Client Satisfaction Quality Improvement Tool and Sample Surveys

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Introduction

Assessing your client's satisfaction with all aspects of the Family PACT services you provide is valuable input to guide modifications and improvement in service delivery. The Quality Improvement (QI) Tool provides some background on why it is important to collect client satisfaction feedback. This QI Tool discusses the timing, frequency, and options for data collection. Additionally, the QI Tool describes how to analyze and use client satisfaction results to plan improvements in client services.

Why Conduct Client Satisfaction Assessments?

Conducting client satisfaction activities can help you to:

- Identify opportunities for service improvements;
- Identify what clients want as opposed to what you or your staff (or your Board of Directors) think they want; and
- Provide feedback to service delivery staff, management, and others about program effectiveness.

Steps in the Process

In order to carryout successful client satisfaction activities, the following steps should be completed:

- Decide what you want to look at and learn. Research shows there are six basic areas of the most concern to clients. Those areas are: Amenities; People Skills; Environment; Medical Expertise; Affordability and Systems.¹ These are explained in Appendix A "Client Centered Care."
- 2. Choose which method you want to use to collect information from clients about their satisfaction with your services.
- 3. Select who will be involved in collecting information from clients and prepare them for that role.
- 4. Interpret the data you obtain from clients so you can use it to improve services.
- 5. Share the results with staff and get them involved in planning improvements.

Choose a Data Collection Method

Different approaches to assessing client satisfaction include Interview Methods, Questionnaire Methods, and Ongoing Input Mechanisms.

Interview Methods can take the form of in-depth interviews, client focus groups or exit interviews. It is best for interviews to be conducted by a non-staff member who has been trained to elicit client responses.

¹ Leebov,W., Vergare, M., Scote, G. (1990) Patient satisfaction: A guide to practice enhancement. Ordell, NU: Medical Economics Books.

Questionnaire Methods, such as mail or e-mail surveys, telephone surveys and exit surveys are relatively simple to use. Because of the confidentiality issues with Family PACT services, mail, e-mail, and phone surveys are not frequently used. Exit surveys are the most commonly-used method of data collection in family planning settings.

Ongoing Input Mechanisms include toll-free numbers, suggestion boxes, and response cards.

The advantages and disadvantages for each method are listed below:

Method	Advantages	Disadvantages
Interview Methods In-depth interviews Client focus groups Exit interview	Interviewer can probe for more details and explanations than is possible from a written form.	Time intensive to conduct, compile, and analyze data (especially with individual interviews).
	Clients are more likely to share honest opinions and feelings.	Need qualified individuals to conduct interview/focus group.
Questionnaire Methods Mail and e-surveys Phone surveys Exit surveys 	Inexpensive	Confidentiality may be compromised with mail, e-mail, or phone surveys.
	Can design questions relevant to specific areas of interest (environment, people skills, etc.).	Questions frequently do not match the literacy or language level of the population.
	Easy to compile and analyze responses.	
Ongoing Input Mechanisms Toll-free number Suggestion box Response card 	Good source for soliciting ideas and complaints. Can be inexpensive	Individual opinions do not necessarily represent the majority of clients.

The two most **frequently used methods in family planning clinics are focus groups and surveys**. Consequently, the remainder of this QI Tool will focus on these two methods.

Focus Groups

Why conduct a focus group?

Focus groups "give you a sense of what is going on with people's minds and lives that you simply can't get with survey data," according to Lee Atwater, political consultant and focus group expert.

Conduct a focus group:

- To draw upon respondents' attitudes, feelings, beliefs, experiences and reactions that are more readily expressed in the social atmosphere and interaction of a group;
- To get more in-depth input than is possible on a survey; and
- To gain a larger amount of information in a shorter period of time than individual interviews or observations would provide.

