at all."

"I feel because I am a man I get less help with services, in general."

"When I went to get my food stamps there was a lady that was also applying for food stamps the same day. She got her food stamps that day but it took a month before I received mine. I asked why it took so long and was told I was a man and it was easier for me to get a job than the lady that was applying at the same time. Washington state is a woman and child state and that phrase is told to me many times and that the woman will always get the services before the man."

**Some men feel staff stereotypes them and treats them in an insulting manner.**

"Basically, as I said, I had not had overdue support. I was very good about paying it on time. But, DSHS staff treated me like a deadbeat Dad, I was treated very rudely and insulted by DSHS staff. I think that is extremely unnecessary."

"I feel like there is too much stereotyping and I felt like they were assuming the problem before I explained, in regards to DCS."

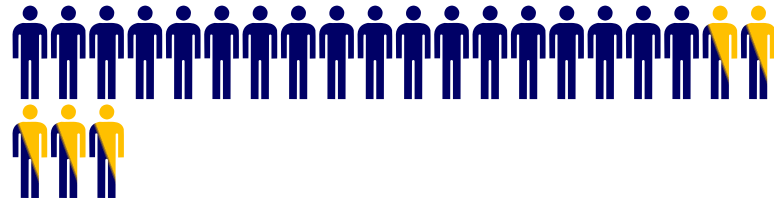
"My son was a solo parent and they tended to treat him indifferent or arrogant that made him feel uncomfortable and embarrassed about applying for services."

"The person from Support Enforcement talked to me in a manner that made me feel put down and uncomfortable."

## THEME | Discrimination based on a client's gender


Of the 23 clients who reported unfair treatment based on gender, 22 were men. 1 woman described ill-treatment experienced by her son.

### Unfair treatment related to being MALE:



All reported gender bias in this survey targeted males. Of the 23 male clients who reported mistreatment, 18 were clients of the Division of Child Support (DCS). 12 of the DCS clients were non-custodial and 6 were custodial fathers. 17 of the 23 men said that mothers get preferential treatment including access to more services, faster services, lower child support payments, and more helpful behavior from staff. 6 spoke of rude, demeaning behavior. Although the location of the perceived ill-treatment is not specified in all the comments, clearly child support is a major focus of discontent.

#### LEGEND

	Gender is the only factor		Gender plus additional protected group
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## THEME | Discrimination based on a client's sexual orientation

### Unfair treatment related to SEXUAL ORIENTATION:



1 client selected "sexual orientation" as the cause of unfair treatment. This client attributed staff non-responsiveness to the client's sexual orientation. The client said, "My caseworker doesn't talk to me or return calls unless I get someone else involved in my case."

#### LEGEND

	Sexual orientation is the only factor
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## THEME | Discrimination based on a client's age

The 13 clients who feel they received unfair treatment based on their age can be grouped into three categories: young mothers, working age, and older adults.

### Unfair treatment related to being YOUNG MOTHERS:



1 client thinks DSHS staff tricked her into giving up her children to foster care. Another young mother wishes she could get as much monetary and food assistance as others.

### Unfair treatment related to being WORKING AGE:



The majority of the 7 working age clients described unfair treatment centered around economic issues; staff appeared reluctant to give services to those judged capable of self-support. Of the 7 working age clients, 5 feel the unfair treatment was due to a combination of their age and disability. Most are upset they are not eligible for needed services including medical and food assistance. Several feel they were judged and treated condescendingly.

### Unfair treatment related to being OLDER:



2 of the 4 clients in the older age group, over 50 years of age, believe services were denied due solely to their age. Another client's concerns appear to be related to a combination of her age and disability. 1 respondent feels staff were judgmental and reluctant to talk to him due to his age and race.

#### LEGEND

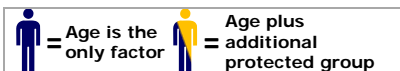


Photo courtesy of Microsoft, free domain.

#### Several young mothers feel they were treated unfairly due to their age.

"It was dealing with CPS and I had 2 children when I was between the ages of 16 and 17, and I was not adequately informed of procedures and was conned into assigning my children into foster care."

"I know other people on DSHS who have more children and make more money than I do and seem to get more money than me. I have one child and so does my friend and she makes more money but gets a lot more food stamps than I do. And her shelter costs are less than mine."

