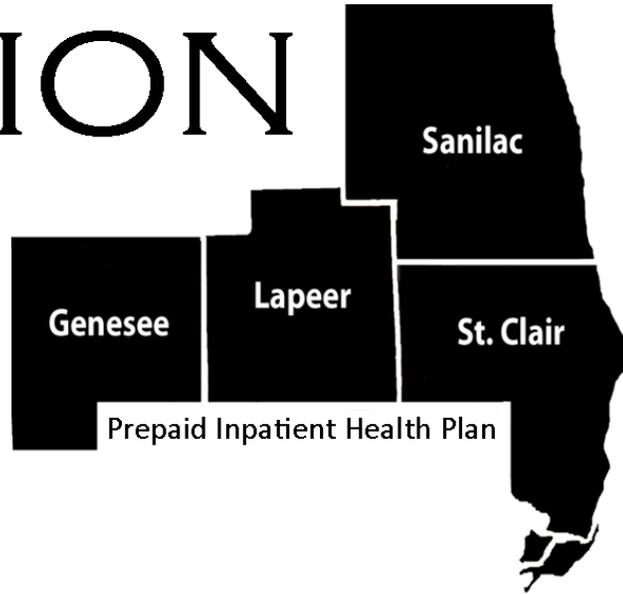


# REGION

# 10



## Customer Satisfaction Survey Report FISCAL YEAR 2023

**Region 10 Prepaid Inpatient Health Plan (PIHP)  
Customer Satisfaction Survey Report FY2023  
December 2023**

This report is a summary of the annual Region 10 PIHP Customer Satisfaction Survey regarding customer satisfaction in the regional provider network for Fiscal Year (FY) 2023. It represents the PIHP's effort to implement the Customer Satisfaction process as noted in the FY2023 Quality Improvement Program & Workplan.

***Survey Methodology***

In FY2023, Region 10 PIHP's Customer Satisfaction Survey project utilized aligned survey instruments. The survey instruments were designed in FY2016 and updated in FY2019 by the PIHP / Community Mental Health (CMH) Quality Management leaders on the Region 10 Quality Management Committee (QMC). In FY2019, four questions were added to the Adult survey and one to the Child survey to better address quality and availability of service delivery, while better aligning the two surveys. For FY2020, the questions were rearranged to mix the subjective/person-focused questions with the questions regarding satisfaction. In FY2022, some minor changes were made to the Adult and Child surveys after receiving feedback from the Region 10 Quality Management Committee. The wording of question number five on the Adult survey was changed to better align with Region 10's mission. On both the Adult and Child survey, the "provider use only" section used to identify members receiving Home and Community-Based Services (HCBS) was moved to the bottom of the survey, away from the questions, to alleviate confusion.

The CMH Adult population along with individuals served in the Substance Use Disorder (SUD) network, specifically by SUD Treatment Service Providers, were administered the Adult survey. The FY2023 Customer Satisfaction Survey was conducted from August 7 – August 18, 2023 throughout the SUD network. The SUD providers administered the survey and returned scanned or hardcopy completed surveys to the PIHP for data entry. The CMH Child population was administered the Child survey. The CMH Adult and Child surveys were administered to Region 10 Medicaid beneficiaries only. Individuals throughout the region were asked to collectively rate their service experience. The FY2023 Customer Satisfaction Survey was conducted from July 31 – September 1, 2023 throughout the CMH network. Each CMH recorded survey responses via their preferred method and reported their data to the PIHP. The PIHP aggregated and analyzed the data.

Below are the questions asked in each survey. Questions are posed in a "yes" or "no" response format. Some questions allowed for the option to provide open-ended feedback.

The Region 10 Adult survey consisted of the following items:

1. I like the services I have received.
2. As a result of services received, my symptoms are not bothering me as much.
3. Staff were sensitive to my cultural/ ethnic background and treated me with respect.
4. As a result of services received, I am better able to control my life.
5. Staff believed in me by supporting my journey towards recovery, discovery, health, and independence.
6. Services were available at times that were convenient to me.
7. As a result of services received, I do better in social situations.
8. I am happy with the quality of services I have received.
9. Have you had any difficulty getting services due to any barriers? If yes, please explain.
10. As a result of services received, I deal more effectively with daily problems.

11. Overall, I am satisfied with the services I have received.
12. Do you have any other comments, questions, or concerns? If yes, please explain.

The Region 10 Child survey consisted of the following items:

1. As a result of services received, my child gets along better with family and others.
2. Services were available at times that were convenient for my family.
3. Staff were sensitive to my family's cultural/ethnic background and treated us with respect.
4. As a result of services received, my child is better able to do the things he/she wants to do.
5. My family got the help we needed for my child.
6. I am happy with the quality of services I have received.
7. As a result of services received, my child is better at handling everyday life.
8. Have you had any difficulty getting services due to any barriers? Please explain.
9. Overall, I am satisfied with the services I have received.
10. Do you have any other comments, questions, or concerns? Please explain.

In the Adult and Child CMH surveys, along with the SUD survey, the respondent was given the opportunity to provide their contact information if they wanted to be contacted by the provider for follow-up.

In both Adult and Child CMH surveys, one additional open-ended question was asked to supplement the findings obtained across each CMH:

- What would make services better for you or the community as a whole? Please explain.

In the SUD survey, two additional open-ended questions were asked to supplement findings across the SUD Network:

- Name one thing I like most about this program:
- Name one thing I think needs improvement in this program:

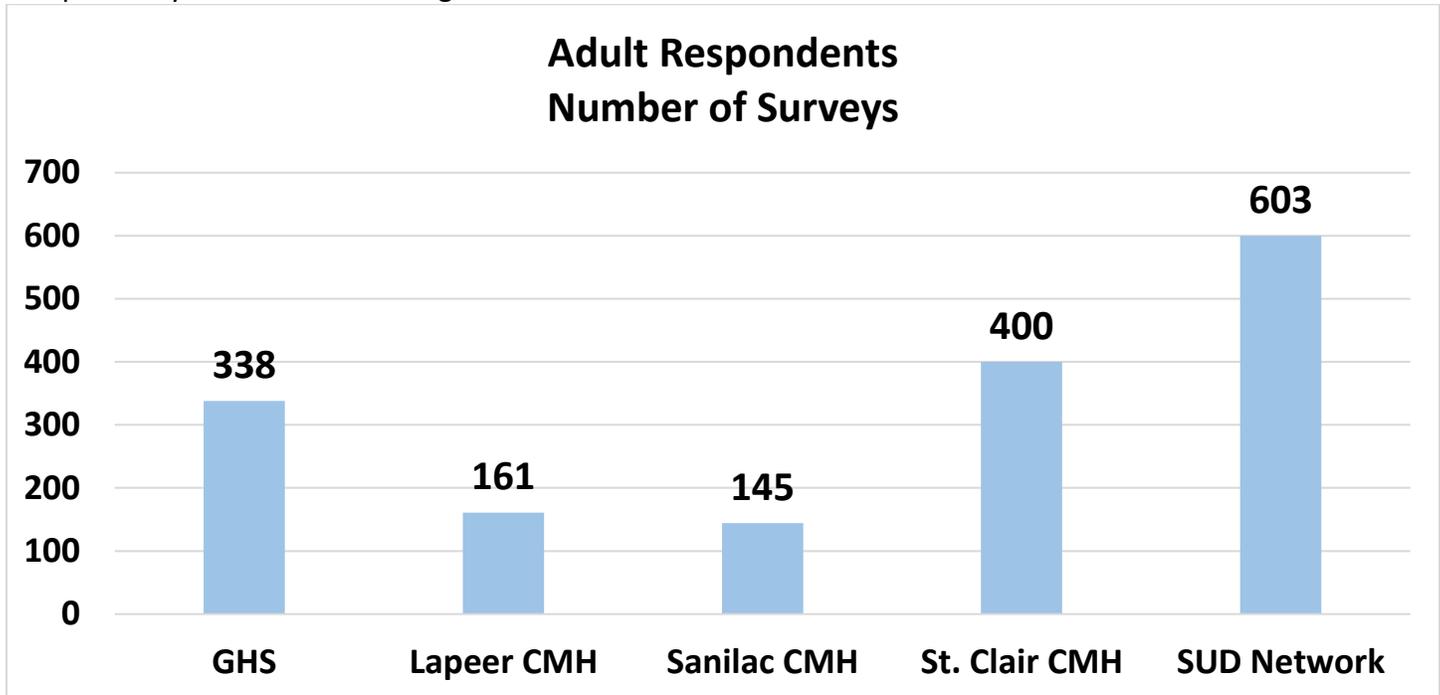
Individuals receiving long term support and services (LTSS) and HCBS were included in the sample population among each CMH and were included in the Adult and Child survey results. Survey data for the Adult HCBS population was also aggregated separately. HCBS provide individuals who need assistance with everyday activities the opportunity to receive services (such as personal care, homemaker, and adult day health services) in their own homes or the community as opposed to institutional settings (Centers for Medicare & Medicaid Services, 2022).

Surveys were administered via mail by Genesee Health System (GHS), Lapeer CMH, and St. Clair CMH. GHS, Sanilac CMH, and St. Clair CMH also administered a portion of surveys through telephone outreach. CMHs were instructed to offer a survey to all Medicaid beneficiaries who presented for services during the administration period. However, St. Clair CMH offered phone and in-person methodology for only three of the five weeks, beginning these methods on August 14, 2023 due to less-than-expected return on their mailout.