Consider using a focus group to follow up on survey results. This is especially useful if a significant number of respondents have expressed dissatisfaction with something about your site and you want to learn more. Another instance when it might be helpful to conduct a focus group would be if the organization is doing long-range strategic planning about changes or additions to services, hours, or locations for services.

<u>Skills</u>

The most critical focus group skills are those of the moderator, who must encourage interaction and honest responses, yet should keep the group on task. Effective moderators use excellent group facilitation and communication skills, especially in establishing rapport and asking open ended and follow-up questions. If no one at the site has ever led a focus group, a volunteer from the community (i.e., college student or staff from a partner agency) may be available to lead the first focus group.

In addition to a moderator (or facilitator), someone else needs to take notes. A note-taker must be very skilled in capturing what participants actually say, as well as summarizing when appropriate. Focus groups can also be taped and the conversation transcribed later.

Resources

Conducting focus groups does not have to be expensive, complicated, or time-consuming. The greatest investment will be staff time to plan for, conduct, and follow up on the information from the group. Additional concrete resources include paper and pens for the note taker(s) (or a laptop computer), possibly a digital recorder, a comfortable private space (preferably in a neutral location), and some simple incentives. Be sure to provide refreshments and potentially gift cards or other items as incentives for participants. If participants are parents, provide child care. Also, consider providing transportation, especially if the focus group members include adolescents.

Most people think that asking clients to participate in a focus group would be a burden on them; however, participating in a focus group may be of enormous benefit to the attendees. They may see it as a great opportunity to be involved in the decision-making process, valued as experts, and the chance to work collaboratively with providers. If a group works well, trust develops and the group may explore solutions to a particular problem.

Action plan

Focus groups should consist of at least four, but no more than ten people. The group should be small enough for everyone to have an opportunity to share insights, but large enough to have diverse perceptions.

Prepare the questions in advance by asking:

- What is the goal of the focus group?
- What do we want to learn from participants?
- Why are we doing a focus group instead of individual interviews or another method?

Be sure that every question that is asked feeds back to the goal and that there is a plan for using the responses to that question. If it is unclear why the question is being asked, do not ask the question.

Guidance for questions:

- Develop five to six questions before the focus group occurs.
- Use open-ended questions; avoid yes/no questions.
- Use probing follow-up questions: "What influenced your answer?" or "Please say more about that."
- Encourage alternative points of view: "Does anyone feel differently?" or "What are some other points of view?"

Conducting focus groups:

- Welcome and thank participants, provide an overview of the topic, and establish ground rules for the group (such as speaking one at a time).
- Discuss confidentiality issues, tape recording, and note taking.
- Let participants know that there is no right or wrong answer and that you are interested in both positive and negative comments.
- Encourage participants to share their point of view even if it is different from what others have said.

Surveys

Using surveys to measure client satisfaction on a routine basis can minimize staff anxiety, but it can also decrease the effectiveness of the response if clients are asked too frequently to complete surveys. Beside too frequent, surveys are often too long, are not systematically collected from clients and/or not analyzed.

To be most effective, client satisfaction surveys should:

- Be collected only periodically during the year;
- Kept short and easy to complete;
- Be distributed and promoted to clients by staff; and
- Assess client expectations as well as their satisfaction.

Sample surveys

Attached are five short survey forms, each one focusing on one of the aspects of health care that clients say is important (Amenities, People Skills, Environment, Medical Expertise, and Affordability/Systems). These or similar surveys can be created to serve the organization's needs at the time.

Each sample survey is designed to solicit clients expectations as well as their satisfaction, since without doing so we have no way of knowing what is important to clients. By asking clients how important specific elements of their care are to them, we can then use their expectation scores as a baseline for comparing satisfaction scores.

Staff role

It is critical to involve staff in the collection of survey tools. You'll need to decide which staff are going to hand out and explain the surveys to clients, and then make sure these staff are enthusiastic about getting honest input and can convey that enthusiasm to clients. Simply placing surveys on the counter is not sufficient. Staff needs to be involved. Posting signs near the surveys can also be helpful, but be sure to take them down when you are not actually conducting client satisfaction activities.