#### Some clients of working age were upset they didn't qualify for medical or food assistance.

"I felt like when I applied when I was going to school, they would not allow me to have medical. Even though I am young my disability doesn't allow me to work, and I was not eligible for services if I didn't work while I was going to school and I felt like this was unfair."

"I was trying to get medical for myself and DSHS said I couldn't because I was over 18 years old."

"The very last worker to handle my case in the Crossroads office (food assistance) kept sending me letters regarding spousal support. I kept getting the same documents to complete and she kept denying me. She then sent me a termination letter for food assistance and then she wanted to call my ex-husband for details. I felt she believed I was in the age bracket where I should go get a job and not seek assistance."

#### A few older clients believe ill-treatment was due to their age.

"There were a couple of medications that I wanted filled but they said because of my age I had to get pre-authorization. (I was too old.)"

"Going in it was so difficult to get anyone to talk to me, and I felt that I was looked upon badly because I was a white old man in line trying to get help."



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**Some clients related mistreatment to their religious beliefs.**

"Religion. We are Latter Day Saints (Mormon). There is an extreme bias with the Christian-based foster care community and my family has experienced multiple times by many different workers (in Children's Administration) an unfair bias."

"We are Jehovah's Witnesses so we are not involved in political things such as school and local politics. We are politically neutral and we don't celebrate holidays. There were so many times that the children would be automatically signed up to receive gifts and participate in holiday celebrations."

**Two clients mentioned issues related to their immigrant status.**

"I felt like I was treated indifferently because I was born in Germany. They kept asking me if I was an alien. It was a strange incident."

"Government make better. The Russian community needs more."

**Others feel they were treated in a rude or disrespectful manner.**

"It was because I was pregnant and my husband was out of work and I was not able to work. The supervisor started yelling at me and so I hung up the phone and he called back and threatened to take away our benefits and make us pay everything that we had received back. I did not want to talk to him anymore because he was extremely angry. I got very sick and felt weak, I just couldn't listen anymore, so I hung up again. We found out later that the financial worker had not completed some paperwork and the manager had misunderstood the situation - he thought that we were lying. She called us back and explained what happened and she also apologized. Her manager never did. That was the worst interaction we've ever had with DSHS and it made me physically sick. Clients should NEVER be treated like this. It is not our fault that my husband was laid off from his job."

"The DSHS worker acted like I was taking money out of her purse. She said that she was tired of everyone mooching off everybody else!"

## THEME | Discrimination based on other factors

22 clients indicated that mistreatment was due to "Other" reasons. 6 respondents named specific factors, including religious beliefs, income level, and immigrant status. The remaining clients chose "Other" as a source of poor treatment, but in their explanatory comments did not relate the ill-treatment to a specific factor or related it to one of the protected groups.

### Unfair treatment related to SPECIFIC OTHER FACTORS:



6 respondents related their unfair treatment to specific factors, including religious beliefs, income level, and immigrant status. 3 respondents spoke about experiences related to their religious beliefs; 2 of these were related to foster care, the other to mental health services. 1 client was initially denied vocational rehabilitation services because his net worth was too high. 2 clients made comments related to their immigrant status. 1 feels she experienced indifferent treatment because she came from Germany and the other wished there was more help for the Russian community.

### Unfair treatment related to UNSPECIFIED OTHER FACTORS:



11 respondents did not identify a specific factor which led to their ill-treatment. Of these, 6 feel DSHS staff treated them rudely or in a disrespectful manner. 2 respondents feel upset about staff's misperception that they didn't want to participate in their programs when it was really a transportation issue. 1 single mom wanted to get services for her other children even though boyfriend supports the one they have in common. Another client commented on the difficulty in getting a correct answer to questions. A parent wishes her older, disabled son would get recognition at his workplace of 15 years.

### Unfair treatment related to PROTECTED GROUPS:



5 additional clients chose the "Other" category as one of the sources of their maltreatment, but their narrative comments referred only to one of the protected groups.

