

Our Clients Speak

Results from the Social and Health Services Client Survey



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2023

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Title: Our Clients Speak: Results from the 2023 Social and Health Services Client Survey

Abstract: Between October 2022 and April 2023, the Research and Data Analysis Division of the Washington State Department of Social and Health Services (DSHS) conducted 1,157 telephone interviews with randomly selected clients who received services between May 2021 and April 2022. Most services covered in the survey were provided by DSHS. Medical assistance, community-based mental health services, and substance use disorder services were provided by the Washington State Health Care Authority. Children and Family services were provided by the Department of Children, Youth, and Families. Clients were asked about their satisfaction with social and health services and for recommendations for change. The 2023 Client Survey is the second survey to gather client feedback since the COVID-19 pandemic. Results suggest overall declines in satisfaction since the last major survey in 2021, much of which can be attributed to the extensive and continuing impact of the pandemic. Areas of significant decline indicate challenges with access to staff and ease of receiving services. Despite these challenges, clients remain highly satisfied with how they are treated by staff and the quality of the services they receive. Comments show that clients appreciate remote options for service delivery, but would like shorter wait times on the phone, faster and simpler application processes, and more user-friendly online systems.

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Contents



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INTRODUCTION Executive Summary	1
Survey results at a glance	3
About the respondents	5
About the survey.....	6
About this report	6
CHAPTER 1 Quality and Helpfulness	7
ALL SOCIAL AND HEALTH SERVICES	
Question: Overall, have social and health service programs helped you and your family?	8
Comments: Quality and helpfulness of services	9
SPECIFIC PROGRAMS	
Question: Are you satisfied with program services?.....	10
Comments: Quality and helpfulness of specific programs, offices, locations	11
CHAPTER 2 Staff	13
Question: Do staff treat you with courtesy and respect?	14
Comments: Staff courtesy and respect.....	15
Question: Do staff listen to what you have to say?	16
Comments: Staff listens/understands.....	17
Comments: Other comments about staff	18
Comments: Specific staff members	19
Comments: Need more staff.....	20
Comments: Provider staff	21
CHAPTER 3 Access and Processes.....	23
GETTING SERVICES	
Question: Are programs open at times that are good for you?	24
Question: Is it easy to get services from the program?	25
Comments: General processes	26
Comments: Specific processes.....	27
Comments: Eligibility processes.....	29
Question: Did you get services as quickly as you needed?	30
Comments: Timeliness of services	31
Comments: Provider processes	32
CONTACTING STAFF	
Question: When you call, is it easy to get to a live person when you need to?	33
Question: Do staff return your calls within 48 hours?	34
Comments: Phone and staff access	35



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"Peaceful Lake Day"/2021 Employee Survey Photo Contest/Martha Burris

CHAPTER 4 | Information.....37

Question: Do you know what program services there are for you and your family? 38

Question: Did program staff explain things clearly? 39

Question: Was it easy to get the information you needed about services? 40

Comments: General information 41

CHAPTER 5 | Client Involvement and Coordination43

Question: Did you help make plans and set goals about services? 44

Question: Do social and health services make sure all your services work well together? 45

Question: Do the staff from your different social and health service programs work together as a team to try to help you get the services you need? 46

Comments: Coordination 47

CHAPTER 6 | Resources49

Comments: Social and economic program availability 50

Comments: Benefit levels 51

Comments: Health care provider availability 52

Comments: Health benefit levels 53

CHAPTER 7 | Equity and Disparity55

Question: In the past two years has there been a time when you felt social and health services staff treated you unfairly because of your race, culture, age, gender, sexual orientation, or disabilities? 56

Analysis: How do perceptions of unfairness shape the client experience? 56

Comments: Unfair treatment 58

Analysis: Racial disparities on structured questions 59

APPENDIX 61

APPENDIX A: Methods 63

APPENDIX B: Cooperation and Completion Rates 73

APPENDIX C: Survey Questions 75

APPENDIX D: Weighting 77

APPENDIX E: Responses by Sub-group 81

APPENDIX F: Themes from Narrative Questions: Glossary and Report 83

APPENDIX G: Survey Instrument 87

Executive Summary

The Client Survey is a voice for Washington’s social and health services clients.

“ AS HARD AS IT IS TO GET AHOLD OF FOLKS AND THE DIFFERENT PROGRAMS, ONCE I GOT IN, IT WORKED FOR ME. MAKES A DIFFERENCE IN MY LIFE AND OPENED SO MANY DOORS. ”

- Client, 2023

From October 2022 to April 2023, the Research and Data Analysis Division of the Department of Social and Health Services conducted 1,157 interviews with randomly selected social and health services clients in the State of Washington. The survey consisted of standardized and open-ended questions about clients’ satisfaction with the programs they interacted with over the past two years.

Social and health services are a partner for people who need food assistance, financial aid, medical care, and other services. The clients who participated in this survey represent one in every four Washingtonians. They are neighbors, friends, and family. Their voices tell us about the successes and challenges of Washington state social and health services systems.

The 2023 Client Survey is the second survey to gather client feedback since the COVID-19 pandemic. Results suggest overall declines in satisfaction since the last major survey in 2021, much of which can be attributed to the extensive and continuing impact of the pandemic. Areas of significant decline indicate challenges with access to staff and ease of receiving services. Despite these challenges, clients remain highly satisfied with how they are treated by staff and the quality of the services they receive.



“Sunflower”/2021 Employee Survey Photo Contest/Tricia Tavary

Successes

While there were no significant increases in positivity (“Yes” or “Strong Yes”) this year, most clients continue to be highly satisfied with the quality and helpfulness of social and health services programs. **More than 9 of 10 clients (92%) said that services help them and their families and more than 8 of 10 (86%) clients said they are satisfied with their program services.**

Over half of the client comments (57%, 611 comments) mentioned the high quality or helpfulness of specific programs or social and health services generally. Clients expressed gratitude for the many ways social and health services help them and their families during challenging times.

Clients also continue to be happy with staff interactions.

More than 9 of 10 clients said staff treat them with courtesy and respect (91%) and listen to what they have to say (91%). Of the 1,071 clients who made comments, 20% noted a positive interaction with staff, highlighting staff compassion, understanding, and helpfulness.

“ WHAT I LIKE BEST IS THERE [ARE] SO MANY BENEFITS AVAILABLE. THE WORKERS ARE KIND AND GRACIOUS AND WANT TO HELP. IT HAS LITERALLY BEEN A LIFE SAVER FOR ME AND MY CHILDREN. ”

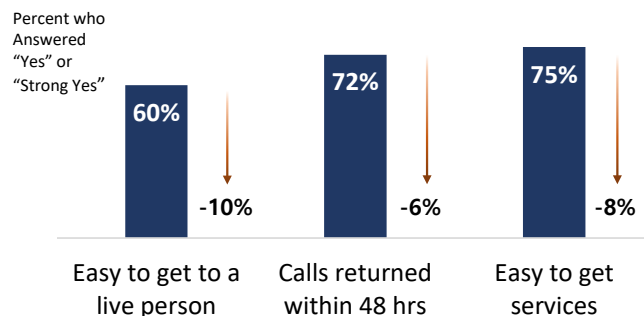
- Client, 2023

Opportunities to improve

Compared to 2021, three of 15 items had statistically significant declines in positive responses. Areas of decline indicate challenges with access to staff and ease of receiving services.

Just 6 of 10 clients said it’s easy to get to a live person when they call, down 10 percentage points from the last survey and a record low.

When asked what social and health services could do to improve services, 57 clients (5% of all who commented) said hiring more staff would help, a 90% increase from 2021.



Clients continue to identify opportunities for process improvement in their comments. Among clients who made comments, 31% described access issues or processes they would like to see improved. As in past years, common requests included shorter wait times on the phone, faster and simpler application processes, and more user-friendly online systems.

“ I’VE BEEN ON HOLD FOR TWO HOURS BEFORE. I UNDERSTAND COVID, BUT IT WOULD HELP IF IT WAS EASIER TO GET AHOLD OF SOMEONE. ”

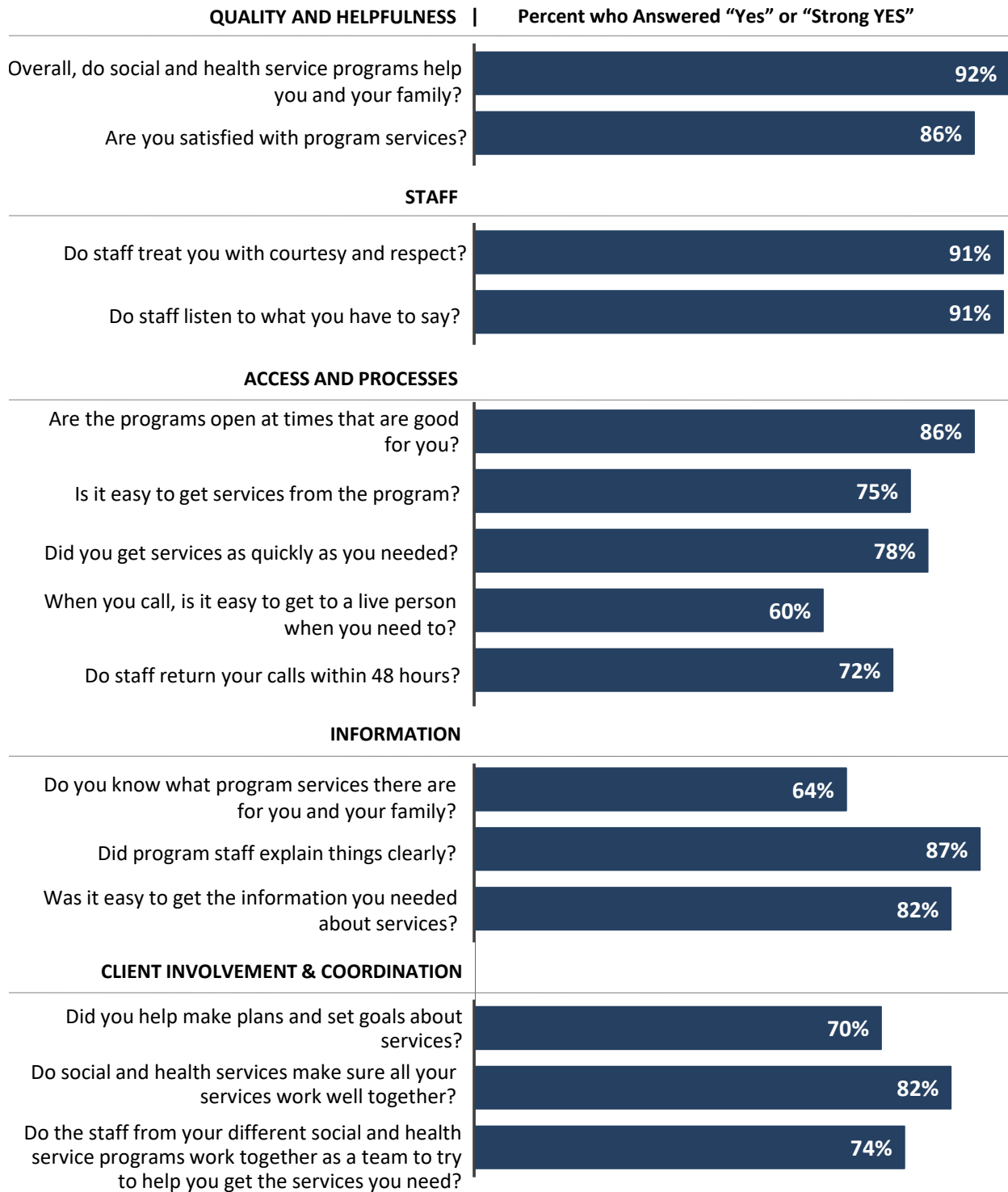
- Client, 2023

A small but important number of clients reported unfair treatment. Just over 1 of 20 clients (6%) said they were treated unfairly due to race, culture, age, gender, sexual orientation, or disabilities. Race and disability were cited most frequently as the reason for unfair treatment. Clients who report that they were treated unfairly were less satisfied on 13 of 15 standard questions about the client experience.

Survey results at a glance

2023 Client Survey Satisfaction Rates: Responses to the Standard Questions

All Social and Health Services Clients (DSHS, HCA, DCYF) • Weighted Data

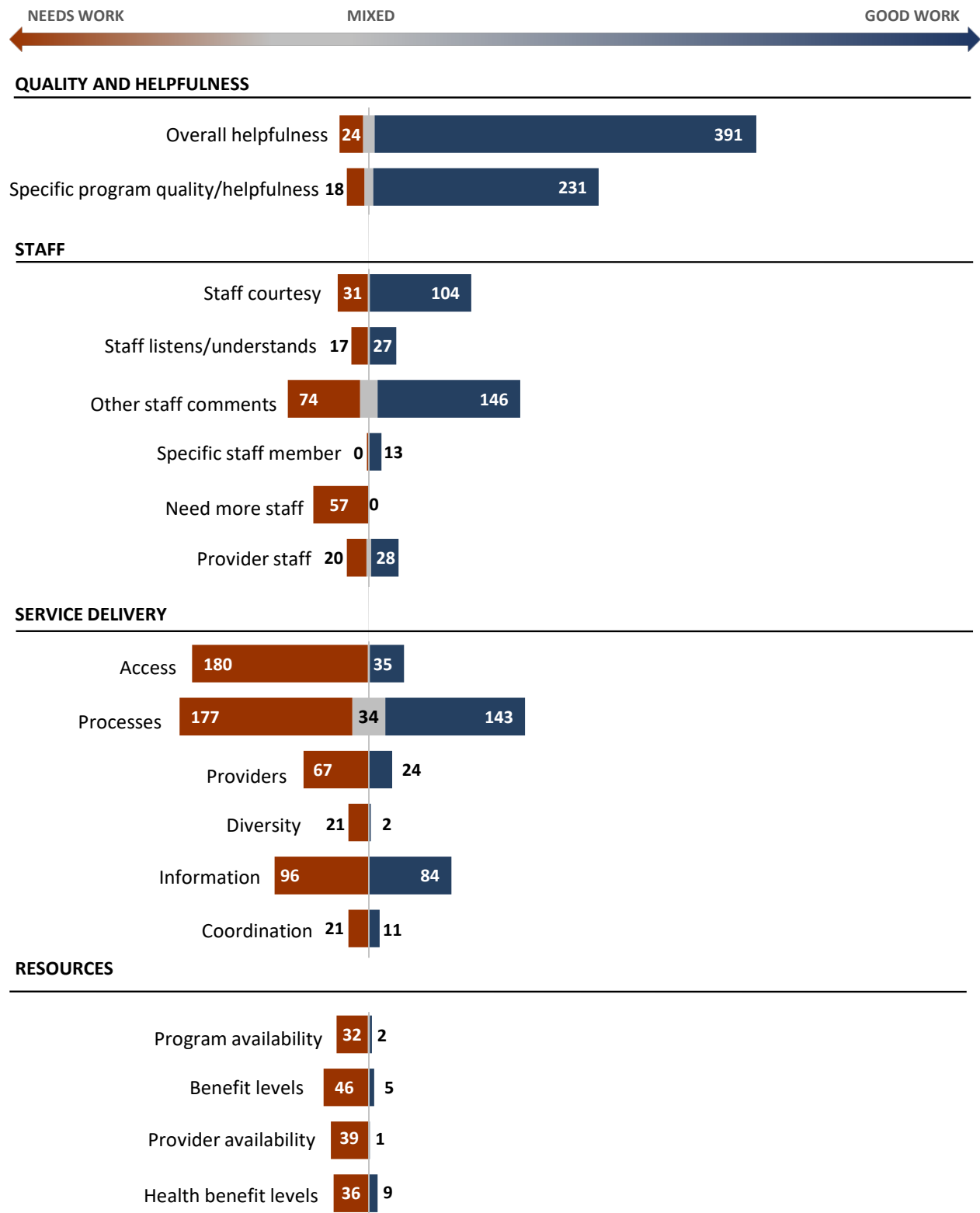


2023 Number of Comments by Topic: Responses to the Open-Ended Questions

“What do you like best about dealing with social and health services?”

“What is one thing social and health services can do to improve services?”

All Social and Health Services Clients (DSHS, HCA, DCYF) • Unweighted Data



About the respondents

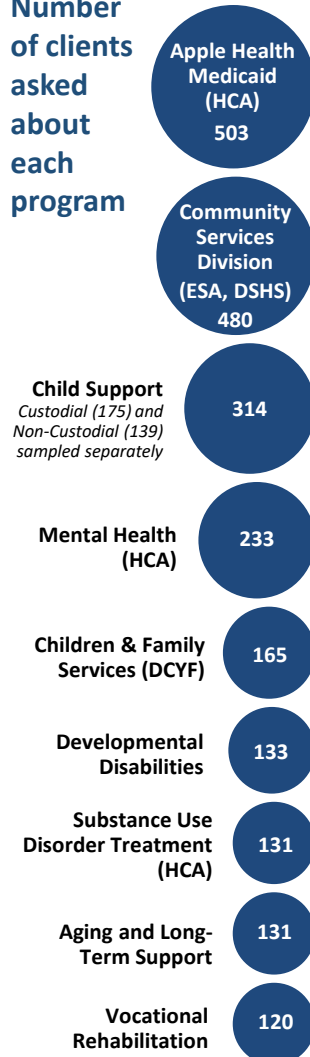
More than 100 clients selected from each of nine major programs were represented in the completed survey. Survey participants from each program were randomly chosen from those clients who received services from that program between May 2021 and April 2022.

Most social and health service clients use more than one program, so each person interviewed was asked about every social or health service used in the past two years.

The figure below shows 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. About 64% of the 1,157 clients in the survey used one or both of the most widely utilized programs: Medicaid/Apple Health and Economic Services.

The person who completed the survey was not always the client. In 397 cases (34%), 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, caregiver, family member, or other representative who deals with social and health service programs was asked to complete the survey.

Number
of clients
asked
about
each
program



Client Characteristics

The average client age was 38.8 years, but ranged from early childhood through late adulthood:

- 16% of the clients in the survey were children (under 18)
- 72% were working-age adults (18 to 64)
- 11% were older adults (65+)

Clients were slightly more likely to be female:

- 51% of the clients were female
- 49% were male
- 1 client identified as non-binary (0.2 percent)

Clients were more likely to live on the west side of the state:

- 24% lived in DSHS Region 1, in Eastern Washington
- 38% lived in DSHS Region 2, in Northwestern Washington
- 34% lived in DSHS Region 3, in Southwestern Washington
- 5% lived out of state at the time of the interview

Clients were asked what racial and ethnic group(s) best describes them.

Race/Ethnicity	Number	Percent
American Indian or Alaska Native	63	5%
Asian	59	5%
Black or African American	112	10%
Hispanic or Latino	186	16%
More than one race/ethnicity	117	10%
Native Hawaiian or Other Pacific Islander	19	2%
Other/Unknown	41	4%
White	805	70%
White, Non-Hispanic	698	60%

Note: Race/ethnicity groups are not mutually exclusive with the exception of non-Hispanic white.

About the survey

- The 2023 survey is the 13th in a series of biennial surveys initiated in 2001.
- Clients were randomly selected from Washington state social and health service programs, and were asked about all social and health services they used.
- 1,157 clients were interviewed between October 2022 and April 2023. 1,050 interviews were completed by telephone; 107 were completed online.
- The completion rate was 70% of sampled clients. Of the clients who could be contacted, 90% completed the survey.
- Most programs covered in the survey were administered by the Department of Social and Health Services. Medical assistance, community-based mental health services and substance use disorder treatment services were provided by the Health Care Authority. Family services were provided by the Department of Children, Youth, and Families.

About this report

Question pages describe the results of standard questions, each of which consists of a question with the response choices “Strong YES,” “Yes,” “Neutral,” “No,” and “Strong NO.”

- For each question, there is a chart showing the percent who answered “Strong YES” or “Yes” in each year of the survey since 2007, when the current questionnaire was adopted.
- All percentages are based on data weighted according to each client’s service profile (the specific combination of services that the client used).
- Results are rounded to the nearest whole number. Due to the effects of rounding, some percentages reported as whole numbers may not add to 100%.
- Differences between years (the current year compared to the previous survey and compared to 2007) are listed if statistically significant at the .05 level.
- The results combine responses to each question for all of the services received by a given client. For example, if a client received Aging and Long Term Support services as well as economic services from the Community Services Division, the heading “Are you satisfied with program services” includes the average of that client’s responses to the questions “Are you satisfied with Aging and Long-Term Support?” and “Are you satisfied with DSHS Community Services?”

Comment pages describe the results of thematic content analysis of responses to the open-ended questions “*What do you like most about dealing with social and health services?*” and “*What is one thing social and health services can do to improve services?*”

The **Appendices** provide detailed information on methodology, including changes to the survey, the survey questions, sampling and weighting procedures, response rates and a glossary describing the themes used in comment analysis.

Common acronyms that appear in this report

ALTSA – Aging and Long-Term Support Administration	DSHS – Department of Social and Health Services
CPS – Child Protective Services	DVR – Division of Vocational Rehabilitation
CSO – Community Services Office	EBT Card – Electronic Benefits Transfer Card for food benefits
DCS – Division of Child Support	HCA – Health Care Authority
DCYF – Department of Children, Youth, and Families	SUD – Substance Use Disorder
DDA – Developmental Disabilities Administration	TANF – Temporary Assistance for Needy Families

CHAPTER 1

Quality and Helpfulness

Clients remain highly satisfied with the helpfulness of social and health services.

This chapter addresses the core reasons that social and health services exist: Do they help Washingtonians in need, and are clients satisfied with services?

Ratings of program helpfulness are among the highest in the entire survey, demonstrating the positive impact of social and health services on clients' lives, especially during challenging times. Survey scores show most clients are also highly satisfied with their program services, though ratings of program satisfaction are lower than ratings of overall helpfulness.

- *Overall, do social and health services help you and your family?* (92% positive)
- *Are you satisfied with program services?* (86% positive)

Clients had a lot to say about the helpfulness of social and health services generally, and about certain programs specifically. More than two-thirds of client comments (65%) discussed quality and helpfulness, by far the most frequently mentioned topic. These comments were overwhelmingly positive. Of the 698 comments about general or specific program helpfulness, 611 were positive, 71 were suggestions for improvement, and eight were mixed. Sentiment was neutral or unknown for another eight comments.

Many clients said social and health services provided much-needed support during difficult times in their lives. Clients who said they would rather not use services were still grateful they were available. Though smaller in number, some clients expressed general dissatisfaction or said specific programs were unhelpful.



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QUESTION | **Overall, do social and health service programs help you and your family?**

More than 9 of 10 survey respondents (92%) reported that social and health services helped them and their families. Less than 1 of 20 (4%) disagreed.

RESPONSE



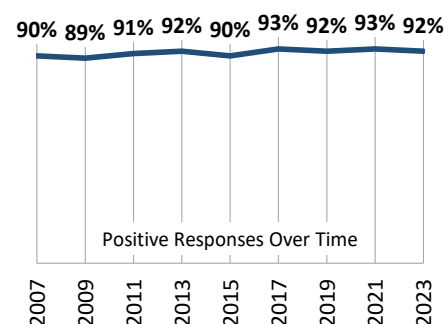
DETAIL

At 92% positive, this question is the most highly rated topic in the survey.

Responses have remained positive over time, with no statistically significant differences compared to 2021 or 2007.

Despite widespread issues with the *delivery* of services during the later phases of the pandemic, clients nonetheless recognize the helpfulness of the services themselves.

TREND



Our clients speak . . .

“**THEY ARE HELPFUL WHEN YOU NEED IT. RELIABLE.**”

Clients are grateful for the help.

“I’m really so grateful for the help, really you guys are so awesome and I know there are so many people that depend on these services so 5 out of 5 stars for all of you.”

“The services have been a lifesaver.”

“They have been very beneficial and I am glad that they have the agency out there to help families. Not only have they helped me but they help others that I am aware of.”

“The programs have helped me a lot and I’m grateful for every single one I receive.”

Many clients said services provide help during challenging times.

“They provide services to my family when we find ourselves in situations outside of our control that we become needy.”

“They provide the help needed, depending on our situation. I was homeless and I’ve been happy with the services.”

“They help me and my family when we are going through hard times financially.”

“They are there for me when I need help.”

“They are there for my food assistance and they can help people in hardship.”

“I like that it is there as a safety net for situations such as this.”

“Very helpful if you’re in need. I’m going blind so I need help.”

“The benefits have helped a lot, especially during the pandemic.”

Some said they don’t like working with social and health services, but the help they receive is essential.

“I really don’t like dealing with them, but they help in times of trouble.”

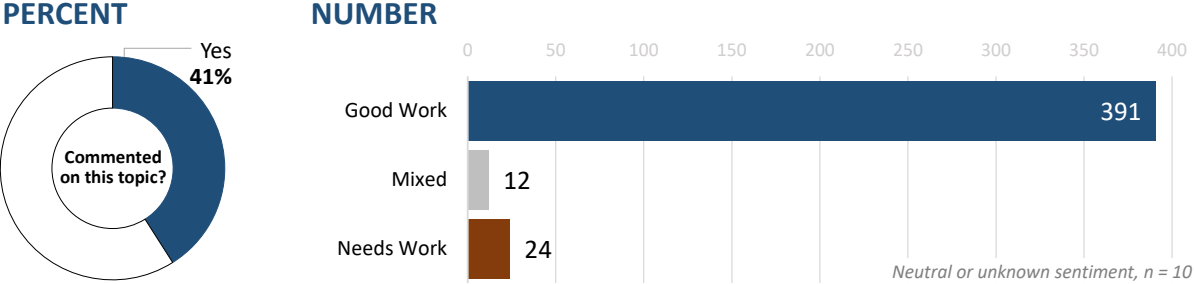
“I don’t really like dealing with them at all. Since I have my grandson I need that extra support.”

A few clients said the services are not helpful.

“Do better!”

“At the beginning it was helpful, but has declined as the kids got older.”

437 of the 1,071 clients who made comments (41%) mentioned the overall quality of services.



KEY FINDINGS

Client comments about the overall quality and helpfulness of services were overwhelmingly positive.

- Many clients simply said that they were grateful for the help, that things were going well, or that their needs were being met. Many noted that social and health services offered help during challenging times.
- Clients appreciate both the practical solutions and peace of mind that services offer – for themselves and their families.
- The negative comments were mostly general, with some clients simply saying they didn’t like anything about dealing with social and health services. A few clients said services only helped sometimes or didn’t reach all those who are in need.

Our clients speak . . .

“ I’VE BEEN A SINGLE MOTHER ALL MY LIFE AND I COULDN’T SUPPORT MY FAMILY WITHOUT YOUR HELP. ”

Clients appreciate knowing assistance is available.

“Knowing that there is someone out there that cares and provides you what is needed.”

“[I like] that they are aware of the needs of the people they serve.”

“Thankful that they’re there when we need them.”

“[I like] the stability of knowing there is help available if I need it.”

“I like that there are people willing to help you. At a young age I moved out real fast and had to grow up early. People are always willing to help out. I appreciate that they are there to help me.”

“As a single parent with two kids, having services has brought a sense of security that I can care for my kids.”

“[I like] knowing that there is an option to improve my life.”

Some said the help they receive gives them and their families a better quality of life.

“I like maintaining quality of life, like not being on the street.”

“They got the services I needed and helped me get on my feet. I owe them a lot of gratitude. [They] got me to where I needed to be.”

“It improves our quality of life.”

“We feel very fortunate the programs exist and are helpful. I am now the girls’ caregiver as well as their stepmom. It’s been wonderful and helps us keep them at home.”

“They help me to help him thrive.”

Some clients voiced dissatisfaction with the quality and helpfulness of services.

“They don’t reach everyone that needs it.”

“Help senior citizens better.”

¹ Starting in 2023, this page excludes “nothing” comments, which are counted as positive in response to “What is one thing social and health services can do to improve services?” (n=115) and negative in response to “What do you like most about dealing with social and health services?” (n=40).

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

More than 8 of 10 survey respondents (86%) reported they are satisfied with program services. Less than 1 of 10 (7%) disagreed.

RESPONSE

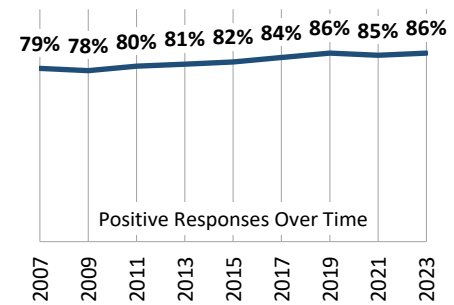


DETAIL

At 86% positive, responses show a non-significant increase of one percentage point compared to 2021, matching the highpoint set in 2019. Longer-term trends show positive responses increased 7 percentage points compared to 2007, a statistically significant difference ($p < .05$).

As in past surveys, ratings of program satisfaction are lower than ratings of overall helpfulness of services. Clients are grateful for the help they receive, but also see areas where service delivery could improve.

TREND



Our clients speak . . .

“
ALL THE SERVICES I RECEIVE ARE 100% WONDERFUL. I WOULDN'T BE ALIVE TODAY IF I HADN'T RECEIVED MEDICAL, FOOD ASSISTANCE, AND THE TWO TIMES I WENT TO TREATMENT.
 ”

Most clients are satisfied with the services they receive.

