

State of Hawai'i - Dept. of Health
Child and Adolescent Mental Health Division (CAMHD)



Provider Satisfaction Survey
**(A Joint Report Offered by the Provider Liaison Specialist and
the Research and Evaluation Team)**

Fiscal Year 2014
July 1, 2013 – June 30, 2014

Prior to the disbursement of the (July 01, 2013 – June 30, 2014) *Provider Satisfaction Survey* in July, 2014, an opportunity was given for CAMHD Staff and Providers to review the survey format of the 2013 survey and to make suggestions and recommendations for change to the 2014 survey, once that process was complete, Research & Evaluation Team (RET) staff member, Dr. Scott Keir revised the Providers Satisfaction Survey and then sent out the revised survey to Providers in August, 2014. Providers were asked to complete the online survey within two weeks of receiving the link. Two reminders were sent to Providers who had not completed the survey within that time frame¹

Providers were asked, through the survey, to evaluate the CAMHD overall and to offer comments as well. The specific CAMHD offices/sections and processes which were included in the survey were:

- Administrative Office
- Clinical Services Office (CSO)
- Research and Evaluation Team (RET)
- Performance Management Office (PMO)
- Program Monitoring
- Performance Operations
- Credentialing Office
- Grievance Office
- Sentinel Events
- Facilities Certification
- Management Information Systems (MIS)
- Administrative Supports (Fiscal Department)
- Family Guidance Centers (FGCs)
 1. Hawaii
 2. Central Oahu
 3. Honolulu
 4. Leeward Oahu
 5. Maui

¹ The deadline for the PSS return had to be extended several times, due to some internet access glitches at some of the Provider Agencies.

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6. Kauai
7. Family Court Liaison Branch

The Provider Satisfaction Survey was conducted utilizing a web-based data survey administration and data collection tool (Survey Monkey) designed to streamline the process. The RET staff were instrumental in interpreting the data and creating the graphs.

The survey was e-mailed to all of CAMHD's contracted provider agencies, including their designated staff and to HFAA, who interacted with CAMHD during the period covered in the survey. A total of 131 surveys were sent out; 47 surveys were completed; and the final 2014 survey response rate was 35.9%.

Explanation of Survey Scores:

Ratings of '2' or greater indicate that the CAMHD is "Meeting or Exceeding Expectations." Any ratings that are less than '2' indicate that the CAMHD is not "Meeting Expectations." Ratings of less than '1' suggest that the CAMHD office/section/processes "Needs Improvement."

Overall Findings:

In order to get an overall measure of satisfaction with the CAMHD services/sections and processes, three items were asked to be rated for all the various offices/sections/processes (CSO, RET, FGCs, etc.) of the CAMHD (along with other items that were tailored for each office/section/process surveyed). The common evaluation items included for all CAMHD offices/sections/processes were:

1. "The professionalism and courteousness of the CAMHD staff in your communications".
2. "The timeliness of the CAMHD staff to respond to your inquiries or requests".
3. "The helpfulness of the CAMHD staff in their response to your inquiries".

The rating scores in the table below for the questions related to "Professionalism," "Timeliness," and "Helpfulness" are calculated mean values for the 47 providers responding to each item. The scores for these three items suggest that respondents perceived that for all three of these areas, the CAMHD "Meets Expectations", but falls just short of "Exceeding Expectations." This suggests that providers responding to the survey believe that the professionalism, timeliness and helpfulness of the CAMHD "Meets Expectations" but does not necessarily "Exceed Expectations." The results also indicate that the CAMHD has shown improvement since the last survey in all three of these areas.

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Items Rated	2013 Ratings	2014 Ratings
Professionalism	2.45	2.84
Timeliness	2.32	2.64
Helpfulness	2.33	2.72

Areas on graphs with 10% or higher of either “Needs Improvement” or “Unacceptable” suggest opportunities for improvement and should result in the development of an Action Plan.²

Common Themes

- Training Needs – FGC staff need training relative to Ancillary Services.
- Training Needs – Relative to Service Authorizations, there should be step-by-step instructions for FGC staff which also identify the follow-up process.
- Service Authorization Delays
- Delay in CAMHD staff not returning phone calls.
- Need for role clarification between FGC Staff and provider staff.

Where there are ongoing changes in staffing in both the provider agencies and the CAMHD, there is always the need for continuous improvement in CAMHD’s collaborative relationships with members of the Provider network. The CAMHD has used the results of the PSS as an important tool to target areas in need of improvement each year.

Note: The comments section will be released to each FGC’s Branch Chief and they can forward to and discuss with the staff at their FGC. The complete comments section will only be released to CAMHD’s Administrator and his designees.

It is recommended that Branch Chiefs and Mental Health Supervisors (MHS1s) develop a ‘Plan of Improvement’ to address areas receiving a rating of 10% or more and that those plans be submitted to the CAMHD Performance Manager and the Public Relations Liaison when finalized.

² It is important to read the comments section to get more context behind the quantitative results. For those offices/sections/processes not requiring an action plan, the comments section may nonetheless still prompt opportunities for improvements.



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**PROVIDER SATISFACTION SURVEY
REPORT**

Fiscal Year 2014

July 1, 2013 – June 30, 2014
(A joint project by the Provider Liaison Specialist and
the Research and Evaluation Office of CAMHD)



PROVIDER SATISFACTION SURVEY RESULTS

JULY 01, 2013 – JUNE 30, 2014

INTRODUCTION

The Child and Adolescent Mental Health Division (CAMHD) of Hawaii's Department of Health (DOH), a member of Hawaii's public system of child serving agencies, is an integrated network of services and supports, managed through public/private partnerships consisting of contracted community-based agencies and state-managed, community-based CAMHD branches (Family Guidance Centers and the Family Court Liaison Branch) with administrative and performance oversight functions at the state's central administration office. In valued partnership with its contracted provider network, the CAMHD's mission is to provide necessary, timely and effective mental health services to children and youth with emotional and behavioral challenges, and their families that allow them to lead full and productive lives.

Through its provider network the CAMHD offers an array of services that include: emergency services; intensive case management; outpatient behavioral health services; crisis residential services; intensive outpatient services; Multi-Systemic Therapy (MST); Functional Family Therapy (FFT), Multi-Dimensional Treatment Foster Care (MTFC), Transitional Family Home (TFH) placement; Community-Based Residential (CBR) programs; and Hospital-Based Residential (HBR) programs with the CAMHD providing care coordination services, quality oversight services and the funding for the services.

One of the ways the CAMHD gauges its effectiveness and measures any collaborative successes as a partner with members of its provider network is to conduct an annual provider satisfaction survey of the performance of its staff/services in relationship to our provider network and their needs. The survey has become a method of capturing information that has guided the CAMHD's efforts toward improvement and administrative/operational changes as needed.

Prior to the disbursement of the Provider Satisfaction Survey, an opportunity was given to the CAMHD staff and Providers to review the survey and to make recommendations for revision. Mahalo for your input.

In September 2014, the CAMHD conducted its *annual* survey of its provider network, covering the period of July 1, 2013 through June 30, 2014. The CAMHD provider network members were asked, through the survey, to evaluate the CAMHD overall, and to offer their comments of specific CAMHD offices, sections and processes that included the following:

1. Administration Office
2. Clinical Services Office (CSO)
3. Research and Evaluation Team (RET)
4. Performance Management Office (PMO)

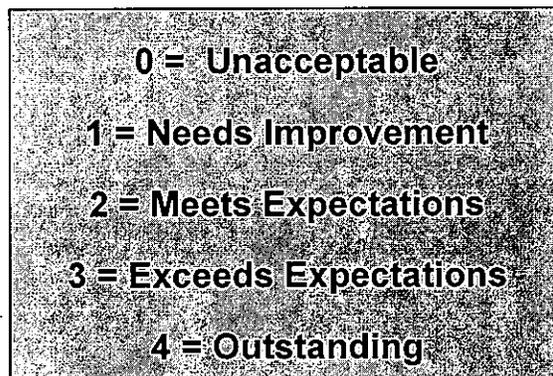
- Program Monitoring
 - Performance Operations
 - Credentialing Office
 - Grievance Office
 - Sentinel Events
 - Facilities Certification
5. Management Information Systems (MIS)
 6. Administrative Supports (Fiscal Dept.)
 7. Each of the CAMHD Family Guidance Centers (FGCs)
 - Hawaii
 - Central Oahu
 - Honolulu
 - Leeward Oahu
 - Maui
 - Kauai
 - Family Court Liaison Branch

The CAMHD conducted its satisfaction survey online through Survey Monkey, a web-based survey tool that helps to streamline the collection of data as well as providing quick results. The CAMHD has used this method of web-based surveys to conduct this annual satisfaction survey for the past four years.

The CAMHD Provider Relations Liaison e-mailed the Survey Monkey web link to the administrators of the CAMHD contracted provider agencies and designated provider staff. A total of 131 surveys were e-mailed out and 47 surveys were completed for a survey response rate of 35.9%.¹

SURVEY RATINGS

In the 2014 online survey, providers were asked to rate all sections of the CAMHD on several business functions. All survey responses were designed on a five-point Likert scale (see scale below). Using the following rating scale, the interpretation of the findings is: the higher score, the higher the level of satisfaction with the CAMHD offices on a particular item. The scale that each respondent was asked to use was the following:



¹ For a comparison, in previous years, the Provider Satisfaction Survey Response Rate was:

- 2013: 44.0% (40 of the 91 surveys sent out were completed)
- 2012: 63.3% (57 of the 90 surveys sent out were completed)

SURVEY RESULTS

In September 2014, the CAMHD sent a total of 131 surveys to providers (who had some interaction with the CAMHD staff). These agencies contracted with the CAMHD to provide behavioral health services to the youth served by the CAMHD. Out of the 131 surveys sent out, there were 47 respondents who completed the survey and submitted their responses through Survey Monkey. Ratings that are '2' or greater indicate that respondents believe that the CAMHD is "*Meeting or Exceeding Expectations*," any ratings that are less than '2' indicate that providers believe that the CAMHD is not 'Meeting Expectations' Mean scores of less than '1' suggest that the CAMHD office "*Needs Improvement*."

OVERALL FINDINGS

In order to get an overall measure of satisfaction with the CAMHD, three items were asked to be rated for all the various offices (CSO, RET, FGCs, etc.) of the CAMHD (along with other items that were tailored to each office, section and process). The evaluation items included for all CAMHD were:

1. "The professionalism and courteousness of the CAMHD staff in your communications."
2. "The timeliness of the CAMHD staff to respond to your inquiries or requests."
3. "The helpfulness of the CAMHD staff in their response to your inquiries."

The overall mean values below for the questions regarding 'Professionalism,' 'Timeliness,' and 'Helpfulness' are calculated by adding together each of the responses from all of the 47 respondents on each question and then calculating the mean (or average) for that item across all respondents. The calculated mean scores for these three items (see Table below) suggest that respondents perceived that for all three of these areas, the CAMHD '*Meets Expectations*' but falls just short of '*Exceeding Expectations*.' So providers responding to the survey believe that the professionalism, timeliness, and helpfulness of CAMHD definitely 'Meets Expectations' but does not necessarily 'Exceed Expectations.'²

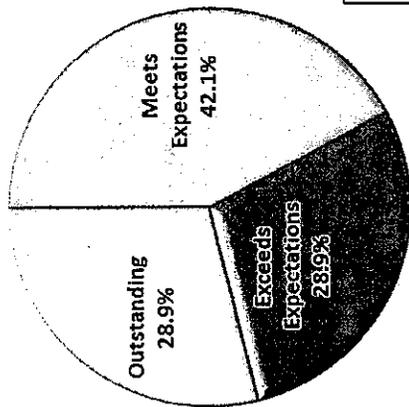
Survey Item	FY2013	FY2014
Professionalism	2.45	2.84
Timeliness	2.32	2.64
Helpfulness	2.33	2.72

The next section presents graphs (pie charts) for each CAMHD branch or office that shows the breakdown of responses for the three overlapping items (e.g., 'professionalism,' 'timeliness,' and 'helpfulness') that are asked of all offices/branches of CAMHD.

² There have been some improvements in most areas covered since the last Provider Satisfaction Survey in 2013. To compare surveys, you may view the 2013 Provider Satisfaction Survey by visiting the following link:
<http://hawaii.gov/health/mental-health/camhd/library/pdf/rpteval/cs/index.html>

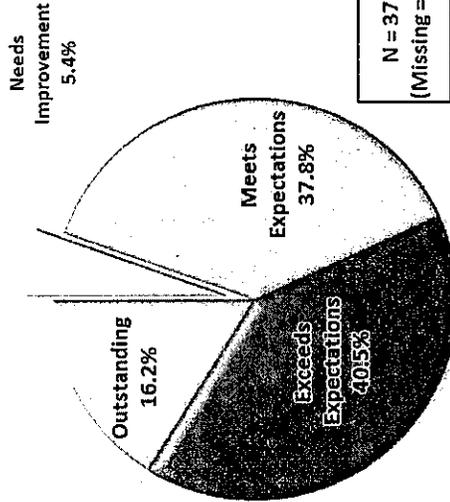
Administrative Offices

CAMHD Administration Staff: Professionalism & Courteousness



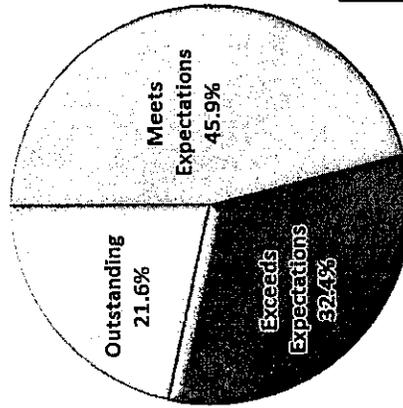
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CAMHD Administration Staff: Timeliness to Respond to Inquiries



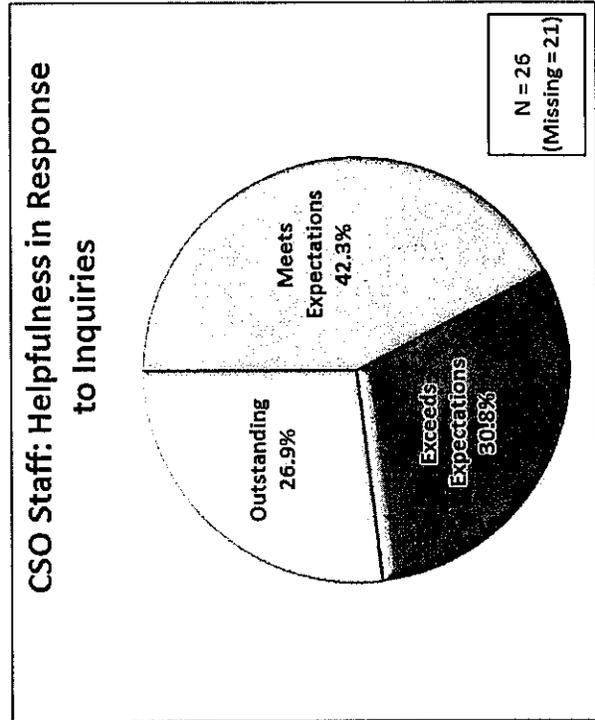
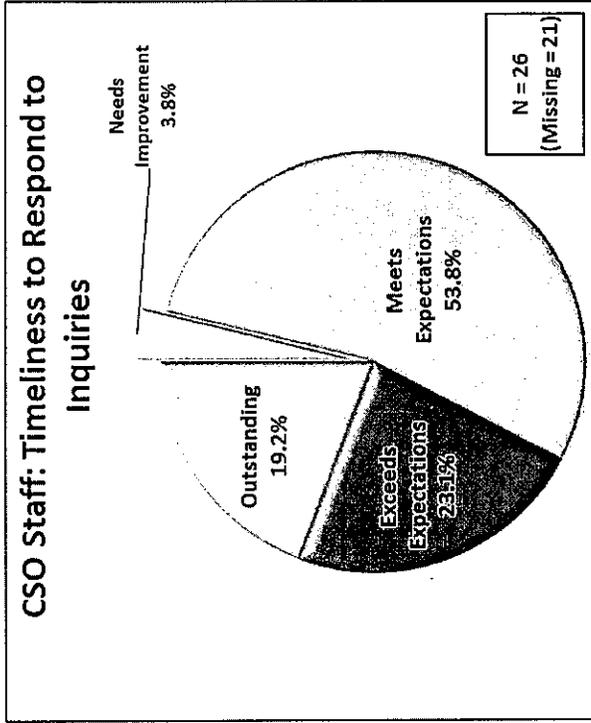
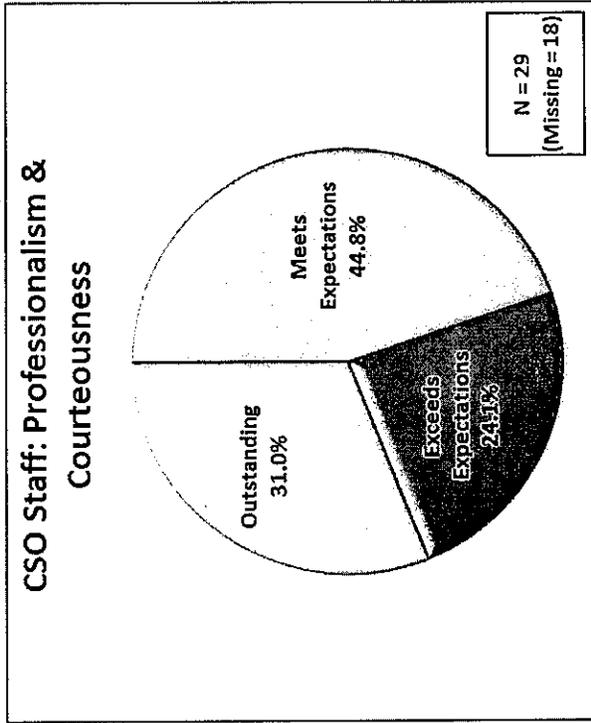
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CAMHD Administration Staff: Helpfulness in their Responses

