



Child and Adolescent Mental Health Division

PROVIDER SATISFACTION SURVEY **REPORT**

Fiscal Year 2015

July 1, 2014 – June 30, 2015

*(A Joint Project by the Provider Liaison Specialist and the Research
and Evaluation Office of CAMHD)*



PROVIDER SATISFACTION SURVEY RESULTS

JULY 01, 2014 – JUNE 30, 2015

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 Family Guidance Centers including 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); transitional family home (TFH) placement; community-based residential 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.

The CAMHD conducted its *annual* survey of its provider network, covering the period from July 01, 2014 through June 30, 2015. The CAMHD provider network members were asked, through the survey, to evaluate the CAMHD overall, and to offer their comments of specific CAMHD offices that included the following:

1. Administrative Office
2. Clinical Services Office (CSO)
3. Research and Evaluation Team (RET)
4. Program Monitoring Office - Program Monitoring
5. Program Monitoring Office -- Sentinel Events
6. Program Monitoring Office -- Grievance Office
7. Health Systems Management Office -- Management Information Systems (MIS)
8. Health Systems Management Office -- Facilities Certification
9. Health Systems Management Office -- Credentialing Office
10. Administrative Supports (Fiscal Office)

11. Each of the CAMHD Family Guidance Centers
 - 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, provides quick results. The CAMHD will likely continue to use web-based surveys to conduct this annual satisfaction survey.

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 49 surveys were completed for a survey response rate of 36.6%.

SURVEY RATINGS

In the 2015 online survey, providers were asked to rate all sections of the CAMHD on a scale of 1-5 (See Scale below) on several business functions.

All 2015 survey responses were designed on a five (5)-point scale. Using the following rating scale, the way to interpret the findings is: The higher the score, the higher the level of satisfaction with the CAMHD Offices/FGCs/Services are on a particular item.

<p>0 = Unacceptable</p> <p>1 = Needs Improvement</p> <p>2 = Meets Expectations</p> <p>3 = Exceeds Expectations</p> <p>4 = Outstanding</p>
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For a comparison of previous years, the Provider Satisfaction Survey Response Rate was:

2012 – 63.3% (57 of the 90 surveys sent out were completed).

2013 – 44.0% (40 of the 91 surveys sent out were completed).

2014 – 35.9% (47 of the 131 surveys sent out were completed).

2015 – 36.6% (48 of the 131 surveys sent out were completed).

SURVEY RESULTS

For the period covering July 01, 2014 to June 30, 2015, the CAMHD sent out a total of 131 surveys to providers (who had some interactions with the CAMHD staff) during the coverage period. 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 49 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 services/sections and processes, three items were asked to be rated for all the various offices/sections/processes (PMO, CSO, RET, FGCs, etc.) of the CAMHD (along with other items that were tailored for each office/section/process surveyed). The evaluation items common to all sections of CAMHD included:

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 of mean' values^[1] for the 49 respondents answering each of these three items. The resulting scores for these three items show that respondents perceived that for all three areas, the CAMHD is right in the middle between "Meets Expectations," (score=2) and "Exceeding Expectations"

^[1] The three means presented in this table were created using this methodology: A mean value was calculated for all responses offered for a particular item (i.e., "Professionalism," "Timeliness," and "Helpfulness") related to a certain section of CAMHD (e.g., PMO, CSO, RET, FGCs). A mean was then *calculated across all those means* for each of the three survey items.

(score=3). In other words, providers responding to the survey believe that the professionalism, timeliness and helpfulness of the CAMHD “Meets Expectations” but does not necessarily rise to the level of “Exceed Expectations.” The results also suggest that since last year’s 2014 study, the CAMHD has declined slightly in two of the areas (“Professionalism” & “Timeliness”) but improved slightly in one area (“Helpfulness”). It is unclear, however, whether these small differences between the two years of reporting of the means calculated are statistically significant.

Survey Items	2014 Ratings	2015 Ratings
Professionalism	2.58	2.50
Timeliness	2.51	2.45
Helpfulness	2.43	2.47