Sample instructions for staff regarding surveys

- 1. Please give each patient one survey in the appropriate language and one envelope.
- 2. Instruct the patient to complete the first part of the survey before they see a staff person (e.g. at the front desk or in the waiting room). Ask them to take a few moments after their visit to complete the second part of the survey.
- 3. Ask clients to place the completed survey in the envelope and drop it off in an identified location in your clinic. A locked box is probably the best. The drop-off location should be in an area that patients frequent (near the exit) and that is away from areas that staff tend to occupy. We want the clients to feel that they can drop off the survey with complete assurance of anonymity. The drop-off box or envelope should be clearly labeled.

<u>Return rate</u>

An important issue to note is the return rate of surveys. If it is low (80% or less), this prompts questions such as:

- How are the surveys distributed?
- Does staff explain the surveys and encourage clients to complete them or are they simply left on a counter for clients to pick up?
- How is the survey explained to staff?
- What training has been or could be done with staff to help them see this as a positive opportunity to engage with clients, improve services, and enhance their working environment?
- What cultural issues might interfere with your clients comfort level, interest, or willingness to complete the surveys? Is language a barrier or are there other more complex issues?

Analyzing Results

Focus Groups

For focus groups, review the transcript or notes from the session. Potentially, group responses according to the questions asked. Another option is to sort responses into different areas/issues of importance to clients (i.e., Amenities; People Skills; Environment; Medical Expertise; Affordability and Systems).

Results should include overall themes from the group with example quotes given for each theme. Indicate whether the quote was an exception, a common theme among participants, or typical of certain subgroups of participants. With staff assistance, identify the most important findings of the focus group and any areas of client services that need improvement.

Surveys

If you utilize the attached sample survey forms or similar ones that solicit clients expectations, you can compare the average expectation score to the average satisfaction rating for your site. Dissatisfaction is indicated if a satisfaction score is lower than the expectation score and highlight areas for improvement.

Tabulating Your Results

Demographic data

The demographic data is fairly simple. The answers can be used to get a percentage of clients who fit into certain categories, such as age or race. These percentages can be calculated by adding the number of specific responses, dividing that number by the total number of surveys completed, then multiplying that number by 100 to get the percentage.

As an example, a clinic conducts a survey with 25 clients. On the first question, 20 respond that they are female, 5 respond they are male. To obtain the percentage that responded that they were female, we carry out the following calculation: $(20 \div 25) \times 100 = 80\%$

Other data

The other questions on the sample surveys are rated on a scale and those ratings must be averaged to get a final score. To tally the answers for rated questions, there are a few steps to go through with each question. Take a look at the example below:

How Would You Rate:	(Awful=1, Bad = 2, Okay=3, Good=4, Great=5)

The process of scheduling your appointment? 1 2 3 4 5

In order to get an average of all the responses, it may be easiest to create a table with five columns—one for each rating. You can use that table to count up the number of responses to each rating. See example below:

Rating Scale	1	2	3	4	5	Total		
1. # of responses to each rating	1	1	4	22	9	= 25		
2. Multiply # of responses by the amount assigned each rating	X1	X2	X3	X4	X5			
3. Calculate answers to #2 above and add answers together for a total score	1	2	12	44	40	= 99		
4. Divide the sum of all the answers by total number of responses to the question	99 divided by 25 = 3.96 average score for this question							

You will need to go through this process with each question. Do not make the assumption that everybody answers all the questions. The number "25" in the above example will likely change from question to question.

Analysis considerations

If you can calculate an average client expectation score and an average client rating of your site's performance, it is possible to identify which aspect of your services are meeting client expectations and which are not. "Dissatisfaction is indicated if a satisfaction score is lower than the expectation score."

When you review your scores consider these questions:

- How close are your satisfaction scores to the expectation scores?
- How high are client expectations?
- Are client expectations too low or about right?