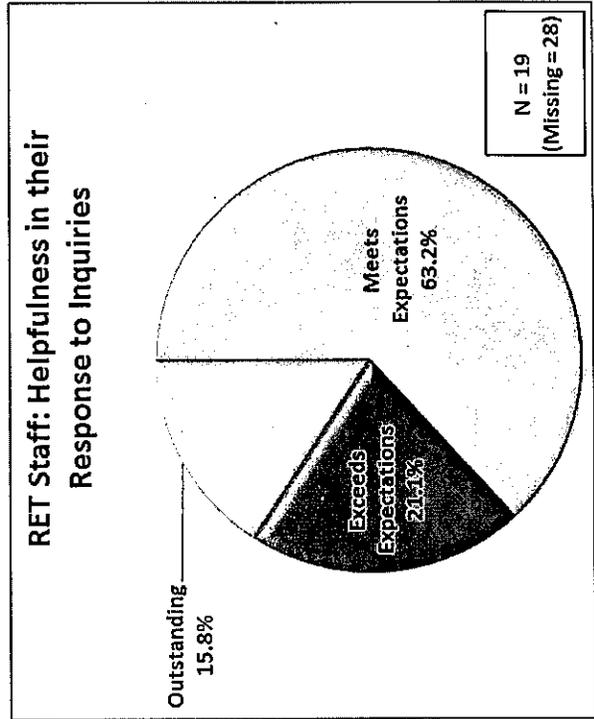
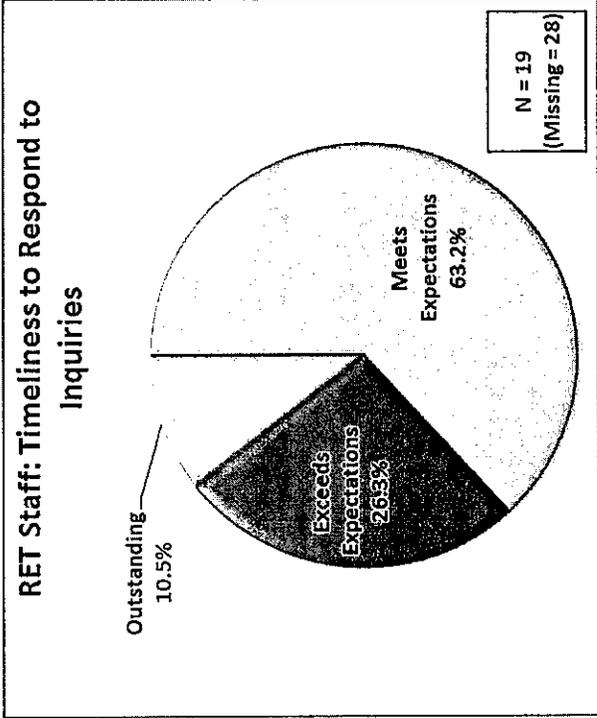
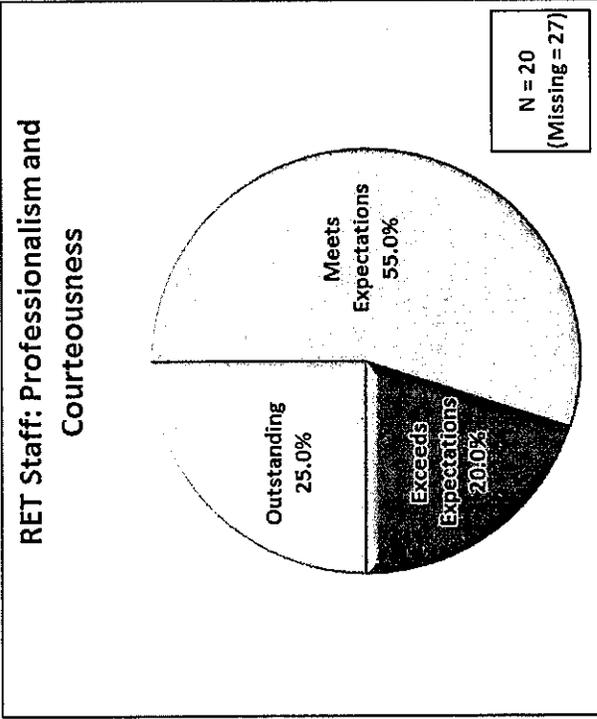


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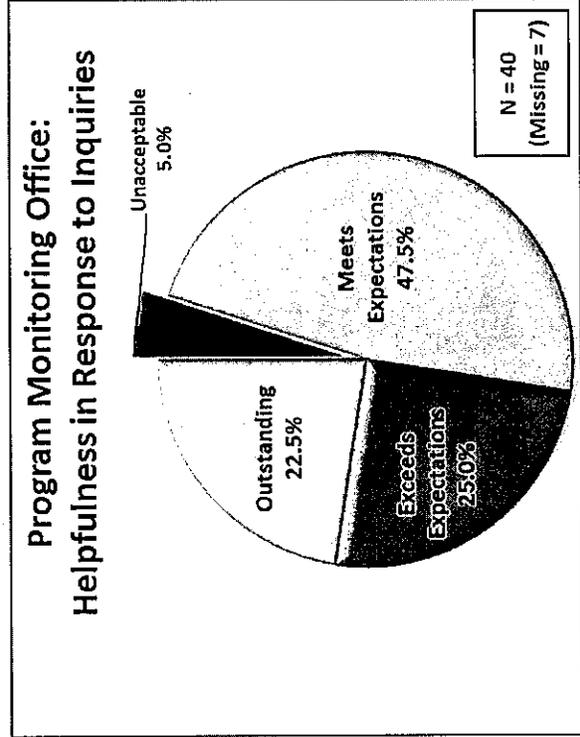
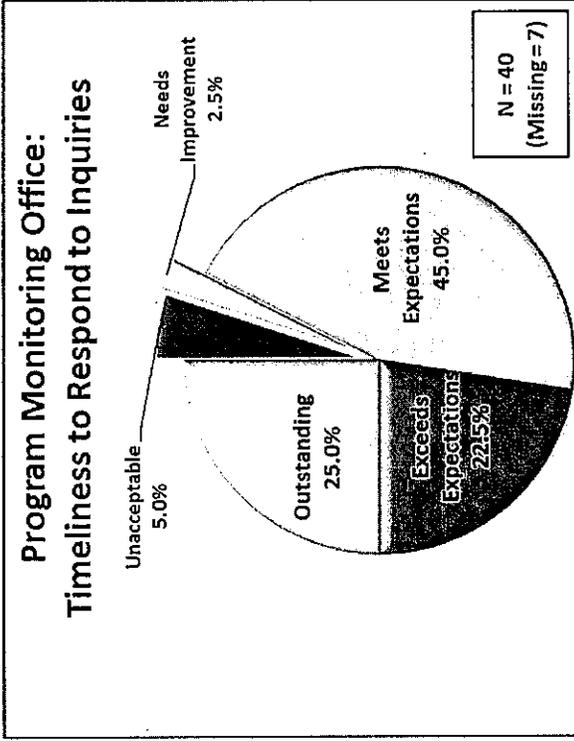
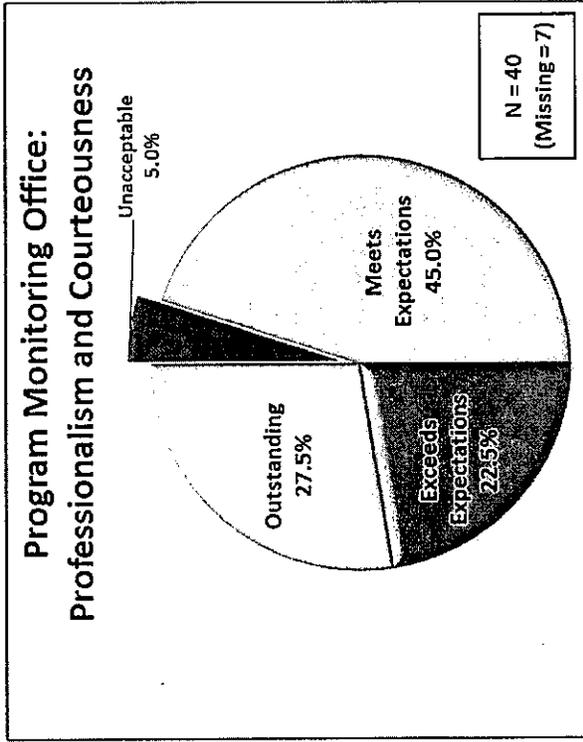
Clinical Services Offices (CSO)



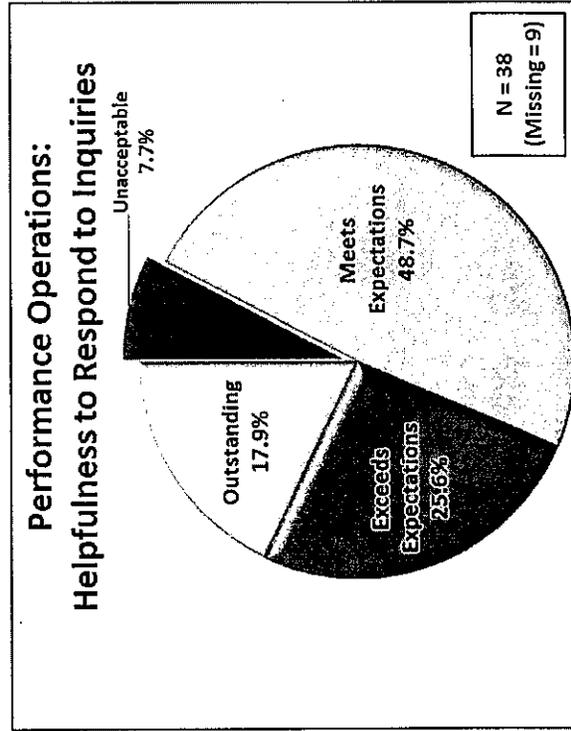
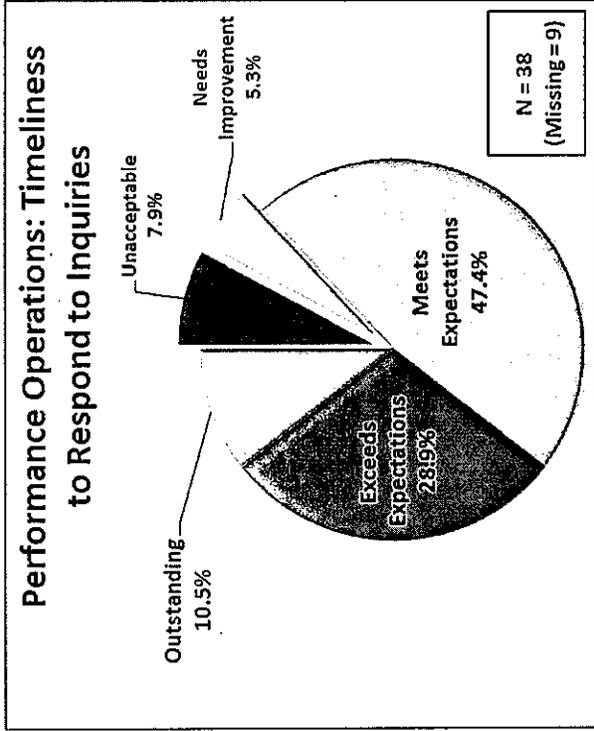
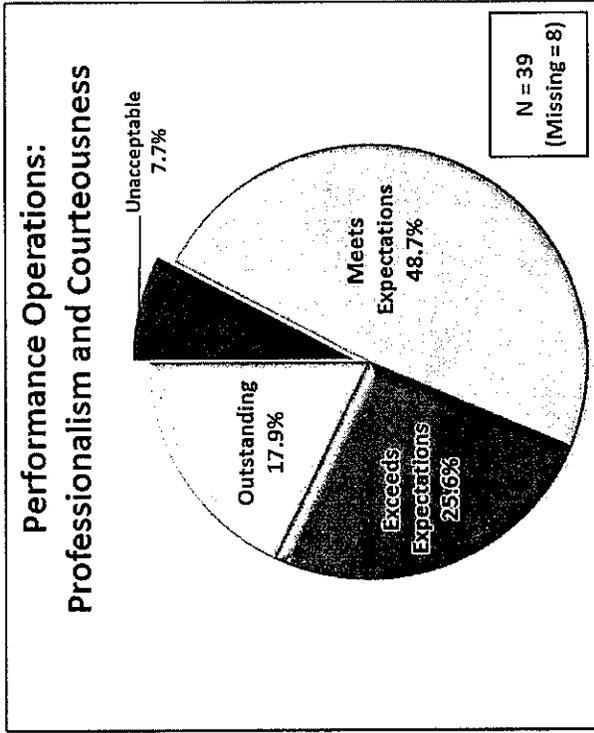
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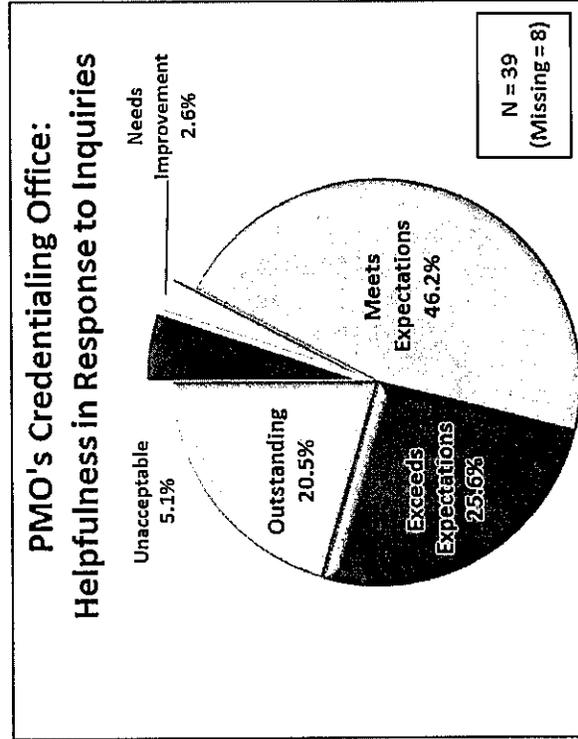
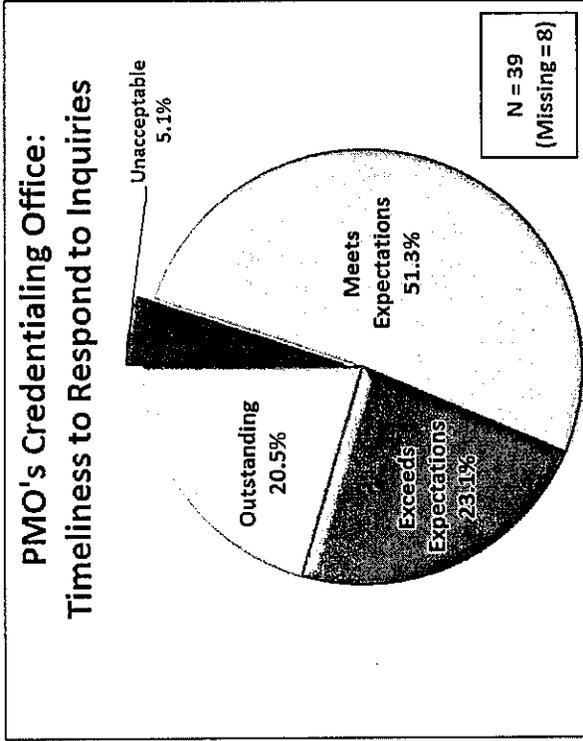
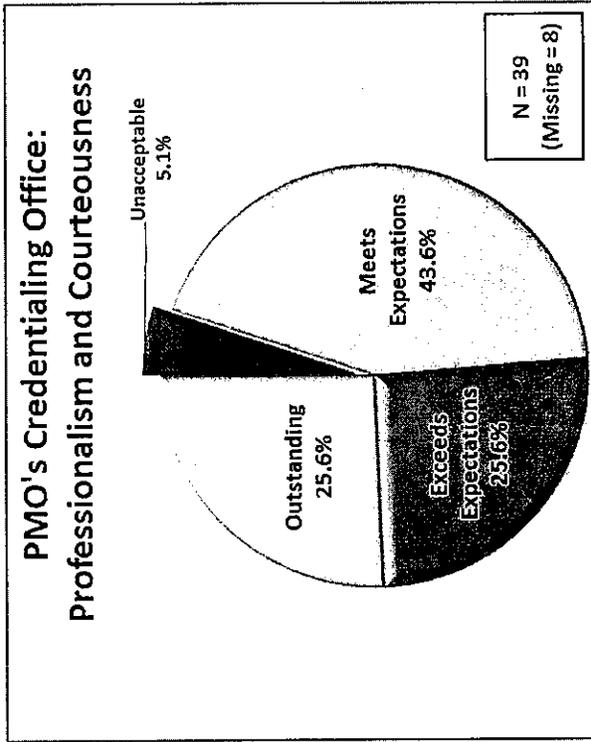
Program Monitoring Office (PMO)