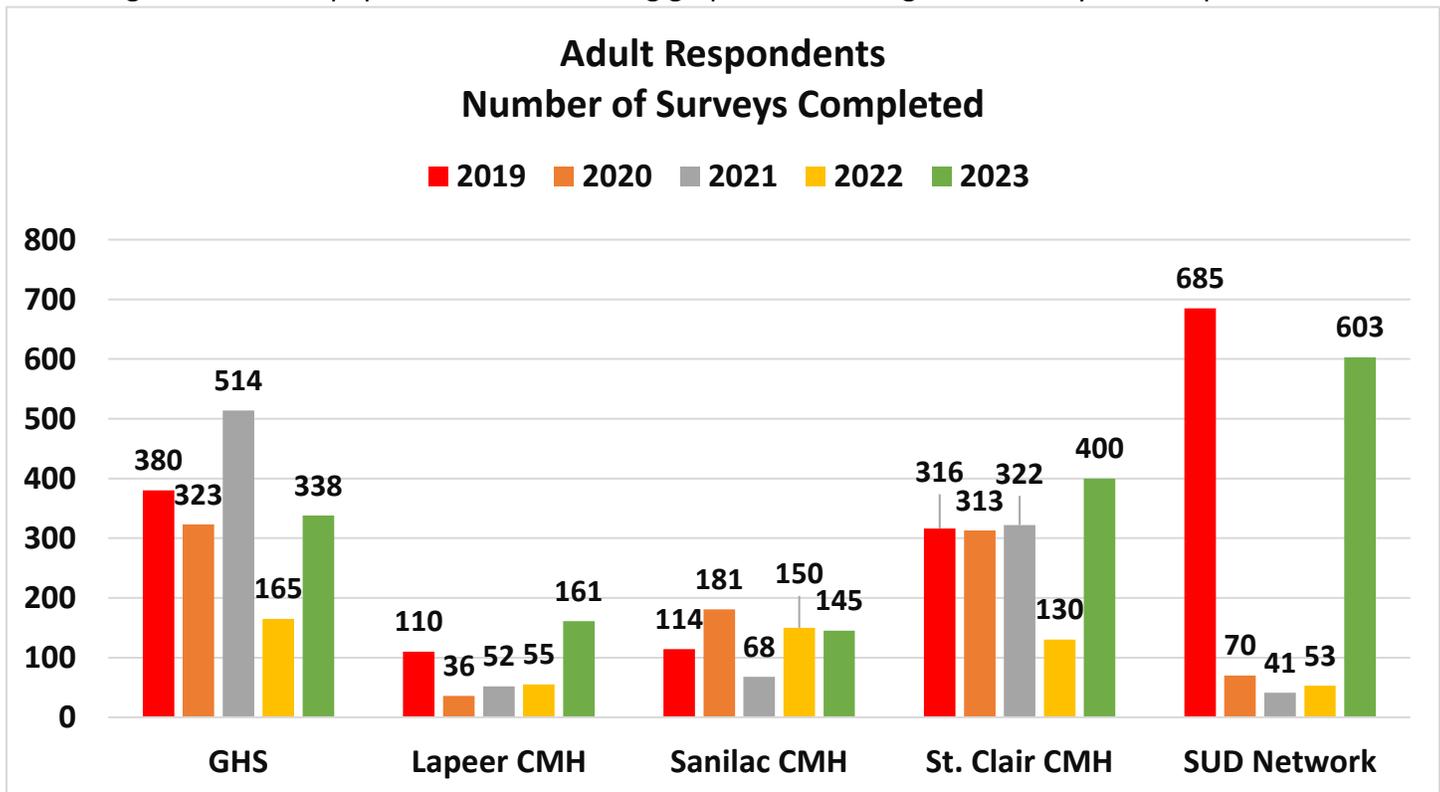
## Region 10 Survey Results

### Adult Surveys

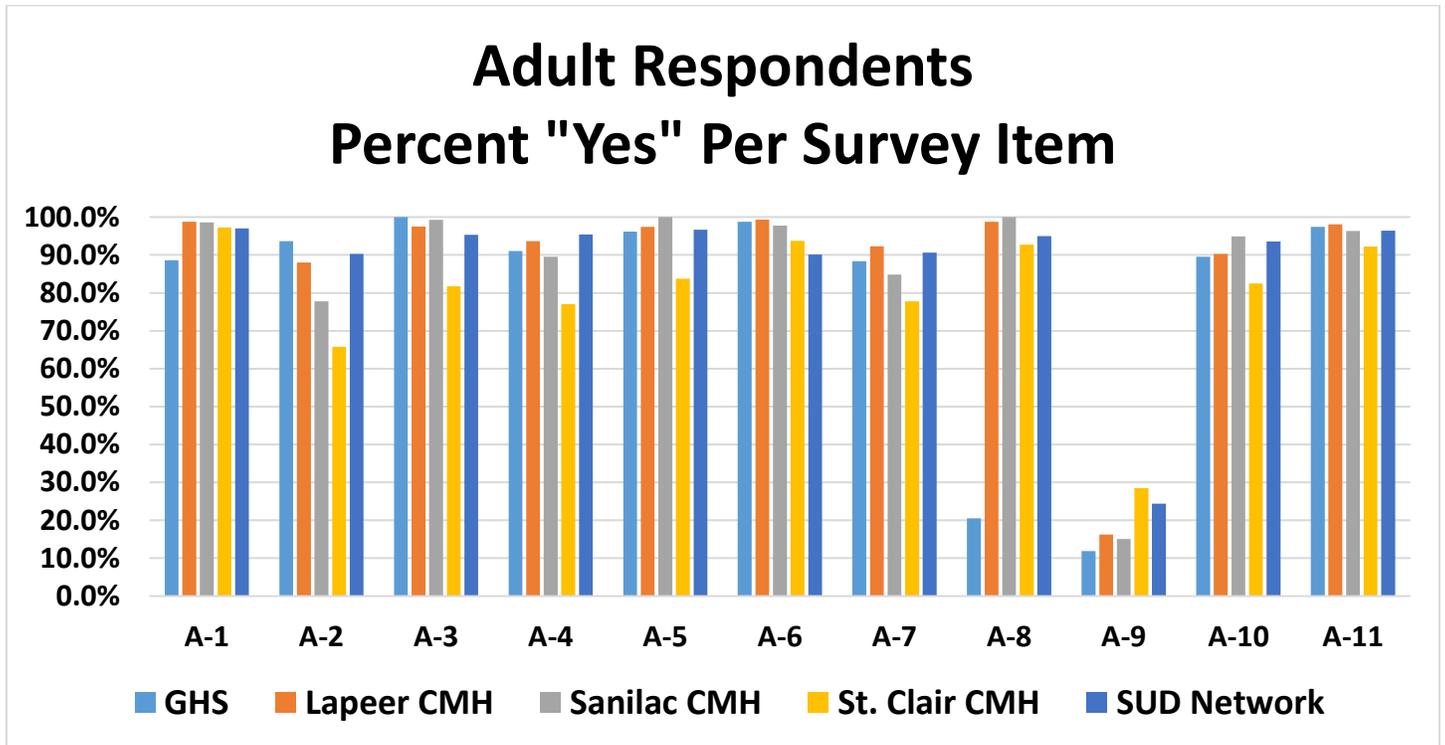
A total of 1,647 surveys were completed by adults receiving services in the Region 10 PIHP network. Of the 1,647 surveys, 1,044 were completed by persons receiving CMH services. The remaining 603 surveys were completed by individuals receiving SUD Treatment services.



This is a significant increase over FY2022 in which 553 Adults completed surveys throughout the network with 53 coming from the SUD population. The following graph shows a longitudinal analysis of response totals.



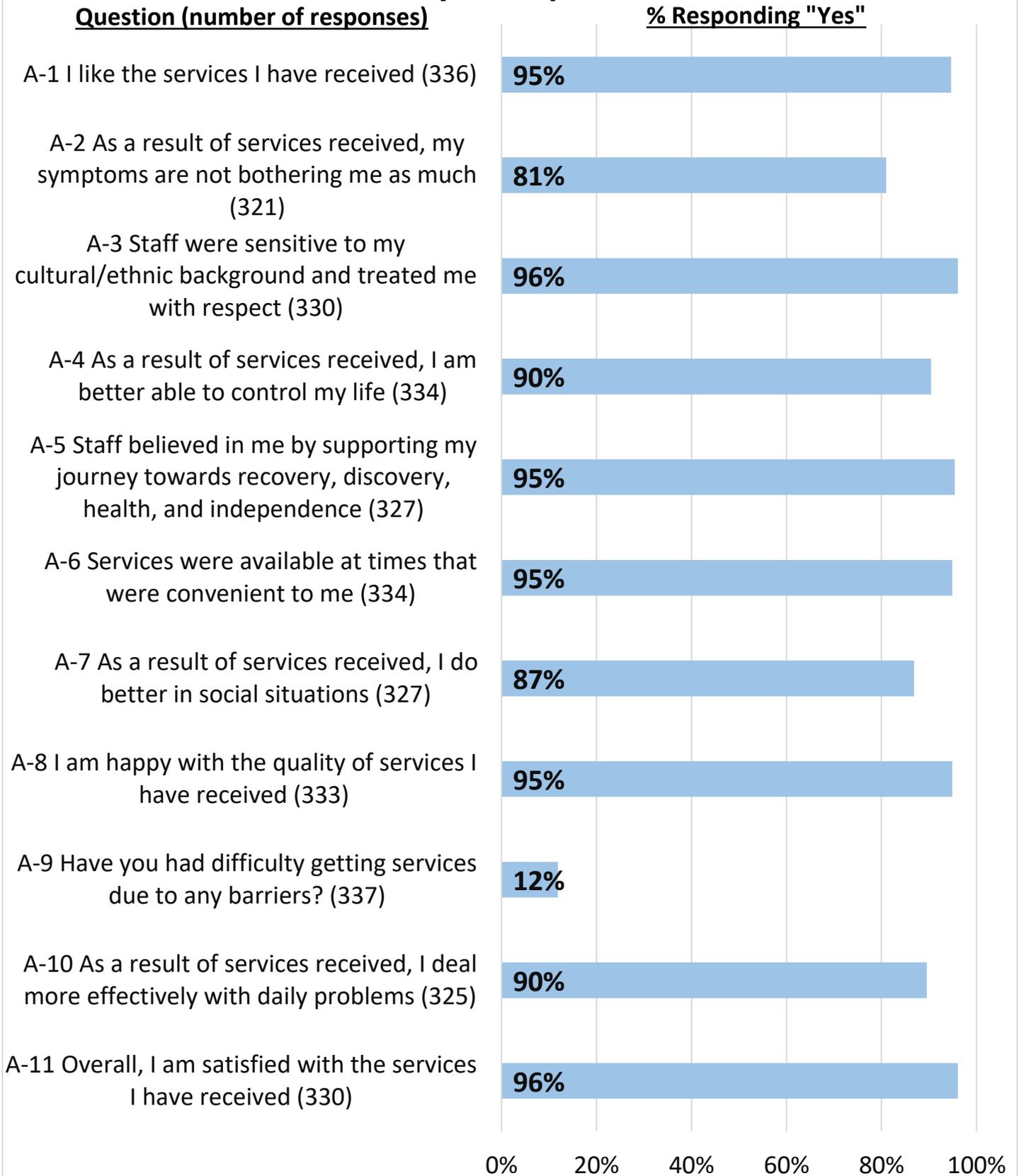
The graph below shows the percentage of “yes” responses per survey item for the Adult Survey.



The graphs on the following pages display survey detail from each CMH and the SUD Network for the Adult Survey. On each graph, “Surveys Completed” is the number of individuals completing the survey, the (n) next to each question is the number of responses received for the corresponding question, and the percentage is the percent of respondents answering “yes” to the corresponding question. See Appendix A for a full breakdown of Provider-level “yes” response rates and totals corresponding to overall satisfaction.

