



Consumer Satisfaction Services, Inc.

Capital Region 2nd Quarter Report October-December 2018

PREPARED FOR:

Capital Area Behavioral Health Collaborative (CABHC)

**Prepared By
Consumer Satisfaction Services**

**4775 Linglestown Road
Suite 201
Harrisburg, PA 17112
(717) 651-1070
www.css-pa.org**

Consumer Satisfaction Services, Inc.

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Consumer Satisfaction Services, Inc. (CSS) is a non-profit, tax exempt organization recognized by the Internal Revenue Service under Section 501 (C) (3) of the United States Tax Code.

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Overview of CSS Process

Survey Protocol

Consumer Satisfaction Services (CSS) is a consumer operated non-profit organization. CSS gives a voice to consumers, by giving them the opportunity to express their opinion of services received as well as their treatment wants and needs. CSS also helps to identify trends and institute change for future consumers. Some members of the Board of Directors and all staff are self-identified as being in mental health and/or substance abuse recovery, or identify as a family member.

All Consumer/Family Satisfaction Team (C/FST) surveyors have their criminal background check, child abuse history clearances and confidentiality statements updated on an annual basis and FBI clearances updated every 5 years.

Surveyors are present at the CSS office to schedule face-to-face appointments and occasional telephonic interviews. The surveyors schedule appointments with recipients of mental health services using the consumer names provided by Capital Area Behavioral Health Collaborative. The names include recipients of a level of care that was predetermined and scheduled to be surveyed in the corresponding quarter. Recipients of Drug and Alcohol (D&A) services are typically interviewed at the D&A facility although some D&A providers collaborate with CSS and obtain consent from consumers so that CSS can contact them to schedule a face to face interview at a later date. The D&A consent process is still in the early development stages with three active Drug and Alcohol providers and one in process of collaborating with CSS to provide consents.

The CSS primary survey tool consists of 45 questions that cover topics including satisfaction with Perform Care, satisfaction with services being received, and the impact of services on over-all life improvement. CSS uses a separate survey for the level of care Crisis Intervention as many of the questions on the primary survey tool are not applicable. This survey has 27 questions. The development of this tool is recent and implementation began in the 2nd Quarter 18-19. CSS, in collaboration with the System Improvement Committee (SIC); participants including representatives from Perform Care, county administrators, CABHC, stakeholders/consumers and CSS, determined that there was a need to reevaluate the survey used for Crisis Intervention. CSS and the System Improvement Committee (with input from Crisis Intervention directors) developed a new survey tool with questions that are specific to Crisis Intervention.

Consumers are given the opportunity to decline a survey and are free to end the survey at any point. Consumers have the option to skip or refuse to answer any question, if they choose. The confidentiality of each consumer is protected and any identifying information will be removed to ensure that protection.

Statistical Analysis

Consumer Satisfaction Services utilizes the data analysis programs SNAP and SPSS. The Mean Satisfaction Score is calculated for each individual based on responses to the survey questions that focus on satisfaction with services received and the perceived effects (outcomes) of services.

Each question has 5 possible responses that are included in the Mean Satisfaction Score. The responses range from 1 (Strongly Disagree) to 5 (Strongly Agree), this is called a Likert Scale. Higher scores represent higher satisfaction. All of these numbers are combined (added up) and that number is divided by the total number of questions and that is how we calculate the Mean Satisfaction Score or the average score for one respondent. The mean scores of each survey are then combined to find the Total Satisfaction Score or the average score based on all responses.

Total Satisfaction Score is compared with other demographic information in an attempt to identify statistically significant differences.

The use of the word 'significant' in CSS reports indicate that the observed differences in the data have been evaluated using appropriate statistical methods with the alpha level set = .05. A significant trend indicates a probability level which approaches significance i.e. the probability level is between .05 and 1.0.

CSS has set a benchmark for the consumer responses that are reflective of Services and Outcomes of Services. Strongly Agree and Agree scores of 85% or above indicate high satisfaction, and Strongly Disagree and Disagree scores of 15% or above indicate low levels of satisfaction requiring further exploration.

Frequencies may not sum to total (n=total number of respondents) as individuals may have chosen not to respond to certain questions. Percentages may not sum to 100.0% due to rounding.

Request for Assistance

During the interview, if a consumer indicates they are unhappy about something with their provider (based on the service and provider that is the focus of the survey), Perform Care or any other part of the behavioral health system that can reasonably be addressed, the surveyor will ask the consumer if they would like them (surveyor/CSS) to communicate this concern to the party they have a concern with. This is known as the Request for Assistance (RFA). A completed Request for Assistance is forwarded to Perform Care and Capital Area Behavioral Health Collaborative (CABHC) for action steps and follows up.

- CSS had no Requests for Assistance for the 2nd Quarter 18-19.
- In collaboration with CABHC and Perform Care, CSS is currently updating the RFA process and corresponding documentation.

* If at any point during the survey a consumer reports an event or situation where they felt that they were mistreated by their provider, CSS automatically offers to conduct a Request for Assistance. If the consumer declines the RFA, CSS records the event and it is reported in the provider specific report within the consumer comments.

Survey Information

During the 2nd Quarter 18-19 Consumer Satisfaction Services completed 518 satisfaction surveys with recipients of the level of care Crisis Intervention. Due to survey goals and a commitment to excellence, CSS has requested to continue surveying this level of care during the 3rd quarter 18-19. This extension will expectantly allow for additional surveying to take place and will ensure a more complete representation of the satisfaction for those individuals receiving these services. At the conclusion of the 3rd quarter 18-19 CSS will report upon the total satisfaction for the level of care Crisis Intervention.

- **Sample: The Crisis Intervention survey results for the 2nd quarter 18-19 represents 518 (n=518) respondents from the Capital Region including 330 adult consumers (63.7%) and 188 child/adolescents (36.3%).**
- **Sample: Of the 330 adult consumers, 319 (96.7%) responded for themselves, 5 (1.5%) had a parent/guardian respond for them, and 6 (1.8%) responded for themselves with the additional input of a parent/guardian. Of the 188 child/adolescent consumers, 13 (6.9%) responded for themselves, 152 (80.9%) had a parent/guardian respond for them, and 23 (12.2%) responded for themselves with the additional input of a parent/guardian.**
- **Level of Care: In all, 1 treatment level of care was utilized by respondents, Crisis Intervention Services.**
- **Methods: Data was collected by 7 interviewers.**
- **Treatment Facility: Data was collected from 5 Treatment Facilities that served members from the Capital Region.**
- **Type: Overall, of the 518 interviews 474 (91.5%) were face-to-face and 44 (8.5%) were conducted by phone.**

In addition to surveying recipients of Crisis Intervention services, CSS surveyors also visited Drug and Alcohol Inpatient as well as Drug and Alcohol Intensive Outpatient facilities during the 2nd quarter 18-19. These reports will be finalized and published following the 4th quarter 18-19 as per the schedule of surveys.

We welcome questions, comments and suggestions. Please contact:

**Abby Robinson
C/FST Manager
4775 Linglestown Road
Harrisburg PA, 17112
(717) 651-1070**