The other thing to keep in mind is "courtesy bias." Many clients express more satisfaction than they actually feel in order to be polite or because they are afraid of being identified. In addition to being very sensitive to slight differences between expectation and satisfaction scores, look for small or subtle expressions of dissatisfaction.

When you review clients comments, note if they add information about the questions in the area of focus you chose, or if their comments are about a whole other area. If they are about a whole other area, the next survey should focus on that area.

Using Your Data to Plan Changes and Improvements

Client satisfaction data can become a powerful tool to make great improvements to your clinic services. Often, fixes can be simple and inexpensive and can make a big difference.

Discussing the results from client satisfaction efforts with as many staff as feasible is ideal. Besides presenting the data from clients, you will also have the opportunity to get staff input and ideas for the most important step in the process: what changes the site will make in response to the client feedback? While written results may seem quicker and easier, presenting the data in person provides an opportunity to highlight key results and more importantly to continue staff involvement and commitment to the next step of putting the data to work.

One approach involves listing the results/issues identified by clients and getting staff input on possible changes. By focusing on the individual issues clients identified, staff can brainstorm possible solutions or changes that would address the specific issue. For each issue, have staff brainstorm, as a whole group or in small groups, ways they can think of to provide fantastic service in the areas identified.

Another resource for potential solutions is the "*Customer Service Tool for Quality Improvement for Family PACT Providers*" (found at <u>www.familypact.org</u> under the Provider tab/Provider Resources/Quality Improvement Tools) which describes customer service approaches that can improve client satisfaction.

Once all the ideas for change have been identified, it will probably be necessary to prioritize the ideas that can be implemented. If possible, involve staff in the prioritizing of ideas. By using colored dots or some other mechanism, ask staff to vote on the top three ideas they would like to see the organization tackle.

Once the priority ideas have been identified, the next step is to create an action plan for change. Staff can be involved in providing input into the action plan or the management team may develop and work with staff to implement the action plan. Whoever is involved, there are five important elements to consider whenever change or innovation is planned:

Vision + Skills + Incentives + Resources + Action Plan = Motivated Staff and Change.²

The result of not including or missing some of the elements in the process and possible solutions are described below:

² Adapted from Della Ambrose (1987) and Time Knoster (1991), http://www.nasponline.org/publications/cq306knoster.html

Missing Element	Result	Solution
No Vision	Confusion and drudgery	Involve everyone
No Skills	Anxiety and failure	Ensure staff have skills to perform tasks
No Incentives	Unmotivated, slow or no change	Identify individual motivators
No Resources	Frustration and limited change	Reallocate; get creative
No Action Plan	Uncertain/false starts	Clarify who is responsible and who will follow-up.

Summary

Putting the data to work is the most important step. However, putting the data to work depends on what the data says; so there is no one simple prescription. What happens next depends on what was learned and what areas the site decides to change. It is important for staff to own the process, so it is important to create and commit to an action plan.

The action plan itself will include such elements as:

- 1. The issue being addressed;
- 2. Specific actions or changes that are planned to address the issue;
- 3. Which staff will be involved in taking the action or making the change;
- 4. What resources, skills, systems, etc., are needed to accomplish the change;
- 5. What is the time line for preparing and implementing the change; and/or
- 6. How you will know if the change was successful.

Write up your plan, and make it public. Celebrate successes and continue to check-in on your progress.

It will also be important to continue to conduct periodic client satisfaction assessments on the various aspects of client centered care. With each effort the staff will repeat the analysis and action plan for changes and improvements.

Sample

Client Satisfaction Surveys

Amenities

Please complete this **<u>before</u>** your exam and keep it with you.