- “We’re happy with the services that are offered.”
- “They’re very supportive and the benefits are available to me.”
- “Washington is the best for social and health services.”
- “[I like] the benefits that are available for my children.”
- “They help me meet my needs.”
- “[I like] the services. Everything!”
- “We appreciate the services.”
- “We have loved our experience so far.”
- “I think the service she is getting is good.”
- “I’ve always got good service when I needed it.”
- “They provide all the services we need.”
- “They have helped me with what he needs.”
- “They are available for my mother so she can get the help that she needs.”

Some mentioned the positive impact on families.

- “DSHS is good in supporting families and I will say keep it up.”
- “They have been convenient and helpful for our family.”
- “It makes me proud to be a United States citizen because these programs are available. I’ve been through hell, and they have taken care of me and my family.”
- “It is a good resource to help families.”
- “Help out with the family as to emotional and financial support.”
- “[I like that] they offer services for my son and our family.”
- “They help people provide for their families and help families stay together.”

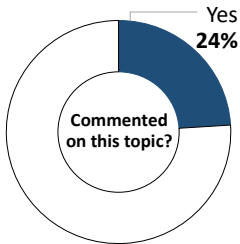
A few expressed dissatisfaction with their services.

- “Let’s just say I wouldn’t choose to work with them.”
- “I have had frustrations with services the last couple years.”

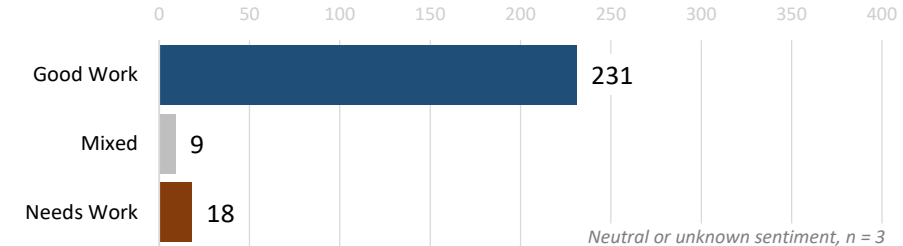
Quality and helpfulness of specific programs, offices, and locations

261 of the 1,071 clients commenting (24%) mentioned the quality and helpfulness of specific programs or locations.

PERCENT



NUMBER



KEY FINDINGS

Most comments about the quality of specific programs were positive or expressed satisfaction.

- Over 100 clients were pleased with medical services and 83 said they appreciate food assistance.
- Though smaller in number, clients also specifically praised vocational rehabilitation services (17), developmental disabilities services (14), mental health services (13), substance use disorder treatment services (11), aging and long-term support services (6), and children and family services (4).
- Some clients suggested improvements for specific programs. The most frequently mentioned program was child support services with 9 comments. A few clients mentioned improvements for medical coverage, food assistance, children and family services, mental health services, vocational rehabilitation services, and developmental disabilities services.

Our clients speak . . .

“
WHEN I WAS ON APPLE HEALTH I NEVER HAD TO DECIDE WHETHER TO TAKE MY FAMILY MEMBERS FOR MEDICAL [HELP] OR FEED THEM.
 ”

Many clients mentioned the quality and helpfulness of specific programs.

- “I really appreciate the medical insurance. I wouldn’t have anything without it.”
- “We get food benefits so we can eat.”
- “Helped me stay clean and sober and get by financially as I got back on my feet.”
- “They helped me find a job that I could do.”
- “When my mother had her stroke there was some help, and they helped with speech therapy and food stamps.”
- “The childcare assistance has been a huge blessing and helpful to my kids for early development.”
- “I was able to adopt three children through the system.”
- “The child support office was able to track down and get back support.”
- “They are there to help me go to school and find a job.”
- “Glad I had the opportunity to get the mental health help I needed.”
- “It makes it easier to get food.”

“I think that the Developmental Disabilities Administration in WA state does an exceptional job supporting families.”

“They are there to provide mental health for my son.”

“They helped me with the process of getting my mother, who was diagnosed with dementia, into assisted living.”

“I have the security of knowing it’s ok to seek treatment when I’m sick and I won’t have to build up a big bill for it.”

“The programs like SNAP and Apple Health have helped me move forward.”

“[I like] that it helps adults with disabilities to succeed with a career they can do.”

Though less common, some clients said specific programs could be improved.

“DVR should try to get more variety in job training and placements.”

“Child support is not helpful at all. Stopped receiving support over a year ago. Caseworker retired and no one has been assigned.”

Staff

Social and health services staff make a difference in the client experience.

For Washingtonians in need of social and health services, their first point of contact is likely with program staff. A positive experience is important for supporting clients during challenging times, while a negative one can create barriers to seeking services in the future.

Survey scores about program staff are among the highest in the entire survey, reflecting staff commitment to person-centered care. More than 9 of 10 clients agreed when asked:

- *Do staff treat you with courtesy and respect?* (91% positive)
- *Do staff listen to what you have to say?* (91% positive)

Clients had a lot to say about staff. Almost 4 of 10 client comments (38%) talked about social and health services staff employed by state agencies, as well as contracted providers. Of the 403 total comments about staff, 214 were positive, 35 were mixed, and 150 were suggestions for improvement. Sentiment was neutral or unknown for four comments.

Comments on staff often mentioned characteristics of their interactions, including staff courtesy and respect, listening, communication, and knowledge. Some clients mentioned that systemic challenges, including high workloads and frequent turnover, have negative consequences for interactions with staff. With some important exceptions, clients expressed appreciation for staff treating them as individuals, listening to their needs, and providing much-needed services.

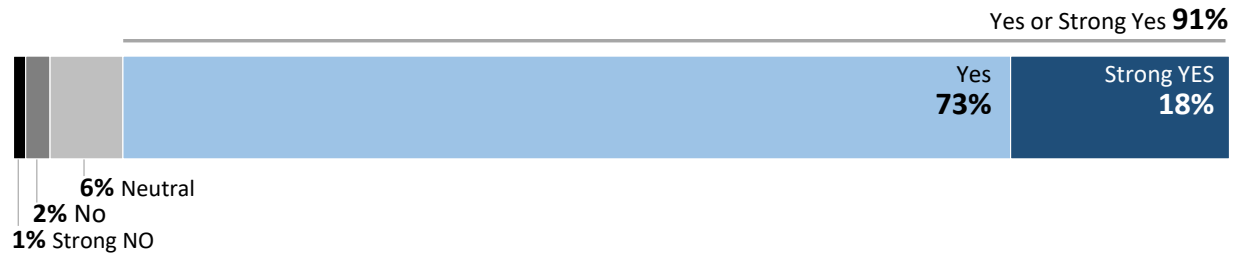


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QUESTION | **Do staff treat you with courtesy and respect?**

More than 9 of 10 survey respondents (91%) reported that social and health services staff treat them with courtesy and respect. Less than 1 of 30 (3%) disagreed.

RESPONSE

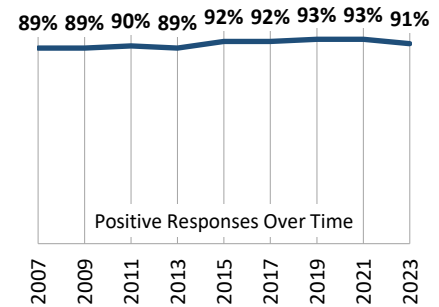


DETAIL

Client satisfaction with staff courtesy and respect has remained consistently high since 2007. At 91% positive, this question is tied with staff listening for the second-highest rated question in this year’s survey. The 2 percentage point decrease from 2021 is not statistically significant.

Satisfaction within the individual programs has also remained consistently high across survey years. DDA clients had the greatest positive response for this question at 100%. Even in mandatory programs such as DCS, the majority of clients said staff treated them with courtesy and respect (84% of custodial and 79% of non-custodial parents). None of the changes observed within the programs from 2021 are statistically significant.

TREND



Our clients speak . . .

“
THEY ARE REALLY HELPFUL AND RESPECTFUL.
 ”

Most clients praised staff for treating them with courtesy and respect.

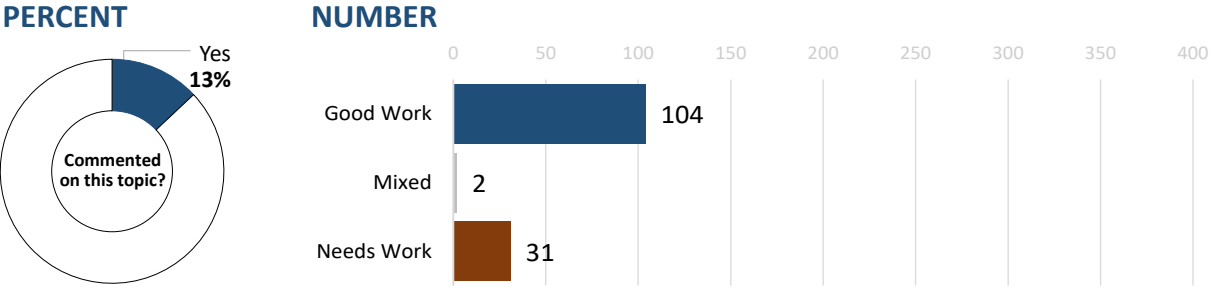
- “Each representative has been helpful and nice.”
- “They are quick and courteous about getting back to their clients.”
- “Most of the staff are very polite and patient when answering our family questions.”
- “All the case managers we’ve had have been respectful, listened to us, and have been compassionate.”
- “The people are always friendly.”
- “I am a transgender male and can honestly say everyone treats me with respect. It’s been wonderful.”
- “They are very polite and patient.”

- “They have treated me well from day one.”
- “I have always been treated well by the folks at DSHS.”
- “They still appear to respect me.”
- “Staff has always been very helpful and courteous when I speak to them in person.”
- “They have been polite to me. They have been respectful to me.”
- “I’d say the staff themselves were very nice and courteous and compassionate.”

A few clients said respect is lacking.

- “Be more courteous and kind with less smarty-pants, impatient communications.”
- “There are some staff that are rude.”
- “We are treated like an old pair of shoes.”

137 of the 1,071 clients who made comments (13%) mentioned staff courtesy.



KEY FINDINGS

More than 8 of 10 client comments about staff courtesy and respect were positive (81%).

- Most clients praised staff for their kindness and compassion. They were grateful for staff who cared about them and provided much needed support.
- Staff friendliness and acceptance were also frequently mentioned. Some talked about how staff’s understanding improved their experience.
- However, some clients talked about negative experiences with staff. Those with suggestions for improvement said that staff often acted as if they were better than the clients. A few felt that their concerns were dismissed by staff.

Our clients speak . . .

“
I LOVE THAT THEY ARE THERE FOR US. THEY ARE KIND, RESPECTFUL, AND HELPFUL WITH EVERYTHING WE NEED AS A FAMILY.
 ”

Many clients are grateful for staff who care about them.

- “I like how the counselor cares.”
- “They seemed to care a lot.”
- “Current caseworker is great! He seems genuine and wants to help.”
- “They are caring and compassionate.”
- “It seems like they care, actually.”
- “The person I was dealing with did care, and try.”
- “They care to the best of their ability to do so.”
- “Our caseworker is really good. She’s taken the time to know us and my family.”

They also appreciate friendliness.

- “They were actually really friendly, and I was really nervous when I got there.”
- “The workers have a smile and are very helpful.”
- “The people were so nice.”
- “People are friendly and willing to help.”
- “Everyone is so nice and helpful.”

Lack of judgement for their situation was important to clients.

- “I don’t feel shamed or judged. When I need help, it’s there once I swallow my pride.”
- “I like that they are open-minded to help you improve your life.”
- “I feel really bad that I need the services, [but] the staff doesn’t make me feel that way.”
- “I feel like it is really a non-judgemental environment. You can call everyone and they will help.”
- “The people are really nice and understanding.”

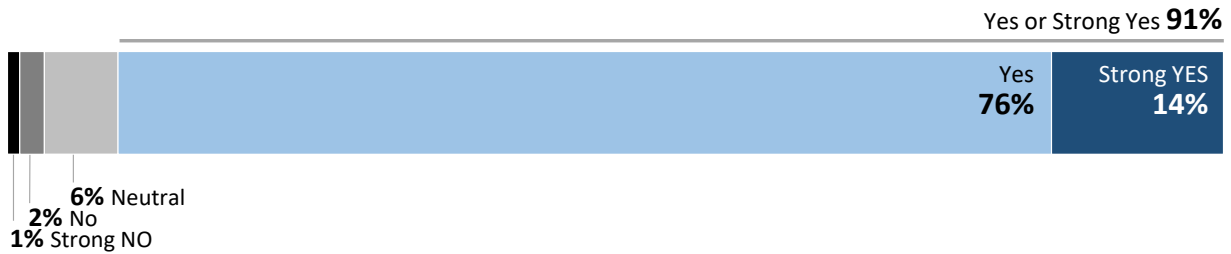
But some clients did feel judged.

- “Food assistance staff look down upon you, pity you.”
- “I feel like the workers treat you like you’re below them.”
- “Young people get treated like they’re just being dramatic.”
- “Improve their attitude. They think they’re better than everyone else.”

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

More than 9 of 10 survey respondents (91%) reported that social and health services staff listen to what they have to say. About 1 of 30 (3%) disagreed.

RESPONSE

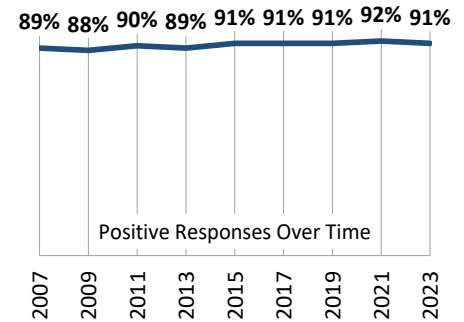


DETAIL

Clients continue to indicate high satisfaction with staff listening to them. At 91% positive, this question is tied with staff courtesy and respect for the second-highest rated question in the survey. The one percentage point decrease from 2021 is not statistically significant.

Most programs closely matched the overall average positive response on staff listening. There is little variation across years and programs for this question, showing that staff listening is one of the most consistent aspects of client experience when interacting with various programs.

TREND



Our clients speak . . .

“ [I LIKE] OUR SOCIAL WORKER AND THE SUPPORT SHE GIVES ME. SHE’S ALWAYS AN ‘EAR.’ ”

Most clients said staff listened to them.

- “They are great listeners.”
- “Easy to talk to and they listen.”
- “They are always willing to listen to me.”
- “They pay attention to you when you ask a question.”
- “[I like] the staff. Just the fact they listen and are open to ideas. It’s back and forth.”
- “Staff were very attentive and helpful.”

Active listening can help clients’ needs be more fully met.

“The gal helping me now is trying to get the landlord to fix my apartment. She listens and gives me good eye contact.”

“They listen to what I have to say and provide what I need. They treat me well.”

“They listen and help you get to your goals.”

“They are very helpful, and really had the time to talk to me as to what I needed.”

“They make it easy for [redacted] to get the things he needs and they listen to him with respect.”

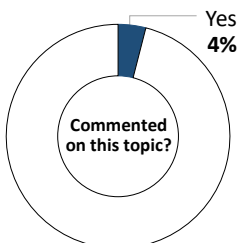
Some clients do not feel heard.

“Take the time to actually listen to what people have to say and not make assumptions.”

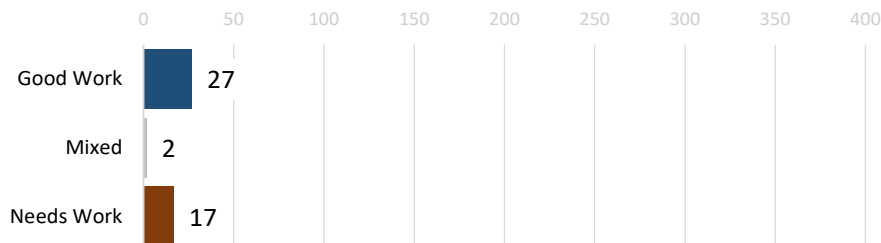
“I would just say maybe trying to listen and understand where a person is coming from.”

46 of the 1,071 clients who made comments (4%) mentioned staff listening and understanding.

PERCENT



NUMBER



KEY FINDINGS

Fewer clients commented on staff listening than in the prior survey, but the comments remain largely positive. Almost 6 of 10 clients commenting about staff listening and understanding said something positive (59%).

- Many clients praised staff for listening to their concerns, working with them to address their needs, and meeting clients where they are in life. Staff understanding was also important in clients’ interactions.
- However, some clients felt that staff did not listen to them or understand their needs. Several clients wanted to be included in decisions and work with staff as a team. Some felt that staff did not want to listen to their perspectives and needs in accessing services.

Our clients speak . . .

“
THEY UNDERSTAND
AND HEAR WHAT MY
PROBLEMS ARE.
”

Clients are grateful for staff who collaborate with them.

“They do try to help with her needs, and if she has an issue they’ll talk it through with her.”

“They really got to know [redacted] and match her well to her job.”

Clients also appreciate staff who understand their unique circumstances.

“They are super great, kind, responsive, listen to me, and individualize what he needs really well.”

“Health Care Authority understands my situation. They go above and beyond to help me maintain my mental health.”

“I like how every time I have talked to someone, they have been the most courteous, understanding, and empathetic. They do not treat you like a bad person.”

“[I like] that the staff is understanding and they actually help.”

“I think the case manager was empathetic and understood our situation and tried to assist us.”

Some clients felt staff were not open to their input.

“We should be working together as a team.”

“Allow me to be involved in decisions instead of just handing them to me.”

“The social workers need to listen more and hear about our different situation. I’m a single parent and my son is special needs. He’s autistic and needs a lot of help. So when I’m asking for help it’s because I really need it.”

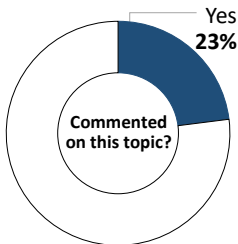
“Be more honest and open to feedback.”

“They could give youth more opportunities to share what they want. We should have more say.”

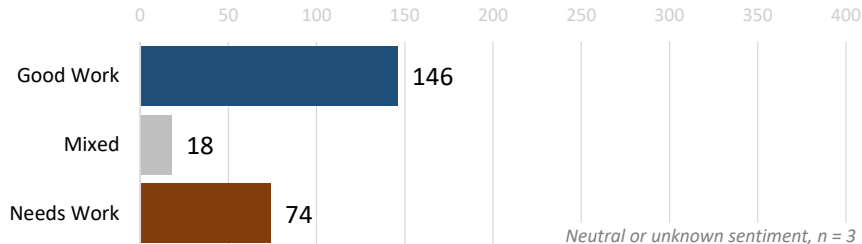
“I think they should focus more on the case and what our needs are, not based on their own opinion.”

241 of the 1,071 clients who made comments (23%) mentioned something else about staff.

PERCENT



NUMBER



KEY FINDINGS

Any comments about staff that did not refer to courtesy, respect, listening, or understanding were categorized as “other” staff comments. These comments were mostly positive (61%) but revealed some areas for improvement.

- Most clients praised staff for being helpful, responsive, and ensuring questions were answered. They particularly appreciated staff who went “above and beyond” to help them, such as checking in and providing cell phone numbers for easy contact.
- Several clients noted that communication and responsiveness were lacking. They suggested staff training as an avenue to address communication skills, poor client treatment, and insufficient knowledge.

Our clients speak . . .

“ I AM THRILLED ABOUT THE QUALITY OF WORKERS SO FAR. QUALITY, INTEGRITY, COMPETENCE, SENSITIVITY, COMPASSION. EVERY ONE OF THOSE THINGS! ”

Clients appreciate staff who are helpful, communicative, and knowledgeable.

- “Everyone is knowledgeable and helpful.”
- “The person we dealt with was available to us and always ready to answer questions.”
- “They stay in touch and keep me updated by correspondence.”
- “The people I have worked with have been good communicators and polite.”
- “They truly pay attention to detail and make me feel comfortable to ask as many questions as I need to, to fully understand.”
- “When I have called and/or emailed regarding issues, staff have always been knowledgeable and helpful.”

Some clients praised staff who put in extra effort to support them.

- “When I was admitted to the hospital I wasn’t completely signed up, but the worker came to the hospital to help me finish up and the bill was completely paid.”
- “I like the way they go out of their way and check up on him.”

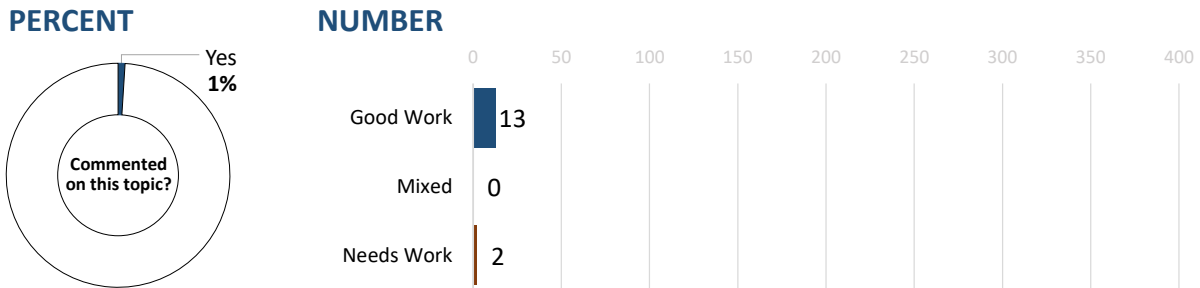
“I feel that the advocates are good and very pleasant. I was given their personal cell phone numbers, if I needed any questions answered.”

“I think the individuals that we deal with are in the field for the right reasons. I think they are committed to doing a good job.”

Others noted areas where staff needed to improve.

- “I would say more staff education around compassion and sensitivity training, because it is really hard walking in there and being vulnerable and transparent to people you have no relationship with.”
- “Improved communication and taking accountability for issues.”
- “No follow-up from phone calls, court orders, and emails.”
- “I would say contact the family about recent situations. Let us know if there is anything we need to add. Checking up on family to see how things are going.”
- “Sometimes an employee has an attitude, so possibly get more training for the staff to deal with the public.”

15 of the 1,071 clients who made comments (1%) mentioned specific staff members.



KEY FINDINGS

Some clients mentioned specific employees who were particularly helpful, exceptional at their jobs, or went out of their way to help. Only two respondents shared experiences with specific staff that they felt needed improvement.

- Clients shared ways in which staff assisted them, such as advocacy on their behalf and staff’s commitment to ensuring the client was taken care of.
- Clients were grateful for staff’s responsiveness and providing excellent service.

Our clients speak . . .

“
**CLAIMS MANAGER,
 ANN REYNOLDS, IS
 SUPER!**
 ”

Clients appreciated the good work of specific staff members.

“I was very happy with the service I received from Chehalis CSA and Nancy Peterson.”

“Ms. Watson at Olympia DCS is very good and very responsive.”

“I have worked with D. Fields who has helped me with my child support documents. She has worked alongside my attorney. I have seen her in court and representing my case working with my attorney. She knows what she is doing and is very helpful. She has been a great advocate for myself and my littles.”

“His case manager, Annie, is outstanding.”

“I would like to give kudos to [redacted]’s DV Case Manager, Helen. She is doing a great job. I honestly feel she has done her best to get him help.”

“Elizabeth Robinson, our case manager, was great!”

“I was assigned Nathan Mabie, through LEAD [Law Enforcement Assisted Diversion] Program through Evergreen Recovery two years ago. He works out of South Everett office. He is the greatest. We both had a lot in common, working out and sports. Assigned randomly and it has worked out great.”

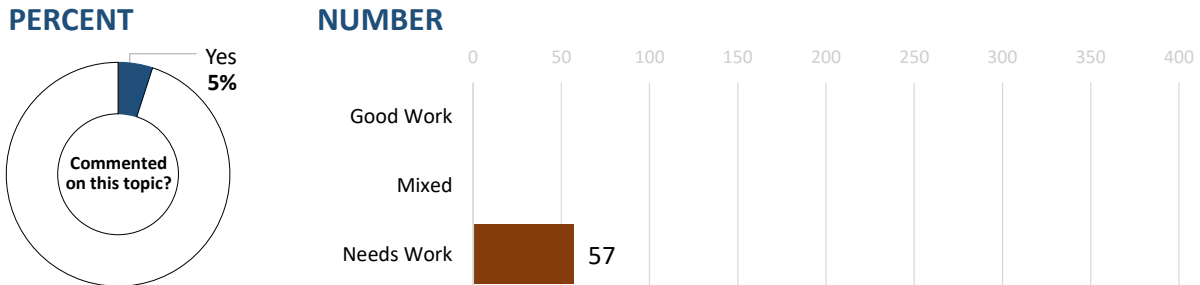
“We have a stellar caseworker. Jiyu Ervin is highly recommended.”

“Tiffany and Jordan (we worked with them most) were awesome. Give them both raises and coffee :)”

“Lady in charge, Beatrice, is on top of everything.”

“[We] finally got a good caseworker in 2021, that knows the ins and outs and is willing to truly take the time to listen. I have not felt that she has rushed me and she takes the time. Her name is Karen Miller. She has helped me in learning the website. She finally got me the help for my husband/ex-husband.”

57 of the 1,071 clients who made comments (5%) mentioned the need for more social and health services staff.



KEY FINDINGS

Comments included in this category were negative, by definition. Almost twice as many clients talked about needing more staff compared to the 2021 survey. Many noted the impact that low staffing had on their experience and ability to obtain assistance.

- Clients called out specific areas where more staff are needed, such as call centers and mental health services.
- Some clients felt that service would improve if staff had more manageable caseloads. Others indicated that staff retention would improve their experiences.
- A small number of clients attributed staffing challenges to the COVID-19 pandemic.

Our clients speak . . .

“
THE FEELING I GOT FROM EVERYBODY IS THAT THEY ARE OVERWORKED, OVERLOADED WITH CASES AND STRESSED OUT.
 ”

Clients want more staff available to meet their needs.

- “Hire more staff to help the citizens of Washington. We need more mental health service workers, more professionals that are able to work with special needs and help the people of Washington.”
- “I guess we could add more help. More people that could work there. The services are good, but things can be better.”
- “Hire more people to help the people that come into DSHS offices.”
- “Have more people available.”
- “More people on the phones when we call.”
- “Try to get more people answering phones. I’ve had to wait two hours before getting a live person.”
- “Have more people available to help with food stamps.”
- “Staffing is one of the reasons we are signing out of DVR as there is no staff for him.”

Clients feel lower caseloads and better staff retention would improve service.

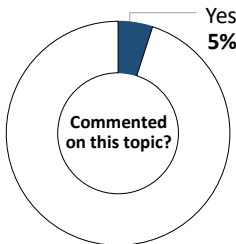
- “Due to such high caseloads for the workers, it can be hard to get help if the case is going well.”
- “Turnover rate in staff is horrible! I end up telling my story over and over again.”
- “Get more people to help those who need service, and pay them better so they want to stay.”
- “Maybe they could hire more staff so the caseloads would be smaller.”
- “The job coaches turn over too quickly.”

A few clients noted the impact the COVID pandemic had on staffing.

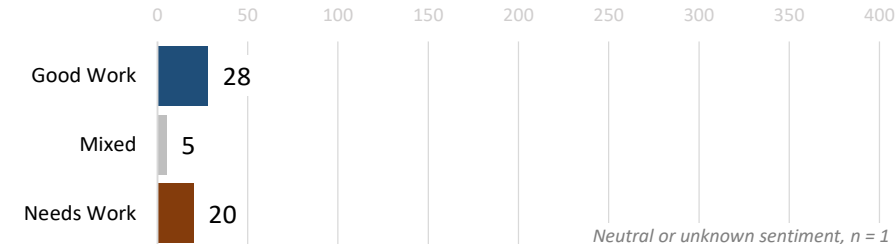
- “Shorter wait times on phone would be optimal, but understandable that [there is] low staffing with the pandemic.”
- “Not much they can do with everyone overworked and sick because of COVID and flu.”

54 of the 1,071 clients who made comments (5%) mentioned provider staff.

PERCENT



NUMBER



KEY FINDINGS

In addition to comments about social and health services staff, some clients commented on the quality of staff or providers paid through social and health service programs. More than half (52%) of the comments were positive.

- Many clients spoke about positive interactions with health care providers and staff, mentioning the care they received and how they were treated.
- Some clients expressed frustration that providers were not familiar with the social services programs, leading to confusion and different treatment.
- Others felt that staff, especially mental health counselors or therapists, needed more experience and training. A few noted different needs based on their specific conditions.

Our clients speak . . .

“
THEY ARE EAGER TO HELP AND ARE GENUINELY INTERESTED IN MY LIFE, AND WANT TO SEE ME RECOVER.
 ”

Clients are grateful for the different ways providers serve their needs.

- “I am blown away on how my therapist and primary care physician give me great one-on-one care. The nursing assistant and co-facilitator with my therapist is terrific.”
- “I’ve been really pleased with my health plan and my doctors.”
- “WorkSource staff is awesome.”
- “My counselors treated me like the same person after I told them about my gender identification. They didn’t treat me any differently than before, I appreciate that. I was surprised how much effort my counselors put into helping me with my drug problem. They kept calling and visiting me even after I dropped out. They really cared about me.”
- “I like the caregiver I have.”
- “I guess what I like best, the personalness from my counselor. Direct approach. Did more to keep me coming back when I was falling in and out.”

Others saw room for improvement.