#### LEGEND

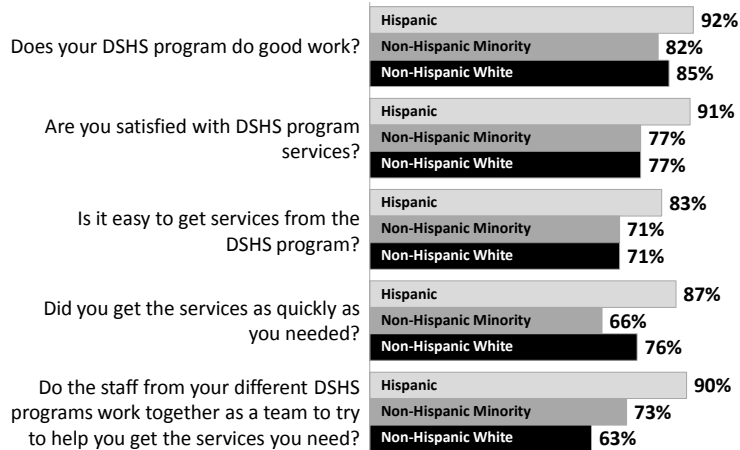


## Racial/ethnic differences in standard questions

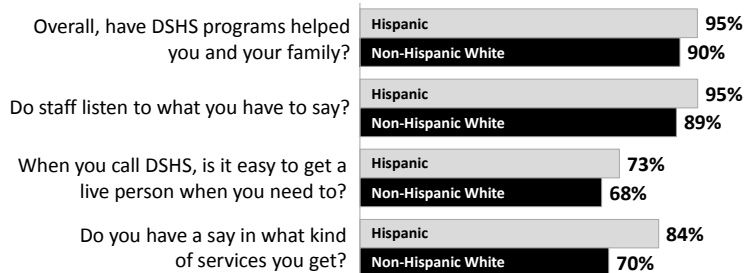
Most of this chapter examines diversity issues through client comments and responses to diversity-specific questions. Standard survey questions (with Agree or Disagree answers) also help us look at diversity issues.\*

On these standard questions, Hispanic respondents were generally more satisfied,\*\* although they are less likely than other clients to know what services are available.

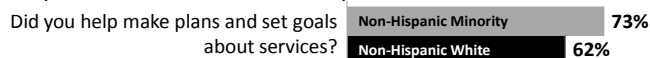
Hispanic respondents reported significantly greater\*\*\* satisfaction than both white and non-Hispanic minority respondents on five questions:



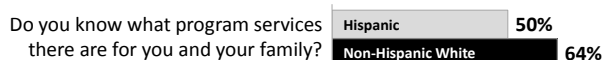
Hispanic clients reported significantly higher\*\*\* satisfaction than non-Hispanic white clients on four questions:



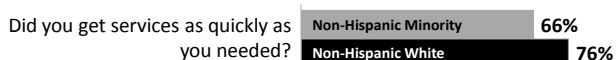
Non-Hispanic minority clients were significantly more\*\*\* satisfied than non-Hispanic white clients on one question:



Non-Hispanic white respondents reported significantly higher\*\*\* satisfaction than Hispanic respondents on one question:



Non-Hispanic white clients were significantly more\*\*\* satisfied than non-Hispanic minority clients on one question:



\* For this analysis, race was divided into 3 categories (Non-Hispanic Minority, Hispanic, and Non-Hispanic White) to make numbers in each group large enough for statistical comparison.

\*\* These difference may not always reflect actual differences in client experience. Social science literature suggests that Hispanic survey respondents tend to give more positive answers.

\*\*\* Statistically significant at the .05 level.

For all demographic comparisons, see Appendix F.



Photo courtesy of Microsoft, free domain.

Some minority clients feel they are subjected to rude behavior or have difficulty accessing programs because of their race.

"Sometimes they hang up on me because I do not speak English." (Hispanic client)

"The caseworker does not involve me or family in the decision making for my son, I feel like she doesn't respect me or my culture." (African American parent of client)

"Economic Services - When I first came to their office, when I told him I was Indian/White, he seemed to have a problem with that. I made phone call to supervisors, etc. and it was dealt with temporarily. The supervisor was to take away the social worker from me but I ended up keeping the same worker. I eventually lost my cash assistance."