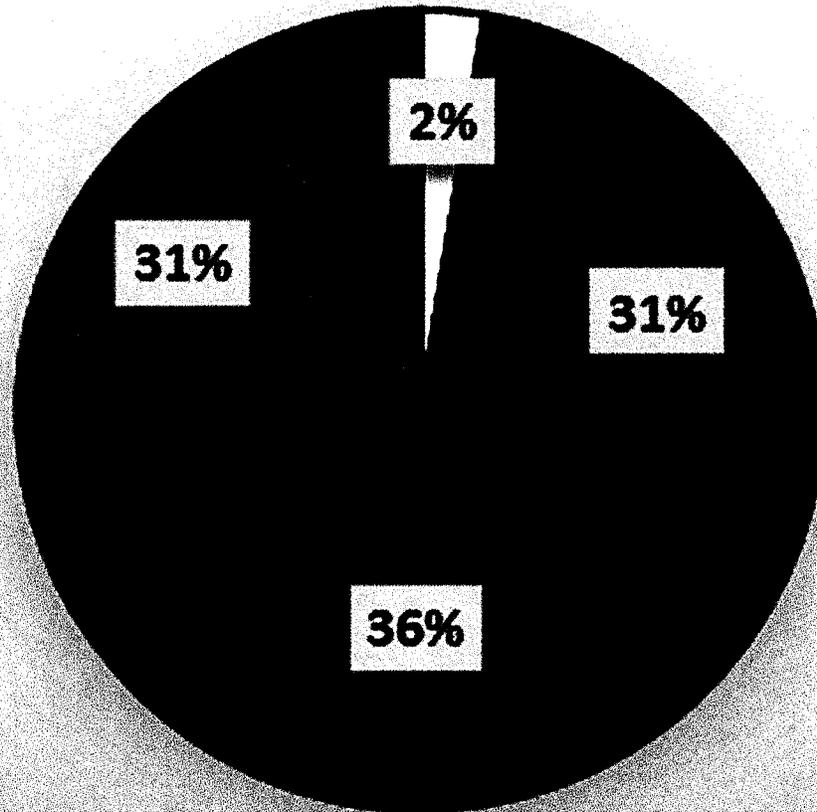
Opportunities for Improvement Indicated

Opportunities for improvement, as indicated by a score of 10% or greater on the survey’s “Needs Improvement”, and “Unacceptable” categories of the rating scale indicates the need for improvement.

Common Themes Taken From Individual Comments Were:

- Missing Service Authorizations
- Authorizations Not Timely
- Staff Training Needed -- to recognize errors in SAs that prevent SAs from being transmitted to providers. Staff needs to be able to find and identify errors and fix them in timely manner.
- Care Coordinators need to know and understand their roles.
- Program Monitoring Process and Approach
- Credentialing process too long.

CAMHD Administrative Office: Professionalism & Courteousness

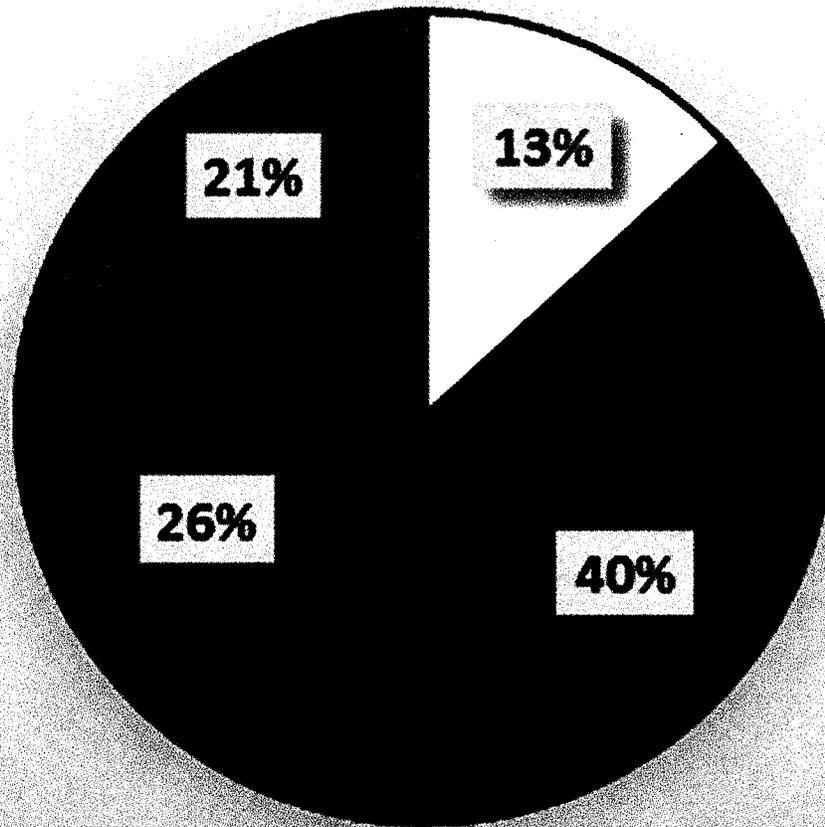


Needs Improvement
 Meets Expectations
 Exceeds Expectations
 Outstanding

a. CAMHD Admin Office (DHHC): The professionalism and courteousness of CAMHD Administration staff in your communications.

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Needs Improvement	1	2.0	2.6	2.6
	Meets Expectations	12	24.5	30.8	33.3
	Exceeds Expectations	14	28.6	35.9	69.2
	Outstanding	12	24.5	30.8	100.0
	Total	39	79.6	100.0	
Missing	98	1	2.0		
	99	9	18.4		
	Total	10	20.4		
Total		49	100.0		