<i>I am:</i> □ Female □ Male									
□ A new patient at this clinic	□ A returning patient at this clinic								
Under 18 years oldBetween 35 and 45	 Between 18 and Over 45 years of 		Betwo	een 2	5 and 34	4			
How would you describe your race	e/ethnicity?				_				
How would you rate:	-					od=4, Gr	eat=5		
The process of scheduling your ap	pointment		2						
The location of the clinic			2			5			
The greeting you received from sta	off today	1	2	3	4	5			
<i><u>How important is it to you, that:</u></i> Not at all important=1, Not important=2, N	ice but not necessary=3,	Impor	tant=4	4, Very	y Impo	rtant=5			
The clinic is comfortable and pleas	sant	1	2	3	4	5			

Please complete the next section <u>after</u> your exam.

<u>How would you rate:</u>	Awful=1, Bad=2, Okay=3, Good=4, Great=							
The comfort of the waiting room	1	2	3	4	5			
The comfort of the exam room	1	2	3	4	5			
Extras to make the clinic a nicer place	1	2	3	4	5			

What else would you like us to know?

Environment

Please complete this **<u>before</u>** your exam and keep it with you.

A new patient at this clinic	A return	ing patient a	at thi	s clin	ic	
 Under 18 years old Between 35 and 45 	Between 18 and 24Over 45 years old			Betwe	en 2	5 and 34
How would you describe your race	e/ethnicity? _				_	
<u>How would you rate:</u>		Awful=1, B	ad=2,	Okay=	=3, Go	od=4, Gre
The process of scheduling your ap	pointment	1	2	3	4	5
The location of the clinic	_	1	2 2	3	4	5
The greeting you received from sta	aff today	1	2	3	4	5
How important is it to you, that:						
Not at all important=1, Not important=2, N	lice but not nece	ssary=3, Impor	rtant=-	4, Ver	y Impo	ortant=5
The clinic is in good condition		1	2	3	4	5

Please complete the next section <u>after</u> your exam.

<u>How would you rate:</u>	Awful=1, Bad=2, Okay=3, Good=4, Grea						
The cleanliness of the clinic	1	2	3	4	5		
The condition of the building	1	2	3	4	5		
The surrounding neighborhood	1	2	3	4	5		
The ease of moving around the clinic	1	2	3	4	5		
The private places to talk with clinic staff	1	2	3	4	5		

What else would you like us to know?

Medical Expertise

Please complete this **before** your exam and keep it with you.

<i>I am:</i> □ Female □ Male							
□ A new patient at this clinic	A returning	patient a	t this	s clin	ic		
 Under 18 years old Between 35 and 45 	 Between 18 and 24 Between 25 and 34 Over 45 years old 						
How would you describe your race	e/ethnicity?				_		
How would you rate:	A	wful=1, Ba	d=2, (Okay=	3, Go	od=4, Great=5	ī
The process of scheduling your ap	pointment	1	2	3 3 3	4	5	
The location of the clinic		1	2	3	4	5	
The greeting you received from sta	aff today	1	2	3	4	5	
<i><u>How important is it to you, that:</u></i> Not at all important=1, Not important=2, N	ice but not necessary	v=3, Import	tant=4	4, Very	, Impo	ortant=5	
Medical staff are knowledgeable a	nd skilled	1	2	3	4	5	

Please complete the next section <u>after</u> your exam.

How would you rate:

Awful=1, Bad=2, Okay=3, Good=4, Great=5

The knowledge of the nurse practitioner or doctor	1	2	3	4	5
The skills of the nurse practitioner or doctor	1	2	3	4	5
The knowledge and skill of other staff	1	2	3	4	5
Receiving the service(s) you needed or wanted	1	2	3	4	5
Staff telling you about test results	1	2	3	4	5
Staff maintaining your confidentiality	1	2	3	4	5

What else would you like us to know?

Efficiency and Systems

Please complete this **before** your exam and keep it with you.