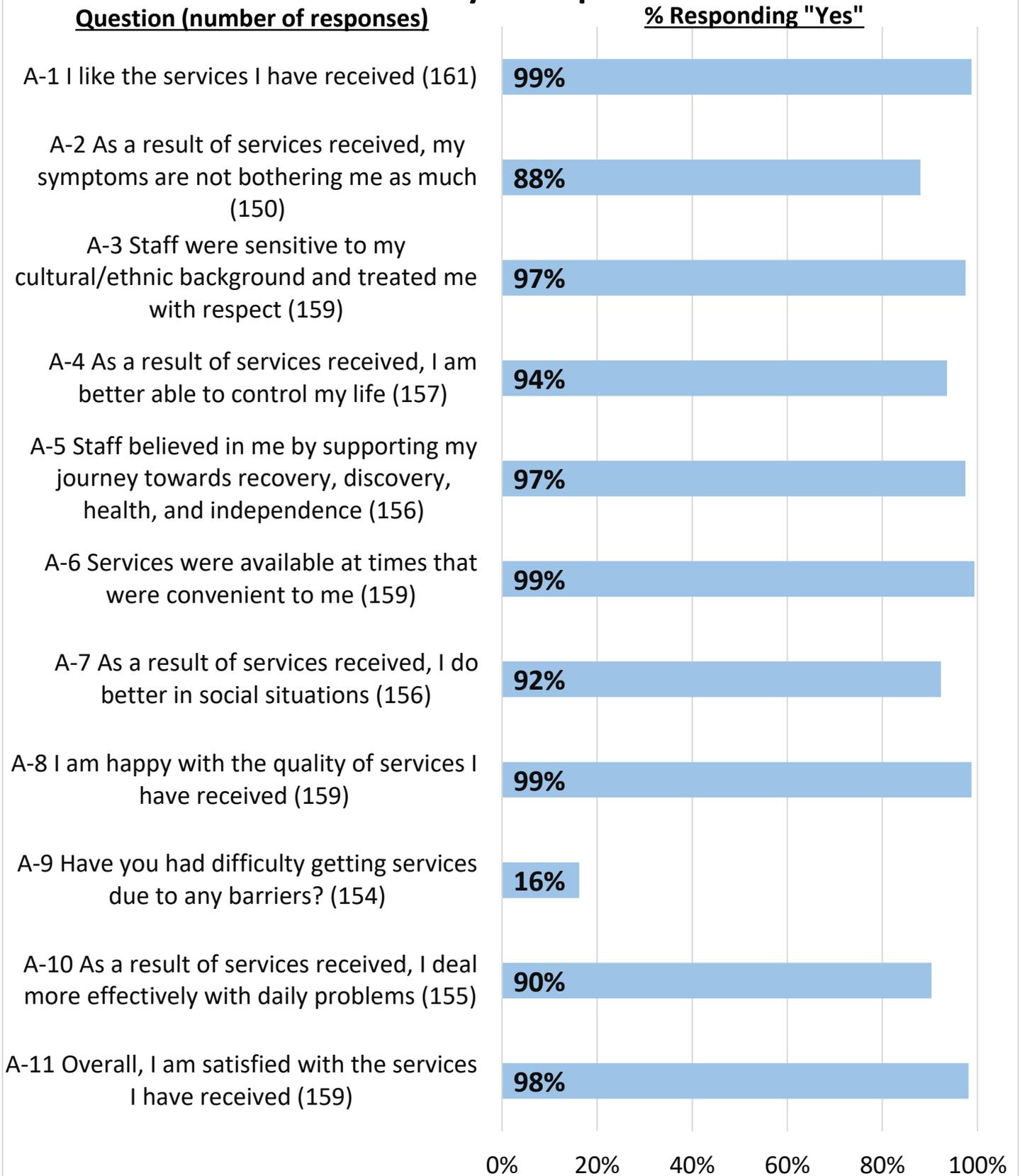
# GHS 2023 Adult Survey Responses

## Surveys Completed=338



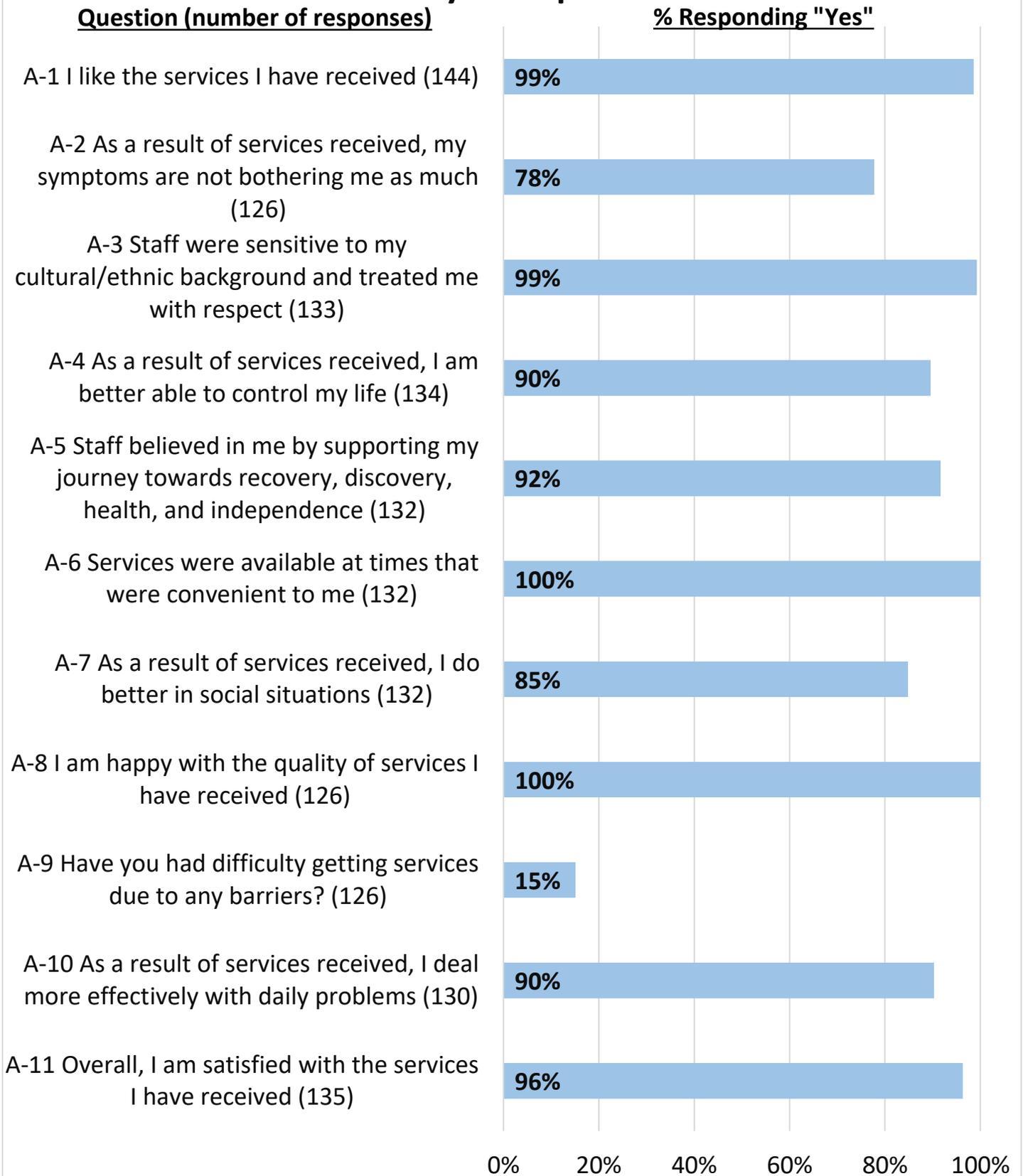
# Lapeer CMH 2023 Adult Survey Responses

## Surveys Completed=161



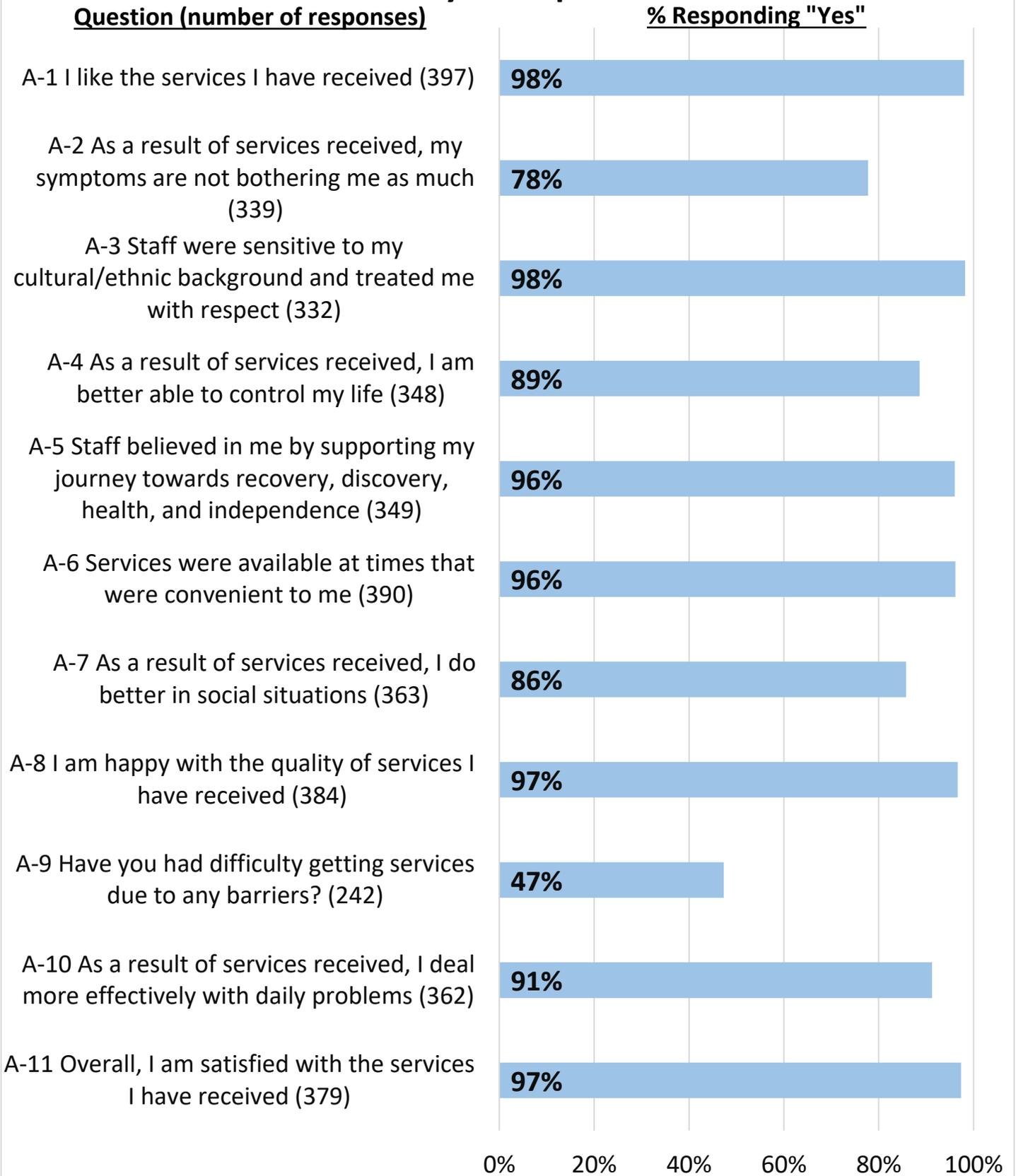
# Sanilac CMH 2023 Adult Survey Responses