CAMHD Administrative Office: Timeliness of Response to Inquiries



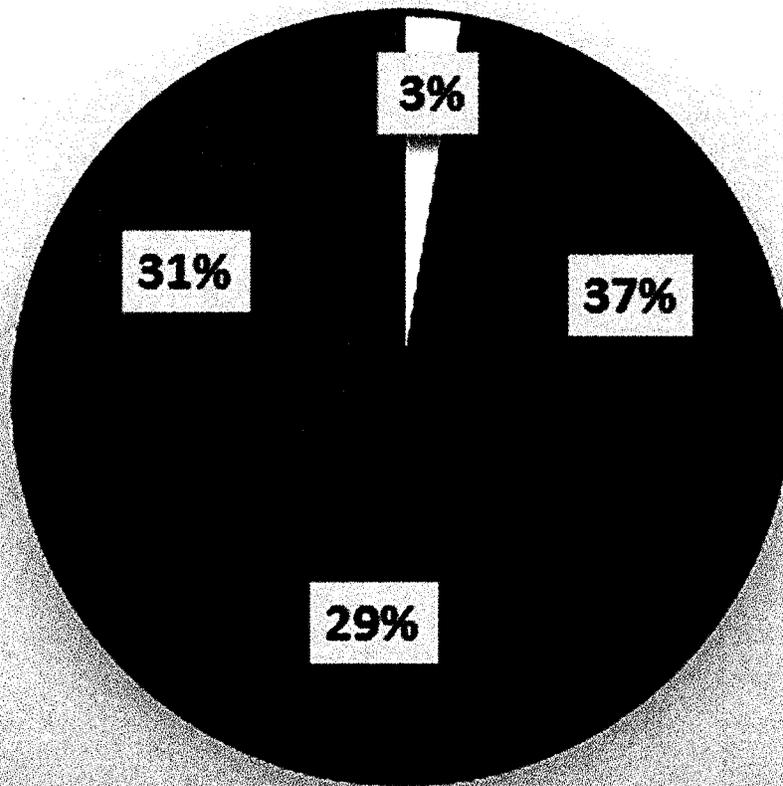
n = 38

Needs Improvement
 Meets Expectations
 Exceeds Expectations
 Outstanding

b. CAMHD Admin Office (DHHC): The timeliness of CAMHD Administration staff to respond to your inquiries or requests.

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Needs Improvement	5	10.2	13.2	13.2
	Meets Expectations	15	30.6	39.5	52.6
	Exceeds Expectations	10	20.4	26.3	78.9
	Outstanding	8	16.3	21.1	100.0
	Total	38	77.6	100.0	
Missing	98	2	4.1		
	99	9	18.4		
	Total	11	22.4		
Total		49	100.0		

CAMHD Administrative Office: Helpfulness of CAMHD Administration Staff



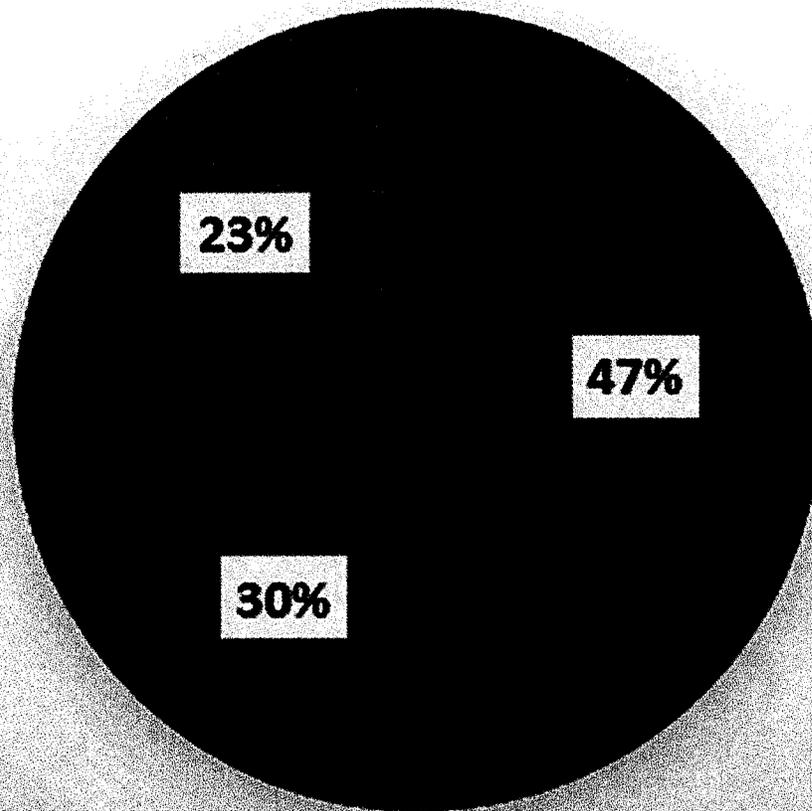
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Needs Improvement
 Meets Expectations
 Exceeds Expectations
 Outstanding

c. CAMHD Admin Office (DHC): The helpfulness of CAMHD Administration staff in their response to your inquiries.

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Needs Improvement	1	2.0	2.6	2.6
	Meets Expectations	14	28.6	36.8	39.5
	Exceeds Expectations	11	22.4	28.9	68.4
	Outstanding	12	24.5	31.6	100.0
	Total	38	77.6	100.0	
Missing	98	2	4.1		
	99	9	18.4		
	Total	11	22.4		
Total		49	100.0		

Clinical Services Office (CSO): Effectiveness of Responses by CSO Staff to Clinical Inquiries

