

Highlights of the 2011 Client Survey

AUGUST 2011

THE MAIN PURPOSE of the Department of Social and Health Services Client Survey is to help the Department's leadership and managers understand how clients view the Department's programs, to see how program changes affect client satisfaction, and to incorporate customer input into strategic planning and decision-making processes. The survey shows how clients experience the Department's values: excellence in service, respect, collaboration and partnership, accountability, and diversity.



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.¹

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

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 2009.³
- ▶ 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.***⁴

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.^{4,5}
- ▶ Fewer Community Services Office clients said that it's easy to get services from Economic Services – a 13% decrease from 2009.⁵

- **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%.⁵ 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 2009.⁵ More than 85% said that DSHS and its programs do good work – an increase from 2001.⁵
- ▶ 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 2001.⁵ 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 significant⁵ 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 2009.⁵
- ▶ 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 redesign⁶ 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

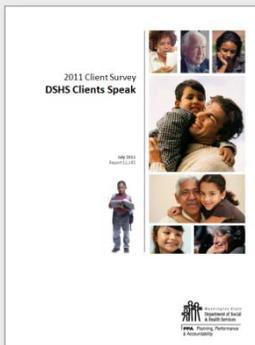
- ▶ More than one-third of the respondents mentioned a need for improvements in processes or access to services.
- ▶ 12% said “No” to “Is it easy to get services from your DSHS program?”
- ▶ 17% said “No” to “Do DSHS staff return your calls within 24 hours?”

- **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.

MORE INFORMATION



2011 Client Survey: DSHS Clients Speak

Copies of the full Client Survey report, statistical tables, and a complete list of comments are available on the DSHS web site: <http://publications.rda.dshs.wa.gov/1441/>

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

² 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>.

³ 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.

⁴ 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.

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

⁶ 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.

Q&A. The Department of Social and Health Services Client Survey

How is the survey conducted?

- The 2011 Client Survey is the seventh in a series of Department-wide client surveys initiated in 2001. It was developed in conjunction with the Social and Economic Sciences Research Center at Washington State University.
- **1,180** clients were interviewed by telephone between November 2010 and April 2011.
- Clients were randomly selected from the Department's programs, and were asked about all services they utilized. Because many clients are served by multiple programs, the survey included 2,774 sets of questions about individual programs. Juvenile Rehabilitation clients are not included as they are better surveyed using other methods.
- The survey mixes qualitative and quantitative survey methods to track trends across time and between programs, and to understand, in clients' own words, why these trends occur.

What are the response rates?

- 85% of the clients randomly chosen for the survey sample were contacted and completed the survey (completion rate). Of the clients who could be contacted, 96% completed the survey (cooperation rate).
- These response rates are extraordinarily high. DSHS clients are often transient and difficult to locate.

Who administers the survey?

The survey is administered by the Planning, Performance and Accountability Survey Research Team. The Team is:

- Highly experienced and skilled – involved with more than 200 surveys including other state and federal agencies /research projects. The Team Leader is a widely published Ph.D. with 30 years of experience as a researcher and social work manager in state, federal and university settings.
- Independent from any of the DSHS programs. DSHS leadership and program staff never know which individual clients have been surveyed; they only see client responses summarized in groups.
- Skilled at finding transient DSHS clients and understanding their concerns. They have interviewed clients in jail, in Brazil, and even in the hospital during labor.
- Dedicated to hearing client opinions and concerns, and making sure that they are heard.

Does the survey accurately reflect differences and changes in programs, policies and environment?

- Answers vary by program in ways that make sense. Satisfaction rates are highest for programs that provide concrete services requested by clients, such medical benefits, aging and adult services (chore services, in-home care), and food stamps. Satisfaction rates are lowest for services that include court mandates, such as child protective services and child support enforcement.
- Answers change when DSHS service delivery changes across the department. For example, in 2011 program improvements in the Divisions of Child Support and Vocational Rehabilitation were reflected in survey results. The recent economic downturn and problems associated with increased demand for services and reduced staffing and resources was reflected in Economic Services and Long-Term Care data.

Are clients hesitant to criticize DSHS?

- In spite of high overall satisfaction rates, there are significant numbers of dissatisfied clients. Clients often reported trouble accessing services, problems with staff, lack of providers, or other unmet needs. Certain areas reported lower satisfaction. More than one third of community services clients said it is NOT easy to get a live person when you phone. 25% of non-custodial child support clients said it is NOT easy to get help when you need it. 29% of Children's clients said that they did NOT get a say in what services they got.
- Clients feel free to make comments like the following: "Fire the crappy people they have working for them." "I hate going in there." "I would like my CPS worker to actually listen to what I have to say." "I don't like dealing with them, and if I had to do it again I would not deal with them." "I think that Children's Administration is a joke. They are there to take your kids and not there to help you."

What are clients told about the connection between their services and their answers?

- Clients are assured that survey participation is voluntary and that "whether or not you participate in the survey will not affect any services you may receive from DSHS. We promise that no one from the DSHS programs that serve you will know how you answered. Reports about the survey will not include any names."
- Clients are encouraged to "tell us how you really feel." They are told that their answers "will help DSHS make plans to improve services and to measure whether services improve in the future."