## Surveys Completed=145



# St. Clair CMH 2023 Adult Survey Responses

Surveys Completed=400

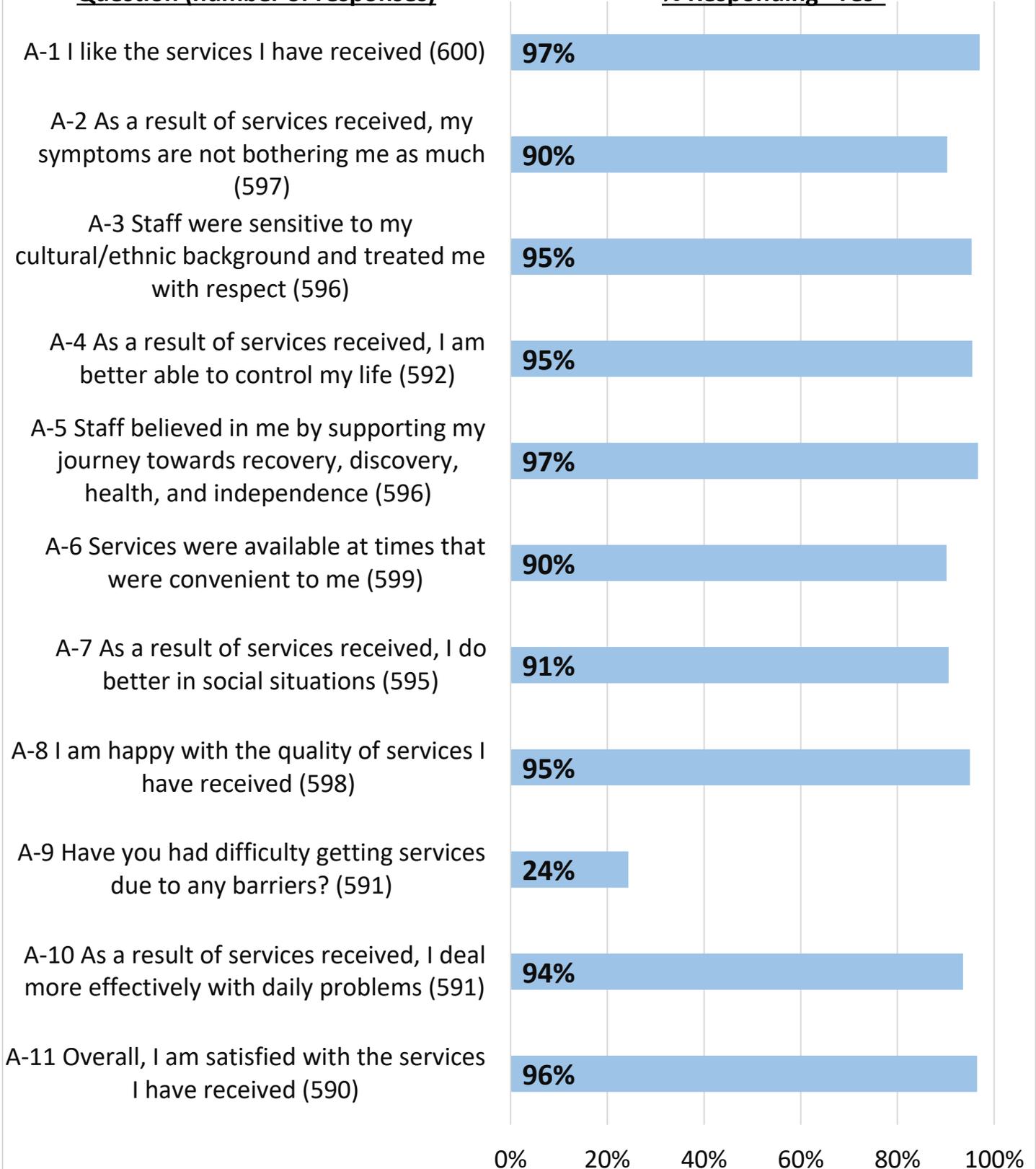


# SUD Treatment Providers Adult Survey Responses

Surveys Completed=603

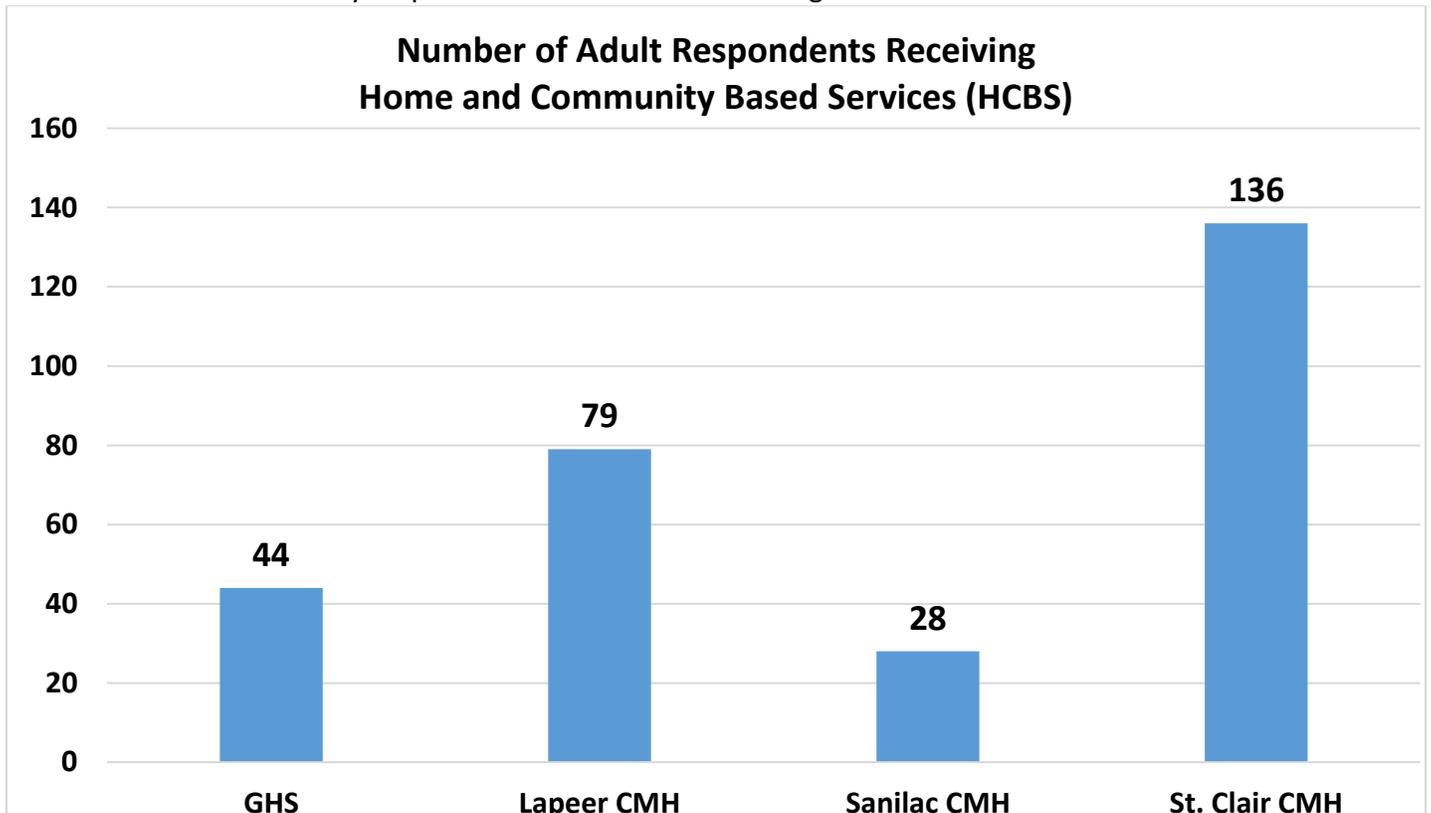
Question (number of responses)

% Responding "Yes"

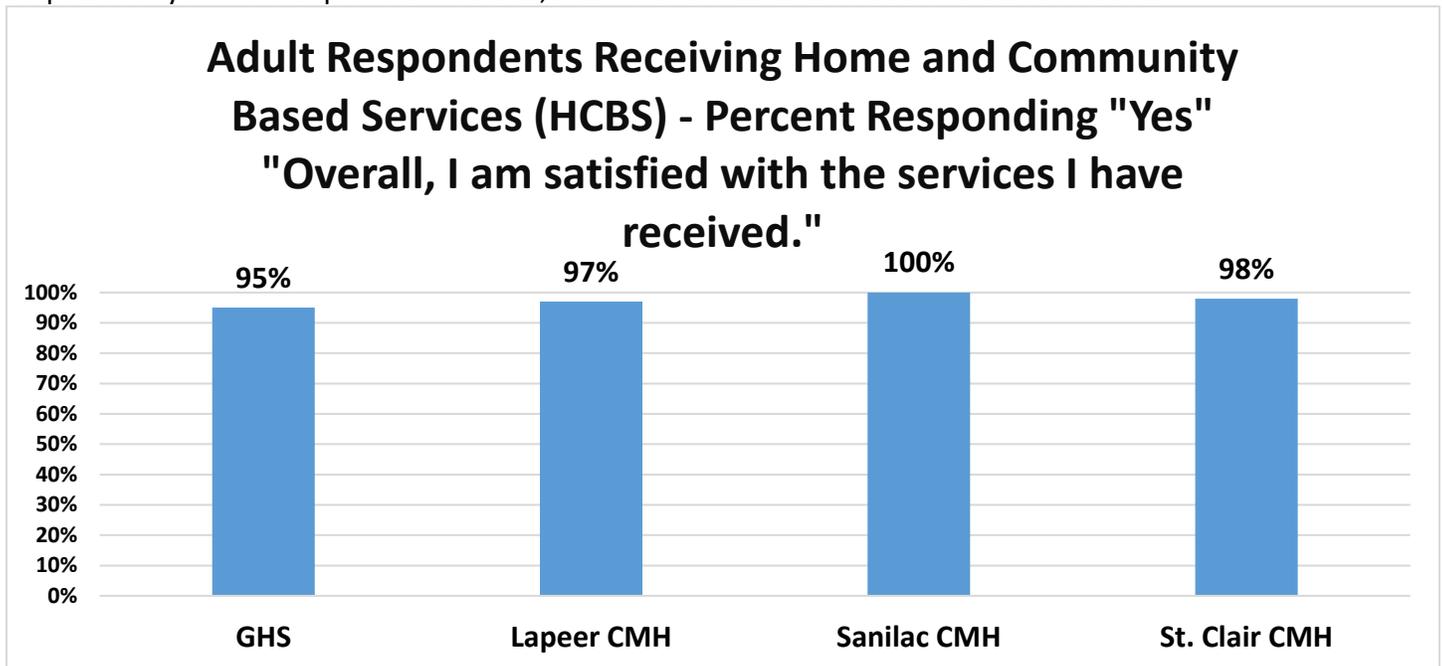


### Home and Community Based Services (HCBS)

Each CMH was asked to identify survey respondents who are receiving HCBS. There were 13 HCBS respondents from the Child population and 287 from the Adult population. The chart below shows the number of the Adult Survey respondents identified as receiving HCBS for each CMH.