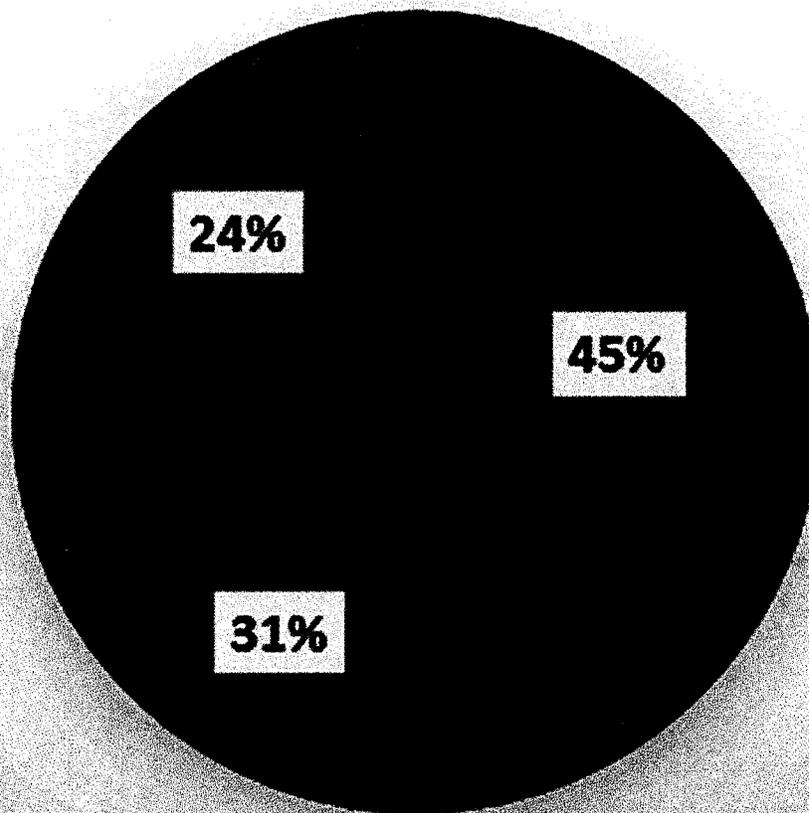


Meets Expectations
 Exceeds Expectations
 Outstanding

f. CAMHD Clinical Services Office (CSO): Effectiveness of responses by CSO staff to clinical inquiries.

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Meets Expectations	14	28.6	46.7	46.7
	Exceeds Expectations	9	18.4	30.0	76.7
	Outstanding	7	14.3	23.3	100.0
	Total	30	61.2	100.0	
Missing	98	5	10.2		
	99	14	28.6		
	Total	19	38.8		
Total		49	100.0		

Clinical Services Office (CSO): Knowledge of the CAMHPS 'Orange Book' by CSO Staff



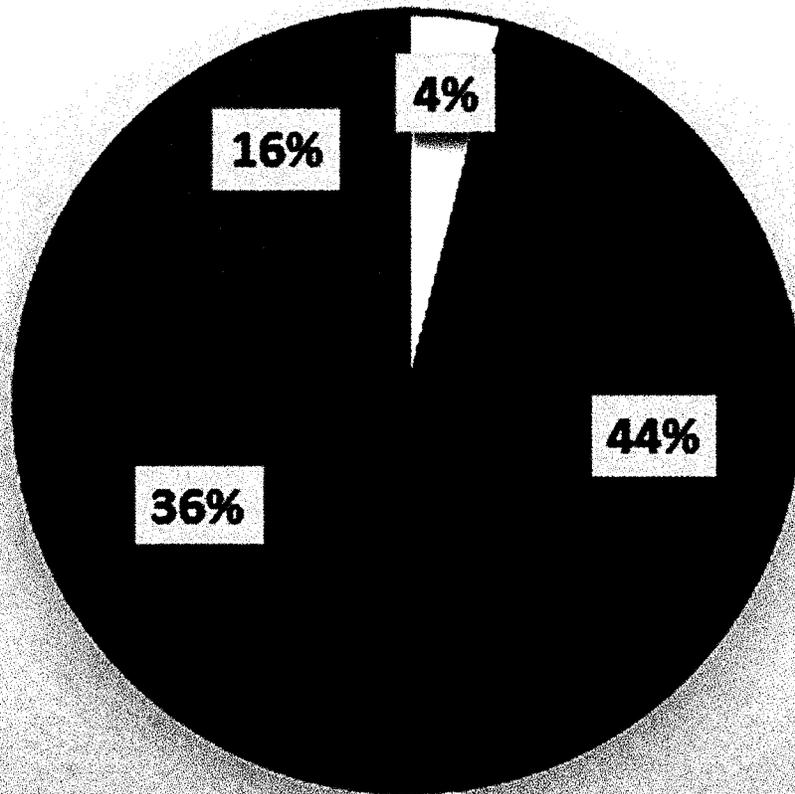
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■ Meets Expectations ■ Exceeds Expectations ■ Outstanding

d. CAMHD Clinical Services Office (CSO): Knowledge of the CAMHPS 'Orange Book' by CSO staff.

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Meets Expectations	13	26.5	44.8	44.8
	Exceeds Expectations	9	18.4	31.0	75.9
	Outstanding	7	14.3	24.1	100.0
	Total	29	59.2	100.0	
Missing	98	5	10.2		
	99	15	30.6		
	Total	20	40.8		
Total		49	100.0		