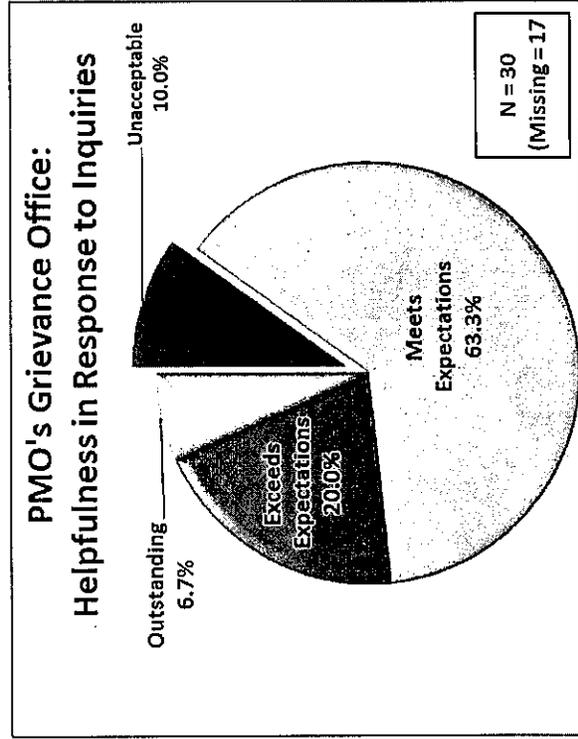
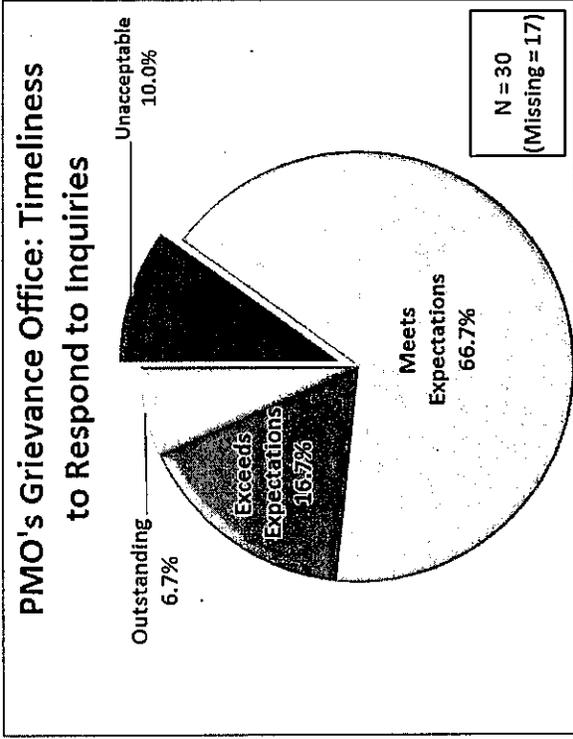
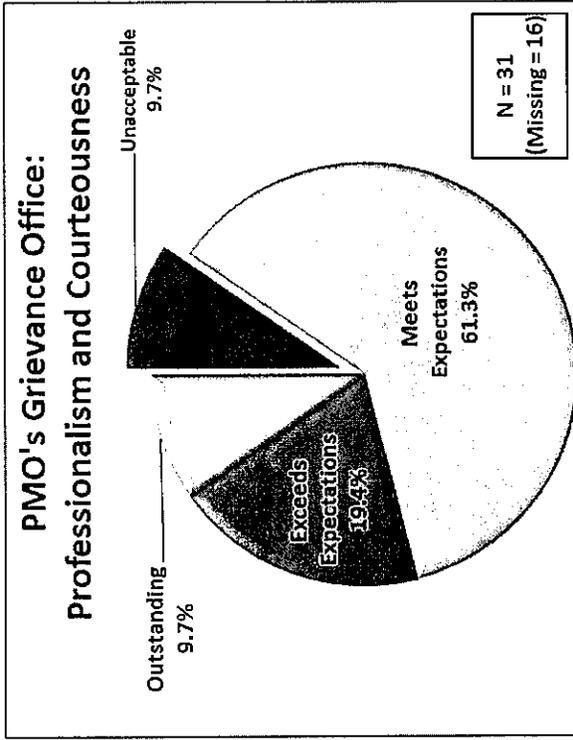
Performance Operations



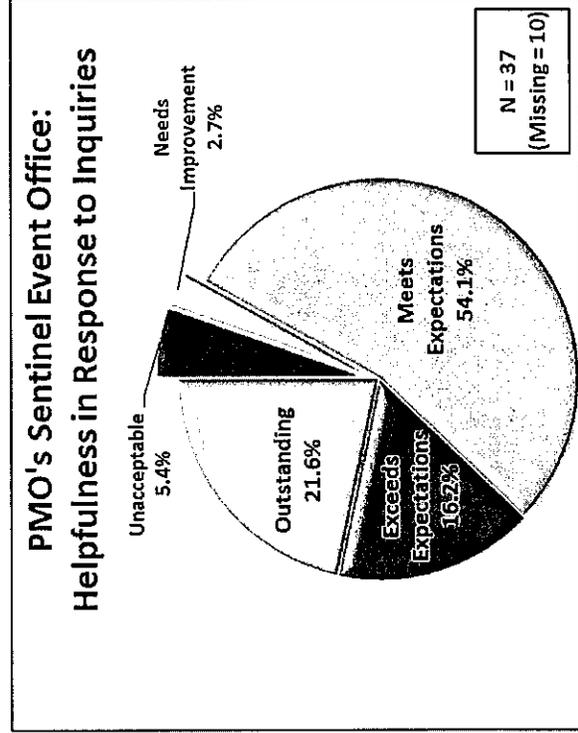
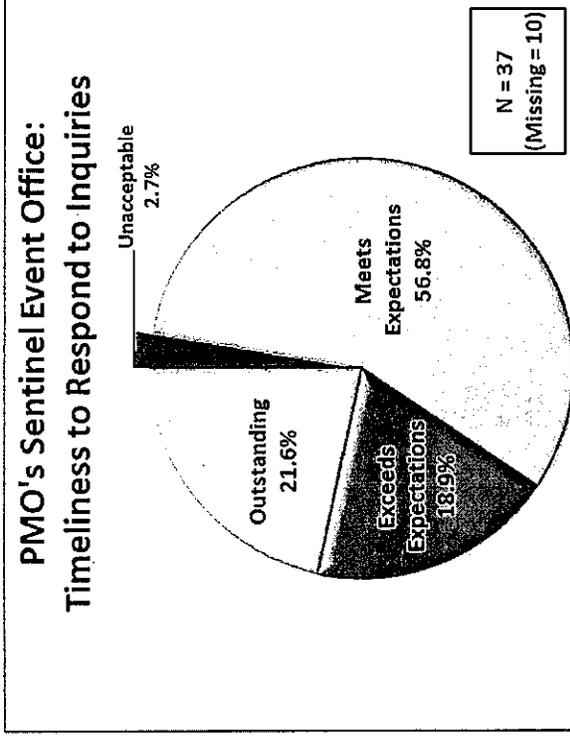
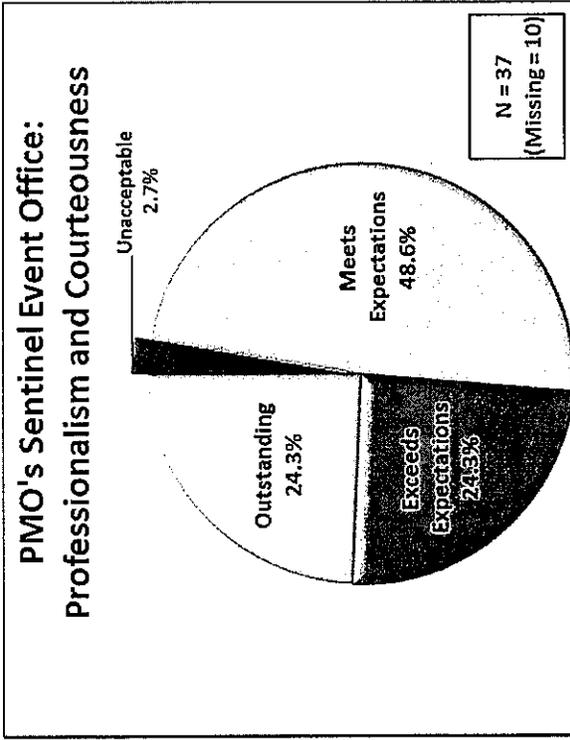
PMO's Credentialing Office



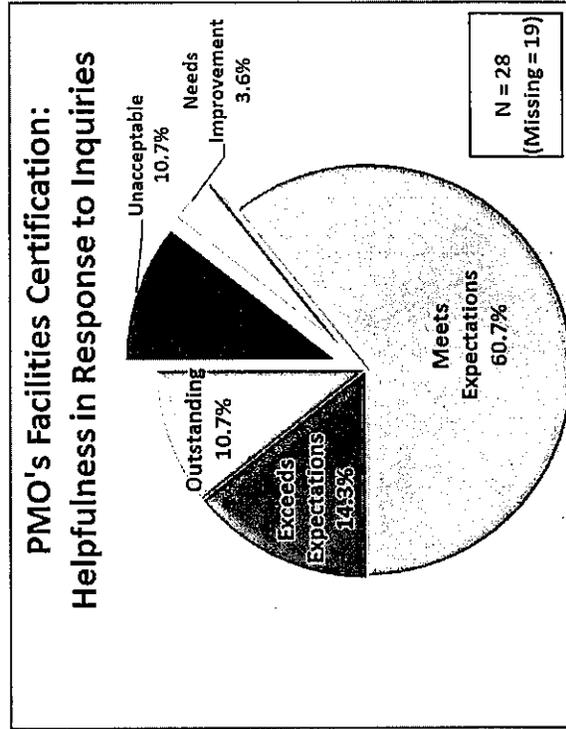
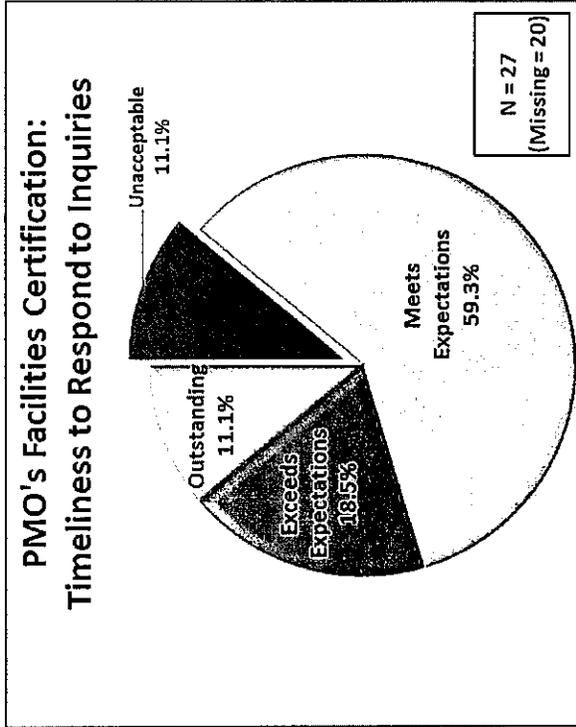
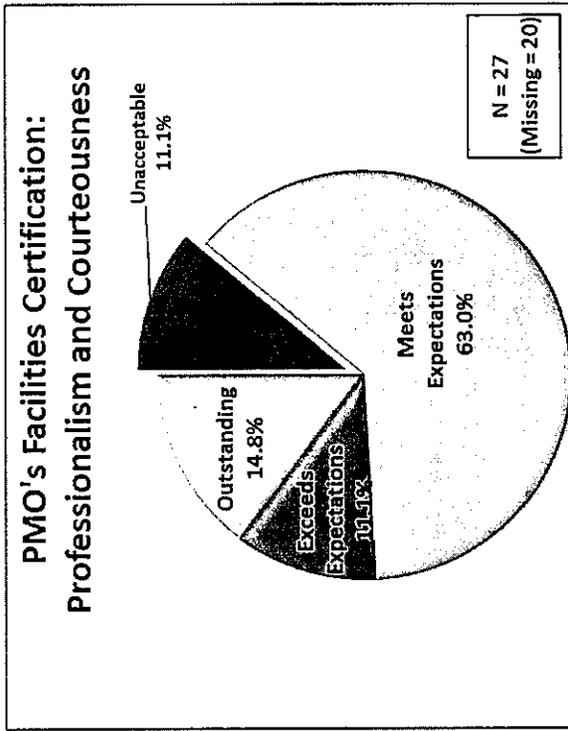
PMO's Grievance Office