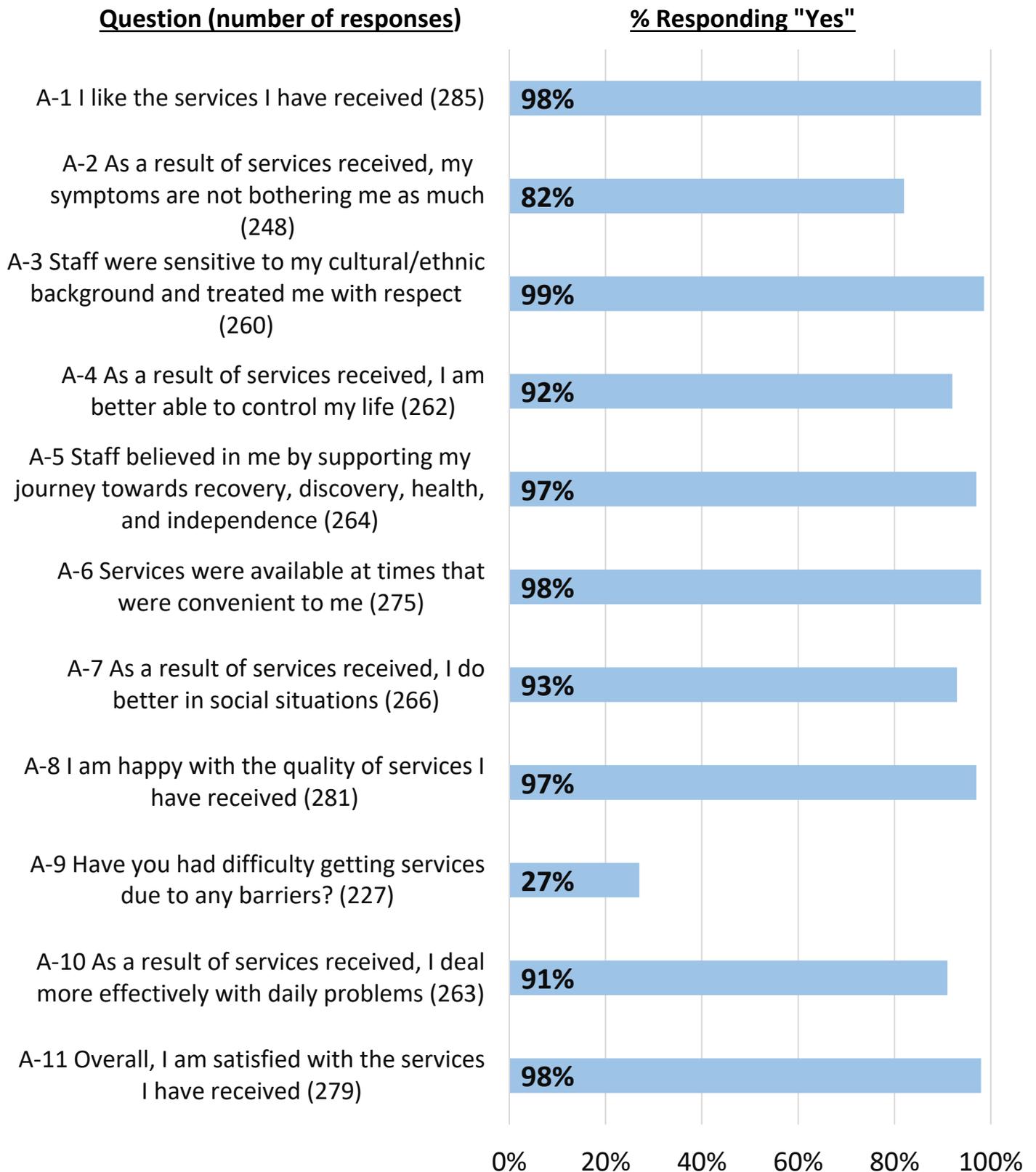
For those Adult Respondents identified as receiving HCBS, below is a breakout of the percentage who responded "yes" to the question "Overall, I am satisfied with the services I have received."



The following page details the average survey response across all 287 adults surveyed who were identified as receiving HSBS throughout the region.

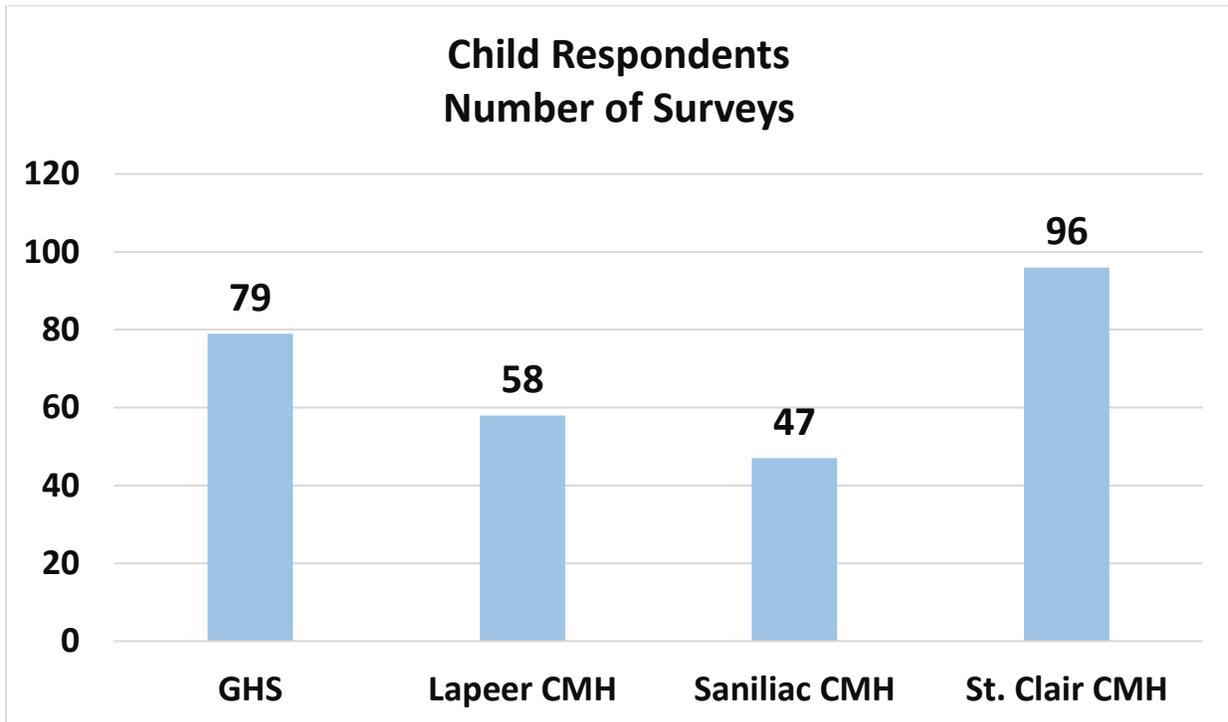
## Region 10 2023 Adult HCBS Survey Responses