**CAMHD Research & Evaluation Team (RET):
Professionalism and Courteousness of RET Staff**

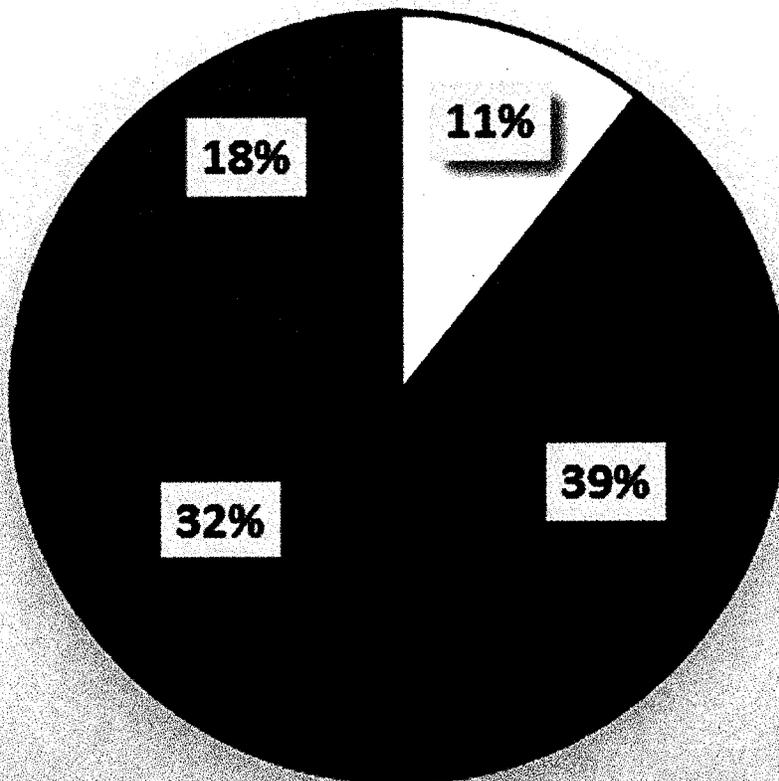


Needs Improvement
 Meets Expectations
 Exceeds Expectations
 Outstanding

a. CAMHD Research and Evaluation Team (RET): The professionalism and courteousness of RET staff in your communications.

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Needs Improvement	1	2.0	4.0	4.0
	Meets Expectations	11	22.4	44.0	48.0
	Exceeds Expectations	9	18.4	36.0	84.0
	Outstanding	4	8.2	16.0	100.0
	Total	25	51.0	100.0	
Missing	98	8	16.3		
	99	16	32.7		
	Total	24	49.0		
Total		49	100.0		

CAMHD Research & Evaluation Team (RET): Quality of the Presentations (e.g., 'Data Party') Shared with You



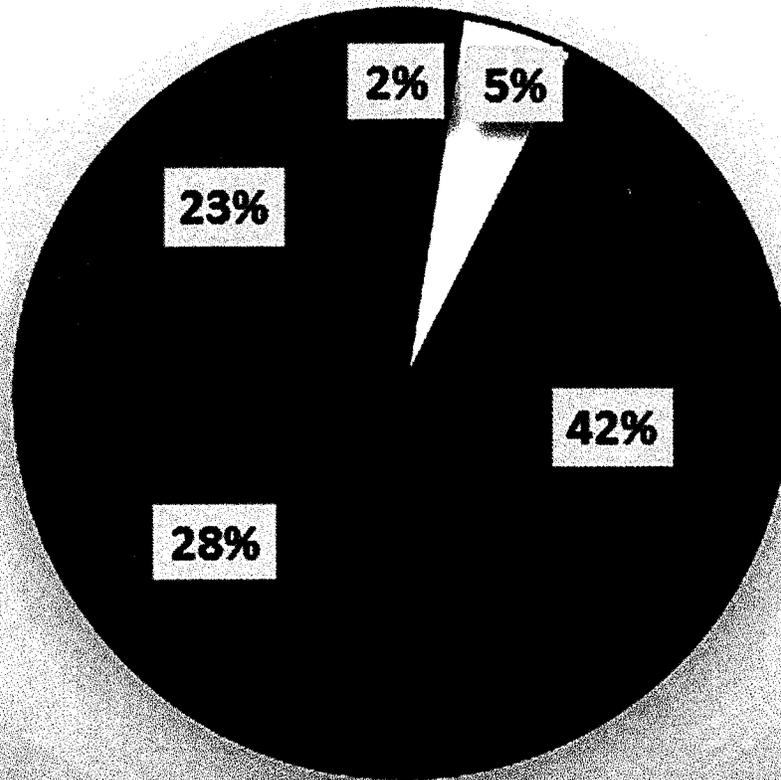
n = 28

Needs Improvement
 Meets Expectations
 Exceeds Expectations
 Outstanding

f. CAMHD Research and Evaluation Team (RET): The quality of the presentations (e.g., 'Data Party', Annual Report) shared with you by this team.

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Needs Improvement	3	6.1	10.7	10.7
	Meets Expectations	11	22.4	39.3	50.0
	Exceeds Expectations	9	18.4	32.1	82.1
	Outstanding	5	10.2	17.9	100.0
	Total	28	57.1	100.0	
Missing	98	9	18.4		
	99	12	24.5		
	Total	21	42.9		
Total		49	100.0		

**PMO Program Monitoring Section:
Professionalism and Courteousness of their Staff**



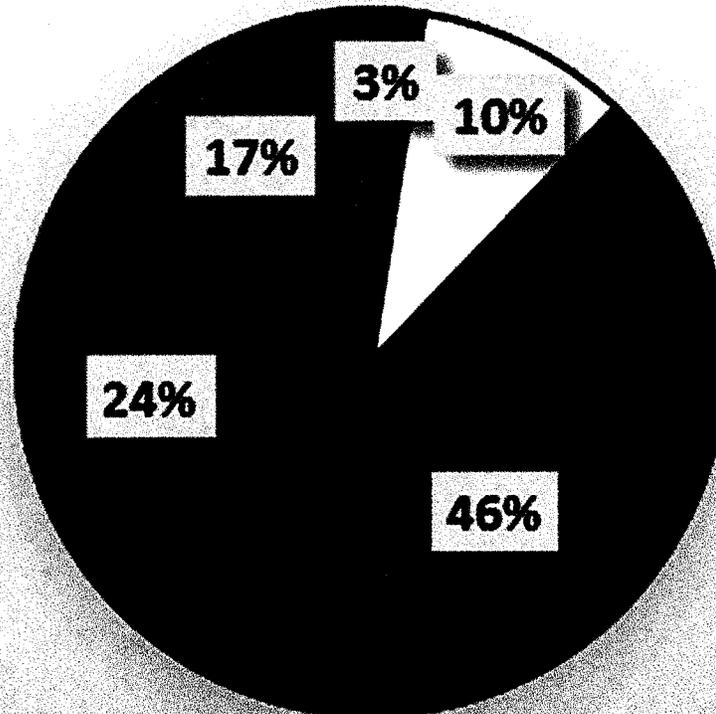
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Unacceptable Needs Improvement Meets Expectations
 Exceeds Expectations Outstanding