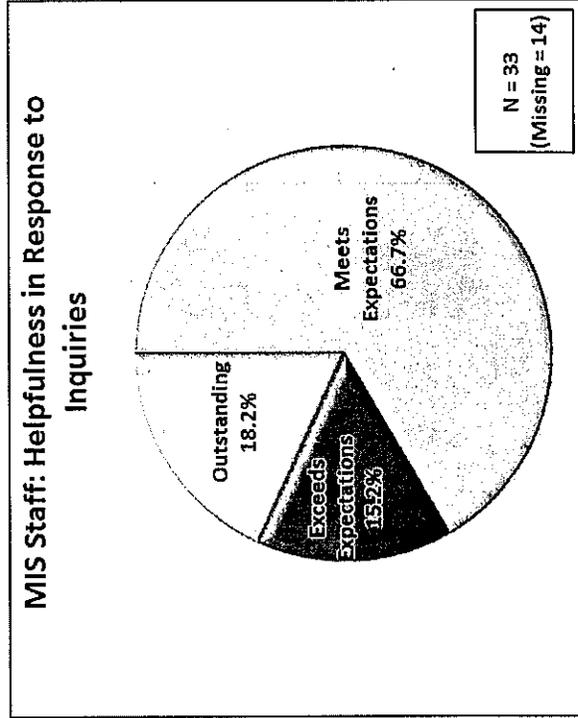
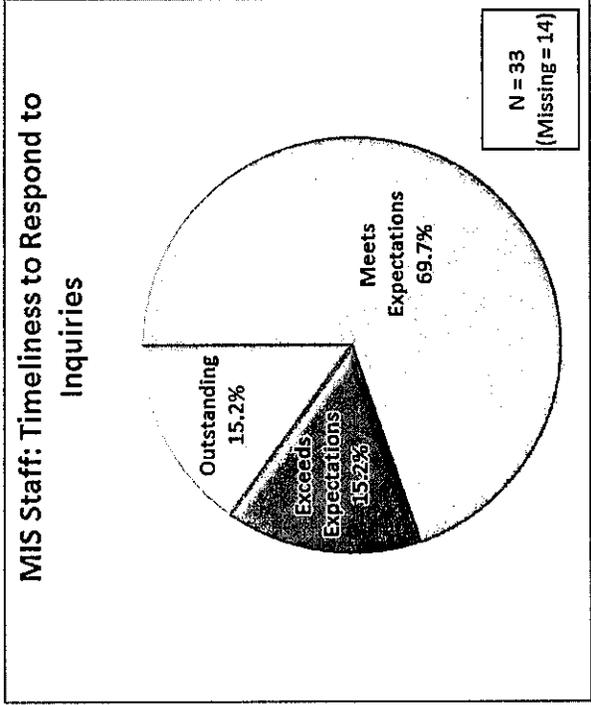
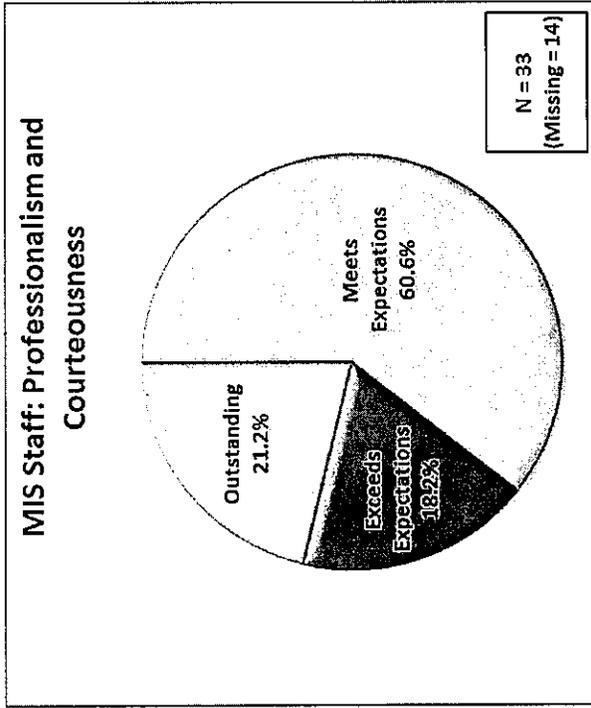
PMO's Sentinel Event Office



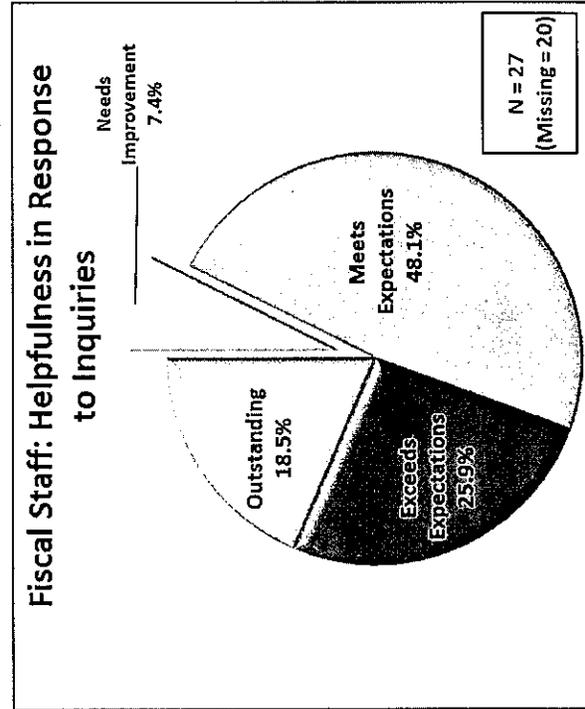
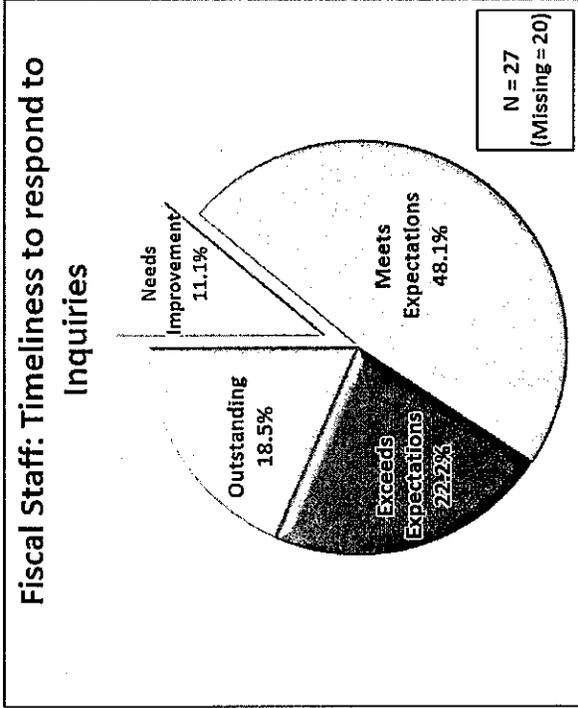
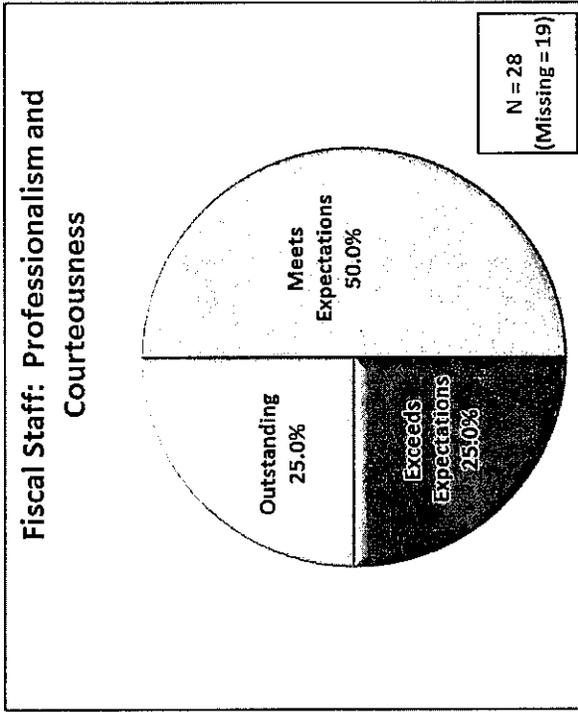
PMO's Facilities Certification



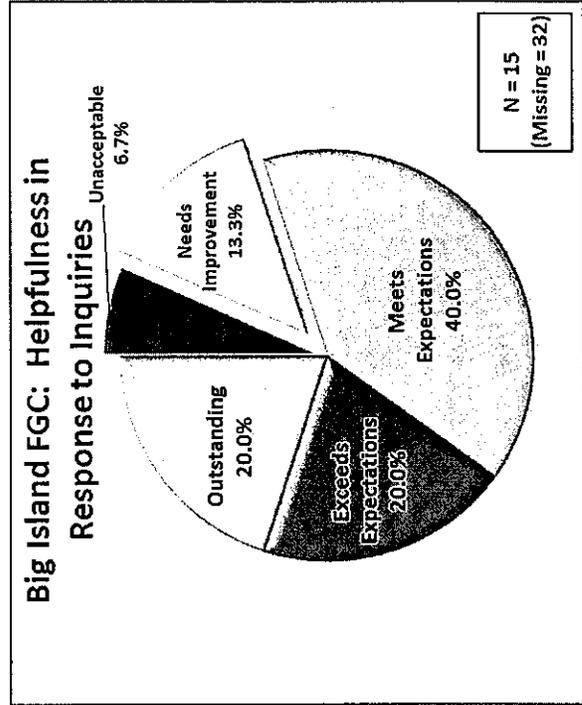
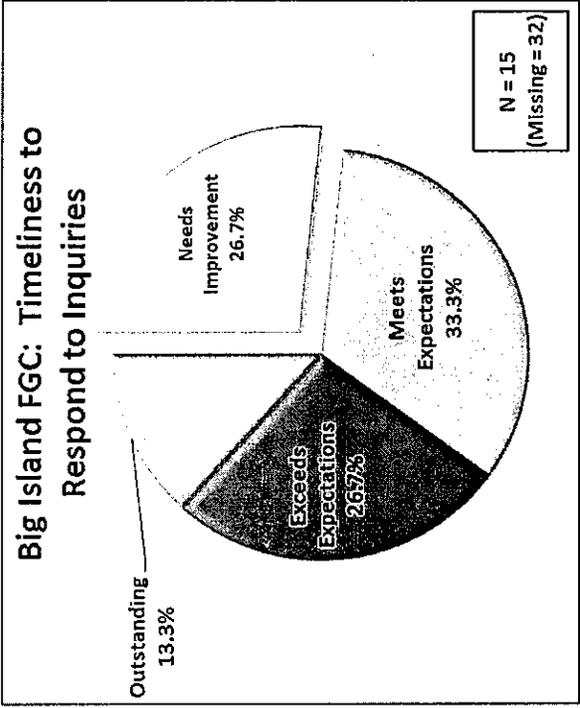
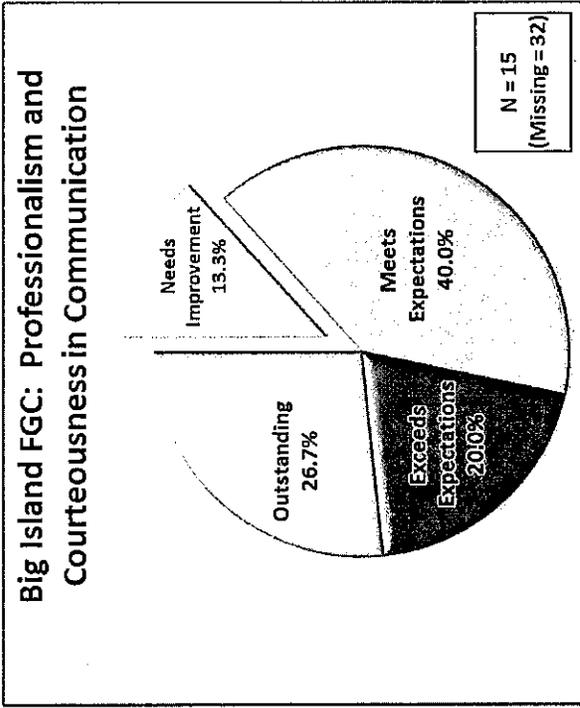
Management Information Services (MIS)



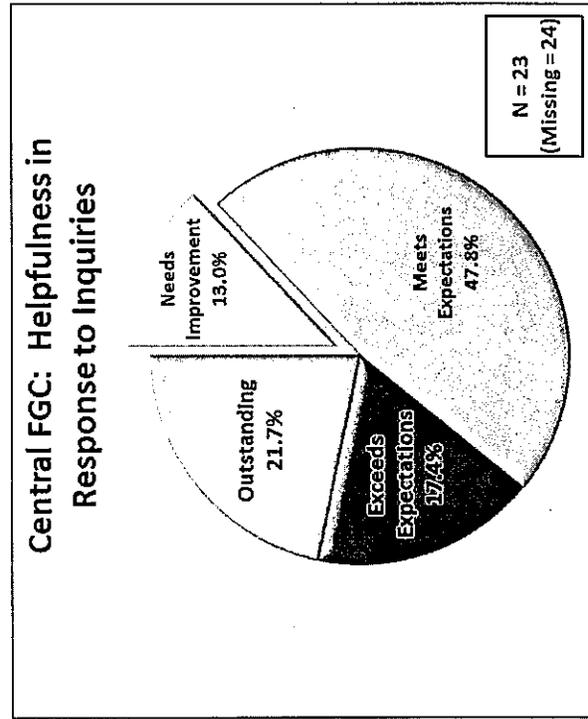
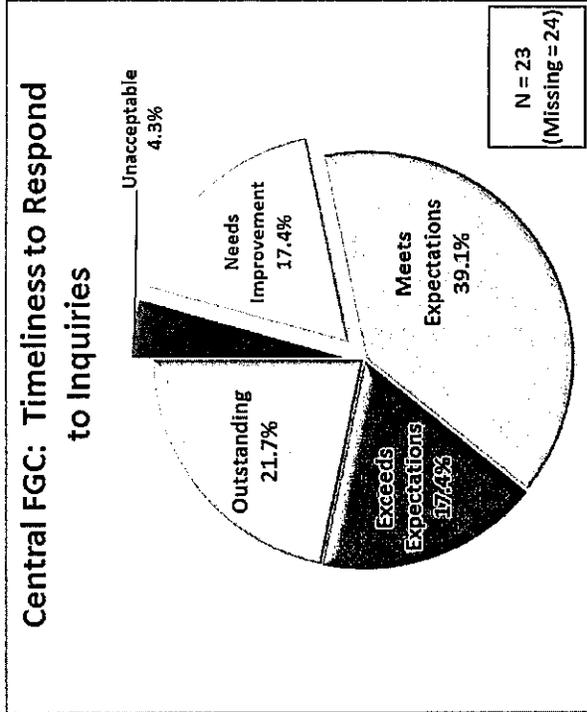
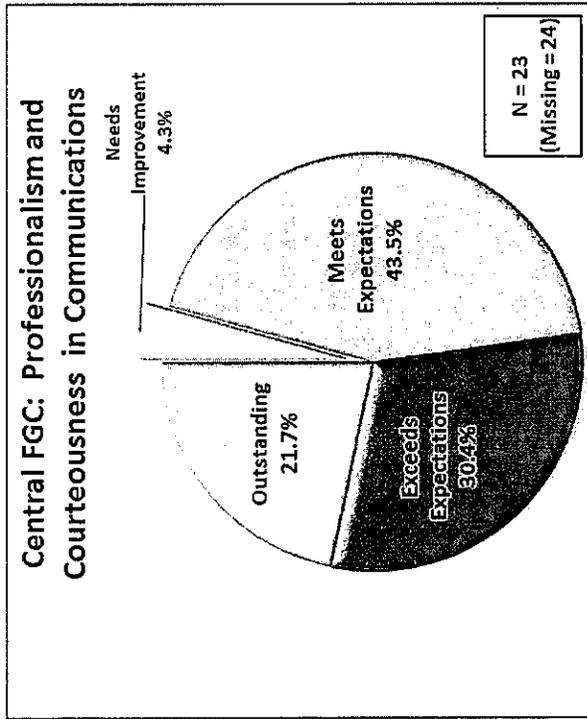
Fiscal Staff