- “Possibly educate the medical providers on how folks are eligible for medical, because it feels like we’re being judged and treated differently.”
- “Have more experienced therapists. They all seem so new.”
- “[I want] more doctors that will treat you with respect.”
- “The caregivers could be trained better. Require caregivers to be vaccinated for COVID! Our current caregiver is not vaccinated!”
- “You need to teach people to treat others nicely. I had a brain tumor and was told by them it was not a disability and I just wished I was treated a little better by staff.”
- “None of the mental health providers know how to treat teens with developmental disabilities. The same goes for the dentists; none of them have any experience.”

Access and Processes

Clients are generally satisfied with access to services, but comments indicate continued challenges with reaching staff.

The processes for applying for and using services – and asking for help along the way – must be easy to navigate to effectively support clients.

Results for questions regarding access and process are mixed. Results for all questions on a downward trend, three of which were statistically significant. Most clients agreed that programs were open at convenient times and that they could get services quickly, but contacting staff continues to be a challenge for many clients.

- *Are programs open at times that are good for you?* (86% positive)
- *Is it easy to get services from the program?* (75% positive, down from 83% in 2021)
- *Did you get services as quickly as you needed?* (78% positive)
- *When you call, is it easy to get to a live person when you need to?* (60% positive, down from 70% in 2021)
- *Do staff return your calls within 48 hours?* (72% positive, down from 78% in 2021)

Clients had a lot to say about this topic. Over half of the comments (53%) mentioned access or processes. Of these 563 comments, 328 were suggestions for improvement and 147 were positive. Many positive comments addressed the ease of getting services and processes that require minimal effort for the client. However, many clients continued to express frustration with long wait times over the phone – an existing challenge that may have been worsened by the COVID-19 pandemic.

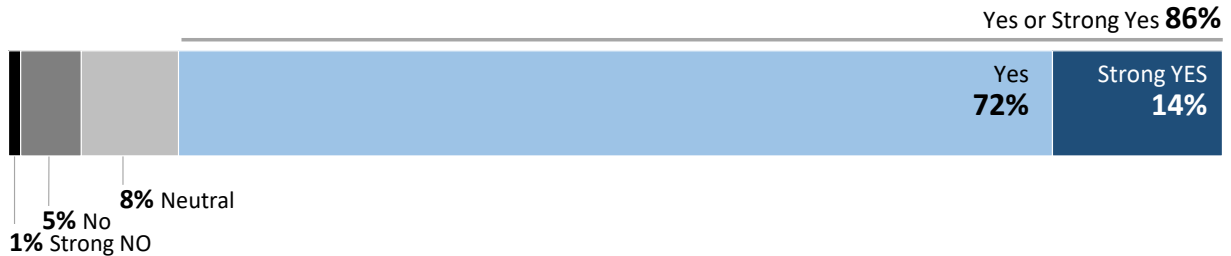


Gettyimages.com/Juan_Algar

QUESTION | Are programs open at times that are good for you?

Nearly 9 of 10 survey respondents (86%) reported that offices are open at times that are convenient for them. More than 1 of 20 (6%) disagreed.

RESPONSE

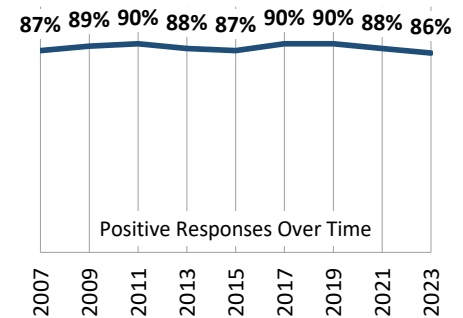


DETAIL

At 86% positive, satisfaction is at its lowest rate on record for this question, but the change from 2021 is not statistically significant. The decreases since 2019 may be due to program modifications that have been put in place to respond to the COVID-19 pandemic and ongoing challenges.

The majority of clients were satisfied with program hours on the structured question. However, in the comments, clients were more likely to point out challenges with access than to express satisfaction. Many clients requested hours outside of the typical 9-to-5. Some noted the continued need for physical offices, even as services have shifted online.

TREND



Our clients speak . . .

Some clients said programs were accessible.

- “Having a local office is helpful.”
- “There is a good effort to connect with us from a distance.”
- “They’re usually open when we need them.”

“**OFFICES SHOULD BE OPEN LATER.**”

Many want more flexible hours to accommodate different schedules.

- “Hours outside of normal business hours – as a working parent it was sometimes challenging to find a time that worked for me and I didn’t need to take time off.”
- “More flexible hours for working parents and school age students.”
- “Have office hours on weekends or after 5PM.”
- “Extend phone hours beyond normal business hours.”

“They could keep their offices open longer. I get off work at 5:00.”

“Open one hour longer.”

“I don’t like the cut off time for applying for services at 3:00. Not everyone has a normal day shift.”

“Better call times, a little later in the day. After two, can you leave a call back number and get called the next day instead of waiting two to three hours? I work full time and the hours aren’t good for me.”

For some, location was more important than hours of operation.

“Open another office on Whidbey Island.”

“I wish that they had a local office that you could go to.”

“Have more offices close by.”

“Get better locations.”

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

3 out of 4 survey respondents (75%) reported that it is easy to get the services they need. More than 1 of 10 (14%) disagreed.

RESPONSE



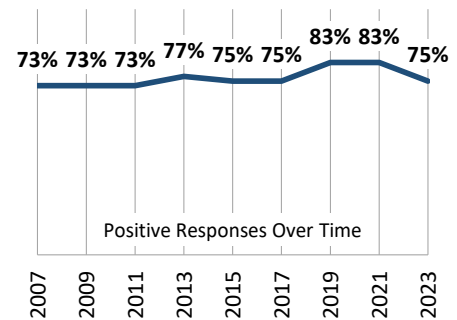
DETAIL

Positive responses decreased by 8 percentage points compared to 2021, a statistically significant difference ($p < .05$).

Declines were widespread across social and health services programs, with decreases reaching statistical significance in four programs.

In contrast to the overall trend, Division of Vocational Rehabilitation clients reported a significant increase in satisfaction with the ease of getting services compared to 2021.

TREND



Our clients speak . . .

“ I CAN GET MOST OF THE HELP I NEED IN ONE SPOT. ”

Many clients said it was easy to get services.

“I really like that I don’t have to be concerned about copays and other types of bureaucracy. It is easy to get the care that I need, and I feel comfortable and confident that I can be taken care of.”

“If we need something, it’s easy to get it.”

“[I am] thankful it’s so easy.”

“It was so easy to access and get my questions answered.”

“They made it very easy. If I needed anything they took care of it.”

“Easy and fast way to get health coverage.”

“They are generally easy to access.”

“It is easy and automatic.”

“It’s easy to access when you need to.”

“They work well for me and are easy to access.”

“They help you get what you need without a bunch of fluff.”

“Easy to work with. They made sure our family gets the benefits we need.”

Some clients said it was difficult to establish services.

“We were told things were there for us, but if we asked for them nothing ever happened.”

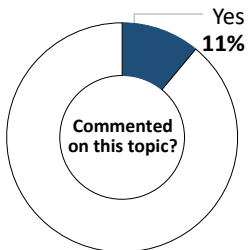
“I just wish there wasn’t so much red tape. The whole process, forms and intakes, and all that. Once we kind of got in, it was okay. It took a while to get traction.”

“There’s so much bureaucracy. So much that we have to go through to help the kids.”

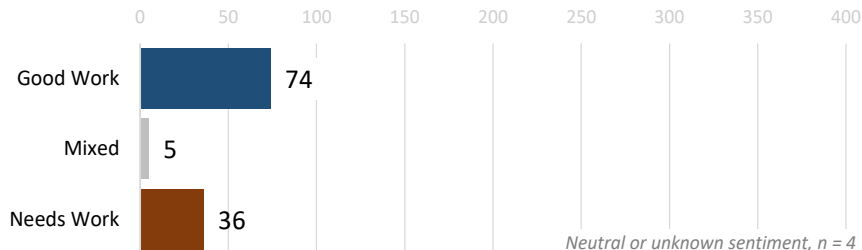
“We have been working on getting help for my son for two years and he fell through the cracks and we’ve not had a lot of follow-through.”

119 of the 1,071 clients commenting (11%) mentioned processes in general terms.

PERCENT



NUMBER



KEY FINDINGS

Most comments about general social and health services processes were positive (62%), but clients also talked about areas in need of improvement.

- Many clients were satisfied that services were easy to get and use. They expressed appreciation for processes that were accessible, efficient, and effective. Many said they liked processes that ran smoothly with minimal interaction.
- Some clients expressed frustration with processes they felt were overly complicated or inconsistent.

Our clients speak . . .

“
THEY ARE DOING THE VERY BEST WITH WHAT THEY HAVE. THEY CONTINUE TO MAKE ADJUSTMENTS TO KEEP UP WITH FUNDING AND RULES.
 ”

Many clients said processes worked well and they did not encounter problems.

- “The case managers we have are so on top of everything, and I’ve never had any problems. If I had issues, they would direct us to where we needed to go.”
- “Just the convenience of it.”
- “It is not terribly difficult.”
- “I like the structure it provides, and the support it provides. Like if you use it the way it is designed, it works. It is not meant [to be] permanent. If you are having a rough time, use it then get off it when it is not needed.”
- “Everything works well.”
- “I like that I’ve never had a problem.”
- “I like how organized they are.”
- “They used the best resources available.”
- “When one of our caseworkers was ill, they provided a backup.”
- “I don’t have to do much.”
- “Things have been smooth so far.”

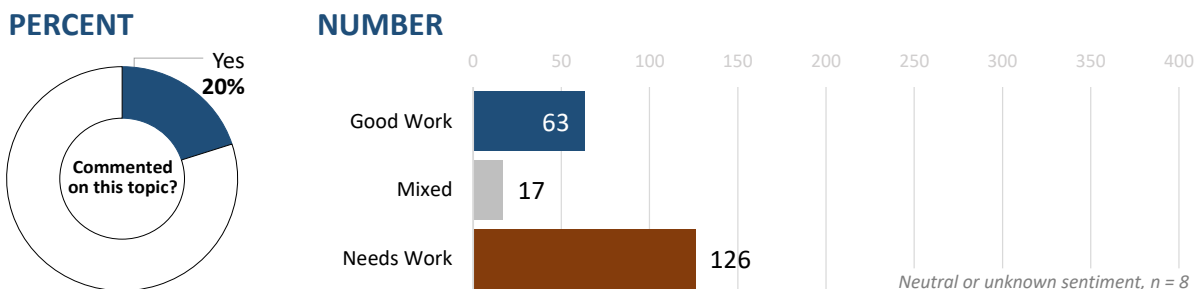
Clients appreciate processes that are fair and consistent.

- “[I like] the consistency over the last several years.”
- “They are not biased about income or social status.”
- “[They] made accommodations for me and helped me succeed.”

Others felt that some processes were inconsistent or overly bureaucratic.

- “I think that high-achieving people with disabilities that choose to pursue opportunities to advance their education should be able to accept these opportunities. The staff at the agencies encourage you to apply for these programs and then the agency denies them.”
- “Not being made to jump through so many hoops to get something done.”
- “Make the process easier to understand.”
- “Follow the laws better.”
- “Humanize the process!”

214 of the 1,071 clients commenting (20%) mentioned specific processes.



KEY FINDINGS

Almost 6 of 10 clients (59%) commenting about specific processes related to access or delivery of social and health services offered suggestions for improvement.

- Positive comments noted appreciation for a range of processes, with many citing online accessibility as a helpful tool. Many DCS clients appreciate how automatic payments minimize interaction with the program as well as the other parent.
- Although many clients appreciate existing online processes, others want more or improved online options to make for better experiences with social and health programs.
- Many clients want more consistency, often saying they want the same caseworker. Some also provided ideas to improve processes, such as new ways to submit paperwork or transition off assistance over time.

Our clients speak . . .

“ I WOULD LOVE TO HAVE A SOCIAL WORKER FOR MY SON. SOMEONE I CAN CONTACT ABOUT SERVICES AND WHAT’S HAPPENING. ”

Some clients described the specific processes they appreciate.

- “Food benefit works good. I lost my card once and they sent me a new one right away.”
- “It makes it easy to pay my child support.”
- “I like that stuff comes in the mail so I know it’s legitimate.”
- “The automated services have been helpful.”
- “You can get most things done on the website and don’t have to play phone tag.”

Many described processes they felt needed improvement.

- “Be more accessible, keep the same caseworkers on my cases.”
- “Having transitional food stamps that taper off instead of just dropping.”
- “Allow us to pay through a system like PayPal and send in receipts. I’m in construction and move from job to job, so paying through payroll deduction isn’t very efficient.”

- “There should be a way of getting it [paperwork] through quick enough and proper enough so it doesn’t get mixed up in other people’s cases. My documents were mixed up with another client with the same first name. I would recommend a Self Scan or Check Out type system.”
- “Keep the same caseworkers.”
- “Stop sending statements, re: costs, multiple times.”
- “I wish you could pick the day you get your food benefits.”

Some clients want process improvements for online capabilities.

- “I wish it was more online and streamlined. Having to mail everything is a hassle.”
- “Have more online services available.”
- “Accept verification by email instead of saying it has to come by ‘snail’ mail or USPS. Accept digital means rather than paper as we’re in the 21st century.”
- “Provide more information and direction on the website. It is very difficult to navigate.”

Some client comments revealed program-specific challenges.

Our clients speak . . .

AGING AND LONG-TERM SUPPORT ADMINISTRATION

Some clients were frustrated with the companies that provide caregivers.

“Stop changing provider companies. It makes it very confusing because it’s hard to keep up.”

“We shouldn’t have to do all the negotiating with the subcontractors. The subcontractors need to make sure their caregivers are well trained.”

DEVELOPMENTAL DISABILITIES ADMINISTRATION

Some clients said they need more assistance from the program in finding care services.

“We couldn’t always find a DDA respite caregiver, but we used to be able to find them years and years ago.”

“DDA needs to assist in finding in-home services, as it’s difficult to find someone.”

“I wish that DDA would give more information on what is available. My son has received services for [redacted] years. I find out there were things that were available during those [redacted] years but it was too late to get the services.”

DIVISION OF VOCATIONAL REHABILITATION

Some clients had challenges with teamwork.

“Rather than helping me to find solutions to my barriers to employment, my counselor actually told me I would NOT be able to achieve my goals, and that I should focus on other areas of work instead.”

“When you are dealing directly with the client and they have special needs including intellectual disability, and you don’t talk to the parent, there will be miscommunication.”

ECONOMIC SERVICES ADMINISTRATION - DIVISION OF CHILD SUPPORT

Custodial parents want more clear communication.

“The father has told me that he had \$1,000 garnished, but I have not received anything and cannot get information.”

“They also never tell you when they switch caseworkers, you just call and then the person says, ‘Oh I’m not on your case anymore, you have to call so-and-so.’”

Noncustodial parents expressed frustration with online systems.

“Customer website is not at all user-friendly. Needs a complete overhaul. Takes eight steps to complete my payment.”

“Honestly the website could use some improvement, especially when searching for something I don’t have bookmarked.”

ECONOMIC SERVICES ADMINISTRATION - COMMUNITY SERVICES DIVISION

Many clients had trouble calling in to get assistance.

“I called in about a simple email and had a 3.5 hour wait time with no option to get called back.”

“The phone lines are very difficult to get through. Make it so you don’t have to be transferred around so much. I call for child care and keep getting transferred around, like five times, and then hung up on and have to start all over again.”

“I was actually on hold for 3.5 hours about a month ago, and that’s when I actually got through.”

HCA - MEDICAID/APPLE HEALTH SERVICES

Some clients wanted more coverage options.

“I wish a copay was an option for a generic drug, instead of getting stuck without having any options.”

“They should provide United Health Care for everyone.”

“I’m not happy with Molina. When I had my wisdom tooth out they refused to authorize pain meds and the dentist didn’t want to do the procedure without that, but it was coming in sideways so I told them to do it anyway.”

HCA - MENTAL HEALTH SERVICES

One client mentioned accommodations challenges.

“Mental Health is hard for him to work with because the counseling is online, and [redacted] needs to be face-to-face to be involved.”

HCA - SUBSTANCE USE DISORDER SERVICES

Clients wanted policy-level changes.

“When someone is picked up for drugs, I think they should be put right into rehab or some sort of rehabilitation program for 90 days. Jail doesn’t help anyone with a drug issue.”

“The tribe sent me to treatment in Grays Harbor, and because I don’t live in Grays Harbor County they charged me \$7,000. I don’t think that’s fair.”

DCYF - CHILDREN AND FAMILY SERVICES

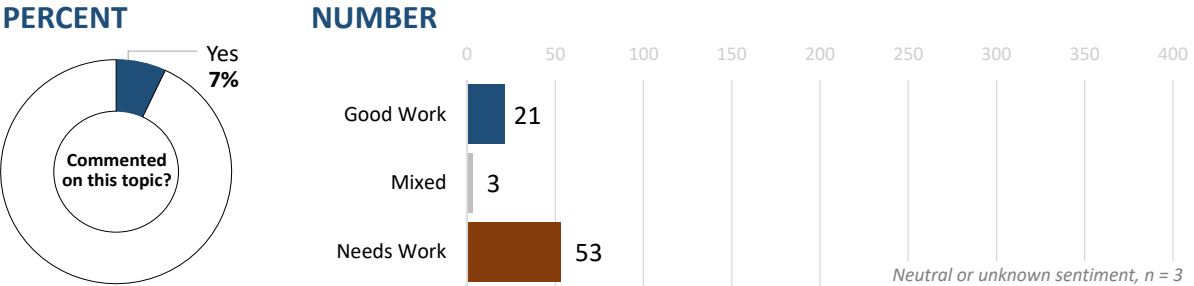
Some clients noted challenges with information sharing and organization.

“Reaching out when caseworkers change.”

“Some of the paperwork was confusing and needs clarification.”

“The state-to-state foster program and adoption process wasn’t very organized.”

80 of the 1,071 clients commenting (7%) mentioned eligibility processes.



KEY FINDINGS

About two-thirds of clients (66%) commenting on eligibility processes made suggestions for improvement.

- Many of the positive comments noted that it is easy to apply for services. Clients especially appreciate online applications and help from staff when they run into questions. Some also mentioned how quickly they were able to get services after applying.
- But some clients had trouble when applying for services and asked for an easier application process.
- Clients also had complaints about eligibility rules. Many suggested adjusting financial limits to qualify, with some mentioning increasing costs of goods and services. Others found it difficult to be approved due to other administrative rules such as age limits or extra paperwork needed.

Our clients speak . . .

“ I FEEL THAT THERE ARE A LOT OF PEOPLE STUCK IN THE MIDDLE. I MAKE TOO MUCH TO BE CONSIDERED POOR, BUT I DON’T MAKE ENOUGH TO KEEP UP WITH THE BILLS. ”

Some clients found the application process easy.

- “It was quick and easy to get food stamps when we needed them.”
- “It surprised me at how easy it was to get insurance.”
- “I like that I can apply for services online.”
- “It was easy to apply for Apple Health, and it’s so nice to not have to pay a copay.”
- “Application process was easy at CSO, [staff] answered questions when they came up.”
- “Everything is so easy to get help.”

Others had challenges when applying for assistance.

- “Make it easier to apply and go through the system to get assistance.”
- “I guess if they make things like the questionnaires easier to get help. It was confusing at first. I needed an advocate.”
- “Make the online applications more streamlined. It’s too easy to get distracted, and then you get kicked out and have to start over.”

- “Making it easier for people at application. If you don’t know what to ask then you’re lost.”
- “It was difficult to apply for services through the Internet... the website can be really frustrating to deal with.”

Many clients expressed frustration with income limits and eligibility criteria.

- “DSHS should re-evaluate the brackets for food since the cost of food has increased so much.”
- “We were turned down due to the amount of info needed being a business owner. It was so stressful and complicated.”
- “Increase the amounts you need to make to be eligible for assistance.”
- “I’d like to get food stamps, but because he’s going to be 18 later this year, they said I couldn’t apply.”
- “Use income after all our expenses in determining eligibility.”
- “Change the cut off for things, financial limits, due to food and fuel going up. Barely able to pay bills and no way to flourish.”

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

Nearly 8 of 10 survey respondents (78%) reported that they got services quickly. More than 1 of 10 (13%) disagreed.

RESPONSE



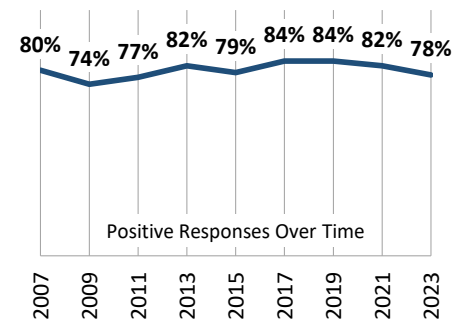
DETAIL

At 78% positive, most clients reported receiving services quickly.

The 4-percentage point decrease compared to 2021 is not statistically significant, but current levels of satisfaction with timeliness are the lowest observed since 2011.

The overall pattern of responses suggests clients have experienced longer waits for services during the pandemic.

TREND



Our clients speak . . .

“
I HAD NO FOOD AND NO PLACE TO LIVE, AND WHEN I CALLED THEM THEY HELPED ME GET FOOD THE NEXT DAY.
 ”

Most clients were satisfied with the timeliness of services.

- “I think for us it’s been pretty prompt. We moved from [redacted] in 2021 and were getting services from DDA in 2022. The DDA caseworker is on top of things.”
- “I like that there’s not a long delay.”
- “They got me help quickly.”
- “Food stamp people are able to resolve issues within a day.”
- “They helped me right away.”
- “They were quick to meet the needs that I had.”
- “They are prompt to help me with things I need.”
- “Fairly easy to get things done in an appropriate time.”
- “Services are timely and people answer questions when they come up. We have very good social workers here.”

“The help is immediate. When people sign up for food stamps they need it right away and it’s nice to get them quickly.”

“From medical to DDA services, things have been really good and prompt.”

“They are efficient and fast.”

“They were able to get me services quickly.”

But some clients are frustrated with long waits.

“Make wait times shorter.”

“Improve wait times.”

“Answer my questions more quickly.”

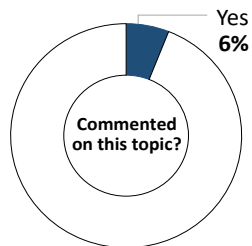
“I don’t like dealing with them due to wait times.”

“I was able to adopt a child, but it took a lot for the adoption to be completed.”

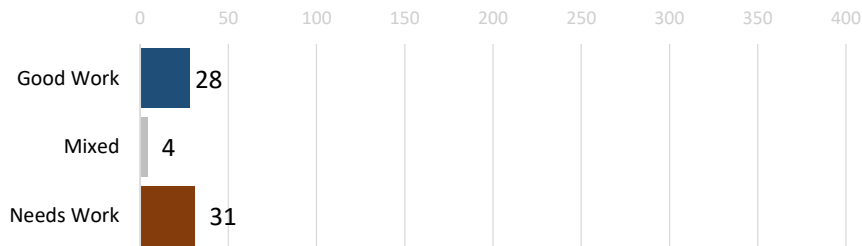
“Better timeliness in reports would be helpful.”

63 of the 1,071 clients commenting (6%) mentioned timeliness of services.

PERCENT



NUMBER



KEY FINDINGS

Comments on timeliness of services were almost evenly split between positive comments and suggestions for improvement.

- Clients were often happy with the timeliness of processes and responses. Some specifically talked about timeliness of getting necessary information from the program.
- However, clients also experienced delays in certain processes, including finalizing adoptions, reviewing applications, issuing benefits, and correcting errors. Some comments indicated that lack of timely response can lead to more problems that the client and program need to address.

Our clients speak . . .

“**WHEN WE GOT THE EBT CARDS, IT TOOK A LONG TIME FOR THE FUNDS TO BE ON IT. NOW WE GOT THE CARD QUICKLY, BUT NOT THE FUNDS.**”

Clients appreciate timely processes and responses.

“I am surprised how easy it is to get ahold of someone when something went wrong, and how quickly they fixed it. They are on time with everything.”

“Once we get what we need, they are usually really good about getting things completed and getting on schedule.”

“The response time is pretty good for the most part.”

“They’re quick with responses and prior authorizations.”

“Quick response. I didn’t have to wait.”

Some specifically mentioned getting information quickly.

“They get back to me with the information needed rather quickly.”

“They provide information pretty fast.”

“It is a lot better than trying to seek out answers on my own. They are a direct resource, and it speeds things up.”

Others wish processes were faster.

“It took a long time to get the three children through the adoption system and that should be shortened when they are legally free.”

“Process the reviews and applications faster.”

“They are slow at getting the necessary EBT card for my daughter.”

“Being able to do what they do good, but at a faster time frame. Just speed up the services.”

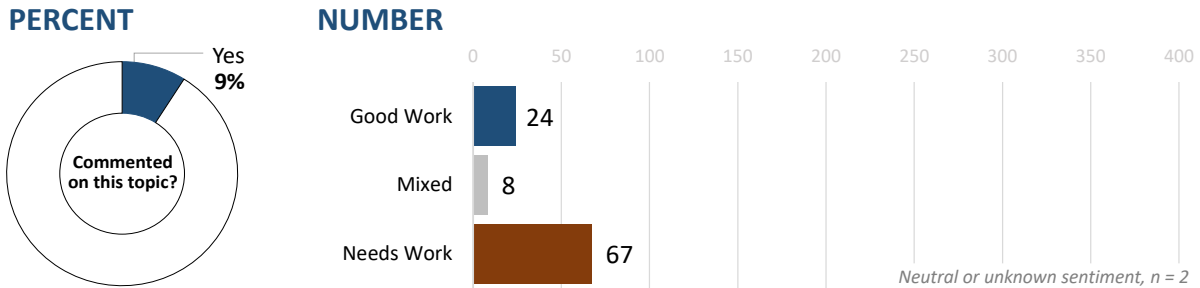
“When there is a dispute, don’t let the family wait all weekend.”

“When I was overpaid, they should have stopped the payroll deduction notice. It didn’t get reduced timely.”

“We just moved here in May of 2021. It took until October 2021 to get a case manager.”

“Processing times can be a little long at times. If they need more info they should reach out as soon as possible and not wait until almost the deadline.”

101 of the 1,071 clients commenting (9%) mentioned provider processes.



KEY FINDINGS

Some clients also commented on the processes of providers who are paid through social and health services programs. Most comments (66%) were suggestions for improvement.

- Many of clients’ positive comments described the accessibility of provider services and locations. Some praised providers who accommodated their needs.
- Some clients were frustrated with providers’ lack of communication. A few said that contractors providing caregiver services needed to communicate with their staff more clearly.
- Some clients also had trouble with scheduling appointments due to limited provider availability.

Our clients speak . . .

“ THEY SWITCHED PRIMARY CARE PROVIDERS WITHOUT TELLING US. ”

Clients appreciate the accessibility of services from providers.

“Because I’m diabetic, they get me in right away.”

“There are lots of locations and it’s easy to find a doctor you like.”

“Certain treatments are available if they are needed. If it can’t get services from my provider, I can get a referral to someone who can help me.”

“I think it’s nice to have emergency urgent care available. My daughter was in a softball tournament out of the area, and she hurt her wrist, but we were able to get her taken care of right away.”

“My mental health services do really well. They don’t send me mail since I’m legally blind. They call and read things to me.”

Some clients had challenges with provider communication.

“Agencies that provide the caregivers lack communication between office people and clients, as well as caregivers.”

“The Family Resource Coordinator has not been helpful. Communication and information-sharing, empowering the parents, and goal-setting need to be more personalized to our child’s experience.”

“I think better communication between ALTSA and the hiring agency (Consumer Direct Care Network) and me needs to be better. And they should answer the caregiver’s questions regarding their pay.”

Others mentioned long wait times for appointments.

“Try not having doctors appointments so far out into the future.”

“Have shorter wait periods to get appointments.”

“The mental health was hard because of availability in being seen. They need more flexible times to do evaluations.”

“It took her months to get an appointment.”

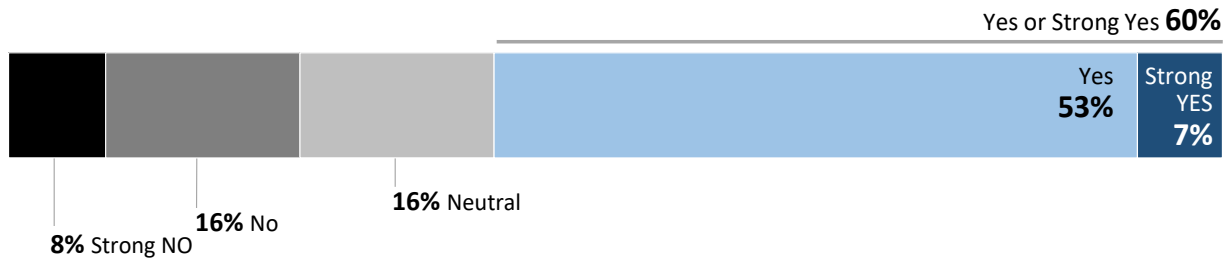
“The appointments are too far out.”

“It’s hard to get an appointment right now with WorkSource.”

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

6 of 10 survey respondents (60%) reported that it was easy to get to a live person when they needed to. Almost 1 of 4 (24%) disagreed.