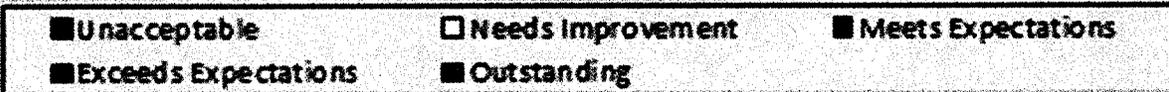
a. PMO Program Monitoring section: The professionalism and courteousness of their staff in your communications.

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Unacceptable	1	2.0	2.5	2.5
	Needs Improvement	2	4.1	5.0	7.5
	Meets Expectations	17	34.7	42.5	50.0
	Exceeds Expectations	11	22.4	27.5	77.5
	Outstanding	9	18.4	22.5	100.0
	Total	40	81.6	100.0	
Missing	98	9	18.4		
Total		49	100.0		

PMO Program Monitoring Section: Helpfulness of Program Monitoring Feedback



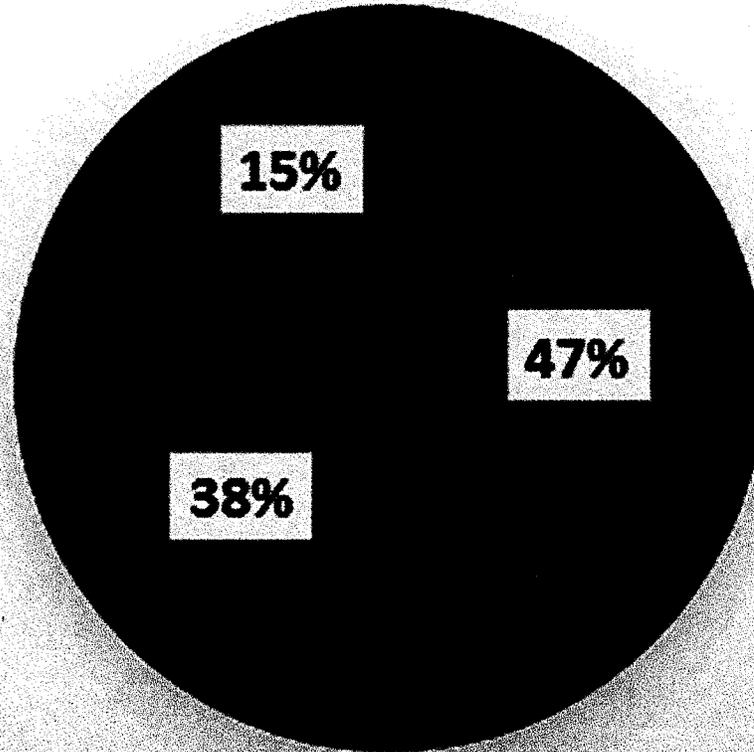
n = 41



e. PMO Program Monitoring section: The helpfulness of program monitoring feedback.

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Unacceptable	1	2.0	2.4	2.4
	Needs Improvement	4	8.2	9.8	12.2
	Meets Expectations	19	38.8	46.3	58.5
	Exceeds Expectations	10	20.4	24.4	82.9
	Outstanding	7	14.3	17.1	100.0
	Total	41	83.7	100.0	
Missin	98	8	16.3		
Total		49	100.0		

PMO Sentinel Events Section : Professionalism and Courteousness of their Staff

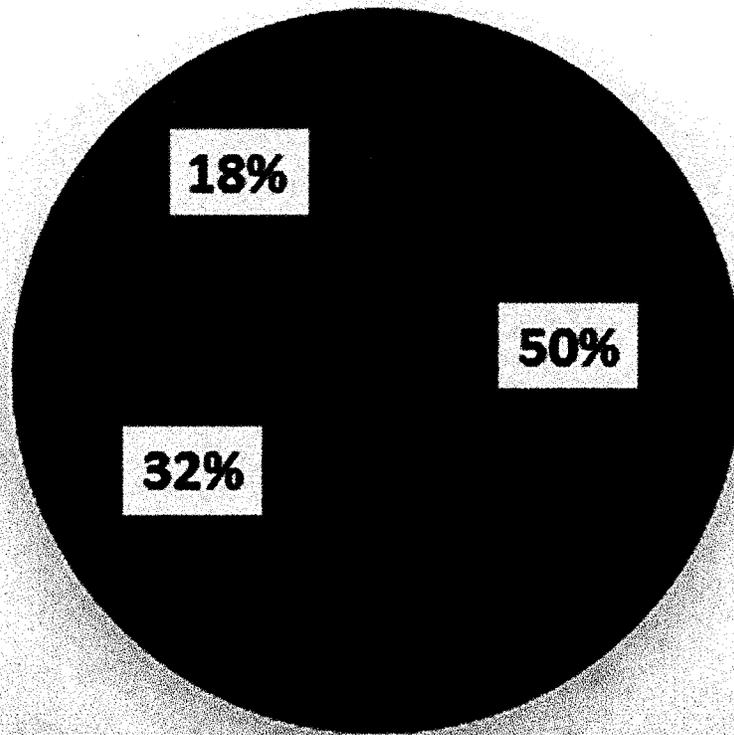


Meets Expectations
 Exceeds Expectations
 Outstanding

a. PMO Sentinel Events section : The professionalism and courteousness of their staff in your communications.