"They helped the Mexican citizens on a green card faster than other people. Everybody should be able to apply for the same services and get the same services." (American Indian client)

"I felt like I got talked down to because of my age and my race." (African American client)

"A lot of the workers treat me badly because of my race and then sometimes there is someone who will understand what I need." (Hispanic parent of client)

"They are trying to limit the number of children that people choose to have. They look at me when we ask for assistance; my husband left. They told me to move to lessen my rent or to have fewer kids." (American Indian client)

"I think the unfair treatment was because I'm not from here. The person in the office who interviewed me, he just screamed out in the reception area 'You are not eligible because of your illegal status.'" (Hispanic parent of client)

"They made me feel like I was lying to them about the absence of their father. They want you to pay them back for child care. They shouldn't make me feel like that." (Family member of Hispanic child)





## Who are the Respondents?



### Respondent Profile

**1,180 clients completed the 2011 Client Survey.**

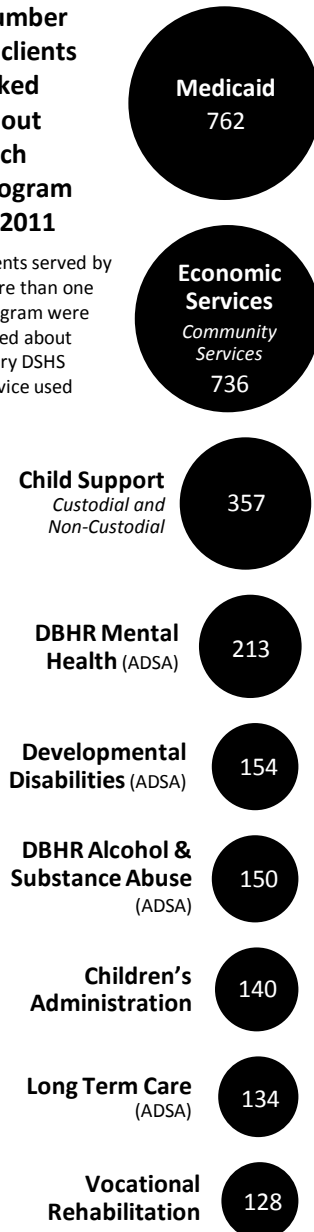
- **At least 100 clients** were selected from each major program, and clients were asked about all services they received
- The completion rate was **85%** and the cooperation rate was **96%**
- Most of the surveys were **completed by clients**, but some were completed by a client's parent, guardian, or other representative
- The average age was **37 years**
- **33%** of respondents identified themselves as members of a racial/ethnic minority group
- **51%** of respondents were female



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### Number of clients asked about each program in 2011

Clients served by more than one program were asked about every DSHS service used



## Program Representation

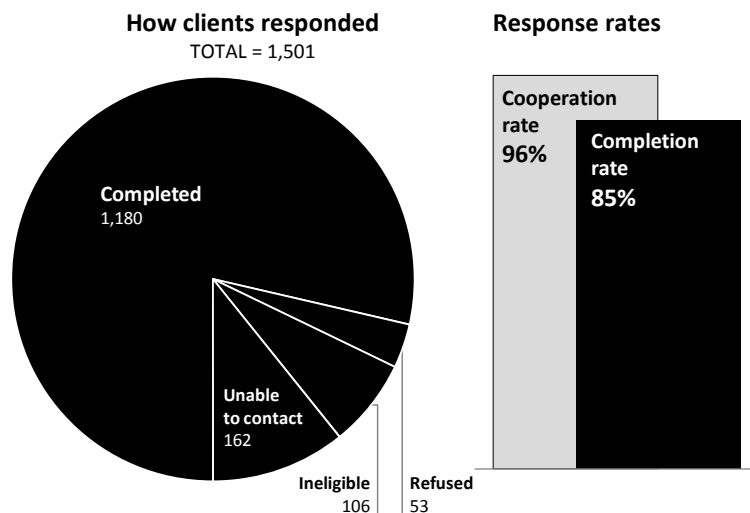
Approximately 100 clients selected from each of nine major DSHS programs\* were represented in the completed survey. Survey participants from each program were randomly chosen from those clients who received services from that program during the month of December 2009.

Over half of DSHS clients use more than one program, so each person interviewed was asked about every DSHS service used in calendar year 2009 (January 2009-December 2009). Thus, a client who was selected from among those receiving economic services might also be asked about the medical assistance and vocational rehabilitation services received in calendar year 2009.

The circles on the left show the number of respondents interviewed about each program. Because a single client was often interviewed about more than one program, the total far exceeds the number of clients interviewed. Well above half of the 1,180 clients in the survey had used the more widely utilized programs: Medicaid and Economic Services.