### Surveys Completed = 287

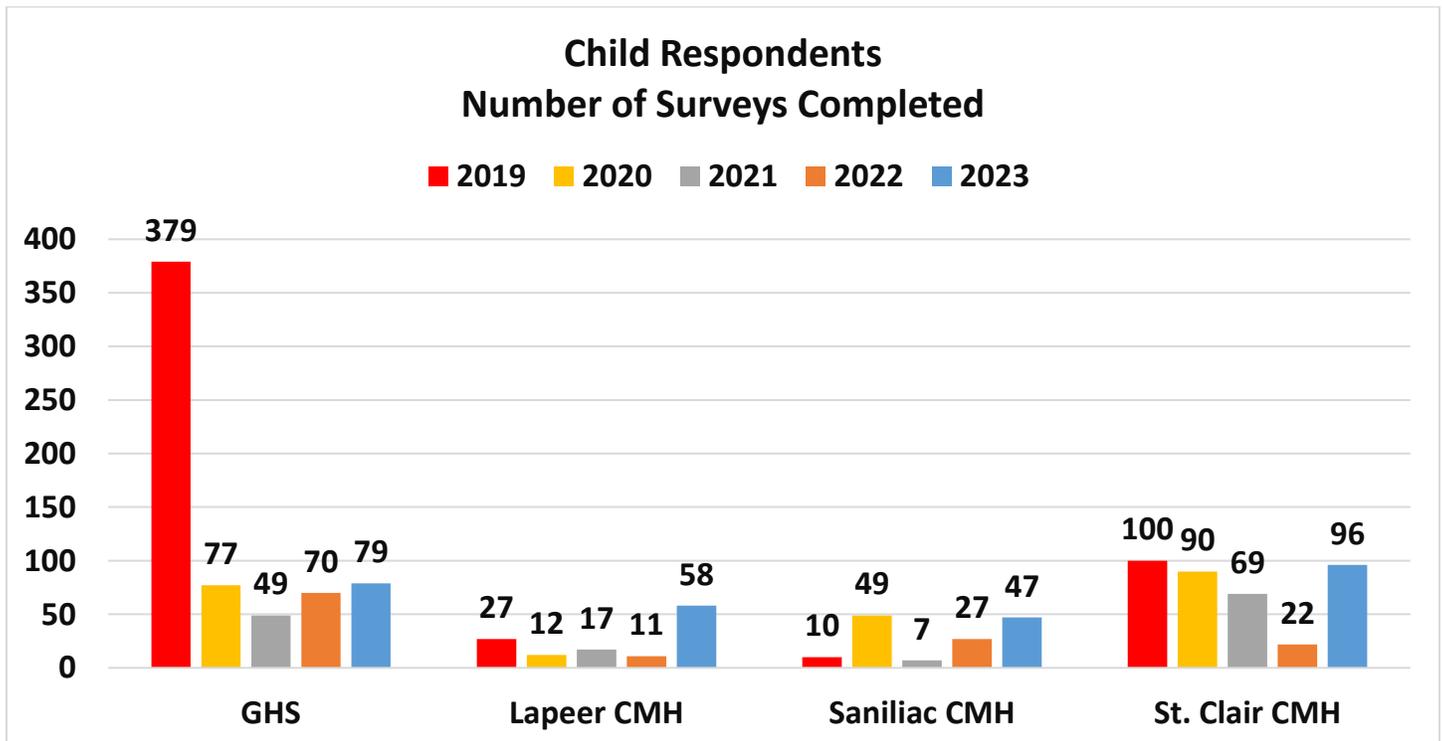


### Child Surveys

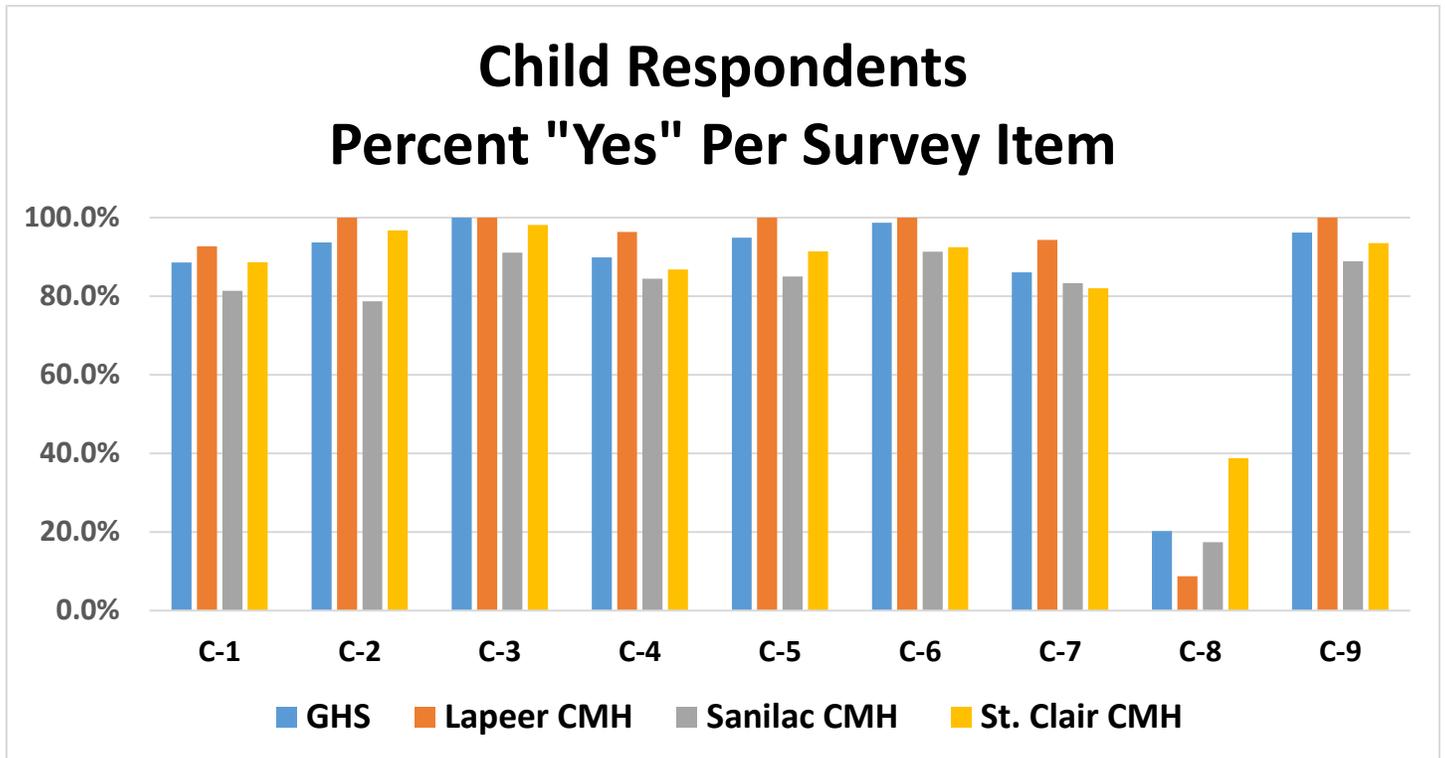
A total of 280 surveys were completed by the parents/guardians of children receiving services at CMH. The graph below shows the number of Child Surveys completed at each CMH.



This is a significant increase over FY2022 in which 130 surveys were completed by parents or guardians of children receiving CMH services. The following graph shows a longitudinal analysis of response totals.



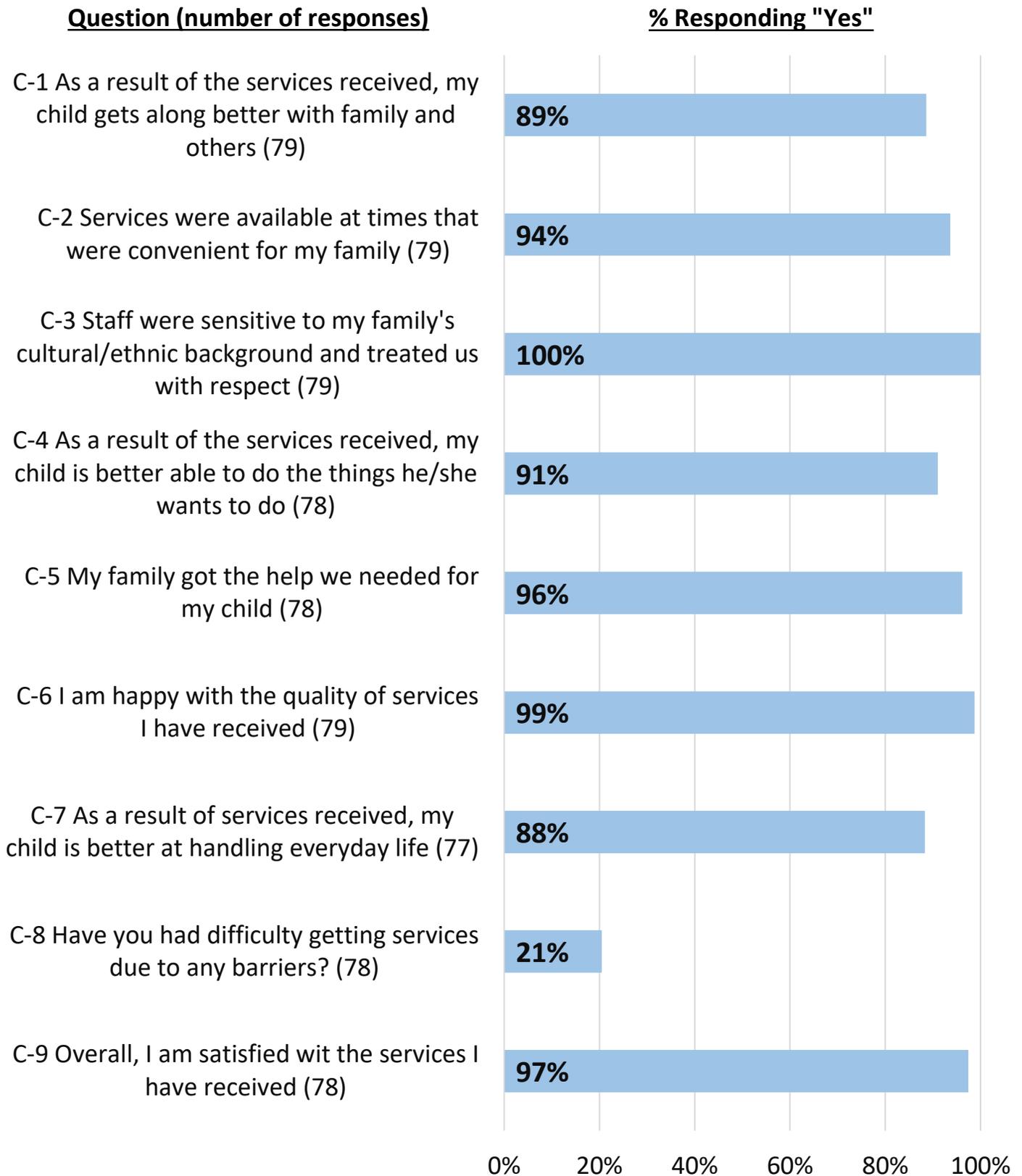
The graph below shows the percentage of “yes” responses for the Child Survey.



The graphs on the following pages display survey detail from each CMH for the Child Survey. On each graph, “Surveys Completed” is the number of individuals completing the survey, the (n) next to each question is the number of responses received for the corresponding question, and the percentage is the percent of respondents answering “yes” to the corresponding question.