<i>I am:</i> □ Female □ Male								
□ A new patient at this clinic	A returni	ing patient	at this	s clin	ic			
 Under 18 years old Between 35 and 45 	 Between 18 and 24 Between 25 and 34 Over 45 years old 							
How would you describe your race	e/ethnicity? _				_			
How would you rate:		Awful=1, B	ad=2,	Okay=	=3, Go	ood=4, Great=5		
The process of scheduling your ap	pointment		2					
The location of the clinic	-	1	2	3	4	5		
The greeting you received from sta	aff today	1	2	3	4	5		
How important is it to you, that:								
Not at all important=1, Not important=2, N	lice but not neces	ssary=3, Impo	rtant=4	4, Very	y Impo	ortant=5		
The clinic visit does not take too lo	ong	1	2	3	4	5		

Please complete the next section *after* your exam.

How would you rate:	Awful=1, Bad=1	2, Oka	<i>ay=3</i> , −	Good	=4, Gi	reat=5	<u>,</u>
The quickness of staff		1	2	3	4	5	
The readiness of staff and clinic for your visit		1	2	3	4	5	
Time spent waiting for the nurse practitioner or	doctor	1	2	3	4	5	
Length of time spent for the visit		1	2	3	4	5	

Was your visit:

□too short □too long

□just right?

What else would you like us to know?

People Skills

Please complete this <u>before</u> your exam and keep it with you.

<u>I am:</u> Gamma Gamma Gamma Gamma Gamma								
A new patient at this clinic	A returning patient at this clinic							
 Under 18 years old Between 35 and 45 	 Between 18 and 24 Between 25 and 34 Over 45 years old 							
How would you describe your race	e/ethnicity? _				_			
How would you rate:	Awful=1, Bad=2, Okay=3, Good=4, Great=5							
The process of scheduling your ap The location of the clinic The greeting you received from sta	1 1 1	2 2 2	3 3 3	4 4 4	5 5 5			
<i>How important is it to you, that:</i> Not at all important=1, Not important=2, N	lice but not nece	essary=3, Impor	rtant=4	4, Ver	y Impo	ortant=:	5	
Staff are friendly and helpful		-	1 2	2	3 4	5		
Please complete the next se	ection <u>afte</u>	<u>r</u> your exa	ım.					
How would you rate:		Awful=1, l	Bad=2	, Oka	y=3,	Good=	4, Gre	eat=5
The show of concern and care from staff		1	2	3	4	5		
The ease of understanding staff		1	2	3	4			
Staff willingness to listen to or talk with you		1	2	3	4	5		
Staff keeping information about you private		1	2					
Staff meeting your emotional needs		1	_					
The helpfulness of staff		1	2	-				
The friendliness of staff		1	2	3	4	5		

What else would you like us to know?

Medical staff spending enough time with you

Please return this form when you are finished. Thank you for your feedback!

1 2 3 4 5

Appendix A

Client Centered Care³

Client-centered care involves six factors that a growing body of research teaches us what *patients* themselves care most about: clinic environment, people skills, medical expertise, systems, amenities, and affordability.

- 1. The environment must be clean, well-cared for, and in accessible and safe surroundings.
- 2. **People skills** include demonstration of concern, willingness to communicate, taking time to listen, paying attention to emotional needs, and helpfulness and friendliness of *all* staff.
- 3. **Medical expertise** is judged based on the examination skills of clinicians, as well as medical treatments and technology available.
- 4. **Systems** refer to the maze factor. How long does it take to get an appointment? How long does a client have to wait to be seen once in the clinic? How long does it take to get test results?
- 5. **Amenities** say "patients first." This may mean a child's play area in the waiting room, or free samples of medication or thermometers. Other examples are free parking, coffee in the waiting room, and attractive educational booklets.
- 6. The final factor, **affordability**, may not seem like an issue in subsidized sites, but the very fact of providing free or low-cost services may impact staff and client attitudes about the quality of care. Free services should be no less excellent and client-centered than high-cost services.

³ Adapted from "Key factors in practice enhancement," Encyclopedia of Practice and Financial Management