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Meets Expectations	16	32.7	47.1	47.1
	Exceeds Expectations	13	26.5	38.2	85.3
	Outstanding	5	10.2	14.7	100.0
	Total	34	69.4	100.0	
Missing	98	15	30.6		
Total		49	100.0		

HSMO Credentialing Office: Professionalism and Courtesy of their Staff

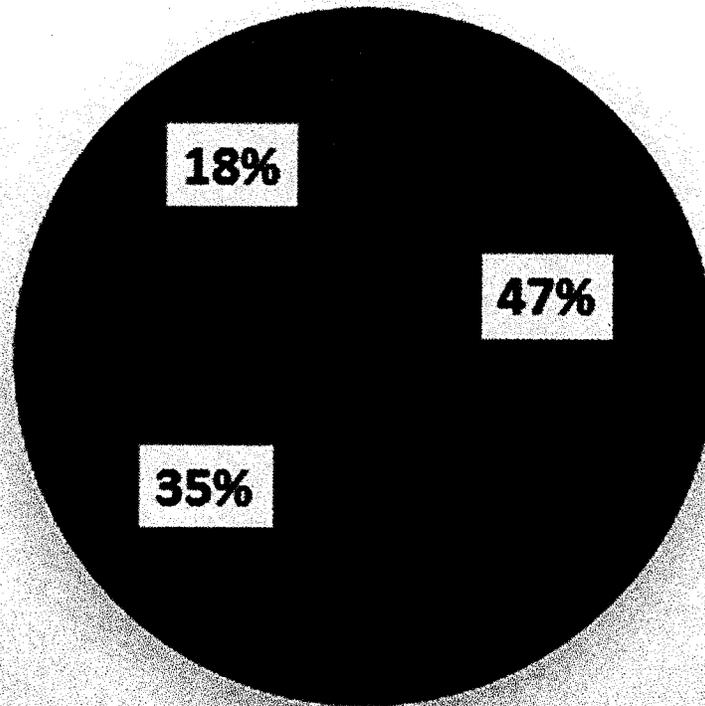


Meets Expectations
 Exceeds Expectations
 Outstanding

a. HSMO Credentialing Office: The professionalism and courtesy of their staff in your communications.

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Meets Expectations	17	34.7	50.0	50.0
	Exceeds Expectations	11	22.4	32.4	82.4
	Outstanding	6	12.2	17.6	100.0
	Total	34	69.4	100.0	
Missing	98	15	30.6		
Total		49	100.0		

**HSMO Credentialing Office: Helpfulness of their Staff in
their Response to your Inquiries**



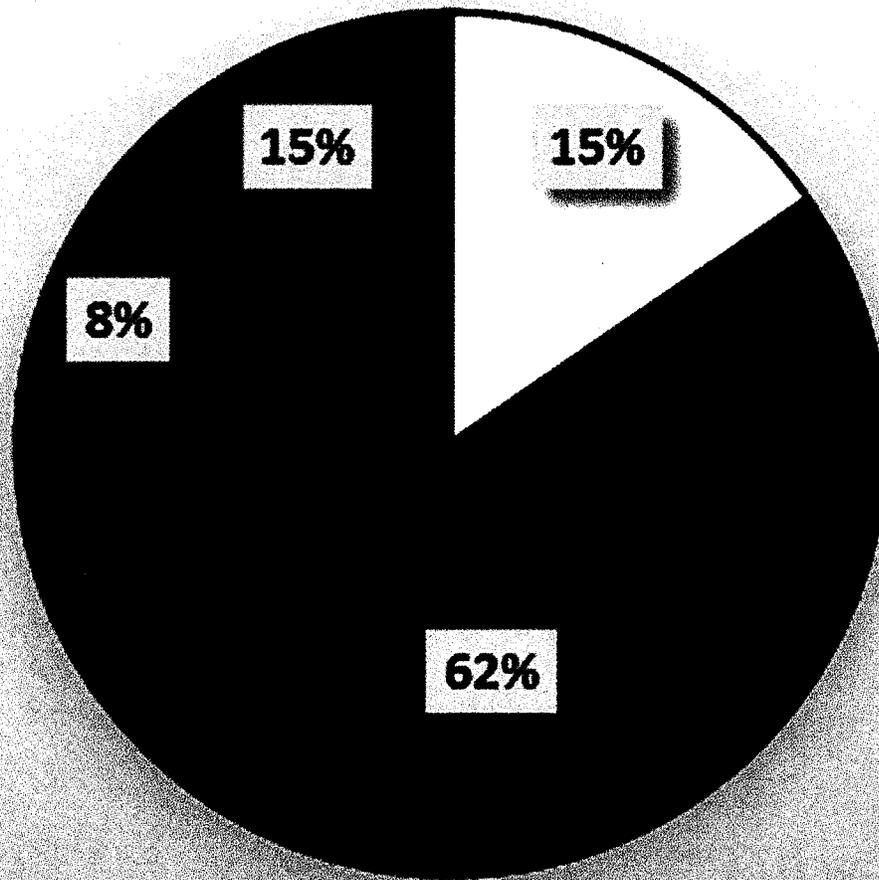
n = 34

■ Meets Expectations ■ Exceeds Expectations ■ Outstanding

**c. HSMO Credentialing Office: The helpfulness of their staff in their
response to your inquiries.**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Meets Expectations	16	32.7	47.1	47.1
	Exceeds Expectations	12	24.5	35.3	82.4
	Outstanding	6	12.2	17.6	100.0
	Total	34	69.4	100.0	
Missing	98	15	30.6		
Total		49	100.0		