RESPONSE

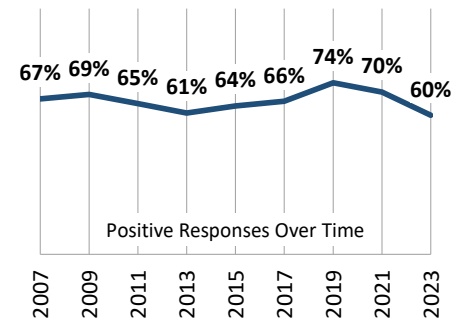


DETAIL

At 60% positive, this question is the lowest scoring in the survey. The 10-percentage point decrease from 2021 is statistically significant ($p < .05$) and represents the largest decrease across all survey items.

Declines were widespread across social and health services programs, with decreases in positive responses reaching statistical significance in the two largest programs (Economic Services Administration’s Community Services Division and Medicaid/Apple Health.)

TREND



Our clients speak . . .

“
IT’S ALRIGHT FOR THE MOST PART. IT’S NOT ALWAYS EASY TO GET AHOLD OF SOMEONE.
 ”

Clients appreciate being able to talk to a live person to get their needs met.

- “Both child support and children services were easy to contact. I didn’t have to plan to be there the whole day.”
- “I did not have to wait long on the phone.”
- “Easy to talk to someone.”
- “I like that I could speak to a live person who was helpful and seemed to understand.”
- “You do not have to go into the office whenever you need something. You can just call and get it straightened out.”
- “[I] like being able to talk to a live person.”
- “If I call, then they are very responsive.”
- “Mental health specialist comes twice a week, but I can call or text her anytime.”
- “When I can get access to the people that I need to talk to, it is a blessing to me.”
- “[I like] being able to talk to somebody.”
- “I like it when I can get ahold of someone to help me out.”

However, others struggled with long wait times to reach a person.

- “Make it easier to reach a person.”
- “[I don’t like] not being able to talk to a real person when I need to.”
- “All the people that I deal with, they are really nice and try to help when you can get ahold of them... just takes a minute to finally get through on the phones.”
- “Be more available for personal contact.”
- “[It is] hard to reach people at times.”

Some dislike automated phone systems.

- “Get more live people on the phones instead of automated calls that don’t have the right options to answer questions. The automated system makes it very difficult to navigate at times.”
- “I have a hard time when the receptionist is a computer talking instead of a real person.”
- “I have a hard time following the prompts in order to finally get to talk to a live person.”

QUESTION | **Do staff return your calls within 48 hours?**

More than 7 of 10 survey respondents (72%) reported that social and health services staff returned their calls in a timely manner. Just under 2 of 10 (19%) disagreed.

RESPONSE

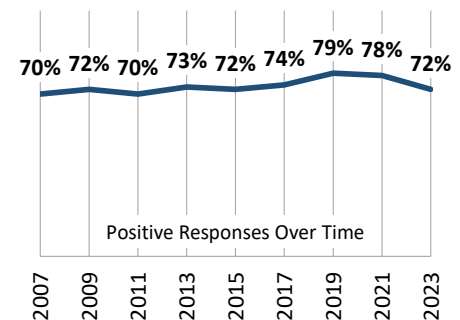


DETAIL

In prior surveys, clients were asked if staff returned calls within 24 hours. This year, the reference period was changed to 48 hours. Even with this extension, current satisfaction is on a downward trend, with positive responses 6 percentage points lower than in 2021 ($p < .05$).

Reported challenges reaching staff were the most acute in ESA’s Community Services Division, which experienced dramatic increases in caseloads at the same time as shifting operations to primarily remote delivery during the pandemic.¹

TREND



Our clients speak . . .

“
THERE IS A LOT OF PHONE TAG, ESPECIALLY IF A PERSON HAS OFF HOURS.
 ”

Many clients said staff get back to them quickly.

- “When I call them, they have responded quickly about food stamps.”
- “They respond well when they get my messages.”
- “I like that I can get ahold of my case manager really easily. He is very prompt. If he doesn’t answer, he will call back within 30 minutes.”
- “They were always good about returning calls and providing resources.”
- “It’s been much easier to get ahold of people over the last two years.”
- “Child support gets back to me right away.”
- “They respond to my phone calls and emails in a timely manner.”
- “I do like that I can call and they will call me back if I am on hold. I think that is a great improvement.”

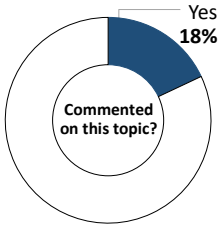
Some clients said they struggled to get timely responses from staff.

- “They should return calls within 24-48 hours. It depends on who you are dealing with, some do and some don’t.”
- “I think specifically DCS, it is really hard to get a caseworker on the phone. I have to leave a voicemail and then play phone tag to finally speak to someone.”
- “Return phone calls in a timely manner and get back to me as to what they have promised to do.”
- “A lot of times they take forever to call back.”
- “I am still waiting for a call back on help I requested.”
- “Return phone calls in a timely manner.”
- “Return phone calls and emails timely, within 48 hours or sooner. Officers need to provide their direct phone numbers.”

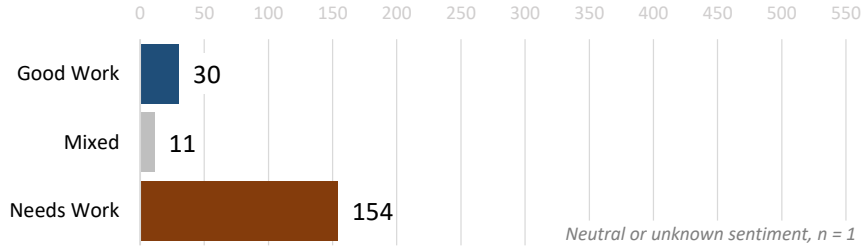
¹ See “DSHS Economic Services Administration Service Trends Before and During the COVID-19 Pandemic,” DSHS Research and Data Analysis Division, June 2023 <https://www.dshs.wa.gov/sites/default/files/rda/reports/research-11-264.pdf>

196 of the 1,071 clients commenting (18%) mentioned staff access, including over the phone.

PERCENT



NUMBER



KEY FINDINGS

The number of clients commenting on phone and staff access increased compared to 2021. The majority of comments were requests for improvement (79%).

- Clients expressed appreciation for quick responses from staff, direct access to their caseworkers, and the option to reach out to them through different methods like email.
- Some clients had general complaints regarding the availability of staff, saying there was no way to get in touch with the staff for assistance.
- Long hold times on the phones continues to be a common complaint among clients, with many mentioning wait times of multiple hours. Some also noted that calls were dropped, meaning they had to go through the long hold process multiple times to get assistance.

Our clients speak . . .

“ I WAS ON HOLD FOR OVER AN HOUR, THEN THE PERSON WHO TOOK MY CALL HUNG UP AND I HAD TO CALL BACK AGAIN AND WAIT AGAIN. HAD ME IN TEARS! ”

Clients appreciate access to staff.

- “Usually I get a live person and my questions are answered quickly.”
 - “I liked being able to get ahold of the support officer directly.”
 - “I can’t remember talking to anyone live. I’ve been communicating by email, and that has worked ok.”
 - “I communicate with my case manager primarily by email and that works well.”
- Many clients expressed frustration at difficulties getting in touch with staff.*
- “There isn’t any way to leave a voicemail at ESA.”
 - “Improve the phone system and be more available to help people move forward in life, rather than having the individual figure it out.”
 - “Be more accessible. It’s almost impossible to get people on the phone and the app looks like it was built in the fifties.”
 - “Improved availability would be a way to improve services.”

Wait times continue to present challenges.

- “The phone line is horrible.”
- “When you call, you should not have to wait hours to get to talk to a real person.”
- “Always very long waits on hold with the community service office.”
- “Fix the call line for food stamps. The wait is terrible. You should not have to wait 2-4 hours to get help. I tried four days straight before I gave up and went into the office.”
- “It would be good to be able to get a person on the phone without taking a long time to reach them.”
- “Fix phone lines. Whenever I get someone, the phone drops me and I have to start all over again.”
- “The phone system with community services needs improvement. I’ve had to wait upwards of two to three hours on hold.”
- “Wait time for phone calls is way too long.”
- “Shorter wait times on phone calls.”

Information

Clients want clear and complete information about services.

Washington State offers a wide variety of programs and services. Providing information about these services is critical to ensure that clients can get all the help that is available to them.

Clients reported mixed experiences receiving information about services. More than 8 of 10 clients agreed staff explain things clearly and that it's easy to get information about services. But self-reported knowledge of available services is the second-lowest scoring question in the survey.

- *Do you know what program services there are for you and your family?* (64% positive)
- *Did program staff explain things clearly?* (87% positive)
- *Was it easy to get the information you needed about services?* (82% positive)

Almost 200 of the 1,071 total client comments (17%) mentioned information. Overall, client comments about information were slightly more negative (n=96) than positive (n=84).

With a few exceptions, clients praised staff for their clear explanations and willingness to answer questions. However, they want staff to proactively offer more information about social and health services available to them. They also want to access information in different formats, including printed materials, online content, mobile applications, and one-on-one coaching. Some clients requested more assistance for people who have trouble communicating in written or spoken English.



Getty Images/Barbara Lorena Vergara

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

More than 6 of 10 survey respondents (64%) reported that they know what services are available. Almost a quarter (24%) disagreed.

RESPONSE



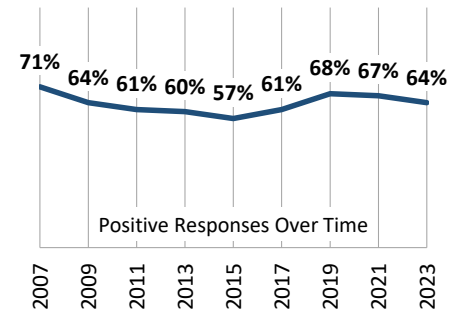
DETAIL

At 64% positive, awareness of services is one of the lowest scoring areas in the survey.

The 3-point decrease in positive responses compared to the last survey in 2021 is not significant, but the current percentage is significantly lower than the high of 71% set in 2007 ($p < .05$).

Although the general trend for this question was downward, the share of clients who said they know what services are available increased significantly for the Aging and Long-Term Support Administration and the Division of Vocational Rehabilitation.

TREND



Our clients speak . . .

“ PROVIDE MORE SERVICES THAT ARE AVAILABLE TO US WITHOUT HAVING TO ASK. IF WE DON’T KNOW THAT A PROGRAM IS AVAILABLE, WE DO NOT KNOW TO ASK FOR IT. ”

Clients appreciate receiving information about what services are available.

“I like the people I’ve dealt with in the last two years. They make sure that I get taken care of. I appreciate that! They’ve been real good to me. [They] let me know about new programs and benefits.”

“[I like] the explanation of programs he is entitled to.”

“Anytime I contact someone I learn about new resources.”

“I get to know services that I can take part of that can help me and my needs.”

“They don’t just offer what you come in for. They offer additional services and help.”

But many asked for information about services to be shared more proactively.

“Have a caseworker reach out and tell you what is available for resources and what services there are.”

“Communicate better what services are available to us.”

“Have a general outline of services available online.”

“Make what services they offer better advertised on application of services. It took too much time to find out what services were available for my addictions.”

“Put out a list of the services available at least once year as a reminder.”

“Give us a list of services and who to contact.”

A few mentioned specific services they want more information about.

“Letting parents know all services available for our kids with special needs.”

“[I] Would like to be updated on services that are available for continuing education on how to help the issues that come with the children that you do not see right away. There may be things offered that I don’t know about. A newsletter would be helpful in providing information on what is available.”

“Make me more aware of other Community Service options that I might not be aware of.”

QUESTION | **Did program staff explain things clearly?**

Nearly 9 of 10 survey respondents (87%) reported that program staff explain things clearly. Just over 1 of 20 (6%) disagreed.

RESPONSE



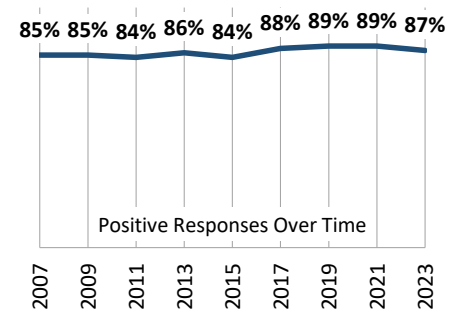
DETAIL

At 87% positive, this question remains the most highly rated of the information questions.

Positive responses declined by 2 points compared to 2021, but the change is not significant.

While there is some variation among programs, none of the social and health services programs report satisfaction lower than 70% positive.

TREND



Our clients speak . . .

“**THEY TOOK TIME TO EXPLAIN THE ANSWERS TO MY QUESTIONS. EXPLAIN THE "WHY" BEHIND THE QUESTIONS.**”

Many clients think staff explain things clearly.

“They explain everything to the point and really well.”

“The child support was explained easily.”

“They communicate really well with me through the email in answering my questions and giving me complete explanations.”

“They always explain well.”

“When I call, they explain to me what I have to do and what is needed per my request.”

“The caseworker was very good about explaining things to me and understanding what to do.”

“I like that they explain everything and answer any questions you have.”

They especially appreciate staff who can make information understandable.

“She explains how things work so I can understand, without using a bunch of legal jargon.”

“I like that they take the time to explain so I can understand it. I got a ninth-grade education.”

“Able to work with me, and I was actually able to comprehend what they were talking about.”

“He is able to get me the information I need and explain it so I can understand it.”

A few wanted more clarity.

“Explain things better.”

“Answer more directly [when] answering questions about resources.”

“I have not had good experiences at the CSO, especially during the pandemic. I have needed them to slow down and explain things so I can understand.”

“They could do better at explaining all options.”

“Felt like they just wanted me off the phone. I don’t feel the services were explained well. I didn’t even know I was going to get child care for a year.”

QUESTION | **Was it easy to get the information you needed about services?**

More than 8 of 10 survey respondents (82%) reported that it was easy to get information about services. Less than 1 of 10 (8%) disagreed.

RESPONSE

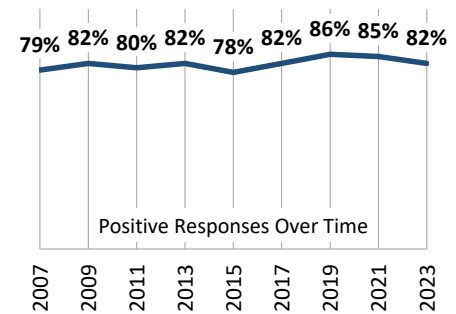


DETAIL

At 82% positive, ease of getting information is down slightly from the last survey in 2021, but the 3-percentage point decline is not statistically significant.

Clients who lived in Northwestern Washington (including King County) reported significantly lower ease of getting information (77% positive) than clients in Eastern Washington (85% positive) or Southwestern Washington (86% positive).

TREND



Our clients speak . . .

“**ONCE YOU FINALLY GET TO SPEAK TO THEM THEY GIVE YOU THE INFORMATION THAT YOU REQUESTED ABOUT YOUR CHILD SUPPORT AND FOOD STAMPS.**”

Clients appreciate readily available information and responsive staff.

- “[I like] how easy it is to get the information I need.”
- “When we do get the services we need, it is easy to find access and answers.”
- “[I like] the ease of being able to look up information.”
- “They always have an answer to something when I have questions.”
- “We can ask the Case Manager questions and they always have answers for us.”
- “Providing the information I need and putting a plan together. And giving all the information you need to make the plan work.”
- “They provide answers to questions and provide referrals when needed.”
- “We are refugees and when I have questions, they are there to answer them.”
- “When I have questions, they will give me easy answers.”

Some said they could find information, but it took some work.

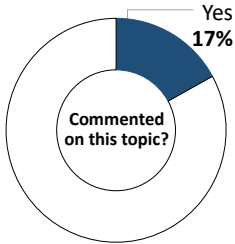
- “If you dig around enough you can find someone who knows how to help you.”
- “If you ask the right questions you usually get an answer. But you have to know what you are wanting so they can get you to the right place.”

Clients appreciate language services and note difficulty when accessibility is not considered.

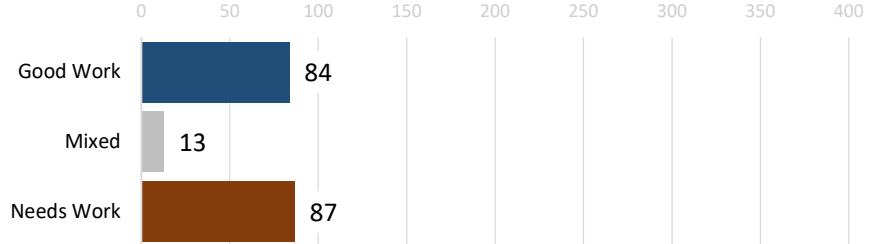
- “I live in a bilingual family and there’s always someone who can speak to us in Spanish.”
- “Websites are not accessible for people with visual and auditory impairments.”
- “It would be nice if they gave the information in Russian.”
- “On the Community Service side, it is very difficult to get assistance on the phone with someone who can speak Spanish. I usually have to go to the office and take someone with me to interpret.”

184 of the 1,071 clients who made comments (17%) mentioned the information they receive from social and health services.

PERCENT



NUMBER



KEY FINDINGS

There were fewer comments about information than in the last major survey in 2021, but they remain evenly split between positive and negative sentiment.

- Most positive comments about information expressed appreciation for staff who were knowledgeable, gave clear explanations, or provided referrals to others when they were unable to help. Some clients commented on the quality of the information itself or offered praise for being able to access information in multiple ways.
- Many of the negative comments indicated clients don't know what services or providers are available to them. Many wished their caseworkers would provide information without them having to ask. They also suggested better advertising of services at the time of application and when there are program changes.
- Some clients expressed frustration with incomplete or contradictory information, which created confusion and sometimes led to clients going without needed services.

Our clients speak . . .

“ WE RECEIVED A LETTER THAT SHOWED LESS BENEFITS THAN BEFORE WITH NO EXPLANATION. ”

Clients like to receive information through a variety of channels.

- “We are getting newsletters and emails with information that is very helpful.”
- “I think they do well by sending out statements and making information accessible through websites and apps.”
- “[I like] that I can get information online.”
- “I like that they send me brochures about the services.”

Most positive comments were about staff who provided helpful information.

- “I like that when I call Child Support they told me what was going on.”
- “I find they do very well in providing information.”
- “If they don't know the answer they take the time to look it up and get back to you.”
- “Information is provided ahead of time, so you can plan.”
- “If they're not able to provide the service, they give me a resource to someone who can.”

But many clients said critical information was missing or incorrect.

- “It's been over a month, and we don't know who our new caseworker is.”
- “[They] send me paperwork I don't need or that contradicts itself.”
- “I have a huge frustration about the support dollars. It's so hard to know what those services are and how to find them. He used to do horseback riding, but they stopped doing that, so now we just have these dollars that we're not able to use.”
- “[They could improve] consistency among information that caseworkers provide.”
- “They didn't tell me I had to take classes to continue getting in-home services for my daughter so now they're not going to pay.”

Several clients mentioned difficulty finding information about providers.

- “Provide a list on the website that shows who accepts Apple Health.”
- “It would be helpful if there was a database we could access that would list the caregivers who are available.”

Client Involvement and Coordination

Active communication helps clients feel included and improves coordination of services.

Clients want to be active participants in their own care and services. Seven of 10 clients agreed they are involved in making plans about their services, making this the third-lowest scoring question in the survey.

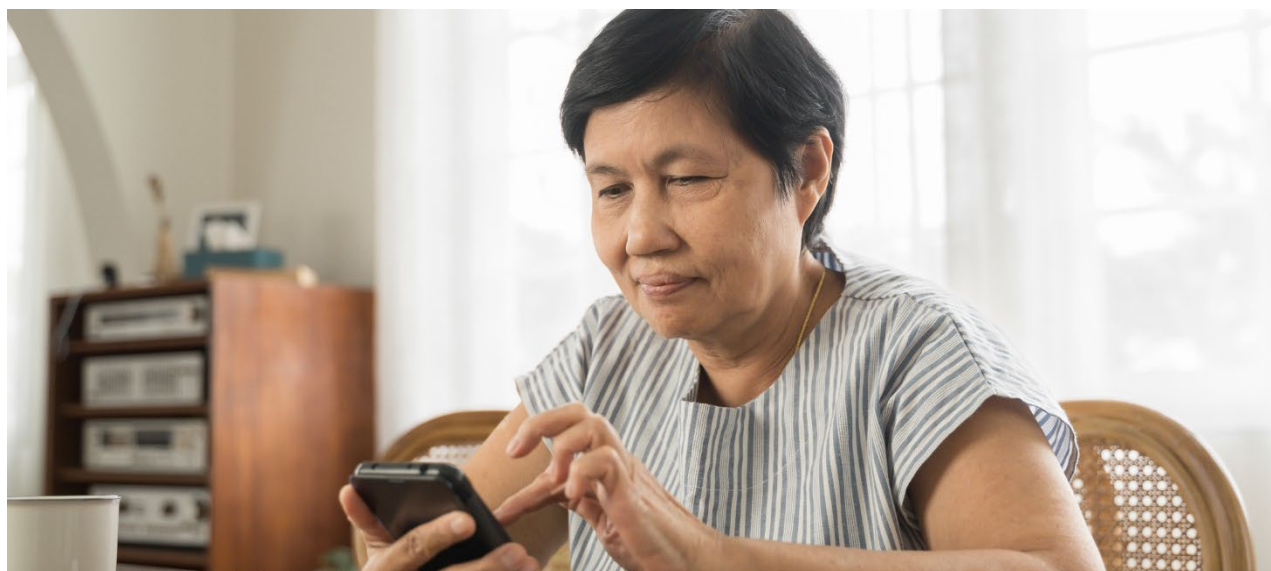
- *Did you help make plans and set goals about services? (70% positive)*

Respondents who received services from two or more programs were asked about coordination between those programs. Survey scores in this area are generally positive, with no significant changes from the prior year's survey results.¹

- *Do social and health services make sure all your services work well together? (82% positive)*
- *Do the staff from your different social and health service programs work together as a team to try to help you get the services you need? (74% positive)*

Client comments about coordination were generally suggestions for change. Out of the 1,071 total client comments, 32 (3%) discussed coordination. Of these, 21 were negative and 11 were positive.

Many comments were about communication, both between programs and among staff. Clients like having opportunities to give input and be actively involved in the process of creating plans and setting goals. Some pointed out areas where increased collaboration would improve services, such as consistency between staff and acting on clients' input.



Getty Images/Eggeeggjiew

¹ Because only a subset of respondents are eligible to answer the coordination questions, score changes must be larger for these questions to reach statistical significance. Trends must be interpreted with caution as years 2019 and prior included clients served by more than two programs. Starting in 2021, the question were asked of all clients served by more than one program.

QUESTION | **Did you help make plans and set goals about services?**

7 of 10 survey respondents (70%) reported that they help make plans and set goals about services. Nearly 1 of 5 (20%) disagreed.

RESPONSE

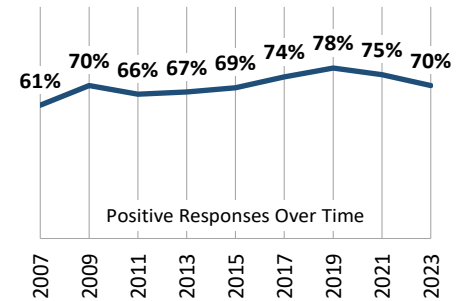


DETAIL

At 70% positive, clients’ satisfaction with their involvement in planning services continues to decrease from the 2019 high. The change from the 2021 survey is not statistically significant.

Satisfaction varies across programs and is generally higher for programs with hands-on services compared to those with more automated delivery of services.

TREND



Our clients speak . . .

“
**I LIKE THE FACT
 I CAN SPEAK FOR
 MYSELF.**
 ”

Clients appreciate having the opportunity to participate and give input.

“Every year the case managers have to come in and do a review, which is a time we get to address the issues at hand.”

“Work Source helped me set goals and make plans and helped me doing it.”

“[They] helped me grow in my life and provided positive support.”

“They definitely help my daughter and allow me to take care of her, and work with her in trying to find employment and provide a job coach.”

“I think it was having a person besides her family that she could talk to that gave her guidance ... the independent party could offer different insight.”

“The caseworkers are awesome. They’ve really helped me understand what I need to do.”

“They have been very helpful in helping me get through school and figuring out what I want to do.”

Some struggled with having a say.

“I wish they would let us go see the counselors we want to see. Since I am tribal, the tribe wants me to go through them so they can get the money, but I don’t like the counselor and wish I had another option for a counselor.”

“I suggest staff be ready to listen to the whole story and help the person with suggestions of where they can learn more.”

“Notify me before putting a lien against my vehicle. I lost my job and got behind in child support ... Instead of communicating with me, they put a lien on my car. I’m working now and making payments, but I would have liked to have avoided the lien and having my passport frozen.”

QUESTION | **Do social and health services make sure all your services work well together?**

More than 8 of 10 survey respondents (82%) served by two or more programs reported that their services work well together. 1 of 10 (10%) disagreed.

RESPONSE



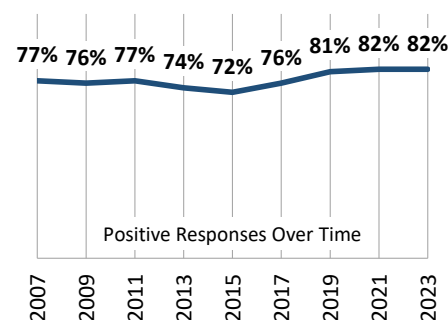
DETAIL

Almost half (46%) of the clients who completed the 2023 survey were served by two or more programs.

These clients continue to be satisfied with services working well together, with scores matching the high of 82% positive in 2021.

This trend is especially notable as satisfaction with many other aspects of service delivery declined during the pandemic years.

TREND



Our clients speak . . .

“THEY COORDINATE WELL TO HELP ME MOVE FORWARD.”

Clients appreciated programs working together.

“Apple Health and Economic Services work well together.”

“It was really good during my pregnancy as they coordinated all my services like ultrasounds, etc.”

“For the most part it seems that the system is geared towards a streamline. Keeps the interaction on my behalf to a minimum since it is streamlined.”

“DDA and DVR work well together.”

“They talk to each other, and that’s really important. Clients have to go one place to get info to apply for programs, then go to another place to give it out. It’s really hard for a lot of folks too, if by going from place to place if they have to use public transit. If staff can phone the information in for you it really helps.”

“[I] don’t have to run around from department to department. Problems are handled right away.”

Some mentioned challenges.

“No one communicates with each other. [I want] more communication between the state services.”

“Improve communication between agencies.”

“[I want] better communications between the different services available.”

“More integrating the mental health and substance abuse programs.”

“Coordinate the services better.”

“The different clinics under Apple Health need to communicate better.”

QUESTION |

Do the staff from your different social and health service programs work together as a team to try to help you get the services you need?

Nearly 3 of 4 survey respondents (74%) served by two or more programs reported that staff from different programs work as a team. Less than 1 in 5 (15%) disagreed.

RESPONSE



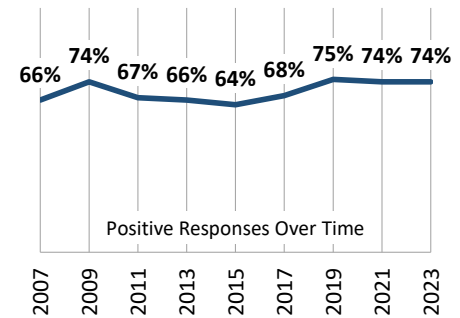
DETAIL

At 74% positive, this question is in the bottom three of the survey overall.

However, satisfaction remains unchanged from the 2021 survey, and is significantly higher compared to 2007 ($p < .05$).

Similar to client satisfaction with services working well together, results indicate that pandemic-related challenges in access and process have not affected clients' perceptions of staff teamwork.

TREND



Our clients speak . . .

“
THEY ALL WORK TOGETHER TO HELP WITH MY BENEFITS.
 ”

Clients appreciate staff who work together for the client.

“Current social workers listen well and are willing to brainstorm together when there’s a problem.”

“They do everything well. The receptionist always greets you and makes sure the person you’re there to see is notified.”

“They pull together and help me with things I need to get done.”

“They always make sure her needs are met, and work to solve problems.”

“They are knowledgeable and are quick to refer me to someone who can help when they don’t have the answer.”

“[I like] when we require something specific, and they know where to send us to resolve the situation.”

“The agency has been good about getting support outside of what they are capable of doing.”

Some made suggestions or expressed frustrations.

“They need to figure out how to communicate with each other better. I get different answers from different people and they sometimes claim they have no record of a call I know I made.”