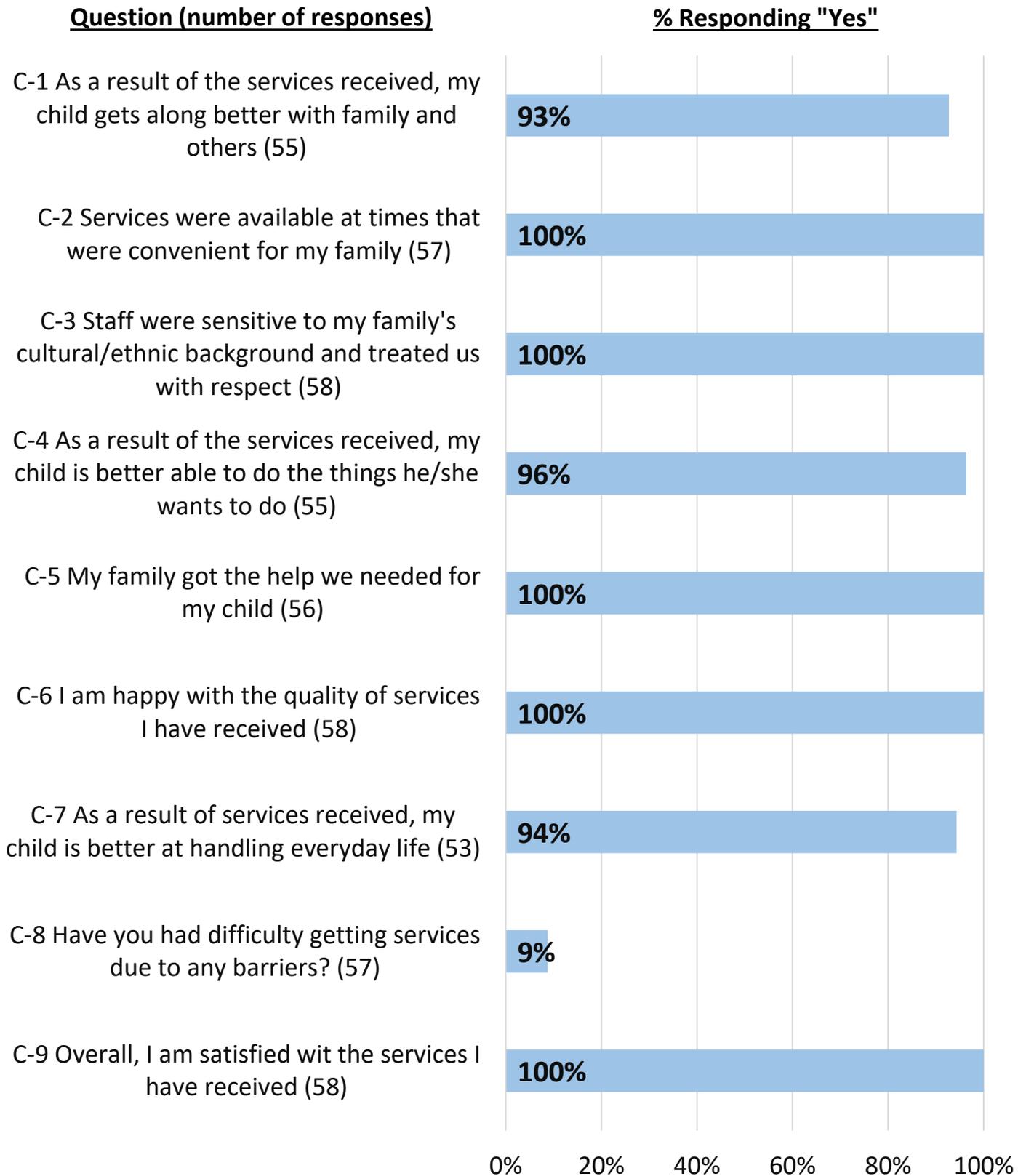
## GHS 2023 Child Survey Responses

### Surveys Completed=79



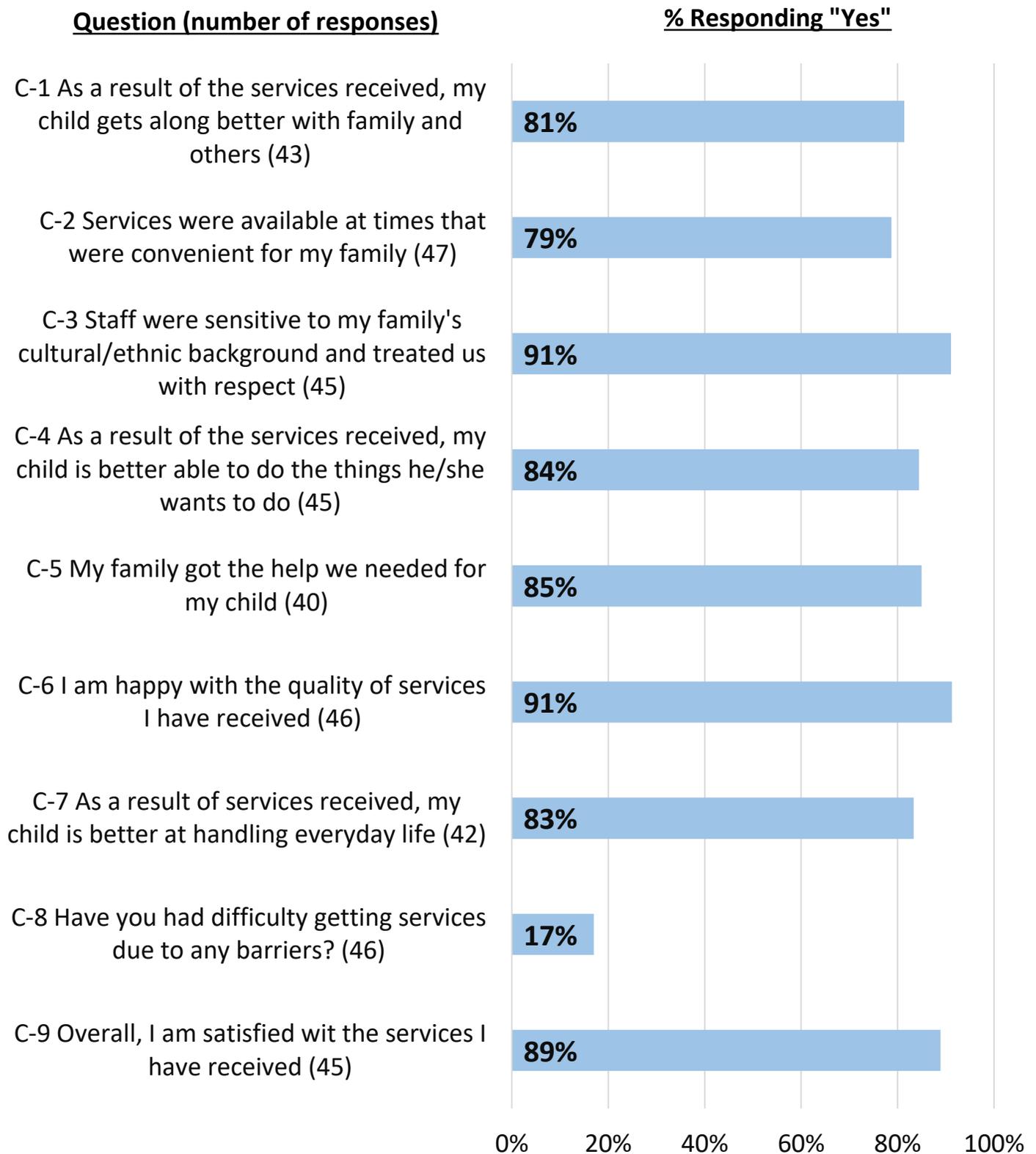
# Lapeer CMH 2023 Child Survey Responses

## Surveys Completed=58



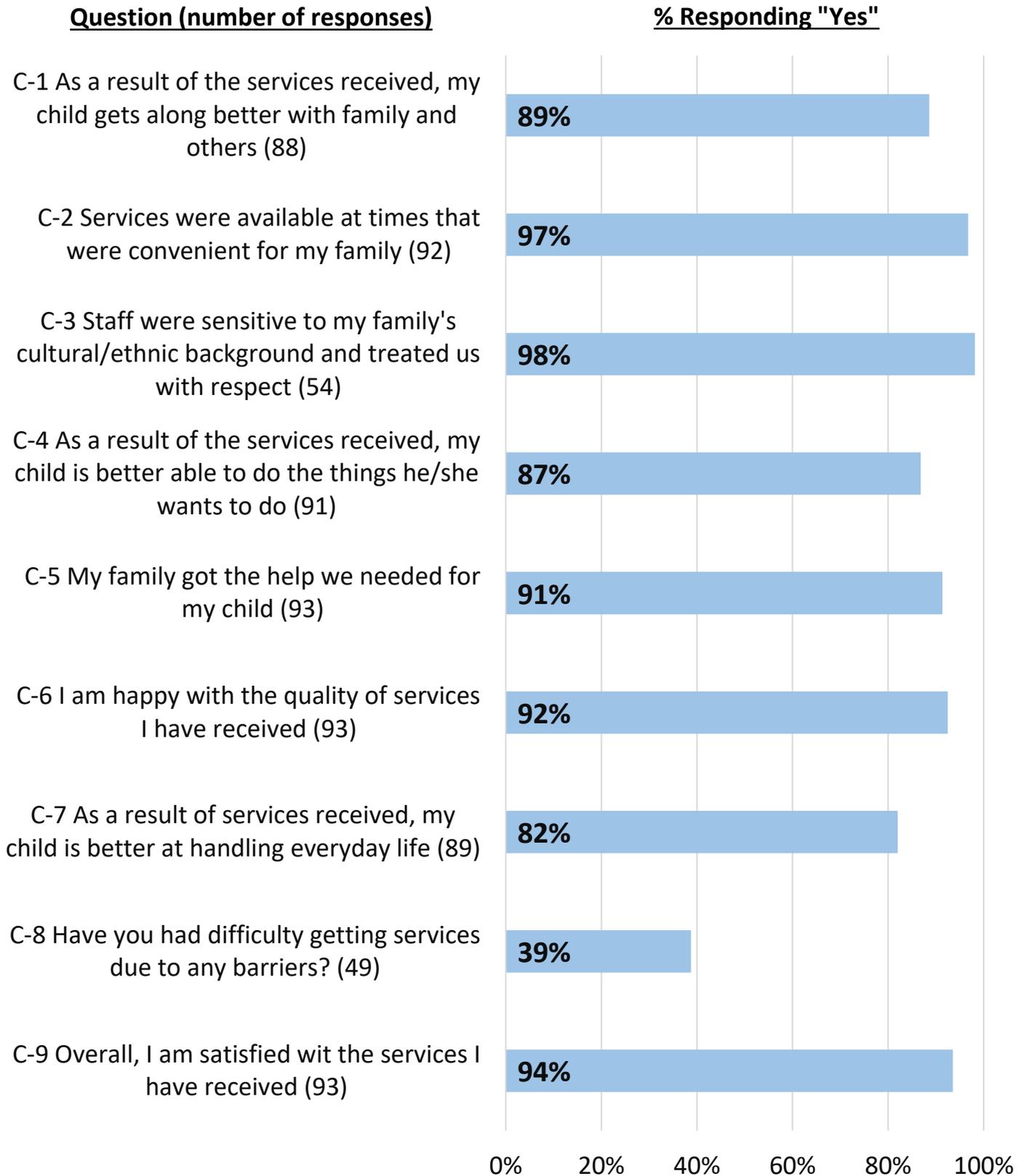
## Sanilac CMH 2023 Child Survey Responses

### Surveys Completed=47



## St. Clair CMH 2023 Child Survey Responses

### Surveys Completed=96



## Longitudinal Comparison of Customer Satisfaction

The tables below show a longitudinal comparison of survey results from FY2017 to FY2023 for both the Adult and Child Surveys. These tables show the percentage of “yes” responses among the region for each item included in the surveys.

### Adult Customer Satisfaction Survey Comparison

Survey Questions	FY2017	FY2018*	FY2019	FY2020	FY2021	FY2022	FY2023
A-1. I like the services I have received.***	98%	96%	97%	97%	97%	95%	97%
A-2. As a result of services received, my symptoms are not bothering me as much.	77%	83%	84%	80%	82%	85%	84%
A-3. Staff were sensitive to my cultural/ethnic background and treated me with respect.	98%	96%	97%	97%	97%	98%	97%
A-4. As a result of services received, I am better able to control my life.	89%	94%	92%	90%	88%	89%	92%
A-5. Staff believed in me by supporting my journey towards recovery, discovery, health, and independence.****	96%	97%	97%	94%	93%	95%	97%
A-6. Services were available at times that were convenient to me. **			93%	95%	94%	95%	94%
A-7. As a result of services received, I do better in social situations.	83%	86%	87%	81%	85%	87%	88%
A-8. I am happy with the quality of services I have received. **/**			95%	95%	95%	94%	96%
A-9. Have you had difficulty getting services due to any barriers? If yes, please explain. **/**			17%	14%	15%	18%	24%
A-10. As a result of services received, I deal more effectively with daily problems.	86%	88%	92%	87%	88%	90%	92%
A-11. Overall, I am satisfied with the services I have received. **/**			97%	95%	95%	95%	97%

\* Persons served by SUD network providers added to survey process beginning FY2018

\*\* Questions added FY2019 \*\*\*\*Question reworded in FY2022

\*\*\*Statistically significant change over previous fiscal year

### Child Customer Satisfaction Survey Comparison

Survey Questions	FY2017	FY2018	FY2019	FY2020	FY2021	FY2022	FY2023
C-1. As a result of services received, my child gets along better with family and others.	84%	77%	79%	83%	90%	85%	88%
C-2. Services were available at times that were convenient for my family.	95%	96%	95%	97%	92%	92%	93%
C-3. Staff were sensitive to my family’s cultural/ethnic background and treated us with respect.	99%	100%	99%	99%	99%	98%	98%
C-4. As a result of services received, my child is better able to do the things he/she wants to do.	91%	89%	85%	85%	87%	85%	90%
C-5. My family got the help we needed for my child.***	92%	93%	93%	92%	88%	87%	94%
C-6. I am happy with the quality of services I have received.***	84%	77%	94%	96%	90%	90%	96%
C-7. As a result of services received, my child is better at handling everyday life.**	88%	83%	79%	84%	84%	80%	87%
C-8. Have you had difficulty getting services due to any barriers? If yes, please explain. *			14%	21%	14%	20%	21%
C-9. Overall, I am satisfied with the services I have received.***	95%	97%	96%	96%	89%	90%	95%

\*Question added FY2019

\*\*\*Statistically significant change over previous fiscal year

## Summary of Findings

Overall, customer satisfaction percentages reveal favorable levels of customer satisfaction throughout Region 10 with an overall 97% of adults indicating satisfaction with services received. The highest levels of satisfaction for adults were in the areas of liking services received, cultural sensitivity of staff, and staff believing in the person served by supporting their journey, each receiving a 97% “yes” response. The highest level of satisfaction for children was in the area reflecting cultural sensitivity of staff as it was in FY2022.

Both the Adult and Child Surveys included subjective and person-focused questions related to perceived changes in the individual’s life resulting from services received. For the Adult population, questions such as reduction of symptoms, handling everyday life, and doing better in social situations scored lower than the satisfaction-based questions. A similar pattern was seen in the Child population. Questions regarding getting along with family and others, being able to do things he/she wants to do and being better able to handle everyday life scored lower than the satisfaction-based questions.