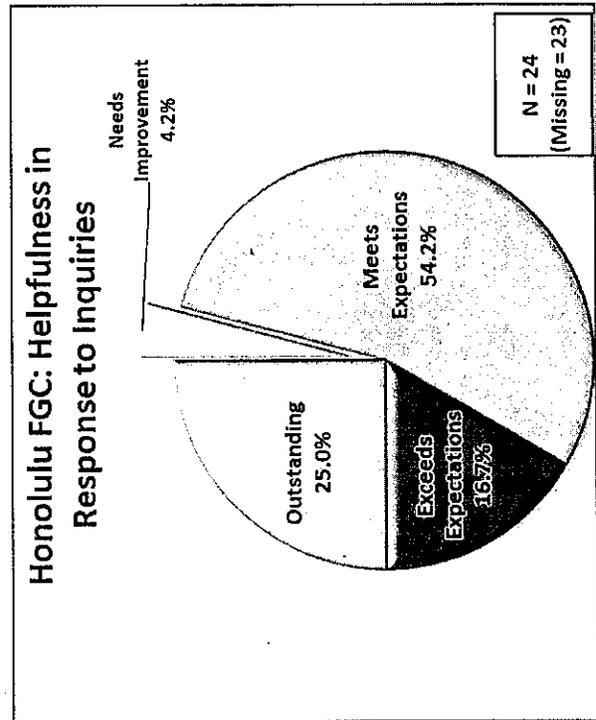
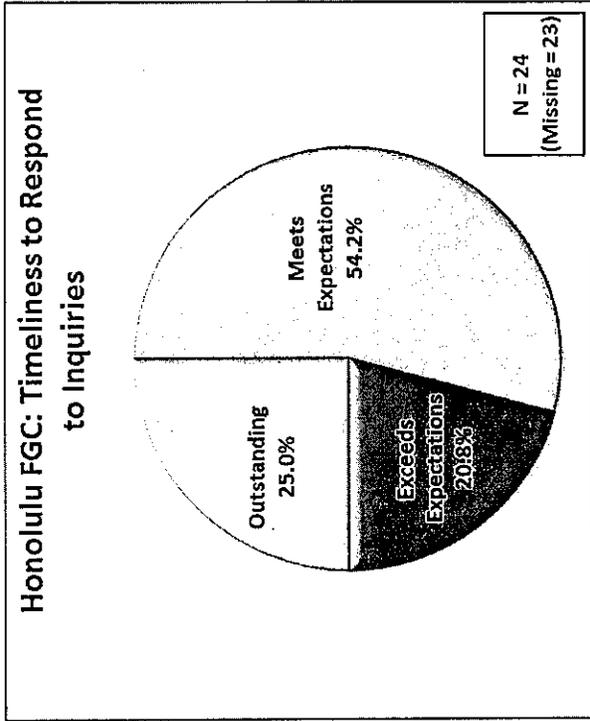
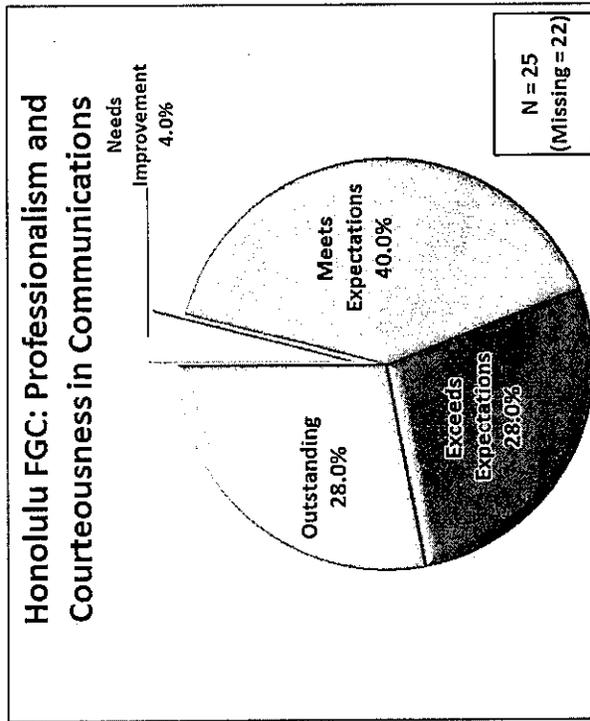
Big Island Family Guidance Center (Clinical Staff)



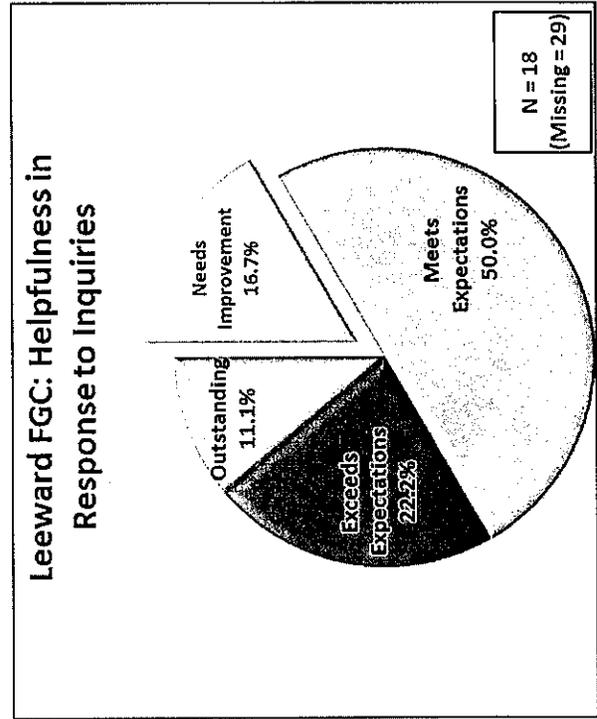
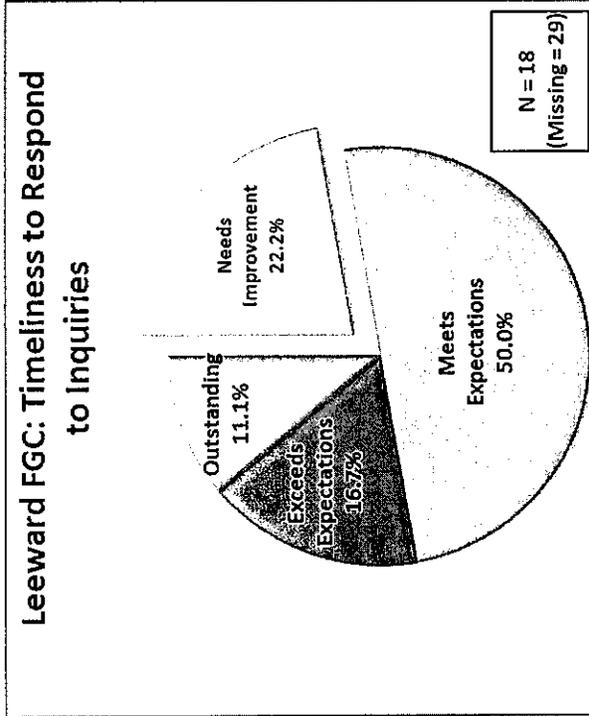
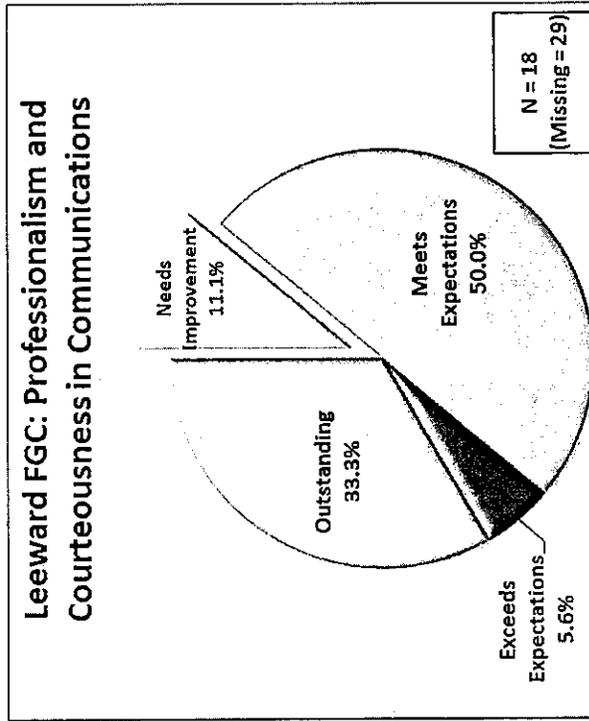
Central Family Guidance Center (Clinical Staff)



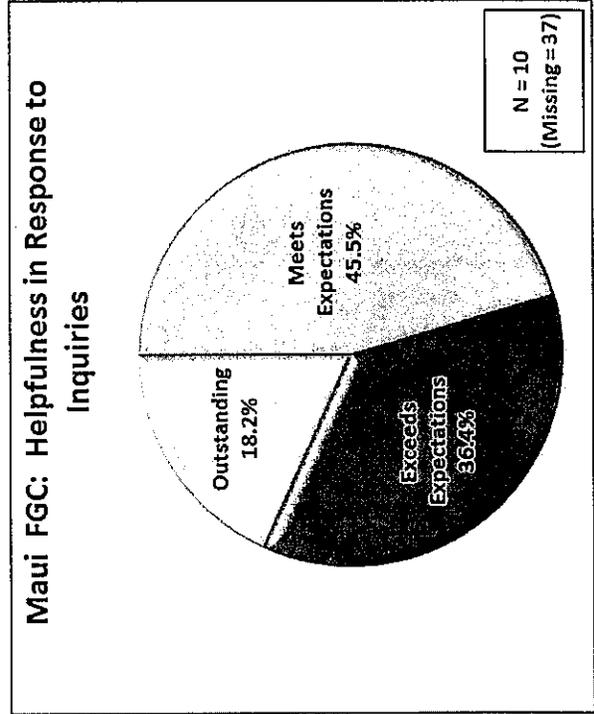
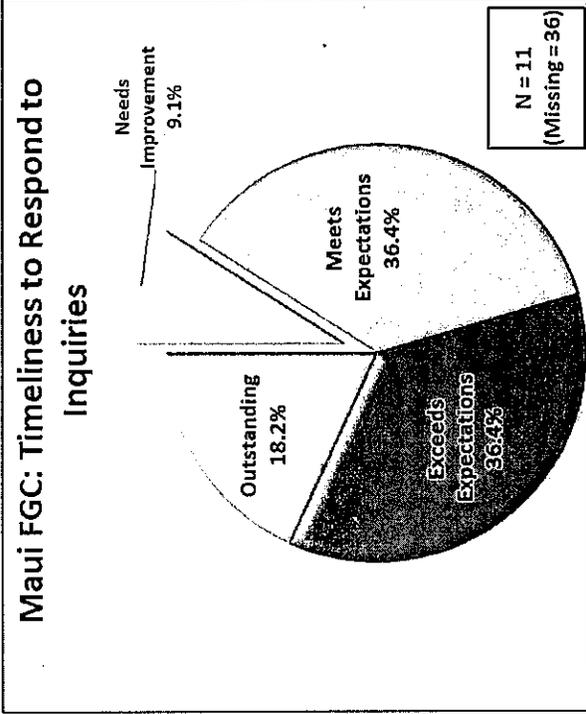
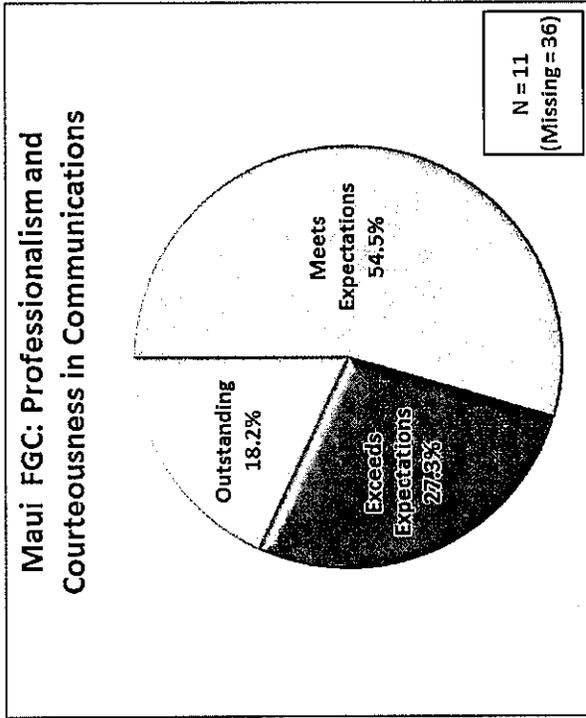
Honolulu Family Guidance Center (Clinical Staff)



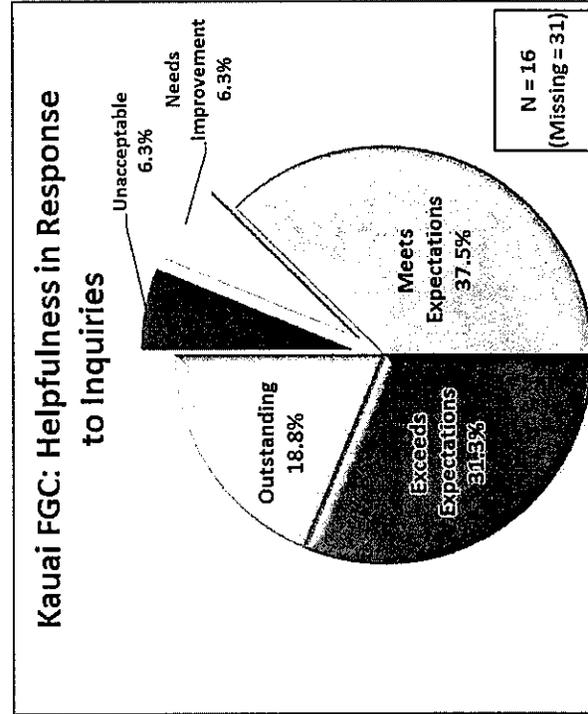
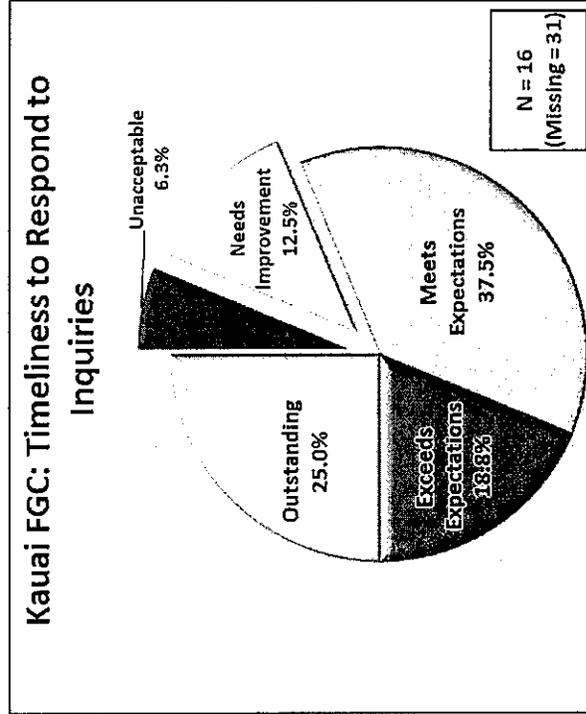
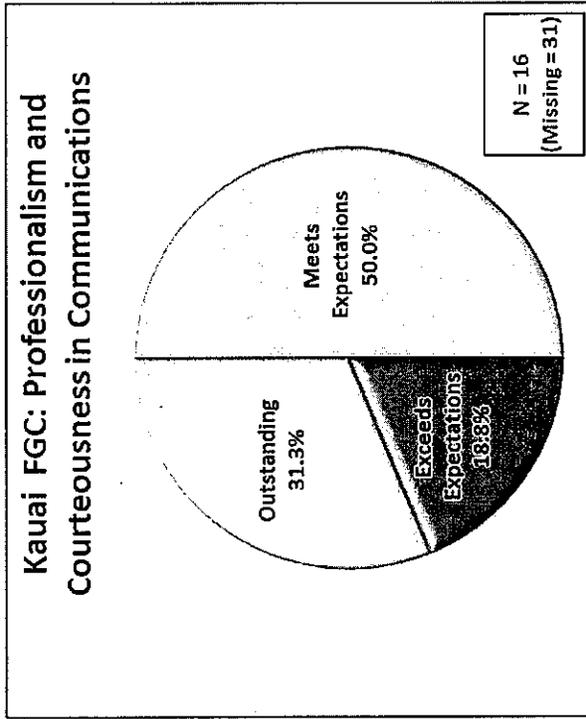
Leeward Family Guidance Center (Clinical Staff)