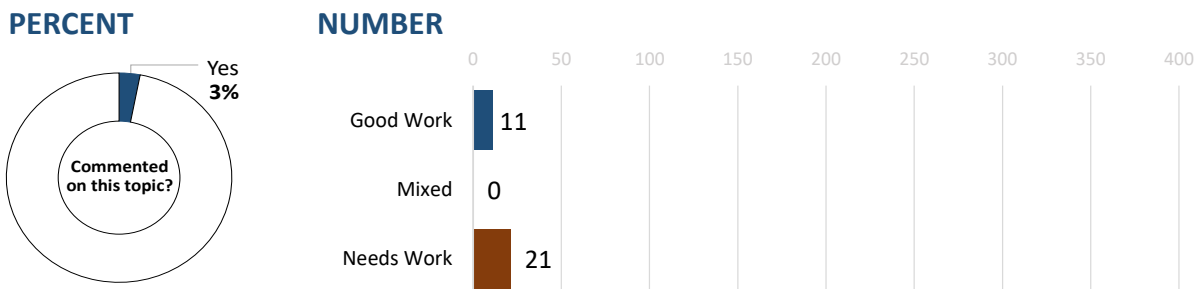
“Make sure everybody gives the same answer. I tell people to call back when they get an answer they don’t like, because it depends who you talk to.”

“We families that are adopting a child need to be part of the team and included in decisions made.”

“I would really like to emphasize the need for coordination like in the old days, when there was a caseworker who knew all about the case and who the players were.”

“[I want] consistency between staff and clear communication.”

32 of the 1,071 clients commenting (3%) mentioned coordination.



KEY FINDINGS

A few clients commented on coordination between different social and health service programs, and coordination between staff in the same program. Twenty-one comments mentioned coordination between programs and 13 mentioned coordination between workers (two mentioned both). Comments were largely requests for improvement.

- Some clients were appreciative of staff who facilitated coordination with other staff and across programs.
- Clients made several specific suggestions on process improvements that could create better coordination, such as information sharing between programs on standard items (e.g., evaluations), and incorporating input from all sources involved.
- Some clients noted areas where teamwork and communication between programs would improve services, including services for children with special needs and better integration of mental and physical health.

Our clients speak . . .

“**THERE SHOULD BE A DIAGRAM AVAILABLE TO SHOW HOW ALL THE DIFFERENT AGENCIES, INCLUDING STATE, COUNTY AND FEDERAL WORK TOGETHER TO HELP FOLKS NAVIGATE THE SYSTEM.**”

Clients appreciate when programs and staff work together to meet their needs.

“They get you what you need, and they are connected well enough to refer me to resources that help me.”

“Some programs are tied together in a way that it makes the services streamlined and easy.”

“They all work together.”

Communication is a common issue.

“I have to make lots of phone calls to get the programs to work together.”

“Last time they did an evaluation, they did not schedule it so I could attend. AL TSA often forgets to communicate with us (family).”

“[Improve] coordination between programs.”

“It would be good if DDA and DVR worked together in the same place and communicated together.”

“[They should be] more communicative with other supports and clients themselves.”

“The divisions feel disconnected and not integrated. Mental Health and Physical Health do not have a team approach.”

A few clients offered suggestions for improvement.

“Combine program reviews. They are each done separately but close together. Each takes several hours on the phone and they ask the same questions.”

“Special needs parents need a road map to help them work through the system and to coordinate the benefits available and navigate the other state systems.”

“Come up with a resource sheet that shows how the services work together.”

Resources

More resources are needed to meet clients' needs.

The survey does not include specific questions about resources because programs often have little control over what is available from federal and state sources. However, many clients offered comments about resources in response to the open-ended questions. These comments about program availability or benefit levels make up 15% of the 1,071 total client comments. Out of the 159 comments on resources, 142 (89%) were suggestions for improvement. Three comments were mixed, and 14 were positive.

Clients continue to request housing assistance and access to specific services such as transportation and programs for non-custodial parents. Mental health services and access to dental care were also mentioned frequently. Many encountered challenges with distant locations and limited provider options.

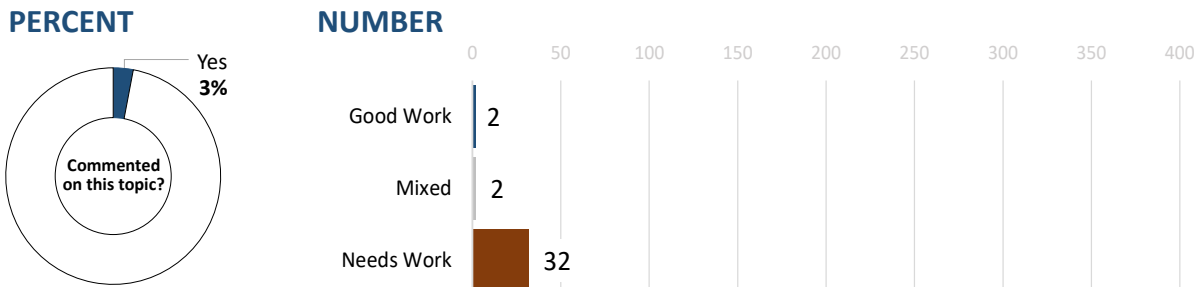
Clients also want benefit levels that meet their needs. Many mentioned challenges with the high inflation experienced in 2022¹, and asked for food and cash assistance levels to be increased. Some also talked about needing more hours for direct service needs, such as job coaching and chore assistance.



Getty Images/Fizkes

¹ See “Consumer Price Index: 2022 in Review”, U.S. Bureau of Labor Statistics, 17 January 2023, <https://www.bls.gov/opub/ted/2023/consumer-price-index-2022-in-review.htm>

36 of the 1,071 clients who commented (3%) mentioned the availability of social and health services programs.



KEY FINDINGS

Almost all comments about program availability were suggestions for improvement.

- Clients made general comments about wanting more assistance.
- Some made specific requests for programs, such as support for non-custodial parents or organized social opportunities for DDA clients.
- Housing assistance continues to be a common request in these comments, with several clients saying they need help with the cost of rent and utilities.
- Others mentioned transportation needs to attend interviews or medical appointments.

Our clients speak . . .

“
MORE PROGRAMS FOR SINGLE PARENTS WHO WORK.
 ”

Some clients wanted more support, without specifying a program.

- “Have more services available and shorter wait lists.”
- “More ways to support people.”
- “Maybe more services, like more variety.”
- “They need more resources for help.”
- “Having more options available for the disabled client.”

Others asked for specific assistance.

- “Help with legal issues.”
- “Be more understanding towards fathers that are paying their child support and have programs for us.”
- “I wish there was more social opportunity for my daughter, smaller groups and activities for our DDA clients.”
- “Offer more rehabilitative things such as gym memberships for younger people.”
- “The parent with the kid gets all the help. I understand why, but the paying parent should get some help too.”

Clients continue to ask for help with housing.

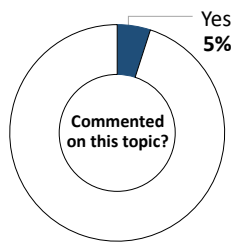
- “More clarity on how to get in touch with someone for rental help and services. There should be a division that deals with just housing services and rental assistance.”
- “I need help with housing. When my landlord found out I was getting SNAP benefits she raised my rent from \$950 to \$2,500. I can’t pay my bills anymore.”
- “Provide utility services, or more help for utility services.”

Some also requested transportation assistance.

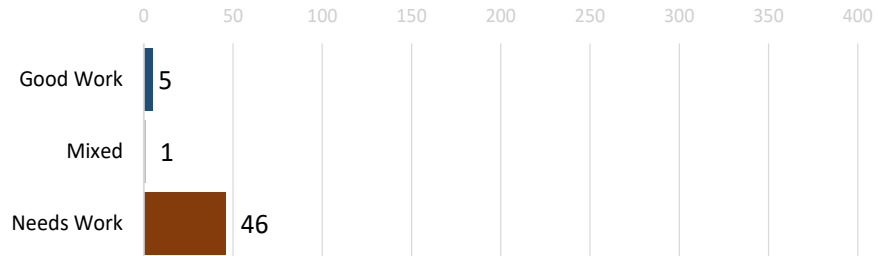
- “Have transportation for clients.”
- “They can take me somewhere when I need to go.”
- “Maybe getting transportation. I eventually got help getting a cab, but it took a while.”
- “Maybe more medical transportation services.”

52 of the 1,071 clients who commented (5%) mentioned benefit levels.

PERCENT



NUMBER



KEY FINDINGS

Nearly all comments about benefit levels (88%) were suggestions for improvement.

- A small number of clients mentioned how increased benefit levels helped them.
- Some clients mentioned how high inflation has lessened the positive impact that cash benefits can have. A few want rules to be updated so they can use the money to purchase other necessities in addition to food.
- For programs that offer hours rather than financial assistance, many clients want more of those hours to help them, such as chore service and job coaching.

Our clients speak . . .

“
INCREASE THE AMOUNT OF FOOD STAMPS THAT WE RECEIVE. ALSO, MORE HOURS FOR HOME ATTENDANT AVAILABLE.
 ”

A few clients appreciated the amount of benefits they received.

- “During the pandemic I got \$20 added to my food stamp card and that was helpful.”
- “It is great to receive payment for the support of the child that we adopted.”
- “They have been able to increase his funding to get the services he needs.”

Many clients want financial benefits to be increased.

- “Increase food benefit due to inflation.”
- “The food benefit is not enough with how costs keep rising.”
- “Rates need to keep up with inflation. I’ve been a foster parent for 20 years and there has been only one rate increase.”
- “Give seniors more than \$23 a month to live on for food.”
- “Give us more money as I’m on fixed income and it’s not enough.”

“Increase the amount of food stamps you get.”

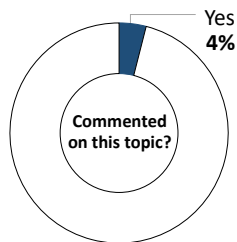
“People need basic necessities outside of food. Other than adding a few dollars to the EBT card, there should be a percentage available for other necessities.”

Others want more hours for services.

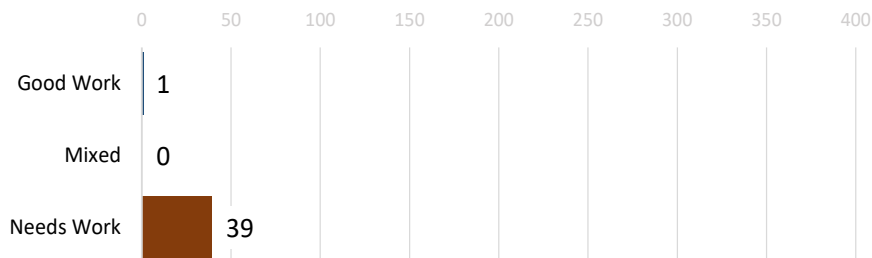
- “I wish they could give me a third day per week for help.”
- “Have more hours available for chore services.”
- “Provide a job coach for longer than 90 days.”
- “[I want] a full day early childhood education program; he only gets morning or afternoon.”
- “They could help with more training available so that it would not be so hard to find a job.”
- “Have more service available for the kids that have special needs.”

40 of the 1,071 clients who commented (4%) mentioned health care provider availability.

PERCENT



NUMBER



KEY FINDINGS

All but one client commenting on health care provider availability indicated a need for improvement.

- Some clients were unable to find providers that were accepting new patients.
- Many clients described challenges accessing mental health and dental services. Some were unable to find any providers who offered the services they need, while other struggled with finding providers that accepted Apple Health/Medicaid insurance.
- Others noted regional limitations with finding services and providers that accept Apple Health/Medicaid.

Our clients speak . . .

“
MEDICAL BENEFITS ARE LACKING PROVIDERS FOR ADULT SPECIALTY CARE, DENTAL, AND VISION. NEED MORE PROVIDERS.
 ”

Provider availability is often a barrier for clients.

“I am having a very difficult time getting a provider in Washington State. I had United Health and no providers would accept new patients.”

“You have to call around to get someone who takes your insurance.”

“Have more providers available.”

“It’s hard to find health care providers who are taking new patients.”

“Have more health care people that accept Medicaid.”

Clients frequently mentioned a need for mental health and dental providers.

“Not enough dentists accepting new patients in our area.”

“Provide more providers doing mental health service for trauma (PTSD).”

“It was hard to find a mental health provider that takes the state insurance.”

“It is hard to find a dentist in Clallam County that accepts Apple Health.”

“Medicaid covers dental, but there are no dentists that take Medicaid. There’s no profit in it.”

“More providers for mental health services, especially with individual counseling services.”

“They need to have more mental health facilities. I stopped going to Sound Mental Health because I’ve had four counselors in a year.”

Clients also want more care options closer to home.

“Only three doctors in my county take Apple Health, and only one out of three dentists.”

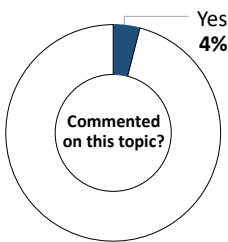
“Just having more providers that accept Medicaid in my area would be so helpful!”

“Not enough ABA [Applied Behavior Analysis] therapists in my area, Thurston County, who will take Apple Health (Molina) because DSHS does not pay enough.”

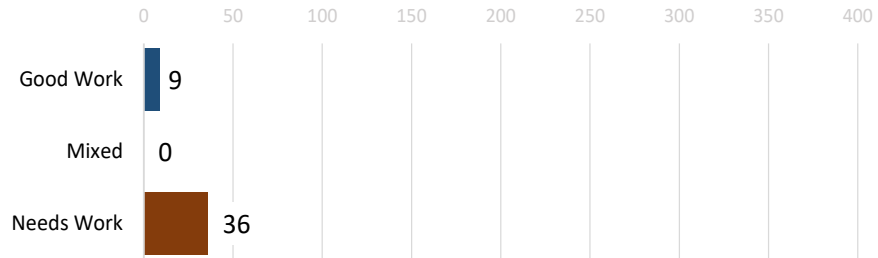
“I think provide more clinics where I live.”

45 of the 1,071 clients who commented (4%) mentioned the level of health-related benefits.

PERCENT



NUMBER



KEY FINDINGS

The majority of clients (80%) who mentioned health benefit levels do not feel that current levels are sufficient for their needs. A few were grateful for the health care they were able to access through social and health programs.

- Clients like being able to obtain medical care they might otherwise not be able to access.
- However, others requested coverage for a variety of services, including vision and dental care.
- Many clients wanted increased mental health care access and coverage, making it the most common request about health benefit levels among clients who commented.
- Some clients addressed the lack of certain benefits or services, including alternative care options, specific lab tests, and pain management.

Our clients speak . . .

“
EXPAND MENTAL HEALTH, THERE ARE SO MANY PEOPLE WHO NEED IT.
”

A few appreciated the access they had to quality medical care.

“I appreciate the medical care my mother receives and that she has vision and dental, which she has not had before.”

“They helped me with my meds and everything.”

“I like the coverage and accessibility.”

“It has been good to have Apple Health for the kids so when they need to go to the emergency room it is covered and is a blessing.”

Many said coverage was not sufficient.

“Dental should cover more stuff for kids.”

“Provide us with eye care, especially the glasses.”

“Maybe if there was better dental services, including oral surgeons who accept Medicaid.”

“My treatment center requires a UA [urinalysis] every two weeks, but my insurance won’t pay for that many UA’s.”

“More specialty doctors available under Medicaid.”

Some asked for expanded coverage of mental health services.

“Maybe more extensive counseling, different types of counseling in the treatment program.”

“The mental health side could use a lot of help. I think because of COVID, everyone needed a counselor.”

“It would be super cool if psychiatric help was more readily available.”

“More options to help with mental health and housing.”

“More mental health services available in our area.”

A few clients wanted alternative care options.

“Cover more of the naturopathic treatments and specific lab tests that are more precise than routine blood tests.”

“Expand coverage of services such as pain management.”

“One of the things [to improve] would be that it doesn’t cover dentists, glasses, or massages.”

Equity and Disparity

Washington State’s social and health services organizations have a strong commitment to diversity, equity, inclusion, and belonging.

Central to this commitment is a responsibility to ensure that all clients are treated fairly. In this chapter, we apply an equity lens to the client experience by addressing two questions:

- 1. Do clients feel that they have been unfairly treated due to race, culture, age, gender, sexual orientation, or disabilities?** About 6% of clients report that they have been treated unfairly by social and health services staff; this is slightly more than the 4% who reported unfair treatment in 2021, but consistent with trends since 2013. Black or African American clients are significantly more likely than others to report unfair treatment. Clients who report that they were treated unfairly are less satisfied on 13 of 15 standard questions about the client experience.
- 2. Are there racial disparities in client perceptions of social and health services?** Analysis of the responses to the standard structured questions by race and ethnicity show that Asian, Native Hawaiian or other Pacific Islander, and Hispanic or Latino clients report higher satisfaction with social and health services than clients in other racial-ethnic groups.



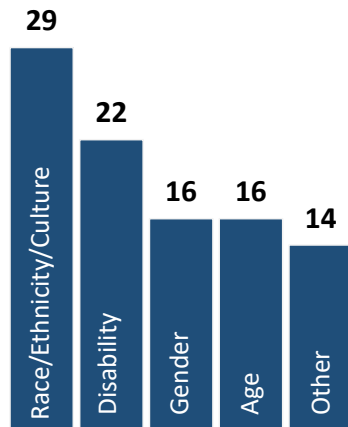
Getty Images/ViewApart

In the past two years has there been a time when you felt social and health services staff treated you unfairly because of your race, culture, age, gender, sexual orientation, or disabilities?

68 of the 1,157 respondents (6%) answered “Yes” to the question about unfair treatment.

RESPONSE

What was the basis for unfair treatment?



Total exceeds 68 because some indicated more than one basis for unfair treatment.

DETAIL

The chart at left shows the basis for unfair treatment cited by respondents. Of the 68 clients who said they have been treated unfairly in the past two years:

- 29 said it was due to race, ethnicity, or culture.
- 22 said it was due to disabilities.
- 16 said it was due to gender.
- 16 said it was due to age.
- 14 said it was due to other reasons, including sexual orientation, immigration status, and criminal history.

About 3 of 10 clients (29%) who reported being treated unfairly cited more than one reason for why. Most commonly, clients said that their unfair treatment was due to race/culture and age (n=8) and race/culture and gender (n=8). In addition, Black clients were more likely than non-Black clients to report unfair treatment (13% vs. 5%, $p < .05$; differences for other groups are not statistically significant).

TREND

As shown in the table below, responses to the question about unfair treatment have been steady since 2013, with the exception of 2021 when a low of 4% of clients reported unfair treatment.

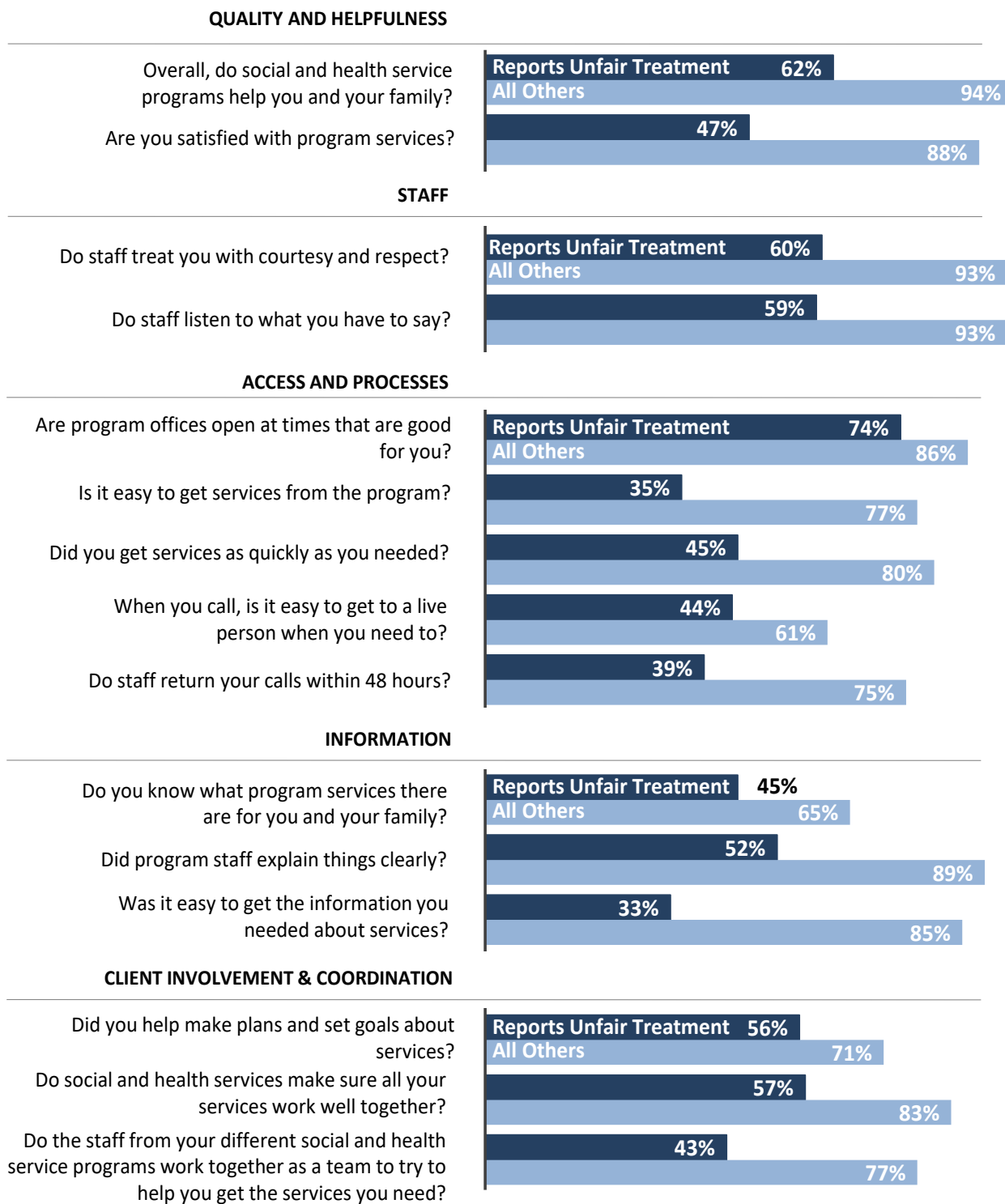
2007	2009	2011	2013	2015	2017	2019	2021	2023
7%	9%	9%	7%	7%	7%	6%	4%	6%

How do perceptions of unfairness shape the client experience?

Clients who report that they have been treated unfairly are less satisfied on all structured questions in the survey; these differences are statistically significant for 13 of the 15 questions ($p < .05$; full results on next page). For example, only 45% of those who say they were treated unfairly say they know what services are available, compared to 65% of clients who do not report unfair treatment. Similarly, clients who reported unfair treatment are less than half as likely as other clients to say it was easy to get services from the program (35% vs. 77%). This pattern across the structured questions suggests that clients who feel unfairly treated have a less positive client experience across multiple dimensions, including dimensions that may not be directly related to the unfair treatment.

Clients Who Report Unfair Treatment Are Less Satisfied on All Dimensions of the Client Experience¹

Percent who Answered “Yes” or “Strong YES”



¹ All differences are significant at $p < .05$ except “Are programs open at times that are good for you?” and “Did you help make plans and set goals about services?” ($p < .10$).

Our clients speak . . .

“
**AT THE BEGINNING
 OF A PHONE CALL THE
 REPRESENTATIVE
 SHOULD ASK IF THE
 CLIENT NEEDS ANY
 ACCOMMODATIONS,
 INSTEAD OF LEAVING
 IT UP TO THE PEOPLE
 TO SELF-ADVOCATE.
 IT IS NOT
 NECESSARILY JUST
 DISABLED
 INDIVIDUALS. IT ALSO
 COULD BE SOMEONE
 STRESSED THAT
 NEEDS THEM TO
 SLOW DOWN.**

Clients shared stories of unfair treatment.

“There were times when we felt that we were told what to do because we were a young couple. We felt talked down to.”

“Because [my son] is non-communicative, he experiences unfair treatment often. They always assume he needs an aide without even meeting him.”

“One social worker told me I was lazy and not trying hard enough. I was having a problem with the death of my family member, and he said ‘So what. It has nothing to do with my case.’”

“They treated me like I didn’t know anything because I was so young. My parents are immigrants, and my mother had a bowel issue, but they were reluctant to treat her because she doesn’t speak English. They seemed to ignore her symptoms because she couldn’t describe them in English.”

“They assume I am doing drugs because I am Black and where I live. I have communication problems and they do not communicate this from social worker to social worker.”

“I went into an office and was asking questions and the way they were talking to me and answering the questions made me feel like they didn’t respect me. They were talking really fast, and I can speak and understand English, but I still need people to repeat things and explain things sometimes. They were talking a certain way and it made me feel like I was asking too many questions.”

“I feel that because I am a Black male that is paying my child support that I don’t get the same fair treatment as a white male does or any other race. It seems that there is already a pre-notion that I am not there to take care of my child.”

” ***Some clients felt that staff treated them unfairly.***

“Mostly they are not kind to me as a customer.”

“I’m not sure if it was because of disabilities or not, but some staff have treated me very rudely. They may have just been having a bad day.”

“Treated me like I was worthless.”

“Staff behavior seems very dismissive.”

“They’re judgmental. I have sores from a spinal infection and they’re looking at me weird like they don’t want me to touch anything.”

“Staff was very demeaning and blaming me for mistakes done in my care by other CSO staff. It brought me to tears.”

“They treat you as if you’re stupid or crazy if you’re on SSI.”

“When I go in the CSO office, they don’t know that I have a disability at first, but when I tell them I do, they then talk down to me like I am stupid. There is a big difference on how they treat me when I mention my disabilities.”

Some clients had a hard time accessing services.

“I don’t know how to explain it right. People who know English and are American, they are provided with better services. Since we are immigrants, it is worse to get services. It is not as easy. If I were American, it would be a lot easier.”

“Programs send mail, but I can’t read it. Reading things to me over the phone or sending text messages is much better. I have an app on my phone that reads texts for me.”

“I’ve been denied pain management treatment for my disability although my doctor recommends it.”

“Maybe more diversity in their counseling. I’m a person of color and there was no one who could speak to me. I feel like an alien, and they couldn’t direct me to the right people.”

“People need to understand sending mail or referring me to a website is not helpful because I’m legally blind. I feel very discriminated against because of my disability.”

“More text options would be great, especially for people with sensory issues. I mostly respond to texts as I am autistic.”

“A lot of the people will only talk to support staff first. They try to take away our voices. People with disabilities always want our voices to be heard.”

“In terms of disability, I have to repeatedly advocate for accommodations when I go to the CSO office. I don’t do well when there is a noisy environment. I am autistic and I cannot focus on a conversation if it is noisy in the office. It would be good to have them ask about accommodations as a starting point, and this would make the meeting easier. Ask people what accommodations they need.”

“I called the CSO call center. They used lingo I did not understand, like what they use in the office. I did not get an answer to a simple question, and it is still not resolved.”

In addition to analyzing client responses to a direct question about unfair treatment, we also examined racial and ethnic differences in responses to the standard survey questions. Comparisons were made between clients who identified with each racial-ethnic group² and all others; for example, Hispanic clients were compared to non-Hispanic clients, Native American clients were compared to non-Native American clients, etc. Clients could be in more than one group, e.g., clients who identify as Asian and Black or African American are included in both the Asian group and the Black group.

The chart on the next page shows statistically significant comparisons by race and ethnicity on the structured questions. All comparisons are available in Appendix E.

KEY FINDINGS

- Clients who identified as Asian or Native Hawaiian or other Pacific Islander³ gave more positive answers than others about their involvement in making plans and setting goals; services working well together; and staff working together across programs to get them the help they need. These patterns are similar to what was observed in 2021.
- Hispanic or Latino clients gave more positive answers than others on seven items: ease of getting services; ease of speaking with a live person over the phone; timeliness of services; ease of getting information about services; staff explaining things clearly; satisfaction with services; and overall helpfulness of services. These differences can be partially explained by the varying proportions of adult and child clients in the survey by race/ethnicity. Hispanic clients were about three times more likely than others to be children. Because satisfaction rates, in general, are higher when the questions are in reference to a child client, the differences we observe on these seven items may reflect the higher proportion of children among Hispanic clients. Statistical tests that control for whether the client was an adult or a child show that the differences between Hispanics and non-Hispanics are reduced (and, for four items, become non-significant) when this is taken into account.⁴ The three items that retain a significant differences between Hispanics and non-Hispanics are ease of getting services; timeliness of services; and overall helpfulness of services.
- Other differences that were observed in 2021, including lower satisfaction on several health and social services items for clients who identify as Black, white, and multiracial, were not observed in this year's survey.

² Groups include American Indian or Alaska Native (AIAN), Asian, Black or African American, Hispanic or Latino, Native Hawaiian or other Pacific Islander, and White.

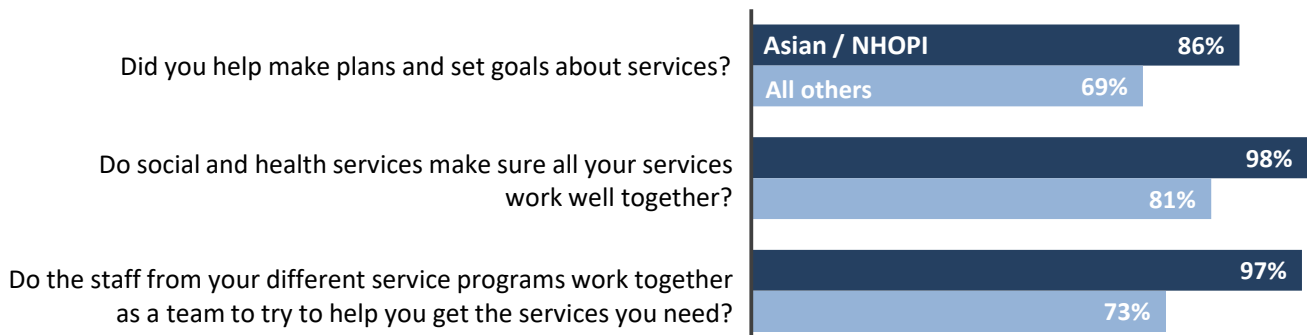
³ Clients identifying as Native Hawaiian or other Pacific Islander (n=19) were grouped with those identifying as Asian (n=59) to facilitate statistical comparison. General patterns were similar when Asians and Native Hawaiians or other Pacific Islanders were analyzed separately. For all subgroup comparisons, see Appendix E.