Longitudinal analysis of the Adult survey shows a statistically significant change in the percentages of “yes” responses for four different questions from FY2022 to FY2023. Although not statistically significant, **Question A-4** (*As a result of services received, I am better able to control my life.*) had the highest improvement by percentage, increasing by 3% from FY2022 to FY2023. Six other survey questions had an increase of 1 to 2% FY2022 to FY2023. Four questions showed a decrease in satisfaction. First, **Question A-2** (*As a result of services received, my symptoms are not bothering me as much.*) decreased from 85% in FY2022 to 84% in FY2023. Next, **Question A-3** (*Staff were sensitive to my cultural/ethnic background and treated me with respect.*) decreased from 98% in FY2022 to 97% in FY2023. **Question A-6** (*Services were available at times that were convenient to me.*) also saw a decrease, dropping from 95% to 94%.

The last of the decreases in satisfaction warrants additional discussion: **Question A-9** (*Have you had difficulty getting services due to any barriers? If yes, please explain.*). Raising from 18% “Yes” response to 24% in FY2023, chi square analysis reveals statistical significance ( $\chi^2 = 5.226, p > .05$ ). This could be attributed in part to decreased telehealth availability upon the end of the Public Health Emergency in May of 2023. Of 116 that listed a specific barrier, 28 (24%) stated that their main barrier is transportation. Interestingly, in FY2022, this was Sanilac CMH’s most prominent barrier; however, in FY2023, no survey respondents from Sanilac CMH mentioned struggling with transportation on their survey. The next highest percentage barrier (16 consumers, 14%), indicated inconvenient appointment times noting that many providers’ hours conflict with employment responsibilities. This is the highest rate for this question since it was added to the survey in FY2019. Of note, St. Clair CMH did not report the written submissions/qualitative data indicating specific barriers so they could not be included in these analyses.

Looking at SUD only results, there were several statistically significant changes. Four of these indicate increases in satisfaction. **Questions A-1** (*I like the services I have received;  $\chi^2 = 6.385, p = .01$* ), **A-5** (*Staff believed in me by supporting my journey towards recovery, discovery, health, and independence;  $\chi^2 = 8.029, p = .00$* ), **A-8** (*I am happy with the quality of services I have received;  $\chi^2 = 5.586, p > .05$* ), and **A-11** (*Overall, I am satisfied with the services I have received;  $\chi^2 = 4.326, p > .05$* ) all showed increases that could not be attributed solely to chance. In terms of lower satisfaction, only one change was statistically significant. This matched the Region 10 network as a whole: **Question A-9** (*Have you had difficulty getting services due to any barriers? If yes, please explain.*) showed a significant drop in satisfaction ( $\chi^2 = 3.870, p > .05$ ).

The survey results for Adults receiving HCBS show that individuals receiving services are satisfied overall. In FY2023, one question received an average score of 99%: **Question A-3** (*Staff were sensitive to my cultural/ethnic background and treatment me with respect*). This question also was scored at 99% in FY2022. Only one question scored below 90%: **Question A-2** (*As a result of services received, my symptoms are not bothering me as much*) which had an average score of 82%. Adults receiving HCBS reported a 98% overall satisfaction rating. Within the FY2023 total survey population, 287 adults and 13 children received HCBS.

Longitudinal analysis of the Child survey shows some statistically significant variances of percentages from FY2022 to FY2023. **Question C-5** (*My family got the help we needed for my child.*) increased from 87% to 94% ( $\chi^2 = 4.570, p > .05$ ), **Question C-6** (*I am happy with the quality of services I have received*) increased from 90% to 96% ( $\chi^2 = 5.110, p > .05$ ), and overall satisfaction represented by **Question C-9** (*Overall, I am satisfied with the services I have received.*) increased from 90% to 95% ( $\chi^2 = 4.162, p > .05$ ).

The primary barrier to services reported in the Child survey was difficulty with scheduling due to staff hours compared to work and school schedules. Of 29 reporting a barrier, 11 (38%) identified scheduling. A primary but less common barrier was lack of respite workers (7%). Of note, St. Clair CMH did not report the written submissions/qualitative data indicating specific barriers and they could not be included in these analyses.

Survey response counts have increased significantly from the FY2022 Customer Satisfaction Survey, going from 683 in FY2022 to 1,927 in FY2023. This is an increase of 282%. This can partially be attributed to changes in methodology for the SUD population. In FY2022, a sample of 40% of individuals in services had surveys mailed to them to be returned to the PIHP whereas in FY2023, each provider was responsible for distributing surveys via their preferred method(s). The quantity of SUD surveys completed increased from 53 in FY2022 to 603 in FY2023; however, this does not account for the total increase in survey volume. As noted earlier in the report, three of the four CMHs also achieved higher response totals over the previous year.

Network affiliates are responsible for reviewing results with individuals served and/or their family members to obtain input and feedback. Following the conclusion of the survey, affiliates are responsible for acting on specific cases as appropriate and identifying the source of dissatisfaction. This process is also monitored via the PIHP's official contract monitoring process. Affiliates are also responsible for informing practitioners, providers, individuals served, and their Governing Body of survey results.

The results of these surveys are reported to numerous committees throughout the region. These committees include advisory boards and Boards of Directors. Survey results are also shared on agency websites. The Quality Management Committee will continue to review and discuss survey results, barriers to survey administration, response rates, and suggested changes to future survey processes, including a review of the survey questions.

### ***Evaluation of Previous Year's Activities***

As a result of the FY2022 Customer Satisfaction Survey, GHS had a key item that they wanted to focus on: to improve survey data quality, GHS indicated the desire to increase the volume of outreach to target response totals by potentially doing a combination of mail out and in-person surveys for FY2023. Survey administration methodology was changed to reflect this, and GHS had an increase of 205% in the number of Adult surveys returned. Upon reviewing the FY2022 Customer Satisfaction Survey results and action plans, it was noted that persons served desired for more therapy services, more flexibility in service availability, and increased crisis response availability. GHS continues to work diligently to expand access to therapy and specialty services

despite the staffing concerns shared across the state, and the transition to same-day, walk-in intakes available at both the main location and the Children’s Center for Integrated Services (CCIS) building has assisted with timely and flexible entrance to services. With the opening of the Behavioral Health Urgent Care, as well as its continuous expansion of hours, GHS is able to provide expanded crisis intervention services.

At Lapeer CMH, efforts continued to address staffing shortages, including the use of LinkedIn and Facebook for recruitment. Lapeer CMH noted their application for the Certified Community Behavioral Health Clinic (CCBHC) grant following the FY2022 Customer Satisfaction Survey. They received that grant, and, for FY2024, were onboarded as a CCBHC Demonstration site. Through the grant dollars, Lapeer CMH was able to add an Integrated Health Liaison position. Additionally, Individual Plan of Service (IPOS) goals were targeted as an area for growth, and training took place for staff during FY2023.

At Sanilac CMH, focus fell on transportation as that was a primary barrier identified during the FY2022 Customer Satisfaction Survey. Leaders held meetings with the Sanilac Transportation Corporation and continue to contact them weekly. Sanilac CMH notes new bus software that helps the system run more smoothly. They also continue to discuss transportation concerns with persons served and work with individuals to coordinate resources.

At St. Clair CMH, focus was put on **Question C-8** (*Have you had difficulty getting services due to any barriers? If yes, please explain.*).

### ***FY2023 Improvement Activities***

As a result of the FY2023 survey, each CMH is already working on improvement activities and action steps to address areas of dissatisfaction and improve survey data quality.

At GHS, as a reflection on questions yielding the lowest satisfaction scores, work continues to explore and promote additional evidence-based practices and treatment modalities geared towards improved symptom management and recovery. General survey results will be discussed with clinical teams in order to develop action plans to identify areas for improvement and action plans. However, there are already initiatives underway through GHS that address some areas of consumer concern or need, such as expanded service delivery across multiple locations; more availability in crisis services, both timing and array; and increasing exploration of available contract providers, specifically related to CLS, respite, and ABA services. Individuals that requested follow-up from their FY2023 survey response were contacted by GHS Customer Service and/or Case Management to address any concerns.

At Lapeer CMH, community integration goals are included in the IPOS for persons served. A variety of evidence-based groups, such as Dimensions Well-Body, Wellness Recovery Action Plan (WRAP), and Enhanced Illness, Management, and Recovery (E-IMR) are offered for Adults. These groups help persons served manage their symptoms. The Children’s Department has been able to fill positions that have been vacant for several years and has expanded on evidence-based practices, such as Dialectical Therapy Adolescents (DBT-A) and Parenting Through Change (PTC). Additionally, the annual accessibility survey and accessibility plan analyze and address identified barriers. Individuals requesting follow up were contacted by the Quality Improvement Coordinator or by Customer Service as soon as they returned the survey.

At Sanilac CMH, continued partnership with the Sanilac Transportation Corporation will be maintained. Sanilac CMH will continue to coordinate based on individuals’ needs for not only transportation but other available

community resources through relationships with community partners. An Excel spreadsheet was maintained to track consumers who requested follow up on the FY2023 Customer Satisfaction Survey.

St. Clair notes that survey length may be a concern for future surveys due to additional requirements put forth due to designation as a CCBHC Demonstration site.

### ***Recommendations***

1. Address the significant increase in barriers to getting services that was reported on both the Adult and Child surveys across the region.
2. Focus on ways to improve satisfaction for person-focused questions on both the Adult and Child survey that have received historically lower levels of satisfaction.
3. Integrate feedback from the newly formed SUD Survey Workgroup for future survey processes.
4. Survey administration processes and sample sizes should be evaluated to determine what methods will yield an increase in responses and improve data quality and achieve a reasonable level of methodological uniformity across the Region.
5. All survey data collected, including qualitative data, should be reported to the PIHP. For future surveys, the PIHP will give more specific direction for data reporting and survey expectations.
6. The PIHP and network affiliates should continue to be informed of these findings and investigate areas of dissatisfaction noted within the survey results.
7. Network affiliates should present data to Consumer Advisory Councils to obtain input from individuals receiving services and/or their family members.
8. The network affiliates should review survey results and identify opportunities for improvement within their service delivery system, including reviewing reported barriers and responses to open-ended questions.
9. The network affiliates should outline systemic action steps to follow up on findings. The PIHP and network affiliates should also evaluate the effects of the systemic action steps taken and determine if these steps have led to improved satisfaction. Network affiliates will report their actions steps to the PIHP via the PIHP's contract monitoring.

Appendix A: Overall Satisfaction by Provider

Provider	Location/Population	Total Responses	Overall, I am satisfied with the services I have received
GHS	Mental Health Adult	330	96%
	Mental Health Children	78	97%
Lapeer CMH	Mental Health Adult	159	98%
	Mental Health Children	58	100%
Sanilac CMH	SUD	4	100%
	Mental Health Adult	135	96%
	Mental Health Children	45	89%
St. Clair CMH	SUD	3	100%
	Mental Health Adult	379	93%
	Mental Health Children	93	94%
Alcohol Information and Counseling Center	SUD	8	100%
BioMed	SUD – Flint	139	96%
	SUD – Roseville	36	100%
Catholic Charities of Shiawassee and Genesee Counties	SUD	56	96%
Catholic Charities of Southeast Michigan	SUD	25	100%
Community Programs, Inc.	SUD	39	100%
Flint Odyssey House	SUD	39	97%
Great Lakes Recovery Mission	SUD	23	100%
New Paths	SUD	114	89%
Sacred Heart Rehabilitation Center	SUD - Flint	71	100%
	SUD - Port Huron	22	100%
	SUD - Richmond	10	100%