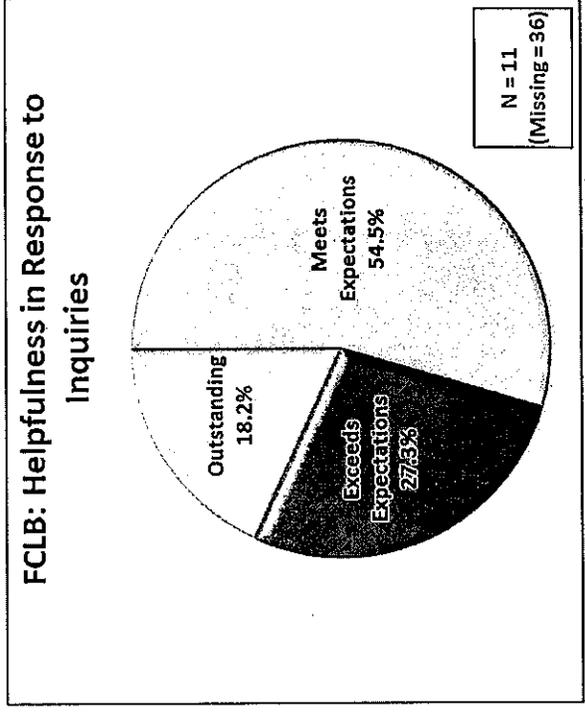
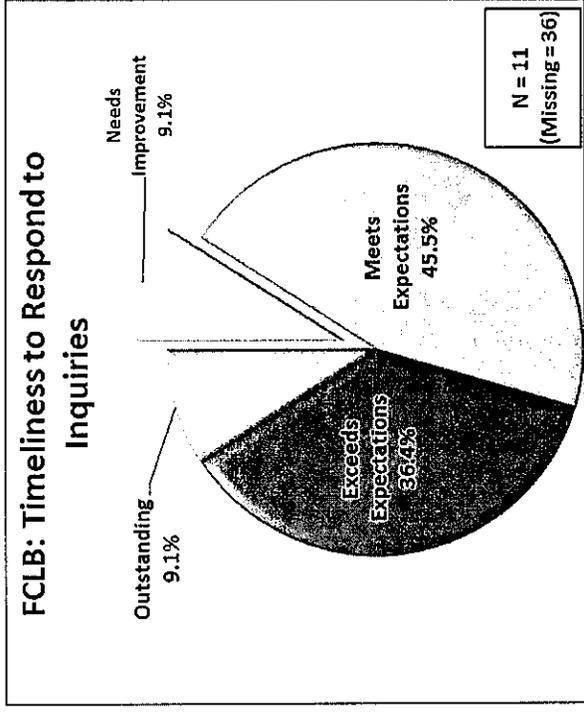
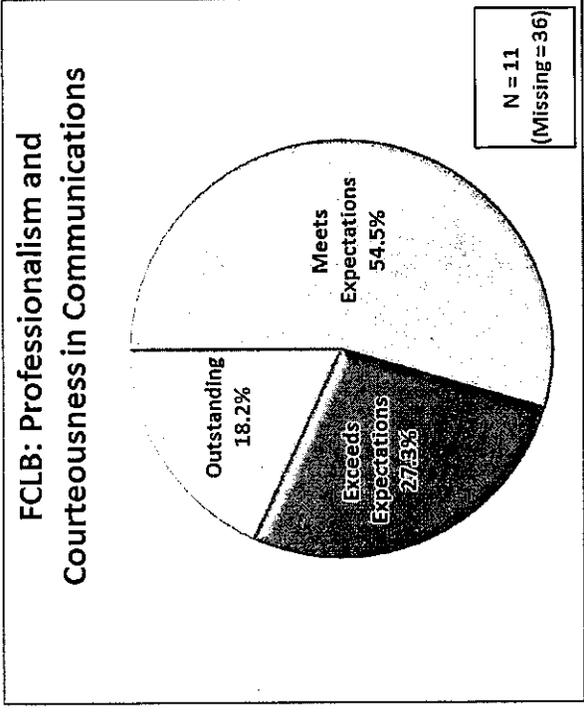
Maui Family Guidance Center (Clinical Staff)



Kauai Family Guidance Center (Clinical Staff)



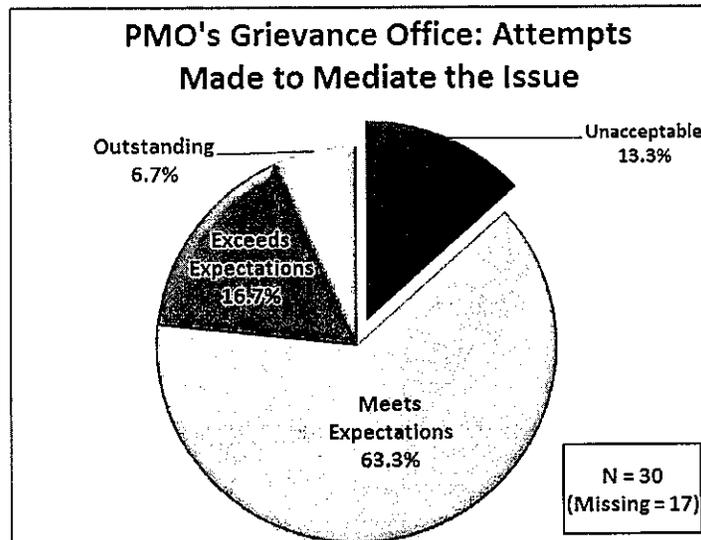
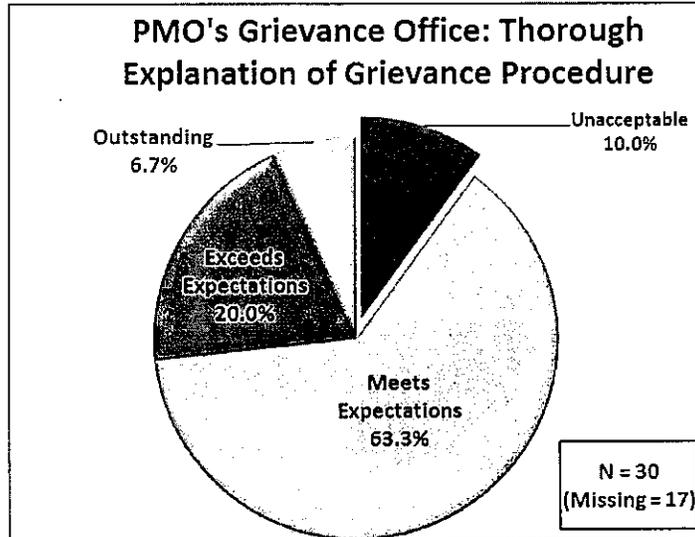
Family Court Liaison Branch (Clinical Staff)



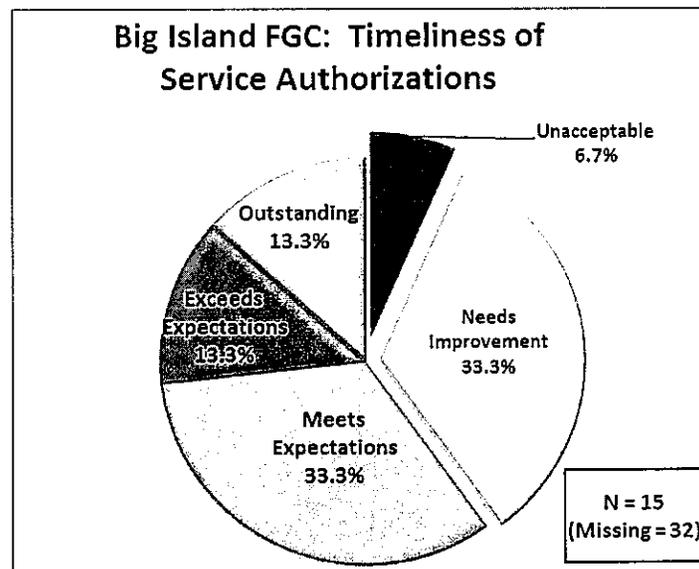
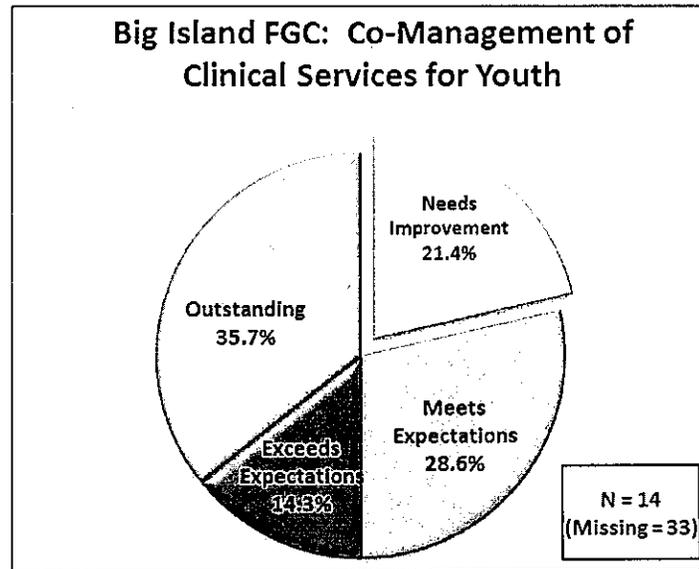
Survey Results: Opportunities for Improvement

Graphs are presented in this section³ that indicates areas which could serve as 'opportunities for improvement' for the various offices and branches of CAMHD. Opportunities for improvement is defined as when: a total of 10% or more of respondents checked either "Needs Improvement" and/or "Unacceptable" (yellow or red pieces of the pie in each graph) when rating the items.

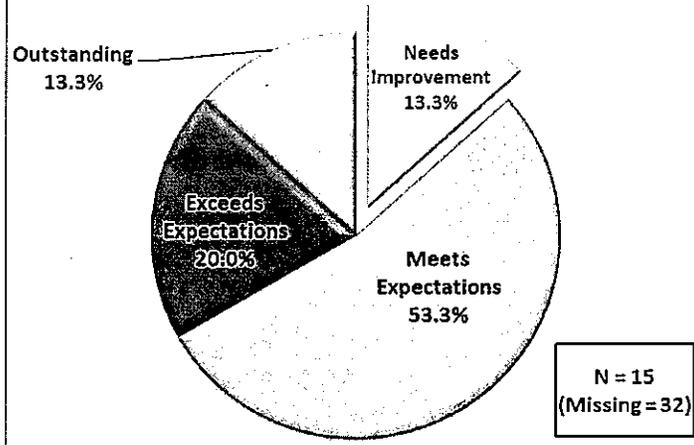
PMO's Grievance Office:



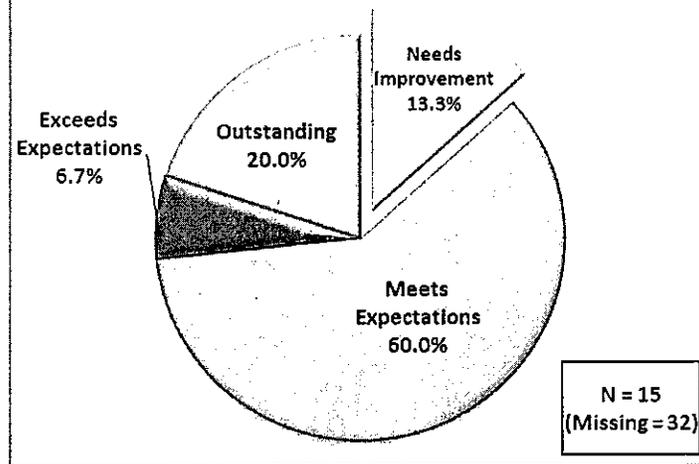
³ Only graphs that were not presented in the earlier section are shown here in this section.

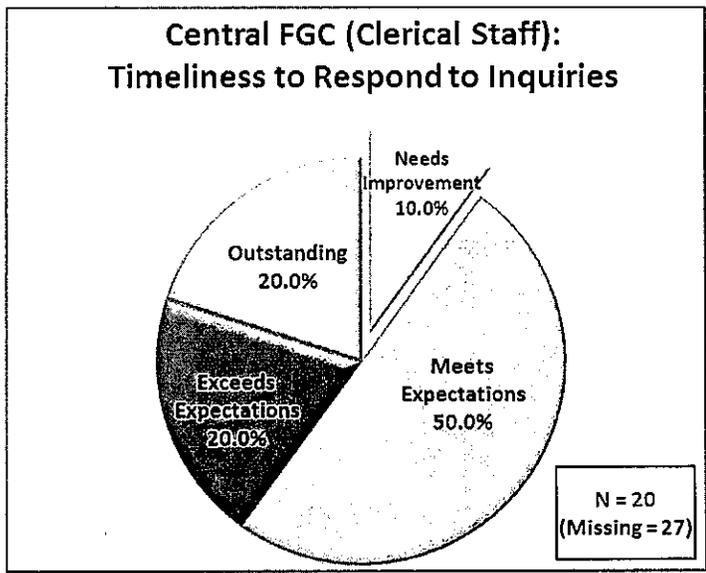


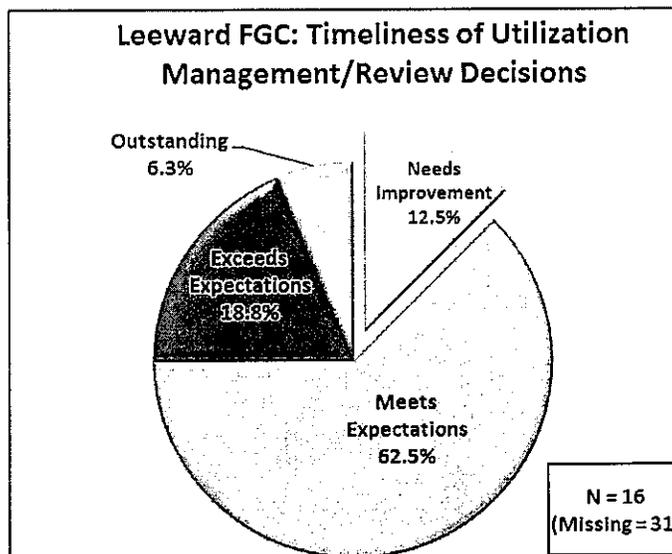
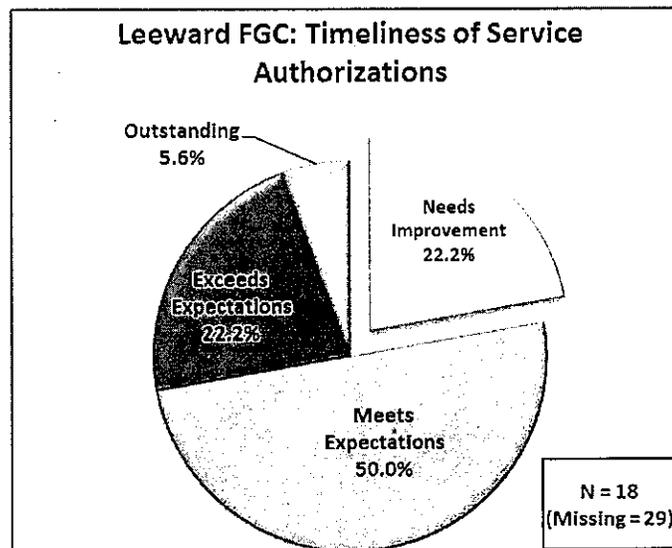
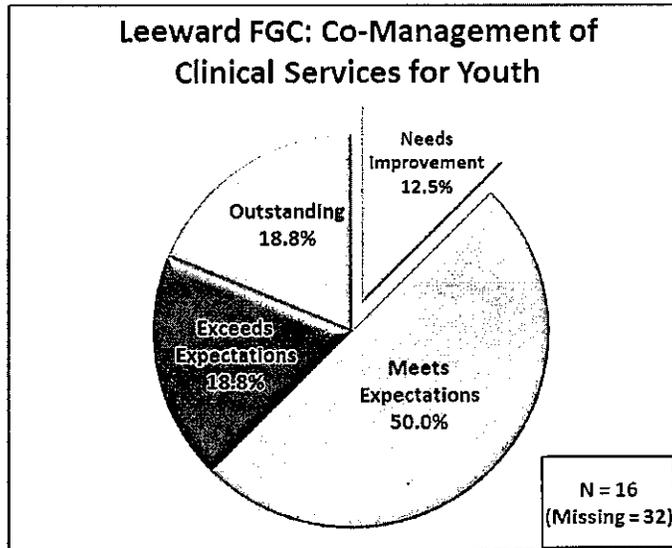
Big Island FGC (Clerical Staff): Timeliness to Respond to Inquiries