⁴ For other racial/ethnic groups, controlling for whether the client was an adult or a child did not change the pattern of results.

Statistically significant comparisons by race and ethnicity⁵

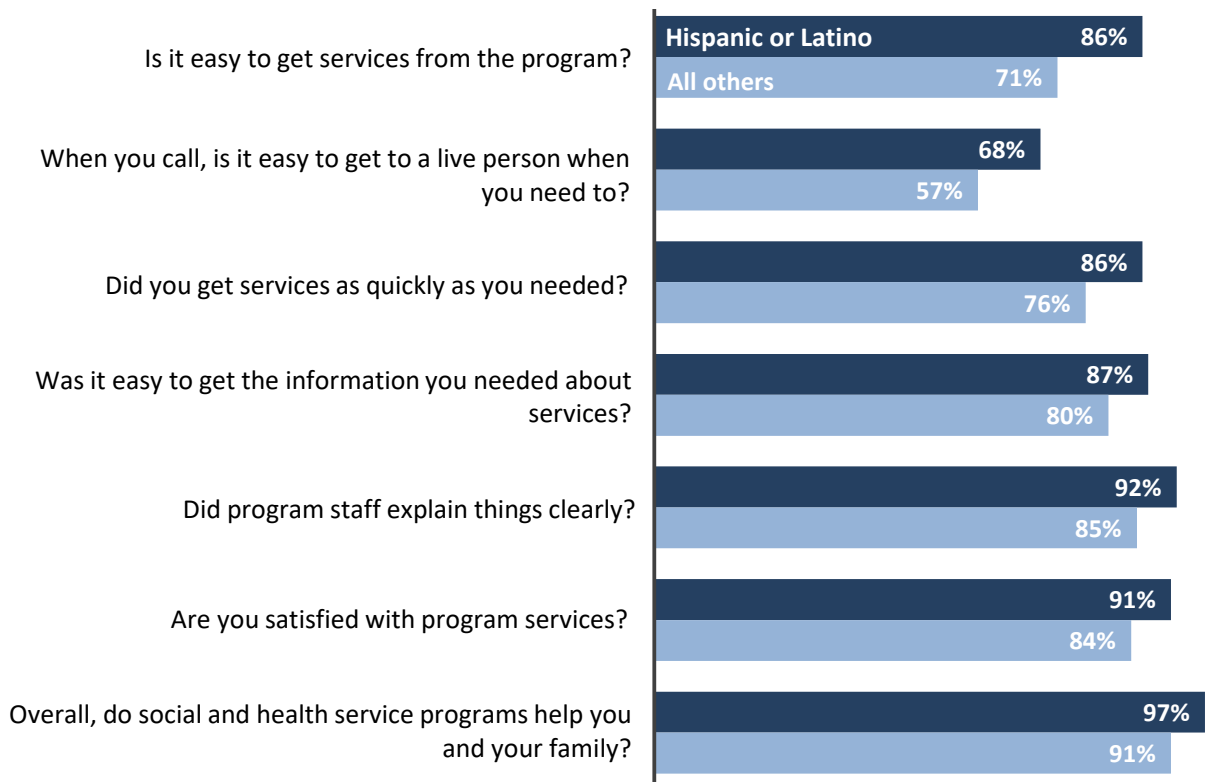
Asian / Native Hawaiian / Other Pacific Islander (n = 75)

Percent who Answered "Yes" or "Strong YES"



Hispanic / Latino (n = 186)

Percent who Answered "Yes" or "Strong YES"



⁵ Chart displays questions with statistically significant differences ($p < .05$) between group members and non-members. All comparisons are shown in Appendix E.

Appendices

Contents

APPENDIX A:	Methods Background and Purpose of the Survey Survey Instrument Previous Changes in the Survey Sample Sampling Considerations Eligibility Factors Interview Methods Response Rate Methods Quantitative and Qualitative Analysis
APPENDIX B:	Cooperation and Completion Rates
APPENDIX C:	Survey Questions
APPENDIX D:	Weighting
APPENDIX E:	Responses by Sub-Group
APPENDIX F:	Themes from Narrative Questions: Glossary and Report
APPENDIX G:	Survey Instrument



"Peaceful Lake Day" /2021 Employee Survey Photo Contest/Martha Burriss

Methods

Background and Purpose of the Survey

The Washington State Department of Social and Health Services (DSHS), Health Care Authority (HCA), and Department of Children, Youth, and Families (DCYF) are committed to continuous quality improvement in services to the residents of Washington State. Agency leadership commissioned this recurring client survey to systematically incorporate customer feedback into the agency's strategic planning process. This survey assesses clients' satisfaction with social and health service programs and provides guidance to agency leadership for planning and risk management.

The measures in this survey were derived from the DSHS Balanced ScoreCard and many of them have been included in the agency Core Metrics, Accountability ScoreCards, the Governor's Performance Agreement, GMAP (Government Management Accountability and Performance) reports, and Results Washington. Beginning with the initial survey in 2001, the survey process provides baseline and repeatable measures. As the survey is repeated, changes in client perceptions can be tracked across time. Additionally, open-ended questions are included in the survey to provide an opportunity for clients to communicate more specific feedback, perceived problem areas, and suggestions for improvement.

Survey Instrument

A cross-department survey team led by the DSHS Research and Data Analysis (RDA) Division developed the core set of survey questions for the first Client Survey in 2001, when Medicaid, Substance Use Disorder Treatment, Mental Health Services, and Children and Family Services were still programs within DSHS. RDA staff completed an extensive review of the customer satisfaction literature and collected samples of customer satisfaction surveys from programs and regions throughout DSHS. The survey team used these reviews to identify the key attributes of client services to be addressed. The final instrument addresses the major client satisfaction attributes identified by the team. A special effort was made to craft questions that are easy to comprehend.

The first 13 questions refer to specific programs. Lead-ins to the questions help clients identify what services they have received from that specific program, and the questions themselves are customized to reflect the specific program and the respondent's relationship to the client (self, parent, guardian, family member, etc.).¹ The final drafts of the lead-ins and questions were reviewed by agency leadership, each program, and the survey team, and were pre-tested several times. Clients who utilize more than one program answer the 13 program-specific questions several times — once for each program utilized. After the program-specific questions, additional questions address system-wide issues. Complete lists of survey questions can be found in Appendices C and G.

¹ For example, the question about service knowledge could be read to the client or their representative as: "Do you know what mental health services there are for you?" or "Do you know what medical assistance services there are for your child?" Certain questions are also rephrased for the Department of Children, Youth, and Families because many DCYF services are mandatory in nature. For example, the question which usually reads, "Is it easy to get help from (specific program)?" is rephrased because clients from mandatory programs generally do not seek initial assistance. The customized question for DCYF reads: "If you need help from Children and Family Services, is it easy to get that help?" Likewise, two questions about the Division of Child Support addressing client involvement were skipped because they were not applicable to this program. Appendix C contains a list of the standard wording for the basic survey questions. Appendix G contains a sample survey for a hypothetical client who utilized all programs. This sample script does not show all possible permutations of the survey. The script with all possibilities written out is more than 100 pages long, with several versions of a question on each page.

Previous Changes in the Survey Instrument

The standard survey questions have remained fairly stable since the first Client Survey in 2001.

2023 Changes. Minor changes were made to the survey instrument.

- For the question about the convenience of program hours (“Is the office open at times that are good for you?”), “the office” was replaced by a reference to the specific program being asked about, e.g. “Is DDA open at times that are good for you?”, “Is Aging & Long Term Support open at times that are good for you?”, “Are the medical providers open at times that are good for you?”, etc.
- The timeline for staff returning phone calls was extended from 24 hours to 48 hours: “Did DDA staff return your calls within 48 hours?”, “Did Aging and Long Term Support staff return your calls within 48 hours?”, “Did medical providers’ staff return your calls within 48 hours”, etc.
- Some DCYF clients in the sample had received only Adoption Support Services and had no recent contact with the agency; these clients had a difficult time answering many of the program questions. To address this, we added the following questions for DCYF clients who said they had not had any services, contact, or payments in the past two years:
 - Can you tell me if you have ever adopted a child while living in Washington?
 - In what year did you adopt your child?
 - Have you ever received adoption support payments?
 - If yes: What was the last year you received payments?
 - If yes: When was the last time you had any other contact with Child and Family Services?

Clients whose last payment or contact was in 2021 or more recent were asked the standard DCYF questions. Those whose last payment or contact was prior to 2021 skipped the DCYF questions.

- The separate ethnicity and race questions were combined into a single race-ethnicity question.
 - Question text revised to: “Which one or more of the following would you say is your race or ethnicity?” with “Hispanic or Latino” listed as one of the response options.

2021 Changes. As the result of a comprehensive review and program feedback, five standard questions were removed in the 2021 survey to reduce administration time and limit redundancies.

- The following standard questions were removed:
 - “Does [program] do good work?”
 - “Did staff who helped you/your family understand your needs?”
 - “Is it easy to get to the [program] offices?”
 - “Did you/your family have a say in what kind of services you get?”
 - If 2+ programs: “Thinking of all (or “both of”) the programs together, have your social and health services programs done good work?”
- The coordination questions (“Do social and health services make sure all your services work well together?” and “Do the staff from your different social and health service programs work together as a team to try to help you get the services you need?”) were asked of clients served by two or more programs, instead of three or more programs.
- Several revisions were made to the question asking clients to identify their race(s) for compatibility with current state and federal standards.
 - Question text revised to “Which one or more of the following would you say is your race?” from “What race group best describes you?”
 - Response options were revised to include “Asian” and “Native Hawaiian or Pacific Islander” as separate groups.

- Clients who selected more than one race were asked a separate question: “Of these groups [read selected groups], would you say that one best represents your race?”
- Several questions were added to the Medicaid/Apple Health survey about client use of telehealth services.
- Several revisions were made to questions concerning Economic Services’ Community Services Division.
 - In all questions and in the introductory script, all references to “Economic Services” or “Economic Services Administration” were changed to “DSHS Community Services.”
 - References to “food stamps” were changed to “food benefits.”
- References to “Support Enforcement” were removed from the introductory text of the Division of Child Support surveys.
- Several changes were made to the introductory text of the Substance Use Disorder survey to reflect the integration of behavioral health and primary care under Medicaid/Apple Health.

2019 Changes. No standard questions were added or removed in the 2019 survey.

- In the 2019 survey only, respondents who used five or more programs² answered a subset of the survey questions in response to concerns about interview time, comprehension of questions, and issues of recall. A total of seven standard questions were skipped, including the four that were removed in 2021. See Appendix C of the 2019 Client Survey Report for a list of the seven questions that were skipped.
- Several revisions were made to reflect organizational changes.
 - References to the Behavioral Health Administration (BHA) were removed as Substance Use Disorder Treatment and outpatient Mental Health Services were transferred from BHA to the Health Care Authority (HCA).
 - Questions formerly asked with respect to the Division of Child & Family Services under the Children’s Administration (CA) were changed to reflect that Administration’s transfer to the new state agency, Department of Children, Youth, and Families (DCYF). References to the “Children’s Administration” were changed to “Department of Children, Youth, and Families.” References to “Child & Family Services” were changed to “Children and Family Services.”
 - References to “DSHS and HCA” were changed to the more general “social and health services agencies” to incorporate DCYF.
- The “customized” personal doctor questions for medical assistance clients were removed.

2017 Changes. No standard questions were added or removed in the 2017 survey.

- Several revisions were made to reflect organizational changes.
 - The Behavioral Health and Service Integration Administration (BHSIA) was renamed as the Behavioral Health Administration (BHA).
 - The Juvenile Justice and Rehabilitation Administration (JJRA) was renamed as the Rehabilitation Administration (RA).
- Noncustodial parents were asked two questions that had previously been suppressed for this group: “Do you know what Child Support services there are for you and your family?” and “Did Child Support staff understand your needs?”
- Several “customized” questions were revised for medical assistance clients in order to improve comprehension and account for changes in programs and terminology.

² In the 2019 survey, 74 of 1,222 respondents (6%) used 5 or more programs.

- The question about a client’s personal doctor was simplified: “A personal doctor is the one you would see if you need a check-up, or get sick or hurt. Do you have a personal doctor or nurse?”
- The question about the amount of time one waits before trying to get care and actually seeing a provider was changed to be more specific to urgent care: “How long did you have to wait between trying to get urgent care and actually seeing a provider?”
- References to medical “coupons,” Healthy Options, and Basic Health were removed.

2015 Changes. No standard questions were added or removed in the 2015 survey.

- Several revisions were made to reflect organizational changes.
 - Some questions formerly asked with respect to the Aging and Disability Services Administration were changed to reflect that Administration’s division into three entities in 2013. References to ADSA-DD (Developmental Disabilities) and ADSA-DBHR (Mental Health) were unchanged, as the questionnaire language did not specify the Administration involved. References to “Aging and Adult Services” (ADSA) were changed to “Aging and Long-term Support” (ALTSA). The Division of Vocational Rehabilitation was transferred to the Juvenile Justice and Rehabilitation Administration (JJRA). Medicaid services were transferred from DSHS to the Health Care Authority as Apple Health.
- Several revisions were made to questions concerning the Health Care Authority (Medicaid):
 - In all questions, “Medicaid” was changed to “Apple Health/Medicaid.”
 - In the introductory script, the definition of a medical provider was changed to “all doctors, nurses, or other therapists who were paid by the state.”
 - The question about using Apple Health/Medicaid insurance was revised: “Have you used your state Apple Health or medical insurance to get medical or dental services in the past two years? Or does anyone else in your household get medical services from Apple Health or Medicaid?” [If needed] “Has the state paid for any part of your medical care in the past two years? Is it possible that you used Apple Health, Medicaid or other state programs like CHIP, Healthy Options or Basic Health to get that care?”
 - The question about calling the toll free Apple Health/Medicaid number was substantially revised to: “We want to know if you have called the Apple Health/Medicaid 800 number in the past two years. This phone number is found on the back of your Apple Health Medicaid Services Card and in mailings from Apple Health. The Services Card is the blue card with the Washington State seal and “Provider One” on the front. Have you called the Apple Health/Medicaid 800 number in the past two years?”
 - The question “Did you and your family help make plans and set goals about medical services?” was changed to “Did you and your family help your medical providers make plans and set goals about your health and health services?”
 - Questions about Urgent Care were substantially revised: “In the last 6 months, did you (client) ever need care right away for an illness, injury, or condition?” [IF YES] “Did you go somewhere other than the Emergency Room?”
 - Questions referring to a “personal doctor” were changed to “a personal doctor or nurse.”
 - The question about discrimination, first introduced in 2007, was edited slightly to reflect organizational changes, substituting “DSHS or Health Care Authority” for “social and health services.”

2009 Changes. At the suggestion of experienced interviewers, the order of questions was rearranged slightly. The wording of a few other questions was changed to increase clarity:

- Addition of the word “set” to a client involvement question. The revised question is: “Did you help make plans and set goals about services?”
- Replacement of the word “facts” with “information” in one of the information questions. Too many respondents misheard the word “facts” as “fax.” The revised question is: “Was it easy to get the information you needed about services?”
- Change in wording for one of the client involvement questions. The old question was: “Were you involved in making choices about your services?” Many clients felt this was repetitive of the other client involvement question: “Did you make plans and set goals about services?” The replacement question was: “Do you have a say in what kind of services you get?”
- Rewording the discrimination question which was introduced in 2007. The revised question reads: “In the past two years has there been a time when you felt staff treated you unfairly because of your race, culture, age, gender, sexual orientation, or disabilities?”

2007 Changes. As the result of a comprehensive review, several major changes in question wording and format were made between the 2005 and 2007 surveys. These changes included:

- Change from using statements (“It is easy to get services from the program.”) to questions (“Is it easy to get services from the program?”).
- Change in standard response alternatives. In previous surveys, the standard response choices were: Strongly Agree, Agree, Neutral, Disagree, Strongly Disagree. In the 2007 survey, the choices were changed to: Strong Yes, Yes, Neutral, No, Strong No.
- Change in wording for one of the coordination questions. The old question was: “Someone from DSHS helps me with all of my services.” This question was confusing for many clients; it was not clear whether “someone” referred to a single person or multiple persons. The replacement question was: “Do staff from your different social and health service programs work together as a team to try to help you get the services you need?”
- Addition of another question on telephone access, reflecting the trend toward call centers: “When you call [Program Name], is it easy to get to a live person when you need to?”
- Addition of a trial question about discrimination at the end of the survey with a follow-up open-ended question for those who answer “yes.”
- Addition of noncustodial parents who are DCS clients to the survey sample (custodial DCS parents were added in 2005).

Sample

RDA staff generated the stratified random sample using the Client Services Database (CSDB) and Client Outcomes Database (CODB), which contain client service and outcome data from all social and health service programs, supplemented by the FamLink case management system and Division of Child Support databases. For each of the identified client programs listed below, they drew a random sample of all clients who received services from that program between May 2021 and April 2022. Sufficient clients were selected to reach the goal of at least 100 completed surveys from each program area. Additional clients were oversampled from programs with the largest share of the population, to ensure appropriate representation in the sample while reducing the impact of weighting on sample precision (sample sizes by program are shown in Appendix B). Programs sampled include:

Department of Social and Health Services

- Aging and Long-Term Support Administration (AL TSA) Long Term Care – Home and Community and Residential Care Services Divisions
- Developmental Disabilities Administration (DDA)
- Division of Vocational Rehabilitation (DVR)
- Economic Services Administration (ESA)
 - Community Services Division (CSD)
 - Division of Child Support (DCS)
 - Custodial Parents
 - Noncustodial Parents

Health Care Authority

- Apple Health (Medicaid)
- Behavioral Health and Recovery
 - Substance Use Disorder Treatment
 - Mental Health Services

Department of Children, Youth, and Families³

- Children and Family Services

Sampling Considerations

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

- If a client selected in the initial samples drawn from Behavioral Health and Recovery was between the ages of 13 and 17 years old, that client was not included in the sample. This protects client confidentiality, since youth between the ages of 13-17 are able to access mental health and substance use disorder treatment services without parental knowledge or consent. When clients between the ages of 13 and 17 were selected from other programs, such as Economic Services Administration or medical assistance, these clients were included in the survey and their parent, guardian, or other adult proxy were interviewed about the client's experiences, but no questions were asked about mental health or substance use disorder treatment services.
- Only adult clients (age 18 and older) were selected in the sample from the Department of Children, Youth, and Families (DCYF). The selection of adult DCYF clients ensured that all

³ Clients are not selected from the DCYF Juvenile Rehabilitation program (JR). Experience has shown that a survey administered after youth are released from supervision is not an effective or representative method to obtain JR client feedback. JR conducts surveys while youth are under their supervision.

families receiving services from DCYF could be selected to participate in the survey, because the DCYF database is organized by families and always includes co-residing parents. Survey questions regarding DCYF inquired about services for all family members. In some cases, children who were selected as part of the survey sample from other program areas (for example, the Developmental Disabilities Administration) also had received services from DCYF. In those cases, the responsible adult was asked about all social and health services the selected child received, including services from DCYF.

- The DCYF sample was taken from the best available client list, which is partially derived from the agency-wide Client Services Database (CSDB), but supplemented from other sources.
- The samples of custodial and noncustodial child support clients selected from the DCS program were randomly chosen from among clients with documented interaction with DCS. These included clients who had online, mail, or phone interactions with the program documented in the DCS Case File Imaging system and the DCSONline system. Clients chosen from other programs were asked the DCS questions if they had an open case with DCS in the sample period.
- Substance use disorder treatment and mental health samples excluded those cases receiving medication only, services only from a primary care provider, or detox only, and who had no other substance use disorder treatment or mental health services. These clients have typically had no interaction with substance use disorder treatment or mental health programs. Medication only services are often provided by primary care providers and are covered in the medical care portion of the survey.
- The Economic Services Administration Community Services Division (CSD) sample excluded clients who received food assistance through AL TSA, DDA or WASHCAP, and received no other CSD services. These clients typically have had no interaction with CSD staff. Interactions with AL TSA, DDA staff are covered in the survey questions covering those programs. WASHCAP is a federal Social Security Administration program.
- The Apple Health/Medicaid sample included all clients who were covered by Apple Health/Medicaid health programs during the survey period. Clients with Third Party Liability (i.e., anyone with Title 19 Medicaid equivalent coverage by another provider, such as Medicare or employer-provided insurance) were not included. Sample inclusion was not dependent on whether the clients actually accessed medical services.

Eligibility Factors

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

- The client lives in a nursing facility. (Clients residing in adult family homes and boarding homes were included in the survey.)
- The client is receiving long-term hospitalization. (This includes state mental hospitals.)
- The client is physically or cognitively unable to complete the survey, and no guardian, family member, or other person who handles his or her affairs was available.
- The client is out of the country.
- The client is a member of the military and currently deployed.
- The client is incarcerated in a jail, prison, or JR institution.
- The client is currently in an inpatient drug or alcohol program.
- The client is homeless and could not be contacted through any means listed in available records.

- The only possible respondent for a client is a DSHS-paid provider.
- The program has no record of the client, although the client appeared in the database sample from said program.
- The client received case management services only and had no actual contact with the program.
- The client has a confidential address.
- The client is deceased.

Interview Methods

Telephone interviews began on October 13, 2022 and ended on April 26, 2023. When necessary, more than 20 attempts were made to contact each member of the sample. Before the interviews, survey staff sent all sample members a notification letter that: (a) informed the client that an interviewer would be calling, (b) assured the client that all survey data would be confidential and not personally identifiable, (c) emphasized that the interview would be voluntary and would not affect the client’s status or benefits in any way, (d) told the client that all respondents who completed the survey would be entered in a random drawing to win one of 24 \$125 grocery certificates, and (e) provided a toll-free number to call to decline participation in the study. Clients or their representatives were afforded an opportunity to send or call in their correct address and phone number and to request survey administration in a language other than English. If the client was a child (under 18 years of age) or an adult incapable of consenting to the survey or answering the questions), then letters (and subsequent phone calls) were made to the person who acts as decision-maker for the client and/or interacts with social and health service programs on the client’s behalf.

Interviews were conducted using a variation of the model script shown in Appendix G, tailored to the specific client’s circumstances and pattern of social and health service use. The interviews started with assuring the respondent of confidentiality and the voluntary nature of the survey, and informing the respondent that he or she may choose not to answer any question and may stop at any time. The interviewer then asked the survey questions about the program(s) utilized by the client. The length of the typical interview varied from 10 to 40 minutes, depending on the number of social and health services utilized by the client. All of the telephone interviews were conducted by RDA Management Information and Survey Research interviewers working remotely, using DSHS-issued cell phones and a Computer-Assisted Telephone Interviewing (CATI) system created using SurveyMonkey®. The CATI system displays survey questions on a computer monitor, making it possible for the interviewer to read the question to the client and enter the response directly into the survey database. No identifying data are entered into the CATI system. When a translator was required, the RDA interviewer used a 3-way phone call to administer the survey with the assistance of an interpreter from a contracted service (Pacific Interpreters).

Response Rate Methods

The overall cooperation rate for the survey was 90% and the completion rate was 70%.⁴ These response rates are high for any survey but are especially remarkable for a survey of clients who may be difficult to reach. The main difficulties encountered in locating clients and completing interviews were:

- Many social and health service clients are highly mobile and do not maintain a permanent residence. This is particularly common among young adult clients (18 to 21 years old) who have recently been released from foster care or substance use treatment programs.
- Like many people, social and health service clients may screen their calls and do not always respond to survey calls.
- Most social and health service clients have low incomes, and a number do not have phones.
- Some of the older adult clients receiving Aging and Disability Services were too fatigued to complete the survey or found listening and responding too demanding.
- Some clients dealing with substance use, mental health issues, developmental disabilities, age-related concerns, or other problems may have difficulty understanding survey questions, or may find them to be intrusive.

Surveyors employed a number of measures to maximize response rates:

- **Skilled staff.** The telephone survey team includes experienced interviewers who were chosen for their survey experience. Several staff members are retired DSHS employees who had spent many years locating social and health service clients as part of Quality Assurance investigations and other DSHS business. These interviewers are highly skilled at using administrative records and other public sources to find a client's current address and phone number.
- **Advance notice.** Before clients were contacted by phone, we mailed a letter to them explaining the survey, stressing the importance of this opportunity to provide feedback, and assuring them of confidentiality. The letter also gave them an opportunity to send in updated phone numbers and addresses, and best times to call.
- **Incentives.** All clients who completed the survey were entered into one of two drawings for \$125 grocery gift cards. They were informed of this opportunity in the initial letter and at the time of the interview.
- **Multiple attempts.** Interviewers attempted to reach clients at many different times and made 20 or more attempts to reach each client. Upon reaching voice mail, interviewers left a message asking the client or representative to call them at a toll-free number (no more than one message within seven days).
- **Alternate contact methods.** Clients were given a toll-free number so that they could call in and complete the survey. Interviewers also worked with caseworkers and relatives to make arrangements to administer the survey to clients at convenient times and locations. These strategies were particularly useful for clients who did not have a home phone.
- **Languages.** If selected clients spoke languages other than English, staff administered the telephone survey in a 3-way conversation with interpreters from Pacific Interpreters. Respondents were contacted in the following languages: Amharic, Arabic, Burmese, Cantonese, Dari, Farsi, French, Haitian Creole, Korean, Mandarin, Oromo, Pashto, Punjabi, Russian, Somali, Spanish, Tagalog, Tongan, Ukrainian, and Vietnamese.

⁴ The cooperation rate is the ratio of the number of completed interviews to the number of eligible respondents who were contacted. The completion rate is the ratio of the number of completed interviews to the total number of potential respondents who are deemed eligible to complete the interview. See Appendix B for computation tables for the overall cooperation rate and completion rate for each program.

Quantitative and Qualitative Analysis

Quantitative analysis was conducted using SAS statistical software. To obtain results that can be generalized to all clients in the population, clients' responses were weighted according to each client's service profile (the specific combination of services that the client used). Thus, the final weighted sample reflects the service usage of all social and health service clients.⁵ An additional type of weighting was used to combine program-specific questions into an "All Program" response for this summary report. When a client is served by multiple programs, that client might answer the same question differently for each program. For example, a client might strongly agree it is easy to get DSHS Community Services but disagree that it is easy to get Mental Health Services. The answers pertaining to all of a respondent's programs are averaged to give a single "all program" answer to each question for that respondent.

Qualitative analysis of responses to the two open-ended questions was conducted using QDA Miner text analysis software. Each comment was manually coded into one of 10 major themes and 27 subthemes.⁶ Comments could contain more than one code. For example, the comment "Staff were kind but I had a hard time reaching them" would include two codes: "staff were kind" would be coded as "Staff Courtesy and Respect" and "I had a hard time reaching them" would be coded as "Phone/Staff Access." Where relevant, comment segments were also coded as "positive," "negative," or "other" (other = neutral or unknown). All coding was reviewed by an independent coder and any discrepancies were reconciled by consensus.

Code frequencies were computed using SAS statistical software and represent the number of *respondents* whose comments reflect that code. Two types of deduplication were used so that each theme or subtheme was counted only once per respondent.

- The first process deduplicates codes across the two open-ended questions so that the code is only counted once, even if it appears more than once in the respondent's comments.
- The second process deduplicates codes as subthemes are rolled up into major themes. For example, a respondent who made comments in both "Staff Courtesy" and "Specific Staff" is counted only once in the "Staff" major theme rollup.

Codes were identified as "mixed" sentiment when respondents include both positive and negative sentiment for the same code (e.g., "Some staff were helpful, but others were not."). This is a calculated field, based on the sentiment coding in QDA Miner.⁷

In cases where a respondent's sentiment was not consistent in the same subtheme or major theme, the following decision rules were applied:

Sentiment 1		Sentiment 2		Reported As
Positive	+	Negative	=	Mixed
Positive	+	Other	=	Positive
Negative	+	Other	=	Negative
Positive	+	Mixed	=	Mixed
Negative	+	Mixed	=	Mixed
Other	+	Mixed	=	Mixed

⁵ See Appendix D for more detail and the complete weighting table.

⁶ See Appendix F for the full list of themes and subthemes.