## Cooperation and Completion Rates

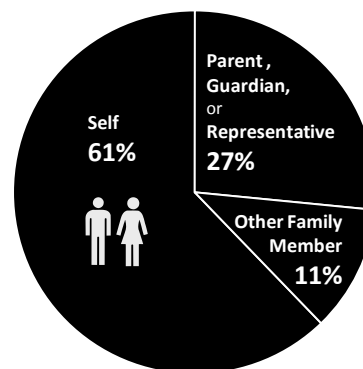
The overall cooperation rate for the survey was 85 percent, and the completion rate was 96 percent.\*\* These response rates are extraordinarily high for any survey, but are especially remarkable for a survey involving the particularly challenging transient population of DSHS clients.



\*The survey did not ask about client interactions with the Juvenile Rehabilitation Administration. 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. 200 clients were chosen from the Child Support caseload—100 custodial and 100 non-custodial parents. Appendix A contains further information about methodology.

\*\*Surveyors employed a number of measures to increase response rates. Response rates for each program and the methods used to calculate response rates are shown in Appendix B. Descriptions of methods used to increase response rates, and of how clients are deemed ineligible, can be found in Appendix A.

The person who completed the survey was not always the client. In 39 percent of the cases, the client selected for the survey was a child or youth (age 17 or under) or was otherwise unable to complete the survey. In these cases, a parent, guardian, family member, or other representative who deals with DSHS was asked to complete the survey.



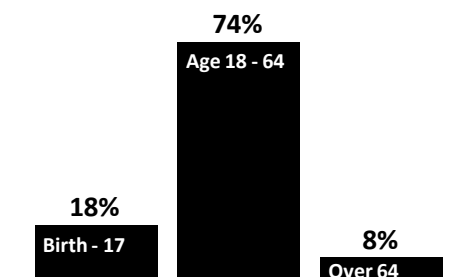
## Client Characteristics

### Age

Clients' ages ranged from early childhood through late adulthood:

- 18 percent of the clients in the survey were children
- 74 percent were working age adults
- 8 percent were older adults

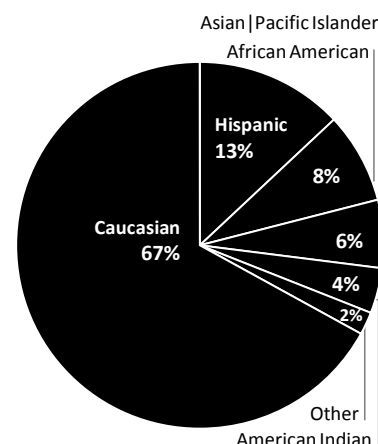
The average age was 37 years.



### Race | Ethnicity

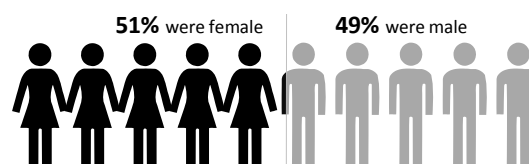
Clients were asked what racial and ethnic group best describes them. In the chart at right, all clients of Hispanic ethnicity are categorized as Hispanic, regardless of racial identification. Thus, for example, the Caucasian category consists of non-Hispanic Caucasians, and the American Indian group consists of non-Hispanic American Indians.

- 67 percent of clients surveyed identified themselves as Caucasian
- 33 percent identified themselves as members of a racial/ethnic minority group



### Gender

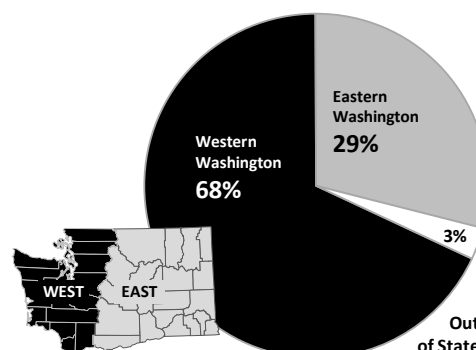
Clients were slightly more likely to be female than male.



### Geography

Clients were more likely to live on the west side of the state:

- 68% lived in Western Washington
- 29% lived in Eastern Washington
- 3% were from out of state









2011 Client Survey  
**DSHS Clients Speak**