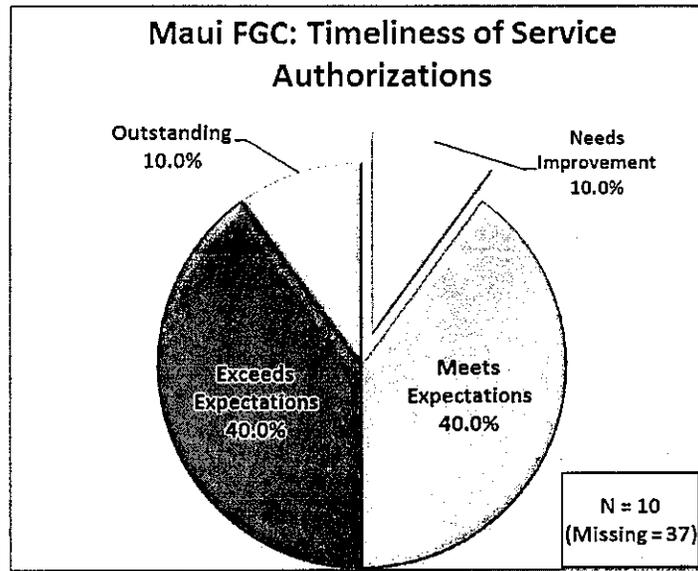
Big Island FGC (Clerical Staff): Helpfulness in Response to Inquiries

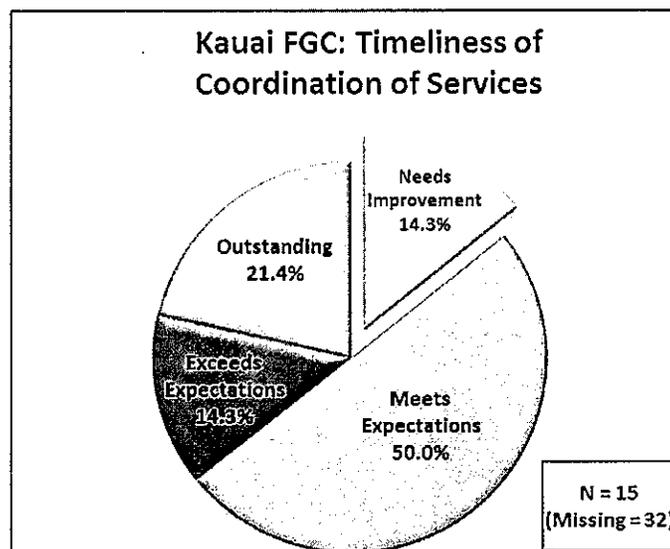
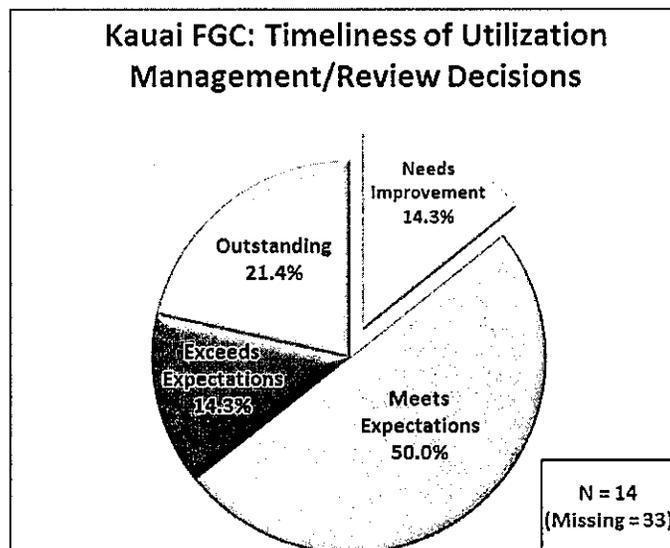
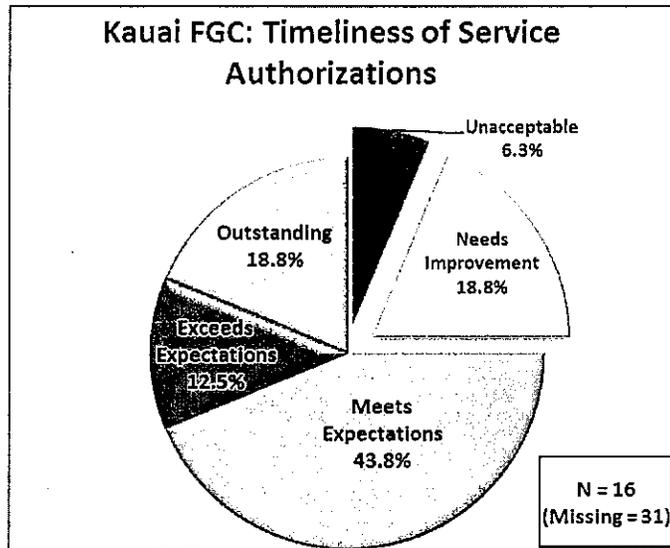




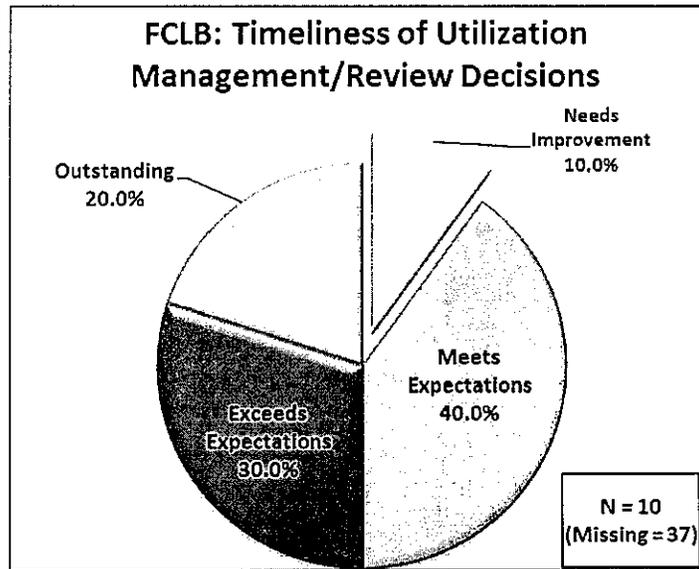


Maui FGC





Family Court Liaison Branch (FCLB)



PROVIDER COMMENTS

The last section of the satisfaction survey offered the respondent an opportunity to offer specific suggestions and/or comments regarding their interactions with the FGCs and CAMHD Offices. The CAMHD supervisory staff will review those comments and address specific concerns identified in the comments in the appropriate venue. (See Appendix A. for list of actual comments offered by the respondents.)

ACTION PLAN & RECOMMENDATIONS

When comparing the findings from the previous year's survey, it appears that CAMHD has demonstrated consistent improvement in its relationships with members of the provider network agencies. However, it is important to note that even though most of the items addressed in the survey do not result in 'Needs Improvement' or 'Unacceptable' responses, there are still many opportunities for improvement.

With the ongoing changes in staffing in both the provider agencies and the CAMHD, there is continuous need for improvement when it comes to the CAMHD's collaborative relationships with members of its provider network. The CAMHD has used the results of provider surveys as an important tool to target areas in need of improvement each year.

The CAMHD uses the provider survey to determine what is needed to build and maintain and improve its collaborative relationship with its provider network. This is to ensure timely, effective and appropriate services are always available to the youth served by the CAMHD.

The Quality Steering Committee (QSC) will:

- Review the results of the 2014 Provider Satisfaction Survey findings and develop a set of report recommendations.
- Make the recommendations developed by QSC available to the CAMHD's Leadership Forum (CLF) for consideration of any needed applicable strategies to effect improvements in its operations to strengthen and improve the CAMHD's relationships with all members of its provider network.
- Distribute copies of the completed report (including the open-ended comments section) to all Branch Chiefs and other administrative supervisors at the branches to review with their staff, and, if warranted, develop a *Plan of Improvement*. Copies of those plans will be submitted to the CAMHD's Performance Manager and Provider Relations Liaison.

The Executive Management Team will:

- Review the results of the 2014 Provider Satisfaction Survey findings.
- Approve the report.
- Assess the adequacy of the results of the methodology implemented to ensure representativeness of the survey sample.
- Determine if changes to criteria/questions need to be made to improve the next survey for 2015.

The Provider Relations Liaison will:

- Electronically distribute final report to the CAMHD.
- Electronically distribute the final report to all representatives of the provider network.
- Schedule a time to present the report to the Provider Network.
- Arrange to have the final report posted on the CAMHD website.

NEXT SURVEY

The next annual survey is scheduled for distribution to potential respondents in August, 2015.

If you have questions and comments, please direct them to: Carol Evans, Provider Relations Liaison at Carol.Evans@doh.hawaii.gov

Mahalo to those of you who participated in this survey and for your commitment to working together to insure that we all offer quality services in a timely, effective and efficient manner.

APPENDIX B
Survey Instrument

Provider Satisfaction Survey 2013-2014

Every year the Provider's Relations Specialist (Carol Evans) sends out this survey to all CAMHD contracted providers to elicit input regarding the working relationship between CAMHD and its service providers. Please take the time to complete this survey so CAMHD can include your comments when considering strategies for improving the way CAMHD provides services to youth in our system.

Please share with us your experience(s) with the various teams/units that comprise the Child and Adolescent Mental Health Division (CAMHD). Please select the one best response to each service/task/responsibility item listed. (Mark 'NA' for items with which you had no interaction or involvement over the past year.)

In this survey we will be referring to various CAMHD offices or units. A brief description of the intended functions and responsibilities of each office at CAMHD are included just before that specific section.

Mahalo for helping make CAMHD a more effective partner in serving children and adolescents with mental health needs!

Provider Satisfaction Survey 2013-2014

The CAMHD Administration Office is tasked with overseeing the management and support functions for all affairs of the Child & Adolescent Mental Health Division (CAMHD).

1. How would you rate the CAMHD Administration Office at Diamond Head Health Center (DHHC) in terms of:

	Outstanding	Exceeds Expectations	Meets Expectations	Needs Improvement	Unacceptable	N/A
a. The professionalism and courteousness of CAMHD Administration staff in your communications.	<input type="radio"/>					
b. The timeliness of CAMHD Administration staff to respond to your inquiries or requests.	<input type="radio"/>					
c. The helpfulness of CAMHD Administration staff in their response to your inquiries.	<input type="radio"/>					

If any of the above were: 'Needs Improvement' or 'Unacceptable', please tell us why:

Provider Satisfaction Survey 2013-2014

The Clinical Services Office (CSO) develops, implements, and oversees clinical and care coordination practices, as well as, policy for CAMHD and its contracted providers within the statewide system of care. CSO is responsible for developing and reviewing documents and activities such as interagency performance standards and practice guidelines, provider contracts and request for proposals.

2. How would you rate the CAMHD Clinical Services Office (CSO) in terms of:

	Outstanding	Exceeds Expectations	Meets Expectations	Needs Improvement	Unacceptable	N/A
a. The professionalism and courteousness of CSO staff in your communications.	<input type="radio"/>					
b. The timeliness of CSO staff to respond to your inquiries or requests.	<input type="radio"/>					
c. The helpfulness of CSO staff in their response to your inquiries.	<input type="radio"/>					
d. Clarifications to the IPSPG ('Orange Book') offered by CSO staff.	<input type="radio"/>					
e. Effectiveness of responses by CSO staff to resource management requests.	<input type="radio"/>					
f. Effectiveness of responses by CSO staff to clinical inquiries.	<input type="radio"/>					

If any of the above were: 'Needs Improvement' or 'Unacceptable', please tell us why:

Provider Satisfaction Survey 2013-2014

The Research and Evaluation Team (RET) analyzes local and national data and then distributes reports and presents the results of those reports (at least) annually on output and outcome data that are collected by/for CAMHD staff, contracted providers, and consumers of CAMHD services. Examples of the reports RET offers presentations on include: the Provider Feedback Report (or bi-annual 'Data Party'), the Provider Satisfaction Survey, the CAMHD Annual Report, and the Consumer Satisfaction Survey.

3. How would you rate the CAMHD Research and Evaluation Team (RET) in terms of:

	Outstanding	Exceeds Expectations	Meets Expectations	Needs Improvement	Unacceptable	N/A
a. The professionalism and courteousness of RET staff in your communications.	<input type="radio"/>					
b. The timeliness of RET staff to respond to your inquiries or requests.	<input type="radio"/>					
c. The helpfulness of RET staff in their response to your inquiries.	<input type="radio"/>					
d. The usefulness of RET reports shared with your agency.	<input type="radio"/>					
e. The quality of the 'Provider Feedback' reports produced by this team.	<input type="radio"/>					
f. The quality of the presentations (e.g., 'Data Party', Annual Report) shared with you by this team.	<input type="radio"/>					

If any of the above were: 'Needs Improvement' or 'Unacceptable', please tell us why:

Provider Satisfaction Survey 2013-2014

The Performance Management Office (PMO) provides quality oversight and monitoring of the policies and practices of contracted providers to ensure quality, timely, safe and effective treatment services that are congruent with CAMHD's practice standards. This office includes Program Monitoring, Performance Operations, Credentialing, Grievance, Sentinel Events, and Facilities Certification sections.

PMO's Program Monitoring conducts case-based reviews and monitor programmatic performance to determine overall programmatic strengths and areas for improvement. Program Monitors interview team members, compose case-based review reports for the FGCs, write annual performance reports for the agencies, and occasionally participate in investigations.

4. How would you rate the PMO's Program Monitoring in terms of:

	Outstanding	Exceeds Expectations	Meets Expectations	Needs Improvement	Unacceptable
a. The professionalism and courteousness of their staff in your communications.	<input type="radio"/>				
b. The timeliness of their staff to respond to your inquiries or requests.	<input type="radio"/>				
c. The helpfulness of their staff in their response to your inquiries.	<input type="radio"/>				
d. The timeliness of sharing program monitoring review reports prepared by their staff.	<input type="radio"/>				
e. The helpfulness of program monitoring reports prepared by their staff.	<input type="radio"/>				

If any of the above were: 'Needs Improvement' or 'Unacceptable', please tell us why:

Provider Satisfaction Survey 2013-2014

PMO's Performance Operations -- Performance Operations specialists correspond with providers and FGC staff to schedule case-based reviews and assemble data for presentation in the annual reports.

5. How would you rate the PMO's Performance Operations component in terms of:

	Outstanding	Exceeds Expectations	Meets Expectations	Needs Improvement	Unacceptable
a. The professionalism and courteousness of their staff in your communications.	<input type="radio"/>				
b. The timeliness of their staff to respond to your inquiries or requests.	<input type="radio"/>				
c. The helpfulness of their staff in their response to your inquiries.	<input type="radio"/>				

If any of the above were: 'Needs Improvement' or 'Unacceptable', please tell us why:

Provider Satisfaction Survey 2013-2014

PMO's Credentialing Office - The Credentialing Office works with agency credentialing specialists to ensure that all providers and staff who work with CAMHD youth are vetted through the credentialing process.

6. How would you rate the PMO's Credentialing Office in terms of:

	Outstanding	Exceeds Expectations	Meets Expectations	Needs Improvement	Unacceptable
a. The professionalism and courteousness of their staff in your communications.	<input type="radio"/>				
b. The timeliness of their staff to respond to your inquiries or requests.	<input type="radio"/>				
c. The helpfulness of their staff in their response to your inquiries.	<input type="radio"/>				
d. The timeliness of sharing program monitoring review reports prepared by their staff.	<input type="radio"/>				

If any of the above were: 'Needs Improvement' or 'Unacceptable', please tell us why:

Provider Satisfaction Survey 2013-2014

PMO's Grievance Office - The Grievance Office communicates with parties filing a grievance and all parties necessary to discover facts, attempt to mediate or resolve issues, make determinations, and make recommendations for provider or system improvements if applicable.

7. How would you rate the PMO's Grievance Office in terms of:

	Outstanding	Exceeds Expectations	Meets Expectations	Needs Improvement	Unacceptable
a. The professionalism and courtesy of their staff in your communications.	<input type="radio"/>				
b. The timeliness of their staff to respond to your inquiries or requests.	<input type="radio"/>				
c. The helpfulness of their staff in their response to your inquiries.	<input type="radio"/>				
d. A thorough explanation of the grievance procedure by their staff.	<input type="radio"/>				
e. The attempts made by staff to mediate or problem solve the issue.	<input type="radio"/>				

If any of the above were: 'Needs Improvement' or 'Unacceptable', please tell us why:

Provider Satisfaction Survey 2013-2014

PMO's Sentinel Events -- Sentinel Events collects information provided through phone messages and written reports about sentinel events, produces cumulative data for feedback about Sentinel Events, and occasionally conducts inquiries or investigations.