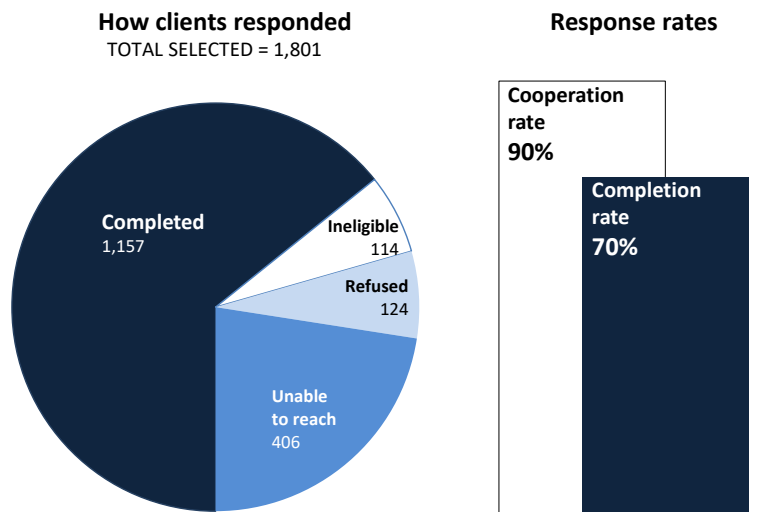
⁷ Prior to the 2023 Client Survey, "Mixed" and "Other" sentiments were coded and reported in a collapsed "Mixed/Neutral" category. For deduplication processes "Mixed/Neutral" + "Positive" = "Positive"; "Mixed/Neutral" + "Negative" = "Negative".

APPENDIX B

Cooperation and Completion Rates

The completion rate was 70% of sampled clients. Of the clients who could be contacted, 90% completed the survey. These response rates are high for any survey, but are especially notable for a survey of social and health service clients who tend to be highly mobile, structurally marginalized, and difficult to reach.¹

The chart below shows the disposition of all clients selected for the survey. To meet the goal of 100 completed surveys for each of the different programs, 1,801 clients were randomly selected as the survey sample. Of those, 406 clients could not be reached. Of those who could be reached, 1,157 people completed the survey, 124 refused to complete the survey, and 114 were found to be ineligible.



¹ Surveyors employed a number of measures to increase response rates. Descriptions of methods used to increase response rates, and of how clients are deemed ineligible, can be found in Appendix A.

Cooperation and Completion Rates, by Program²

	Department of Children, Youth, and Families – Children and Family Services											
	Health Care Authority – Mental Health Services											
	Health Care Authority – Substance Use Disorder Treatment											
	Health Care Authority – Medicaid/Apple Health											
	Economic Services Administration – Division of Child Support (Noncustodial Parents)											
	Economic Services Administration – Division of Child Support (Custodial Parents)											
	Economic Services Administration – Community Services Division											
	Division of Vocational Rehabilitation											
	Developmental Disabilities Administration											
	Aging and Long-Term Support Administration											
	TOTAL	AL TSA	DDA	DVR	CSD	DCS-C	DCS-N	MA	SUD	MH	DCYF	
A Survey Completed	1,157	104	103	104	156	105	105	166	104	101	102	
B Refusal	124	7	5	4	14	13	15	25	15	11	15	
C Subtotal: Found Eligible (A + B)	1,281	111	108	108	170	118	120	191	119	112	117	
D Found Ineligible	114	7	2	1	10	4	10	18	36	6	20	
E Subtotal: All Found (C + D)	1,395	118	110	109	180	122	130	209	155	118	137	
F Percent found ineligible (D/E)	8%	6%	2%	1%	6%	3%	8%	9%	23%	5%	15%	
G No Contact	406	12	15	17	26	65	21	97	69	32	52	
H No Contact/Estimated to be ineligible (FxG)	33	1	0	0	1	2	2	8	16	2	8	
I Subtotal: All Eligible (C+G-H)	1,654	122	123	125	195	181	139	280	172	142	161	
J Total in Sample (E+G)	1,801	130	125	126	206	187	151	306	224	150	189	
K COOPERATION RATE³ (A/C)	90%	94%	95%	96%	92%	89%	88%	87%	87%	90%	87%	
L COMPLETION RATE⁴ (A/I)	70%	85%	84%	83%	80%	58%	75%	59%	60%	71%	63%	

² Clients often receive services from several programs. For the purposes of response rate calculations, clients were categorized by the program from which the sample was drawn. So, in this chart, each client appears in the count for only one program.

³ The ratio of completed interviews to all potential respondents contacted.

⁴ The ratio of completed interviews to the total number of potential eligible respondents. Computation assumes that the ineligible proportion of "no contacts" is equal to the ineligible portion of those that were found. The methodology is based on the definitions of response rates issued by the Council of American Survey Research Organizations (CASRO) and the American Association for Public Opinion Research (AAPOR).

APPENDIX C

Survey Questions

The following is a list of the **standard questions** in the survey. All questions are customized to fit the respondent's relationship to the client (self, parent, guardian, family member, etc.) The first 13 questions were customized for each program. See Appendix G for a sample of the entire survey with sections for each client program.

1. Is (program) open at times that are good for you?
2. Is it easy to get services from (program)?
3. Do you know what (program) services there are for you?
4. When/if you call (program), is it easy to get to a live person when you need to?
5. Did (program) staff return your calls within 48 hours?
6. Did you get services as quickly as you needed?
7. Was it easy to get the information you needed about services?
8. Did (program) staff explain things clearly?
9. Did staff who helped you treat you with courtesy and respect?
10. Did staff who helped you listen to what you had to say?
11. Did you help make plans and set goals about (program) services?
12. Are you satisfied with (program) services?
13. Overall, has (program) helped you?

Two **coordination of services questions** were asked only if a client was served by two or more programs:

14. Do social and health services make sure all your services work well together?
15. Do the staff from your different social and health service programs work together as a team to try to help you get the services you need?

Three **open-ended questions** were asked of all respondents to gain a sense of clients' experiences with social and health services:

16. First, what do you like best about dealing with social and health services programs?
17. What is one thing social and health services can do to improve services?
18. If you have any additional comments or questions about this survey or about social and health service agencies in the State of Washington, I can note them now.

APPENDIX D

Weighting

Clients' responses were weighted according to service profile (the specific combination of services that the client used), so that the final weighted sample reflects the service usage of all social and health services clients.

The table below shows weighting for the combination of programs in the left-hand column. For example, the grey highlighted row (AE) shows that 30 clients in completed survey sample used Aging and Long-Term Support (A) and Economic Services from DSHS Community Services (E), making up 2.5929% of the 1,157 completed surveys. The number of clients who used this combination of services in the total population of social and health services clients in survey-eligible groups, from May 2021 to April 2022, was 22,226 (or 0.9155% of the total). In order for the survey results to be representative of the total population of social and health services clients, survey responses must be weighted so that the percentage of AE clients in the survey sample matches the percentage of AE clients in the social and health services population. Thus, the responses of the 30 survey respondents were weighted by a factor of 0.3531 so that they represent 10.5920 respondents – or 0.9155% – in the weighted survey sample.

Programs	Sample N	Sample %	Population N	Population %	Weight	Weighted N
A	45	3.8894%	42,176	1.7372%	0.4467	20.0993
AC	2	0.1729%	286	0.0118%	0.0681	0.1363
ACMS	1	0.0864%	7	0.0003%	0.0033	0.0033
AD	2	0.1729%	140	0.0058%	0.0334	0.0667
AE	30	2.5929%	22,226	0.9155%	0.3531	10.5920
AEH	3	0.2593%	1,838	0.0757%	0.2920	0.8759
AEHM	3	0.2593%	1,619	0.0667%	0.2572	0.7715
AEHMSZ	1	0.0864%	46	0.0019%	0.0219	0.0219
AEHMOV	1	0.0864%	37	0.0015%	0.0176	0.0176
AEHMOVX	1	0.0864%	5	0.0002%	0.0024	0.0024
AEHMZ	1	0.0864%	300	0.0124%	0.1430	0.1430
AEHS	1	0.0864%	144	0.0059%	0.0686	0.0686
AEHZ	1	0.0864%	223	0.0092%	0.1063	0.1063
AEM	2	0.1729%	2,574	0.1060%	0.6133	1.2267
AEV	2	0.1729%	86	0.0035%	0.0205	0.0410
AEX	1	0.0864%	310	0.0128%	0.1477	0.1477
AEZ	4	0.3457%	1,026	0.0423%	0.1222	0.4889
AH	8	0.6914%	4,070	0.1676%	0.2424	1.9396
AHM	4	0.3457%	3,150	0.1297%	0.3753	1.5012
AHMS	3	0.2593%	405	0.0167%	0.0643	0.1930
AHMZ	1	0.0864%	26	0.0011%	0.0124	0.0124
AHX	1	0.0864%	28	0.0012%	0.0133	0.0133
AM	8	0.6914%	4,203	0.1731%	0.2504	2.0030
AMS	1	0.0864%	182	0.0075%	0.0867	0.0867
AV	3	0.2593%	238	0.0098%	0.0378	0.1134
AZ	1	0.0864%	198	0.0082%	0.0944	0.0944
C	65	5.6180%	76,667	3.1578%	0.5621	36.5362
CD	3	0.2593%	578	0.0238%	0.0918	0.2755
CDEHM	1	0.0864%	152	0.0063%	0.0724	0.0724
CDHM	1	0.0864%	199	0.0082%	0.0948	0.0948
CDHMOV	1	0.0864%	10	0.0004%	0.0048	0.0048
CDMOV	1	0.0864%	15	0.0006%	0.0071	0.0071
CE	6	0.5186%	19,304	0.7951%	1.5332	9.1995
CEH	2	0.1729%	1,682	0.0693%	0.4008	0.8016
CEHM	4	0.3457%	7,753	0.3193%	0.9237	3.6947

PROGRAMS:

A: Aging and Long-Term Support
C: Dept. of Children, Youth, and Families
D: Developmental Disabilities
E: Community Services Division (ESA)
H: Mental Health (HCA)
M: Medicaid/Apple Health (HCA)
S: Substance Use Disorder Treatment (HCA)
V: Vocational Rehabilitation
Z: Child Support - Custodial
X: Child Support—Noncustodial

Sample N: Number of clients who completed survey using this combination of programs.

Sample %: Percentage of the clients who completed the survey using this combination of programs.

Population N: Number of clients using this combination of programs from May 2021 to April 2022.

Population %: Percentage of clients using this combination of programs from May 2021 to April 2022.

Weight: Weight to produce N of 1,157 with program distribution equal to population program distribution (adjusted for empty cells).

Weighted N: Number using this combination of programs after applying the weight.

Programs	Sample N	Sample %	Population N	Population %	Weight	Weighted N
CEHMS	2	0.1729%	747	0.0308%	0.1780	0.3560
CEHMSX	2	0.1729%	612	0.0252%	0.1458	0.2917
CEHMSZ	2	0.1729%	849	0.0350%	0.2023	0.4046
CEHMOVZ	1	0.0864%	16	0.0007%	0.0076	0.0076
CEHMX	1	0.0864%	670	0.0276%	0.3193	0.3193
CEHMZ	2	0.1729%	1,607	0.0662%	0.3829	0.7658
CEHSX	1	0.0864%	189	0.0078%	0.0901	0.0901
CEHSZ	2	0.1729%	434	0.0179%	0.1034	0.2068
CEHVZ	1	0.0864%	13	0.0005%	0.0062	0.0062
CEHZ	3	0.2593%	915	0.0377%	0.1453	0.4360
CEM	11	0.9507%	33,082	1.3626%	1.4332	15.7655
CEMV	1	0.0864%	25	0.0010%	0.0119	0.0119
CEMX	1	0.0864%	2,632	0.1084%	1.2543	1.2543
CEMZ	4	0.3457%	5,010	0.2064%	0.5969	2.3876
CESX	1	0.0864%	240	0.0099%	0.1144	0.1144
CESZ	1	0.0864%	362	0.0149%	0.1725	0.1725
CEX	3	0.2593%	2,749	0.1132%	0.4367	1.3101
CEZ	6	0.5186%	6,037	0.2487%	0.4795	2.8770
CH	1	0.0864%	1,876	0.0773%	0.8940	0.8940
CHM	3	0.2593%	6,595	0.2716%	1.0476	3.1429
CHX	1	0.0864%	80	0.0033%	0.0381	0.0381
CM	3	0.2593%	21,911	0.9025%	3.4806	10.4418
CMX	1	0.0864%	1,143	0.0471%	0.5447	0.5447
CX	5	0.4322%	5,091	0.2097%	0.4852	2.4262
CZ	19	1.6422%	6,624	0.2728%	0.1661	3.1567
D	61	5.2723%	21,049	0.8670%	0.1644	10.0311
DE	4	0.3457%	1,820	0.0750%	0.2168	0.8673
DEM	4	0.3457%	2,576	0.1061%	0.3069	1.2276
DEV	1	0.0864%	98	0.0040%	0.0467	0.0467
DH	5	0.4322%	2,101	0.0865%	0.2002	1.0012
DHM	6	0.5186%	1,107	0.0456%	0.0879	0.5275
DHMOV	2	0.1729%	130	0.0054%	0.0310	0.0620
DHV	3	0.2593%	305	0.0126%	0.0484	0.1453
DM	15	1.2965%	4,735	0.1950%	0.1504	2.2565
DMV	6	0.5186%	398	0.0164%	0.0316	0.1897
DV	17	1.4693%	1,440	0.0593%	0.0404	0.6862
E	87	7.5194%	423,312	17.4358%	2.3188	201.7324
EH	8	0.6914%	17,539	0.7224%	1.0448	8.3583
EHM	26	2.2472%	49,530	2.0401%	0.9078	23.6039
EHMS	13	1.1236%	7,668	0.3158%	0.2811	3.6542
EHMSV	1	0.0864%	102	0.0042%	0.0486	0.0486
EHMSX	4	0.3457%	2,500	0.1030%	0.2978	1.1914
EHMSZ	5	0.4322%	1,885	0.0776%	0.1797	0.8983
EHMV	5	0.4322%	523	0.0215%	0.0498	0.2492
EHMVX	1	0.0864%	48	0.0020%	0.0229	0.0229
EHMX	3	0.2593%	3,038	0.1251%	0.4826	1.4478
EHMZ	5	0.4322%	6,082	0.2505%	0.5797	2.8984
EHS	3	0.2593%	2,619	0.1079%	0.4160	1.2481
EHSV	2	0.1729%	54	0.0022%	0.0129	0.0257
EHSX	3	0.2593%	765	0.0315%	0.1215	0.3646
EHV	1	0.0864%	337	0.0139%	0.1606	0.1606
EHZ	6	0.5186%	3,582	0.1475%	0.2845	1.7070
EM	74	6.3959%	367,293	15.1284%	2.3654	175.0361
EMS	14	1.2100%	8,989	0.3702%	0.3060	4.2838
EMSVX	1	0.0864%	10	0.0004%	0.0048	0.0048
EMSX	7	0.6050%	3,079	0.1268%	0.2096	1.4673

Programs	Sample N	Sample %	Population N	Population %	Weight	Weighted N
EMSZ	5	0.4322%	2,156	0.0888%	0.2055	1.0275
EMV	9	0.7779%	553	0.0228%	0.0293	0.2635
EMX	10	0.8643%	16,965	0.6988%	0.8085	8.0848
EMZ	12	1.0372%	25,869	1.0655%	1.0273	12.3281
ES	6	0.5186%	2,936	0.1209%	0.2332	1.3992
ESZ	3	0.2593%	908	0.0374%	0.1442	0.4327
EV	16	1.3829%	1,638	0.0675%	0.0488	0.7806
EVX	1	0.0864%	91	0.0037%	0.0434	0.0434
EVZ	4	0.3457%	140	0.0058%	0.0167	0.0667
EX	4	0.3457%	17,908	0.7376%	2.1335	8.5342
EZ	23	1.9879%	36,686	1.5111%	0.7601	17.4830
H	5	0.4322%	28,970	1.1932%	2.7612	13.8059
HM	31	2.6793%	67,001	2.7597%	1.0300	31.9298
HMS	15	1.2965%	6,068	0.2499%	0.1928	2.8917
HMSX	2	0.1729%	818	0.0337%	0.1949	0.3898
HMSZ	2	0.1729%	314	0.0129%	0.0748	0.1496
HMV	5	0.4322%	463	0.0191%	0.0441	0.2206
HMX	2	0.1729%	1,371	0.0565%	0.3267	0.6534
HMZ	1	0.0864%	1,805	0.0743%	0.8602	0.8602
HS	5	0.4322%	2,134	0.0879%	0.2034	1.0170
HV	1	0.0864%	326	0.0134%	0.1554	0.1554
HZ	2	0.1729%	1,404	0.0578%	0.3345	0.6691
M	118	10.1988%	668,770	27.5460%	2.7009	318.7072
MS	17	1.4693%	8,248	0.3397%	0.2312	3.9306
MSZ	2	0.1729%	486	0.0200%	0.1158	0.2316
MV	2	0.1729%	724	0.0298%	0.1725	0.3450
MX	6	0.5186%	13,509	0.5564%	1.0730	6.4378
MZ	3	0.2593%	12,728	0.5243%	2.0219	6.0656
S	3	0.2593%	2,779	0.1145%	0.4415	1.3244
V	28	2.4201%	3,636	0.1498%	0.0619	1.7328
VX	1	0.0864%	62	0.0026%	0.0295	0.0295
VZ	1	0.0864%	74	0.0030%	0.0353	0.0353
X	75	6.4823%	129,744	5.3440%	0.8244	61.8304
Z	51	4.4080%	125,749	5.1795%	1.1750	59.9266

APPENDIX E

Responses by Sub-group

Race and Ethnicity

Percent who answered “Yes” or “Strong YES”

	Client Race or Ethnicity ¹												
	Number (Percent)	AIAN 63 (5%)	Other 1,094 (95%)	Asian 59 (5%)	Other 1,098 (95%)	Black 112 (10%)	Other 1,045 (90%)	Hispanic 186 (16%)	Other 971 (84%)	NHOPI 19 (2%)	Other 1,138 (98%)	White 805 (70%)	Other 352 (30%)
QUALITY & HELPFULNESS													
Overall, have social and health service programs helped you and your family?		87%	92%	91%	92%	85%	93%	97%*	91%	99%	92%	91%	93%
Are you satisfied with program services?		86%	86%	81%	86%	78%	87%	91%*	84%	99%	85%	86%	86%
STAFF													
Do staff treat you with courtesy and respect?		92%	91%	92%	91%	89%	92%	94%	91%	100%	91%	92%	91%
Do staff listen to what you have to say?		85%	91%	94%	91%	85%	91%	94%	90%	100%	91%	90%	92%
ACCESS & PROCESS													
Are programs open at times that are good for you?		87%	86%	84%	86%	80%	87%	89%	85%	99%	86%	85%	87%
Is it easy to get services from the program?		73%	75%	79%	75%	74%	75%	86%*	71%	91%	75%	73%	78%
Did you get services as quickly as you needed?		76%	78%	74%	79%	70%	79%	86%*	76%	83%	78%	79%	77%
When you call, is it easy to get to a live person when you need to?		56%	60%	54%	60%	56%	60%	68%*	57%	63%	60%	57%	64%
Do staff return your calls within 48 hours?		67%	72%	66%	72%	69%	72%	76%	71%	81%	72%	72%	73%
INFORMATION													
Do you know what program services there are for you and your family?		58%	64%	66%	64%	67%	64%	60%	65%	60%	64%	66%	60%
Did program staff explain things clearly?		84%	87%	88%	87%	80%	88%	92%*	85%	97%	87%	85%	89%
Was it easy to get the information you needed about services?		85%	82%	77%	82%	77%	83%	87%*	80%	96%	82%	81%	84%
CLIENT INVOLVEMENT													
Did you help make plans and set goals about services?		63%	70%	87%*	69%	62%	71%	74%	69%	81%	70%	70%	70%
COORDINATION													
Do social and health services make sure all your services work well together?		76%	82%	100%*	81%	83%	81%	84%	81%	94%	81%	80%	84%
Do the staff from your different social and health service programs work together as a team to try to help you get the services you need?		70%	75%	99%*	73%	75%	74%	79%	73%	90%	74%	72%	78%

Number and percent for each group are unweighted; percentages for each question are weighted. Statistically significant differences ($p < .05$) indicated by asterisk.

¹ Respondents could select more than one racial-ethnic group. Comparisons are between those who identified with the group and all others. Because of small sample size (N=19), statistical tests for NHOPI clients are not reported. AIAN = American Indian or Alaska Native. NHOPI = Native Hawaiian or other Pacific Islander.

Other sub-groups

Percent who answered “Yes” or “Strong YES”

	Client Gender ²		Client Age		Completed by		Number of Programs Used			Region		
	Male	Female	Adult	Child	Client	Proxy	1 pgm	2 pgms	3+ pgms	Reg 1	Reg 2	Reg 3
Number (Percent)	562 (49%)	592 (51%)	976 (84%)	181 (16%)	760 (66%)	397 (34%)	558 (46%)	332 (29%)	287 (25%)	273 (25%)	434 (40%)	389 (35%)
QUALITY AND HELPFULNESS												
Overall, have social and health service programs helped you and your family?	92%	92%	89%*	98%	88%*	98%	91%	95%	89% ³	94%	91%	92%
Are you satisfied with program services?	85%	86%	83%*	93%	82%*	92%	85%	89%	83% ³	86%	85%	86%
STAFF												
Do staff treat you with courtesy and respect?	91%	92%	90%*	95%	89%*	95%	92%	92%	90%	92%	90%	93%
Do staff listen to what you have to say?	91%	90%	90%	93%	89%	93%	91%	90%	90%	90%	91%	91%
ACCESS AND PROCESS												
Are program offices open at times that are good for you?	87%	85%	85%	87%	85%	87%	85%	88%	87%	90%	80% ⁴	87%
Is it easy to get services from the program?	76%	74%	72%*	81%	70%*	82%	74%	76%	75%	76%	74%	75%
Did you get services as quickly as you needed?	78%	79%	75%*	85%	74%*	84%	78%	80%	78%	82%	75%	79%
When you call, is it easy to get to a live person when you need to?	63%	57%	56%*	67%	57%	64%	59%	62%	59%	58%	58%	61%
Do staff return your calls within 24 hours?	73%	71%	70%	77%	69%	76%	73%	71%	72%	72%	74%	70%
INFORMATION												
Do you know what program services there are for you and your family?	61%	66%	64%	63%	62%	66%	61%	66%	75% ³	60%	66%	66%
Did program staff explain things clearly?	87%	87%	84%*	93%	84%*	91%	86%	89%	87%	89%	84%	88%
Was it easy to get the information you needed about services?	81%	83%	79%*	88%	79%*	86%	81%	85%	83%	85%	77% ⁴	86%
CLIENT INVOLVEMENT												
Did you help make plans and set goals about services?	75%*	66%	70%	71%	69%	72%	67%	72%	80% ⁵	71%	74%	65%
COORDINATION												
Do social and health services make sure all your services work well together?	81%	82%	80%	84%	80%	84%	n/a	81%	82%	85%	81%	79%
Do the staff from your different social and health service programs work together as a team to try to help you get the services you need?	72%	76%	74%	76%	73%	76%	n/a	76%	70%	75%	71%	77%

Number and percent for each group are unweighted; percentages for each question are weighted. Statistically significant differences ($p < .05$) indicated by asterisk or footnote.

² 2 clients identified as trans or non-binary.

³ Significantly different ($p < .05$) than clients in 2 programs.

⁴ Significantly different ($p < .05$) than Region 1 and Region 3. Region 2 includes Island, King, Skagit, Snohomish, and Whatcom Counties.

⁵ Significantly different ($p < .05$) than clients in 1 program and 2 programs.

APPENDIX F

Themes from Narrative Questions: Glossary and Report

Response Glossary

QUALITY/HELP	Description
Overall Help/Quality	Social and health services have/have not helped me/my family; good service overall/satisfied; grateful for help; appreciative; likes options/variety (no specific program noted); like social and health services/everything; didn't like dealing with social and health services; didn't like that they must deal with social and health services to get benefits/services
Specific Program Quality	Named a specific program or an office (such as "Kent CSO") that helped/didn't help; likes program/should change program
STAFF	
Staff Courtesy/Respect	Compliments/complaints regarding staff courtesy, respect, attitude (helpful/likes to help), sensitivity, friendliness, compassion
Staff Listens/Understands	Staff listens; is/isn't attentive; understands; gets input from clients; includes clients in decision-making/planning
Other Staff Comments	Staff's responsiveness (and general timeliness); fairness, flexibility, knowledge, professionalism, honesty, commitment, helpfulness, follow-through, customer service, general communication
Specific Staff Members	Named a specific staff member who helped/didn't help
Need More Staff	Need more staff; reduce turnover; lower caseloads
ACCESS AND PROCESSES	
ACCESS	
Phone/Staff Access	Ability to reach staff members; phone, voicemail, e-mail; return calls and messages timely; call centers/automated phone systems
Office Location/Hours	Ease in getting to programs/providers or services/parking; office hours/class times; transportation; physical condition of office(s)
Appointment Processes	Intake system; long/short waits to be seen; scheduling appointments; appointment notification; phone interviews/online communications
PROCESSES	
General Processes	Compliments/complaints about efficiency, bureaucracy, errors, rules; need to take individuals into account (one size doesn't fit all)
Specific Processes	Compliments/complaints about specific processes; example: "DDA should alphabetize their client lists"; Compliments/complaints about paperwork/forms/applications/letters
Eligibility Processes	Good/bad process of eligibility; distribution of benefits; rules/requirements concerning eligibility; flexibility/inflexibility of process; easy or difficult to get approved for services – and to maintain services
Timeliness of Services	Length of time to get services; waiting lists; includes length of time for eligibility determination

DIVERSITY

Diversity Compliments about treating all groups equally; complaints about preference for specific groups. Reference to specific issues of groups defined by race, ethnicity, gender, disability status, language, immigration status, religion, parental status, sexual orientation or age

INFORMATION

General Information Information from staff to clients about programs or eligibility; answers to questions; clear/unclear explanations; lists of services; notification of new programs/services, events and due dates

Language Services Need more interpreters, bilingual staff or native English-speakers; grateful for available language services

COORDINATION

Coordination between Programs Good/poor coordination between social and health service programs/ offices; includes coordination with other helping government programs/agencies in Washington state

Coordination between Workers Good/poor coordination between workers; good/poor teamwork; need a single worker rather than many; workers' instructions differ or overlap

PROVIDERS (outside SHS)

Provider Staff Providers/staff are good/bad, helpful/not helpful

Provider Process/Access Comments about provider/contractor services and challenges/praise for the process. Includes: Timeliness, appointment process, wait times, any other provider/contractor issue besides staff

RESOURCES

Program Availability Need more/Don't cut/Expand certain programs; social and health services need better funding; grateful for increase in funded program

Benefit Levels Need more/don't cut hours or benefits; pay providers better; grateful for increase in available hours/benefits

Provider Availability Need more medical, dental, mental health, vision or pharmacy providers who accept Medicaid; difficult to find a provider; grateful for available providers who accept Medicaid

Health Benefit Levels Don't cut/expand medical, dental or mental health services; need medical equipment/procedures; grateful for available funding/benefits

OTHER

Other Miscellaneous comments that don't fit elsewhere, including content regarding the survey itself

Don't Know "Don't know;" "Unsure"

COVID-19 Flag for any mention of COVID-19, not limited to how COVID affected service provision. Not coded for sentiment

Narrative Comments Report

1,071 of 1,157 Respondents Made Comments. Unweighted Data

MAJOR THEMES AND SUBTHEMES ¹		Total		Good Work		Needs Work		Mixed		Other ⁴	
		# ²	% of All ³	# ²	% ³	# ²	% ³	# ²	% ³	# ²	% ³
Quality/Help		698	65%	611	57%	71	7%	8	1%	8	1%
Overall Quality/Helpfulness	H	437	41%	391	37%	24	2%	12	1%	10	1%
Nothing	HN	155	14%	115	11%	40	4%	0	0%		
Specific Program Quality	HS	261	24%	231	22%	18	2%	9	1%	3	0%
Staff		403	38%	214	20%	150	14%	35	3%	4	0%
Staff Courtesy	SC	137	13%	104	10%	31	3%	2	0%	0	0%
Staff Listens/Understands	SL	46	4%	27	3%	17	2%	2	0%	0	0%
Other Staff Comments	SO	241	23%	146	14%	74	7%	18	2%	3	0%
Specific Staff	SP	15	1%	13	1%	2	0%	0	0%	0	0%
Need More Staff	SN	57	5%			57	5%				
Provider Staff	SX	54	5%	28	3%	20	2%	5	0%	1	0%
Process/Access		563	53%	147	14%	328	31%	80	7%	8	1%
ACCESS		218	20%	35	3%	180	17%	2	0%	1	0%
Phone/Staff Access	AP	196	18%	30	3%	154	14%	11	1%	1	0%
Location/Hours	AL	28	3%	4	0%	23	2%	1	0%	0	0%
Appointment Process	AA	22	2%	3	0%	18	2%	0	0%	1	0%
PROCESS		364	34%	143	13%	177	17%	34	3%	10	1%
Process - General	PR	119	11%	74	7%	36	3%	5	0%	4	0%
Process - Specific	PS	214	20%	63	6%	126	12%	17	2%	8	1%
Process - Timeliness	PT	63	6%	28	3%	31	3%	4	0%	0	0%
Eligibility	PE	80	7%	21	2%	53	5%	3	0%	3	0%
PROVIDERS		93	9%	24	2%	67	6%	0	0%	2	0%
Provider Process/Access	PX	101	9%	24	2%	67	6%	8	1%	2	0%
DIVERSITY		24	2%	2	0%	21	2%	0	0%	1	0%
Diversity/Preference	DV	25	2%	2	0%	21	2%	1	0%	1	0%
Information		181	17%	84	8%	96	9%	1	0%	0	0%
Information - General	IN	184	17%	84	8%	87	8%	13	1%	0	0%
Language Services	IL	14	1%	1	0%	11	1%	2	0%	0	0%
Coordination		32	3%	11	1%	21	2%	0	0%	0	0%
Between Programs	CP	21	2%	7	1%	13	1%	1	0%	0	0%
Between Workers	CW	13	1%	4	0%	9	1%	0	0%	0	0%
Resources		159	15%	14	1%	142	13%	3	0%	0	0%
Program Availability	RP	36	3%	2	0%	32	3%	2	0%	0	0%
Benefit Levels	RB	52	5%	5	0%	46	4%	1	0%	0	0%
Provider Availability	RC	40	4%	1	0%	39	4%	0	0%	0	0%
Health Benefit Levels	RM	45	4%	9	1%	36	3%	0	0%	0	0%
Other		332	31%	12	1%	32	3%	0	0%	102	10%
Other/Miscellaneous	O	147	14%	12	1%	32	3%	1	0%	102	10%
Don't Know	DK	181	17%								
COVID-19	CV	24	2%								

Notes for Narrative Comments Report (previous page)

- ¹ Major themes (in blue rows) and secondary themes (in italics) are rollups of the subthemes listed immediately below. They are unduplicated - not the total of the numbers below. For example, a single person who made "Good Work" comments in "Staff Courtesy" and "Specific Staff" is counted only once in the "Staff" row. Likewise, a person who has a "Good Work" comment in the "Staff Courtesy" row and a "Needs Work" comment in the "Specific Staff" row would be counted as a "Mixed" comment in the "Staff" row.
- ² All # columns show how many **respondents** made any mention of this theme. Multiple comments on the same theme by a single person are only counted once in the row for that theme. A single person may make both "Good Work" and "Needs Work" comments on the same theme - that person will be counted in the "Mixed" column.
- ³ All % columns show respondents who commented on this theme as a percentage of the total number of respondents who made narrative comments.
- ⁴ Comments with neutral or unknown sentiment. Previous reports presented a combined "Mixed or Neutral" category.