8. How would you rate the PMO's Sentinel Events component in terms of:

	Outstanding	Exceeds Expectations	Meets Expectations	Needs Improvement	Unacceptable
a. The professionalism and courteousness of their staff in your communications.	<input type="radio"/>				
b. The timeliness of their staff to respond to your inquiries or requests.	<input type="radio"/>				
c. The helpfulness of their staff in their response to your inquiries.	<input type="radio"/>				

If any of the above were: 'Needs Improvement' or 'Unacceptable', please tell us why:

Provider Satisfaction Survey 2013-2014

PMO's Facilities Certification -- Facilities Certification conducts site visits of residential programs to determine the safety of the facilities and asks for improvements or corrective actions when necessary.

9. How would you rate the PMO's Facilities Certification component in terms of:

	Outstanding	Exceeds Expectations	Meets Expectations	Needs Improvement	Unacceptable
a. The professionalism and courteousness of their staff in your communications.	<input type="radio"/>				
b. The timeliness of their staff to respond to your inquiries or requests.	<input type="radio"/>				
c. The helpfulness of their staff in their response to your inquiries.	<input type="radio"/>				

If any of the above were: 'Needs Improvement' or 'Unacceptable', please tell us why:

Provider Satisfaction Survey 2013-2014

Management Information Systems (MIS) monitors usage of CAMHD computers/networks/data to insure the confidentiality of those being served by CAMHD is protected and in compliance with HIPAA guidelines. MIS insures that only authorized persons have access to information and that the data are free of viruses. MIS researches and analyzes systems, as well as, tests the contents of information being passed through the system. MIS supports and makes recommendations regarding the billing process.

10. How would you rate the CAMHD Management Information Systems (MIS) unit in terms of:

	Outstanding	Exceeds Expectations	Meets Expectations	Needs improvement	Unacceptable	N/A
a. The professionalism and courteousness of CAMHD MIS staff in your communications.	<input type="radio"/>					
b. The timeliness of CAMHD MIS staff to respond to your inquiries or requests.	<input type="radio"/>					
c. The helpfulness of CAMHD MIS staff in their response to your inquiries.	<input type="radio"/>					
d. The effectiveness of any CAMHD MIS training you've participated in.	<input type="radio"/>					
e. The quality of the training offered by CAMHD MIS staff.	<input type="radio"/>					

If any of the above were: 'Needs Improvement' or 'Unacceptable', please tell us why:

Provider Satisfaction Survey 2013-2014

The Fiscal Support component insures that CAMHD has a systematic approach to conducting fiscal audits and that providers maintain adherence to contracted budget.

11. How would you rate the CAMHD Administrative Supports (i.e., Fiscal Section) office in terms of:

	Outstanding	Exceeds Expectations	Meets Expectations	Needs Improvement	Unacceptable	N/A
a. The professionalism and courteousness of CAMHD Fiscal staff in your communications.	<input type="radio"/>					
b. The timeliness of CAMHD Fiscal staff to respond to your inquiries or requests.	<input type="radio"/>					
c. The helpfulness of CAMHD Fiscal staff in their response to your inquiries.	<input type="radio"/>					
d. The accuracy of claims payments processed by CAMHD Fiscal staff.	<input type="radio"/>					

If any of the above were: 'Needs Improvement' or 'Unacceptable', please tell us why:

Provider Satisfaction Survey 2013-2014

The CAMHD Family Guidance Centers (FGCs) or Family Court Liaison Branch (FCLB) services include: being a liaison with the DOE/schools, receipt of referrals, registration, care coordination, and intensive clinical case management services, as well as, procurement of mental health services. Managed by a Branch Chief and supported by a psychiatrist, psychologist, mental health supervisor, quality assurance specialist, administrative support, fiscal officer and mental health care coordinators.

FYI: For the questions below re: FGCs, the term "Clinical Staff" used in the questions refers to all of the following staff who work in the FGC: Clinical Directors (CD), Psychiatrists, Psychologists, Mental Health Care Coordinators (MHCC) and Mental Health Supervisors (MHS)

12. Have you had any interaction with the staff at the Big Island (Hawai'i) Family Guidance Center (FGC)?

Yes

No - Go to Q #14 - Central Oahu FGC

Provider Satisfaction Survey 2013-2014

13. How would you rate CAMHD 's Hawaii (Big Island) Family Guidance Center (FGC) in terms of:

	Outstanding	Exceeds Expectations	Meets Expectations	Needs Improvement	Unacceptable	N/A
a. The co-management of clinical services for the youth we share with Big Island FGC.	<input type="radio"/>					
b. The professionalism and courteousness of Big Island FGC Clinical Staff in your communications.	<input type="radio"/>					
c. The timeliness of Big Island FGC Clinical Staff to respond to your inquiries or requests.	<input type="radio"/>					
d. The helpfulness of Big Island FGC Clinical Staff in their response to your inquiries.	<input type="radio"/>					
e. The timeliness of service authorizations by Big Island FGC.	<input type="radio"/>					
f. The timeliness of utilization management/review decisions by Big Island FGC.	<input type="radio"/>					
g. The timeliness of the coordination of services by Big Island FGC.	<input type="radio"/>					
h. The timeliness of fiscal oversight (e.g., audits) by Big Island FGC.	<input type="radio"/>					
i. The Aloha/professionalism of Big Island FGC Clerical and Administrative Staff in your communications.	<input type="radio"/>					
j. The timeliness of Big Island FGC Clerical and Administrative Staff to respond to your inquiries or requests.	<input type="radio"/>					
k. The helpfulness of Big Island FGC Clerical and Administrative Staff in their response to your inquiries.	<input type="radio"/>					

If any of the above were: 'Needs Improvement' or 'Unacceptable', please tell us why:

Provider Satisfaction Survey 2013-2014

14. Have you had any interaction with the staff at Central Oahu Family Guidance Center?

Yes

No - Go to Q #16 - Honolulu FGC

Provider Satisfaction Survey 2013-2014

15. How would you rate CAMHD's Central Oahu Family Guidance Center (FGC) in terms of:

	Outstanding	Exceeds Expectations	Meets Expectations	Needs Improvement	Unacceptable	N/A
a. The co-management of clinical services for the youth we share with Central Oahu FGC.	<input type="radio"/>					
b. The professionalism and courteousness of Central Oahu FGC Clinical Staff in your communications.	<input type="radio"/>					
c. The timeliness of Central Oahu FGC Clinical Staff to respond to your inquiries or requests.	<input type="radio"/>					
d. The helpfulness of Central Oahu FGC Clinical Staff in their response to your inquiries.	<input type="radio"/>					
e. The timeliness of service authorizations by Central Oahu FGC.	<input type="radio"/>					
f. The timeliness of utilization management/review decisions by Central Oahu FGC.	<input type="radio"/>					
g. The timeliness of the coordination of services by Central Oahu FGC.	<input type="radio"/>					
h. The timeliness of fiscal oversight (e.g., audits) by Central Oahu FGC.	<input type="radio"/>					
i. The Aloha/professionalism of Central Oahu FGC Clerical and Administrative Staff in your communications.	<input type="radio"/>					
j. The timeliness of Central Oahu FGC Clerical and Administrative Staff to respond to your inquiries or requests.	<input type="radio"/>					
k. The helpfulness of Central Oahu FGC Clerical and Administrative Staff in their response to your inquiries.	<input type="radio"/>					

If any of the above were: 'Needs Improvement' or 'Unacceptable', please tell us why:

Provider Satisfaction Survey 2013-2014

16. Have you had any interaction with the staff at Honolulu Family Guidance Center?

Yes

No - Go to Q #18 - Leeward Oahu FGC

Provider Satisfaction Survey 2013-2014

17. How would you rate CAMHD's Honolulu Family Guidance Center (FGC) in terms of:

	Outstanding	Exceeds Expectations	Meets Expectations	Needs Improvement	Unacceptable	N/A
a. The co-management of clinical services for the youth we share with Honolulu FGC.	<input type="radio"/>					
b. The professionalism and courteousness of Honolulu FGC Clinical Staff in your communications.	<input type="radio"/>					
c. The timeliness of Honolulu FGC Clinical Staff to respond to your inquiries or requests.	<input type="radio"/>					
d. The helpfulness of Honolulu FGC Clinical Staff in their response to your inquiries.	<input type="radio"/>					
e. The timeliness of service authorizations by Honolulu FGC.	<input type="radio"/>					
f. The timeliness of utilization management/review decisions by Honolulu FGC.	<input type="radio"/>					
g. The timeliness of the coordination of services by Honolulu FGC.	<input type="radio"/>					
h. The timeliness of fiscal oversight (e.g., audits) by Honolulu FGC.	<input type="radio"/>					
i. The Aloha/professionalism of Honolulu FGC Clerical and Administrative Staff in your communications.	<input type="radio"/>					
j. The timeliness of Honolulu FGC Clerical and Administrative Staff to respond to your inquiries or requests.	<input type="radio"/>					
k. The helpfulness of Honolulu FGC Clerical and Administrative Staff in their response to your inquiries.	<input type="radio"/>					

If any of the above were: 'Needs Improvement' or 'Unacceptable', please tell us why:

Provider Satisfaction Survey 2013-2014

18. Have you had any interaction with the staff at Leeward Oahu Family Guidance Center?

Yes

No - Go to Q #20 - Maui FGC

Provider Satisfaction Survey 2013-2014

19. How would you rate CAMHD's Leeward Oahu Family Guidance Center (FGC) in terms of:

	Outstanding	Exceeds Expectations	Meets Expectations	Needs Improvement	Not Acceptable	N/A
a. The co-management of clinical services for the youth we share with Leeward Oahu FGC.	<input type="radio"/>					
b. The professionalism and courteousness of Leeward Oahu FGC Clinical Staff in your communications.	<input type="radio"/>					
c. The timeliness of Leeward Oahu FGC Clinical Staff to respond to your inquiries or requests.	<input type="radio"/>					
d. The helpfulness of Leeward Oahu FGC Clinical Staff in their response to your inquiries.	<input type="radio"/>					
e. The timeliness of service authorizations by Leeward Oahu FGC.	<input type="radio"/>					
f. The timeliness of utilization management/review decisions by Leeward Oahu FGC.	<input type="radio"/>					
g. The timeliness of the coordination of services by Leeward Oahu FGC.	<input type="radio"/>					
h. The timeliness of fiscal oversight (e.g., audits) by Leeward Oahu FGC.	<input type="radio"/>					
i. The Aloha/professionalism of Leeward Oahu FGC Clerical and Administrative Staff in your communications.	<input type="radio"/>					
j. The timeliness of Leeward Oahu FGC Clerical and Administrative Staff to respond to your inquiries or requests.	<input type="radio"/>					
k. The helpfulness of Leeward Oahu FGC Clerical and Administrative Staff in their response to your inquiries.	<input type="radio"/>					

If any of the above were: 'Needs Improvement' or 'Unacceptable', please tell us why:

Provider Satisfaction Survey 2013-2014

20. Have you had any interaction with the staff at Maui Family Guidance Center?

Yes

No - Go to Q #22 - Kauai FGC

Provider Satisfaction Survey 2013-2014

21. How would you rate CAMHD's Maui Family Guidance Center (FGC) in terms of:

	Outstanding	Exceeds Expectations	Meets Expectations	Needs Improvement	Unacceptable	N/A
a. The co-management of clinical services for the youth we share with Maui FGC.	<input type="radio"/>					
b. The professionalism and courteousness of Maui FGC Clinical Staff in your communications.	<input type="radio"/>					
c. The timeliness of Maui FGC Clinical Staff to respond to your inquiries or requests.	<input type="radio"/>					
d. The helpfulness of Maui FGC Clinical Staff in their response to your inquiries.	<input type="radio"/>					
e. The timeliness of service authorizations by Maui FGC.	<input type="radio"/>					
f. The timeliness of utilization management/review decisions by Maui FGC.	<input type="radio"/>					
g. The timeliness of the coordination of services by Maui FGC.	<input type="radio"/>					
h. The timeliness of fiscal oversight (e.g., audits) by Maui FGC.	<input type="radio"/>					
i. The Aloha/professionalism of Maui FGC Clerical and Administrative Staff in your communications.	<input type="radio"/>					
j. The timeliness of Maui FGC Clerical and Administrative Staff to respond to your inquiries or requests.	<input type="radio"/>					
k. The helpfulness of Maui FGC Clerical and Administrative Staff in their response to your inquiries.	<input type="radio"/>					

If any of the above were: 'Needs Improvement' or 'Unacceptable', please tell us why: '

Provider Satisfaction Survey 2013-2014

22. Have you had any interaction with the staff at Kauai Family Guidance Center?

Yes

No - Go to Q #24 - FCLB

Provider Satisfaction Survey 2013-2014

23. How would you rate CAMHD's Kauai Family Guidance Center (FGC) in terms of:

	Outstanding	Exceeds Expectations	Meets Expectations	Needs Improvement	Unacceptable	N/A
a. The co-management of clinical services for the youth we share with Kauai FGC.	<input type="radio"/>					
b. The professionalism and courteousness of Kauai FGC Clinical Staff in your communications.	<input type="radio"/>					
c. The timeliness of Kauai FGC Clinical Staff to respond to your inquiries or requests.	<input type="radio"/>					
d. The helpfulness of Kauai FGC Clinical Staff in their response to your inquiries.	<input type="radio"/>					
e. The timeliness of service authorizations by Kauai FGC.	<input type="radio"/>					
f. The timeliness of utilization management/review decisions by Kauai FGC.	<input type="radio"/>					
g. The timeliness of the coordination of services by Kauai FGC.	<input type="radio"/>					
h. The timeliness of fiscal oversight (e.g., audits) by Kauai FGC.	<input type="radio"/>					
i. The Aloha/professionalism of Kauai FGC Clerical and Administrative Staff in your communications.	<input type="radio"/>					
j. The timeliness of Kauai FGC Clerical and Administrative Staff to respond to your inquiries or requests.	<input type="radio"/>					
k. The helpfulness of Kauai FGC Clerical and Administrative Staff in their response to your inquiries.	<input type="radio"/>					

If any of the above were: 'Needs Improvement' or 'Unacceptable', please tell us why:

Provider Satisfaction Survey 2013-2014

24. Have you had any interaction with the staff at Family Court Liaison Branch (FCLB)?

Yes

No - Go to End of Survey

Provider Satisfaction Survey 2013-2014

25. How would you rate CAMHD's Family Court Liaison Branch (FCLB) in terms of:

	Outstanding	Exceeds Expectations	Meets Expectations	Needs Improvement	Unacceptable	N/A
a. The co-management of clinical services for the youth we share with FCLB.	<input type="radio"/>					
b. The professionalism and courteousness of FCLB Clinical Staff in your communications.	<input type="radio"/>					
c. The timeliness of FCLB Clinical Staff to respond to your inquiries or requests.	<input type="radio"/>					
d. The helpfulness of FCLB Clinical Staff in their response to your inquiries.	<input type="radio"/>					
e. The timeliness of service authorizations by FCLB.	<input type="radio"/>					
f. The timeliness of utilization management/review decisions by FCLB.	<input type="radio"/>					
g. The timeliness of the coordination of services by FCLB.	<input type="radio"/>					
h. The timeliness of fiscal oversight (e.g., audits) by FCLB.	<input type="radio"/>					
i. The Aloha/professionalism of FCLB Clerical and Administrative Staff in your communications.	<input type="radio"/>					
j. The timeliness of FCLB Clerical and Administrative Staff to respond to your inquiries or requests.	<input type="radio"/>					
k. The helpfulness of FCLB Clerical and Administrative Staff in their response to your inquiries.	<input type="radio"/>					

If any of the above were: 'Needs Improvement' or 'Unacceptable', please tell us why:

Provider Satisfaction Survey 2013-2014

Mahalo for completing this survey. We plan to share the results of this survey with you via electronic link.