APPENDIX G

Survey Instrument

Introduction¹

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

Hello, this is <<Interviewer Name>>.

I am calling to talk to you about social and health services received from the State of Washington. You should have received a letter explaining this survey.

The results of this survey will help social and health service agencies make plans to improve services and to measure whether services improve in the future.

You have been randomly chosen from all of the people who have received social and health services from the state.

Your participation is completely voluntary but is very important to us. We want to make sure the sample represents all the people who may come in contact with social and health services.

Whether or not you participate in the survey will not affect any services received from these agencies. We promise that no one from the social and health service programs that serve you will know how you answered. Reports about the survey will not include any names.

We want you to be comfortable telling us how you really feel. Please feel free to ask questions at any time.

If I come to any question that you prefer not to answer, just let me know and I will skip over it.

[If respondent is a parent, family member, guardian, or other decision-maker, say:]

You have been selected to receive this survey because you have helped deal with agencies or make decisions for <<Client Name>>.

We would like to ask about any experiences you may have had while helping <<Client Name>> with social and health services received from the State of Washington.

Relationship of Person being interviewed to Client:

- Self
- Parent
- Spouse
- Other Family Member – Same Household
- Other Family Member – Not Same Household
- Guardian, or Other Non-Family Decision-maker
- Foster Parent
- Other Non-Family Caregiver (NOT Decision-maker)

¹ This sample script does not include all possible variations of the survey (for parents, guardians, family members, and other representatives). Interviewers modified the survey appropriately to fit the individual situation. Instructions to the interviewer are in bold font.

Survey Instrument

DDA (Developmental Disabilities Administration)

First/Now I'd like to ask you about your experience with DDA, the Division that helps persons with developmental disabilities. We see that you have been helped by DDA in the last two years. Some of the services they may have provided you are:

- You may live in a home for persons with Developmental Disabilities or someone may come to your house to help you with your daily activities.
- Someone may help you with your job or you may go to an activity during the day.
- You may have received therapies that were paid for with State money.
- You may have a case manager who helps you get services.
- Someone may have come to talk with you about DDA services or may have done an assessment with you.

Have you had any services like that in the past two years? Is it possible that these services may have been sponsored by DDA?

Denies Contact with DDA

If special circumstances—like they are listed as getting DDA case management, but they don't know it, put here. (Don't ask):

I'd like to ask some questions about your experiences with DDA over the past two years. For each question please give one of these 5 answers: Strong Yes, Yes, Neutral, No, or Strong No.

	Strong YES!	Yes	Neutral	No	Strong NO!	Don't Know	Refuse	Does Not Apply
4. Is DDA open at times that are good for you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Is it easy to get services from DDA?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1. Do you know what DDA services there are for you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5a. When you call DDA, is it easy to get to a live person when you need to?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Did DDA staff return your calls within 48 hours?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Did you get services as quickly as you needed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Was it easy to get the information you needed about services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Did DDA staff explain things clearly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Did staff who helped you treat you with courtesy and respect?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Did staff who helped you listen to what you had to say?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Did you help make plans and set goals about DDA services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Are you satisfied with DDA services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Overall, has DDA helped you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

[Go to next program. These are in preferred selection order – choose TOPMOST agency applicable.]

Survey Instrument

DVR (Division of Vocational Rehabilitation)

First/Now I'd like to ask you about your experience with DVR (Vocational Rehabilitation), the Division that helps persons with disabilities get jobs. Have you talked to someone at DVR or received services from DVR over the last two years?

[If initially denies DVR contact, go on with this explanation before you mark "Denies contact."]

Sometimes people get services through some other agency and don't know these services came from DVR. Let me tell you what kinds of services you may have received:

- You might have had counseling about getting a job; help in looking for a job; an assessment of your job interests and skills; an evaluation to see what jobs you could do.
- Job training or training in how to take care of yourself, manage money, or use transportation.
- Medical services or treatment needed for you to work; or help in getting things you need to go to work like: equipment, child care, books, or supplies.
- Someone may have come to talk with you about DVR services or may have done an assessment with you.

Have you had any services like that in the past two years? Is it possible that these services may have been sponsored by DVR?

Denies DVR Contact

I'd like to ask some questions about your experiences with the Division of Vocational Rehabilitation over the past two years. For each question please give one of these 5 answers: Strong Yes, Yes, Neutral, No, or Strong No.

	Strong YES!	Yes	Neutral	No	Strong NO!	Don't Know	Refuse	Does Not Apply
4. Is DVR open at times that are good for you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Is it easy to get services from DVR?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1. Do you know what DVR services there are for you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5a. When you call DVR, is it easy to get to a live person when you need to?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Did DVR staff return your calls within 48 hours?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Did you get services as quickly as you needed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Was it easy to get the information you needed about services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Did DVR staff explain things clearly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Did DVR staff who helped you treat you with courtesy and respect?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Did DVR staff who helped you listen to what you had to say?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Did you help make plans and set goals about your training and employment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Are you satisfied with DVR services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Overall, has DVR helped you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

[Go to next program. These are in preferred selection order – choose TOPMOST agency applicable.]

Survey Instrument

AL TSA (Aging & Long-Term Support Administration)

First/Now I'd like to ask you about your experience with the Aging and Long-Term Support Administration, which you may know as Home and Community Services. Home and Community Services helps seniors and people with disabilities live as independently as possible by helping them choose a supportive living arrangement or find someone to come into their current home to provide help with personal care and medical needs. Have you talked to someone at Aging and Long-Term Support Administration's Home and Community Services, or received services from them in the last two years?

[If initially denies Aging & Long-Term Support contact, go on with this explanation before you mark "Denies contact."]

Sometimes people get services through some other agency and don't know these services came from Aging & Long-Term Support Administration's Home and Community Services Division. Let me tell you what kinds of services you may have received:

- You may live in a special home for seniors or persons with disabilities.
- Someone may come to your house to help you with medical needs, body care, shopping, housework, or cooking.
- You may need help paying for nursing facility services.
- You may have a case manager who does assessments and helps you get services.
- Someone may have helped you fill out a Medicaid application or helped you get medical coverage.
- Someone may have met with you in person or over the phone to talk with you about long-term care services and supports or may have done an assessment with you asking you questions about the types of support you may need, or things you can do on your own or with support of family and friends.

Have you had any services like that in the past two years? Is it possible that these services may have been sponsored by Aging & Long-Term Support?

Denies AL TSA Contact

I'd like to ask some questions about your experiences with Aging & Long-Term Support over the past two years. For each question please give one of these 5 answers: Strong Yes, Yes, Neutral, No, or Strong No.

	Strong YES!	Yes	Neutral	No	Strong NO!	Don't Know	Refuse	Does Not Apply
4. Is Aging & Long-Term Support open at times that are good for you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Is it easy to get services from Aging & Long-Term Support?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1. Do you know what Aging & Long-Term Support services there are for you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5a. When you call Aging & Long-Term Support or Home and Community Services Office, is it easy to get to a live person when you need to?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Did Aging & Long-Term Support staff return your calls within 48 hours?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Did you get services as quickly as you needed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Was it easy to get the information you needed about services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Did Aging & Long-Term Support staff explain things clearly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Did staff who helped you treat you with courtesy and respect?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Did staff who helped you listen to what you had to say?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Did you help make plans and set goals about services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Are you satisfied with Aging & Long-Term Support?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Overall, has Aging & Long-Term Support helped you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

[Go to next program. These are in preferred selection order – choose TOPMOST agency applicable.]

Survey Instrument

Apple Health/Medicaid (Health Care Authority)

First/Now I'd like to ask you about your experience with Apple Health or Medicaid, the programs where the state pays for your medical insurance. Have you received medical insurance from Apple Health or Medicaid or another state-paid program over the last two years?

[If initially denies Apple Health/Medicaid contact, go on with this explanation before you mark "Denies contact."]

- You might get this insurance from a health care plan like Molina, Community Health Plan, Coordinated Care, United Health Care, or Amerigroup.
- You might have gotten health insurance or services through a program like CHIP, sometimes called "Apple Health with premiums," SSI, family planning services, COFA Islander programs, spenddown, or family medical.

EXPLAIN THAT: WE WILL CALL ALL OF THESE "APPLE HEALTH OR MEDICAID" IN THE SURVEY

No – Denies Apple Health/Medicaid/other state-paid health insurance

We want to know if you have called the Apple Health/Medicaid 800 number in the past two years? This phone number is found on the back of your Apple Health Medicaid Services Card and in mailings from Apple Health. The Services Card is the blue card with the Washington State seal and "Provider One" on the front. Have you called the Apple Health/Medicaid 800 number on the back of your blue Apple Health/Medicaid card in the past two years?

[If they seem confused – explain:]

You usually get two insurance cards when you enroll in Apple Health or Medicaid.

- The blue card that says "Provider One" is the Services Card which shows you have state health insurance. You can use this card to check that your enrollment has started or change health care plans. We want to know if you have called the number on the back of THIS card.
- Most people ALSO get a card from their insurance plan (a plan like Community Health Plan of Washington). We are NOT asking right now about talking directly to your plan.

No. Skip questions A, B and C below

Yes. Continue

I'd like to ask you four questions about the people you talked with when you called the Apple Health/Medicaid 800 number. For each question please give one of these 5 answers: Strong Yes, Yes, Neutral, No, or Strong No.

	Strong YES!	Yes	Neutral	No	Strong NO!	Don't know	Refuse	Does Not Apply
A1. When you call the 800 number, is it easy to get a live person?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A. Did staff who helped you when you called the 800 number treat you with courtesy and respect?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Did they listen to what you had to say?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Did they explain things clearly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Have you used your state Apple Health or Medicaid medical insurance to get medical or dental services in the past two years? Or does anyone else in your household get medical care from Apple Health or Medicaid?

[If they seem unsure, probe further.] Has the State paid for any part of your medical care in the past two years?

Is it possible that you used Apple Health, Medicaid, or other state programs like CHIP to get that care?

Yes

No

You can explain any special circumstances in this box. Like State just pays Medicare premium:

I'd like to ask some questions about use of telehealth services during the COVID-19 pandemic. Telehealth is when health care providers use audio or video communications instead of in-person visits to provide services. Telehealth can be provided in a variety of ways, like phone calls, video chats, emails, texts, or provider messaging portals.

During the COVID-19 pandemic, have you used telehealth to receive services or have appointments with health care providers?

- Yes. Go to A below
- No. Go to B below

A. How would you rate the quality of the telehealth services? The options are:

- Very good
- Good
- Acceptable
- Poor
- Very poor

B. Why didn't you receive telehealth services? [Check all that the client mentions]

- No need for services during COVID-19 pandemic
- Didn't have the technology (phone/laptop/device)
- Telehealth wasn't offered
- Other (please specify)

I'd like to ask some questions about your experiences with Apple Health or Medicaid over the past two years. When I ask about your medical provider I mean all doctors, nurses, dentists, or other therapists who were paid by the state. For each question please give one of these 5 answers: Strong Yes, Yes, Neutral, No, or Strong No.

	Strong YES!	Yes	Neutral	No	Strong NO!	Don't Know	Refuse	Does Not Apply
4. Are the medical providers open at times that are good for you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Is it easy to get services through Apple Health or Medicaid?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1. Do you know what Apple Health/Medicaid services there are for you or your family?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5a. When you call the medical provider's office, is it easy to get to a live person when you need to?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Did medical providers' staff return your calls within 48 hours?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Did you get services through Apple Health/Medicaid as quickly as you needed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Was it easy to get the information you needed about Apple Health/Medicaid services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Did your medical providers and their staff explain things clearly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Did the medical providers and their staff treat you or your family with courtesy and respect?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Did the medical providers and their staff listen to what you or your family members had to say?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Did you and your family help your medical providers make plans and set goals about your health and health services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Are you satisfied with Apple Health/Medicaid services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Overall, has Apple Health/Medicaid helped you or your family?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

[Go to next program. These are in preferred selection order – choose TOP MOST agency applicable.]

Survey Instrument

Community Services Division (Economic Services Administration)

First/Now I'd like to ask you about your experience with DSHS Community Services, the Division that sends money and food benefits from the state to individuals and families and also runs the WorkFirst program to help people getting state money find and keep jobs. When you talk to someone from DSHS Community Services you usually call or go to a CSO, which is a Community Services Office. Have you talked to someone at DSHS Community Services or received services from them over the last two years?

[If initially denies CSD-ESA contact, go on with this explanation before you mark "Denies contact."]

We see that you or someone in your family has received some state money in the last two years. Some of the services they may have provided you are:

- You may have received food benefits, emergency assistance or TANF money, which is Temporary Assistance for Needy Families.
- You may have received money because you were aged, blind, disabled, pregnant, in an institution, or unemployable.
- You may have received supplemental Social Security or SSI payments from the State.
- You may have received some money because you were a refugee.
- You may also have been in the WorkFirst program which helps people on TANF find and keep jobs.

Have you or a family member had any services like that in the past two years? Is it possible that these services may have been sponsored by DSHS Community Services?

[If they don't seem to be familiar with monies that may have supported a child, look for clues that there is someone else who is the "primary decision-maker" for this client. If so, talk to the primary decision-maker.]

Denies DSHS Community Services Contact

Are you the only person in your family who gets State money, food benefits, or WorkFirst services from DSHS Community Services?

- Yes
- No

I'd like to ask some questions about your experiences with DSHS Community Services over the past two years. When we ask about DSHS Community Services we are asking about the people who send you or your family State money or food benefits or run WorkFirst. This generally means the CSO staff, which might include your financial worker, case manager, or social worker. For each question please give one of these 5 answers: Strong Yes, Yes, Neutral, No, or Strong No.

	Strong YES!	Yes	Neutral	No	Strong NO!	Don't Know	Refuse	Does Not Apply
4. Is the CSO or call center open at times that are good for you? [All services were conducted through the call center during the COVID-19 pandemic.]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Is it easy to get services from DSHS Community Services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1. Do you know what DSHS Community Services there are for you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5a. When you call DSHS Community Services, is it easy to get to a live person when you need to?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. In the past two years, have you left a phone message for someone at DSHS Community Services? [If no, mark NA and move to next question.] If yes, did staff return your calls within 48 hours?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Did your family get services as quickly as they needed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Was it easy to get the information you needed about services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Did DSHS Community Services staff explain things clearly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Did staff who helped you or your family treat you with courtesy and respect?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Did staff who helped you or your family listen to what you had to say?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Did you and your family help make plans and set goals about services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Are you satisfied with DSHS Community Services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Overall, has DSHS Community Services helped you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

[Go to next program. These are in preferred selection order – choose TOPMOST agency applicable.]

Survey Instrument

MH (Mental Health; Health Care Authority)

First/Now I'd like to ask you about your experience with Mental Health, the program that helps pay for counseling, medication, and other mental health services. Have you or a family member talked to someone at Mental Health or received services from Mental Health over the last two years?

[If initially denies Mental Health contact, go on with this explanation before you mark "Denies contact."]

Sometimes people get services through some other agency and don't know these services came from Mental Health. Let me tell you what kinds of services you may have received:

- You may have talked to a counselor or gone with someone in your family to talk to a counselor.
- You may have had a mental health assessment or received some treatment or medication.
- You may have had a hospitalization related to mental health issues.

Have you or a family member had any services like that in the past two years? Is it possible that these services may have been sponsored by the Mental Health program?

Denies MH Contact

I'd like to ask some questions about your experiences with Mental Health over the past two years. For each question please give one of these 5 answers: Strong Yes, Yes, Neutral, No, or Strong No.

	Strong YES!	Yes	Neutral	No	Strong NO!	Don't Know	Refuse	Does Not Apply
4. Is Mental Health open at times that are good for you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Is it easy to get services from Mental Health?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1. Do you know what Mental Health services there are for you or your family member?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5a. When you call Mental Health, is it easy to get to a live person when you need to?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Did Mental Health staff return your calls within 48 hours?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Did you or your family member get services as quickly as you needed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Was it easy to get the information you needed about services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Did Mental Health staff explain things clearly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Did staff who helped you or your family members treat you with courtesy and respect?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Did staff who helped you or your family member listen to what you had to say?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Did you and your family help make plans and set goals about mental health services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Are you satisfied with Mental Health services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Overall, has Mental Health helped you and your family?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

[Go to next program. These are in preferred selection order – choose TOPMOST agency applicable.]

Survey Instrument

DCS (Division of Child Support)—Non-Custodial Parent

First/Now I'd like to ask you about your experience with the Division of Child Support, the Division that enforces and collects on child support orders. You could be involved with Child Support because you have a child that lives with someone else and you send support money for that child. I'd like to ask about your interactions with the Division of Child Support.

[If denies DCS contact or is unsure] Have you sent money to support a child who doesn't live with you?

- Division of Child Support collects money from one parent and sends it to whoever has custody of the child.
- Or they sometimes collect money to repay the State for supporting a child.
- You also could have had contact with Division of Child Support because they tried to help you get child support payments or tried to get you to pay child support.
- They may have been in contact to determine who a child's parents are.
- Sometimes the Division of Child Support still works on getting child support payments long after the child is out of the home receiving the payments.

[If they still deny DCS interaction]

Denies DCS Contact

I'd like to ask some questions about your experiences with the Division of Child Support over the past two years. For each question please give one of these 5 answers: Strong Yes, Yes, Neutral, No, or Strong No.

	Strong YES!	Yes	Neutral	No	Strong NO!	Don't Know	Refuse	Does Not Apply
4. If you called or had to go to the DCS office, is DCS open at times that are good for you? <i>[If they have not called or gone to a DCS office, select DNA]</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. If you need help from Division of Child Support, is it easy to get that help? <i>[If they have not needed help from DCS, select DNA]</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1. Do you know what child support services there are for you and your family?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5a. If you call Child Support, is it easy to get to a live person when you need to? <i>[If they have not called a DCS office, select DNA]</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. If you called DCS, did Child Support staff return your calls within 48 hours? <i>[If they have not called a DCS office, select DNA]</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. When you asked for help, did you get it as quickly as you needed? <i>[If they never asked for help, select DNA]</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6a. If you asked, did Child Support staff explain the specific actions taken in your case?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Was it easy to get the information you needed about services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Did Child Support staff explain things clearly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Did Child Support staff treat you with courtesy and respect?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Did Child Support staff listen to what you had to say?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Are you satisfied with Child Support services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Overall, has Division of Child Support helped the child/children you support?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

[Go to next program. These are in preferred selection order – choose TOPMOST agency applicable.]

Survey Instrument

DCS (Division of Child Support)—Custodial Parent or Both

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

[If denies DCS contact or is unsure] Have you received money from a child's parent to help support a child who lives with you? Or have you sent money to support a child that lives somewhere else?

- Division of Child Support collects money from one parent and sends it to whoever has custody of the child.
- You also could have had contact with Division of Child Support because they tried to help you get child support payments or tried to get you to pay child support.
- Sometimes the Division of Child Support still works on getting child support payments long after the child is out of the home receiving the payments.

[If they still deny DCS interaction]

Denies DCS Contact

I'd like to ask some questions about your experiences with the Division of Child Support over the past two years. For each question please give one of these 5 answers: Strong Yes, Yes, Neutral, No, or Strong No.

	Strong YES!	Yes	Neutral	No	Strong NO!	Don't Know	Refuse	Does Not Apply
4. If you had to go to the DCS office, is DCS open at times that are good for you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. If you need help from Division of Child Support, is it easy to get that help? [If they have not needed help from DCS, select DNA]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1. Do you know what Child Support services there are for you and your family?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5a. If you call Division of Child Support, is it easy to get to a live person when you need to? [If they have not called DCS office, select DNA]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. If you called DCS, did Child Support staff return your calls within 48 hours? [If they have not called DCS office, select N/A]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. When you asked for help, did you get it as quickly as you needed? [If they never asked for help, select DNA]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Was it easy to get the information you needed about services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Did Child Support staff explain things clearly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Did Child Support staff treat you with courtesy and respect?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Did Child Support staff listen to what you had to say?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Are you satisfied with Child Support services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Overall, has Division of Child Support helped your family?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

[Go to next program. These are in preferred selection order – choose TOPMOST agency applicable.]

Survey Instrument

SUD (Substance Use Disorder; Health Care Authority)

First/Now I'd like to ask you about your experience with drug and alcohol services you may have received through Apple Health or Medicaid. This includes any kind of assessment, discussion, medication or treatment related to alcohol and other drugs. Have you received drug and alcohol treatment or assessment over the last two years?

[If initially denies BHR-SUD contact, go on with this explanation before you mark "Denies contact."]

Let me make this question clearer. Here are the kinds of services you may have received:

- You may have talked to a counselor or a doctor or have gone to a drug or alcohol treatment group.
- You may have had an assessment to see if you have any problems with alcohol or drugs.
- You may have received some other type of drug or alcohol treatment or medication to help with drug and alcohol problems.
- You may have gone to an inpatient drug and alcohol treatment program.

Have you had any services like that in the past two years? Is it possible that you might have had drug or alcohol services paid for or partly paid for by Apple Health or Medicaid?

Denies SUD Contact

I'd like to ask some questions about your experiences with the Substance Use Disorder program over the past two years. For each question please give one of these 5 answers: Strong Yes, Yes, Neutral, No, or Strong No.

	Strong YES!	Yes	Neutral	No	Strong NO!	Don't Know	Refuse	Does Not Apply
4. Is drug and alcohol open at times that are good for you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Is it easy to get drug and alcohol treatment services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1. Do you know what drug and alcohol treatment services there are for you and your family?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5a. When you call the drug and alcohol office, is it easy to get to a live person when you need to?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Did drug and alcohol staff return your calls within 48 hours?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Did you get services as quickly as you needed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Was it easy to get the information you needed about services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Did drug and alcohol staff explain things clearly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Did staff who helped you treat you with courtesy and respect?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Did staff who helped you listen to what you had to say?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Did you help make plans and set goals about services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Are you satisfied with drug and alcohol services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Overall, have drug and alcohol services helped you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

[Go to next program. These are in preferred selection order – choose TOPMOST agency applicable.]

Survey Instrument

DCYF (Department of Children, Youth and Families)

Note to Interviewers: The formal name of this program is "Department of Children, Youth and Families" although few of our clients would recognize that name. Most of the services we ask about come under the Division of Child & Family Services (DCFS), but a few come under the Division of Licensing Resources (DLR).

First/Now I'd like to ask you about your experience with Children, Youth and Family Services, the department that provides social services to children and families, such as helping families with run-away or difficult teens, looking into reports of child abuse or neglect, or providing child care, foster care and adoption support. Have you talked to someone at Children and Family Services or received services from Children and Family Services over the last two years?

[If initially denies DCYF contact, go on with this explanation before you mark "Denies contact."]

Sometimes people get services through some other agency and don't know these services came from Children & Family Services. Let me tell you what kinds of services you may have received:

- You may have provided foster care or kinship care.
- You may have received adoption support payments or services.
- The state may have paid all or part of child care costs for a child in your care.
- You may have received help in dealing with conflicts with a teenager.
- Someone in your family may have received some kind of counseling, parenting training, or other training.
- Your child may have been placed in foster care or been involved in an adoption.
- The services you got may have been called CPS (which stands for Child Protective Services), Family Reconciliation Service, Child Welfare Services—or they may have been provided by a local agency.
- A social worker may have talked to people in your family about your family situation or about some possible reports of abuse or neglect.
- Someone may have looked into possible child abuse or neglect involving you or your child—even if that possible abuse happened at school, daycare, or somewhere else.

Have you had any services like that in the past two years? Is it possible that these services may have been sponsored by Children and Family Services?

[If parent does not know whether child has had any services and/or is not personally familiar with these services, try to find out whether there is another family member or decision-maker who is more familiar.]

Get GOOD name, address, and phone numbers. We may replace this respondent with a more knowledgeable one]

Denies DCYF Contact

→ A. Can you tell me if you have ever adopted a child while living in Washington?

Yes

No → Skip DCYF questions

→ B. In what year did you adopt your child? ____ [If more than one child, enter the year of the most recent adoption.]

C. Have you ever received adoption support payments?

Yes

No

D. What was the last year you received payments? ____

→ E. When was the last time you had any other contact with Child and Family Services? ____

→ If last payment or contact in 2021 or more recent, continue to DCYF questions.

Otherwise, skip DCYF questions.

I'd like to ask some questions about your experiences with Children & Family Services over the past two years. For each question please give one of these 5 answers: Strong Yes, Yes, Neutral, No, or Strong No.

	Strong YES!	Yes	Neutral	No	Strong NO!	Don't Know	Refuse	Does Not Apply
4. Is Children and Family Services open at times that are good for you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. If you need help from Children and Family Services is it easy to get that help? <i>[If they have not needed help from Children and Family Services select DNA]</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1. Do you know what Children and Family services there are for your family?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5a. When you call Children and Family Services, is it easy to get to a live person when you need to?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Did Children and Family Services staff return your calls within 48 hours?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. When you asked for help, did you get it as quickly as you needed? <i>[If they never asked for help, select DNA]</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Was it easy to get the information you needed about Children and Family Services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Did Children and Family Services staff explain things clearly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Did staff who helped you treat you with courtesy and respect?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Did staff who helped you listen to what you had to say?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Did you help make plans and set goals about services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Are you satisfied with Children and Family Services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Overall, has Children and Family Services helped your family?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Survey Instrument

CONCLUDING QUESTIONS

47. The next set of questions is based on the number of services received by the client:

- Client received services from only ONE program
- Client received services from TWO or more (2+) programs
- Client denies ANY contact with services

Clients receiving services from TWO or more (2+) programs ONLY:

We have talked about services from these programs. [name Program 1, name Program 2, name Program 3, etc.]

	Strong YES!	Yes	Neutral	No	Strong NO!	Don't Know	Refuse	Does Not Apply
Do social and health services make sure all your services work well together?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do the staff from your different social and health service programs work together as a team to try to help you get the services you need?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

CONCLUDING QUESTIONS—ALL Participants

Now we want to ask you two questions about what your social and health services programs do well and how they can improve.

First, what do you like best about dealing with social and health services programs?

What is one thing social and health services can do to improve services?

What is your [the client's] age in years? [*Must be WHOLE NUMBER – Put 0 if under 12 months]

 Years

[If doesn't answer age]

- Refuses
- Don't Know

What is your [the client] gender? [DON'T READ OPTIONS] If needed: "We understand that not everyone identifies as male or female. We are asking people how they describe themselves in order to find out the best way to ask this question."

- Male
- Female
- Other (please specify)

Which one or more of the following would you say is your [the client] race or ethnicity?

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or Pacific Islander
- Hispanic or Latino
- White
- Don't Know
- Refused
- Other race

Please specify for "Other":

In the past 2 years, has there been a time when you felt that social and health services staff treated you or your family unfairly because of race, culture, age, gender, sexual orientation, or disabilities?

- Yes (continue)
- No (skip both questions below)

In your opinion was the unfair treatment because of: [Read options. They can choose more than one.]

- Race?
- Culture? [Don't choose if the same as race]
- Age?
- Gender?
- Sexual Orientation?
- Disabilities?
- Other

Could you please tell us about the unfair treatment?

Since January 2021, which state of Washington county have you [the client] lived in the longest? Please specify for "Other" (City, State if outside WA):

Thank you for your time and cooperation. We are done with the survey questions. If you have any additional comments or questions about this survey or about social and health services agencies in the State of Washington, I can note them now.



2023 Social and Health Services
Client Survey
Our Clients Speak