**Central Oahu Family Guidance Center (FGC):
Timeliness of Service Authorizations by FGC staff**

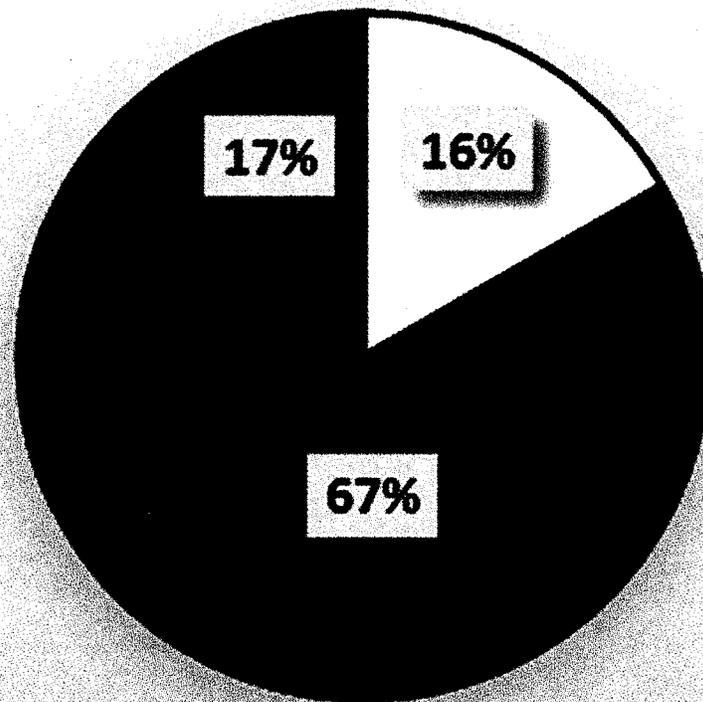


Needs Improvement
 Meets Expectations
 Exceeds Expectations
 Outstanding

e. Central Oahu Family Guidance Center (FGC): The timeliness of service authorizations by Central Oahu FGC.

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Needs Improvement	2	4.1	15.4	15.4
	Meets Expectations	8	16.3	61.5	76.9
	Exceeds Expectations	1	2.0	7.7	84.6
	Outstanding	2	4.1	15.4	100.0
	Total	13	26.5	100.0	
Missing	98	35	71.4		
	99	1	2.0		
	Total	36	73.5		
Total		49	100.0		

**Family Court Liaison Branch (FCLB):
Professionalism and Courteousness of FCLB Clinical Staff**



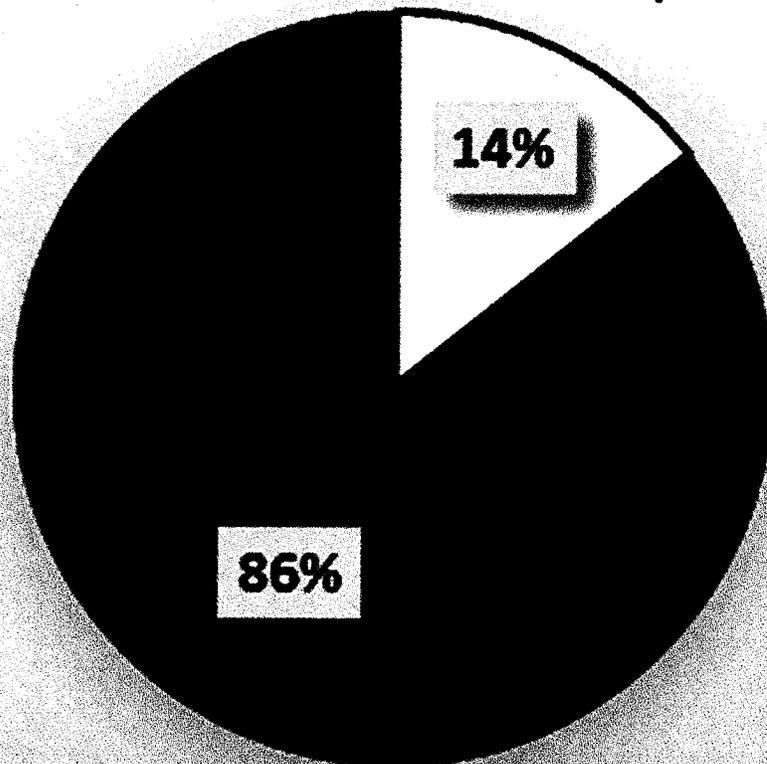
n = 6

Needs Improvement
 Meets Expectations
 Exceeds Expectations

b. CAMHD's Family Court Liaison Branch (FCLB): The professionalism and courteousness of FCLB Clinical Staff in your communications.

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Needs Improvement	1	2.0	16.7	16.7
	Meets Expectations	4	8.2	66.7	83.3
	Exceeds Expectations	1	2.0	16.7	100.0
	Total	6	12.2	100.0	
Missing	98	42	85.7		
	99	1	2.0		
	Total	43	87.8		
Total		49	100.0		

**Family Court Liaison Branch (FCLB):
Timeliness of the Coordination of Services by FCLB Staff**



n = 7

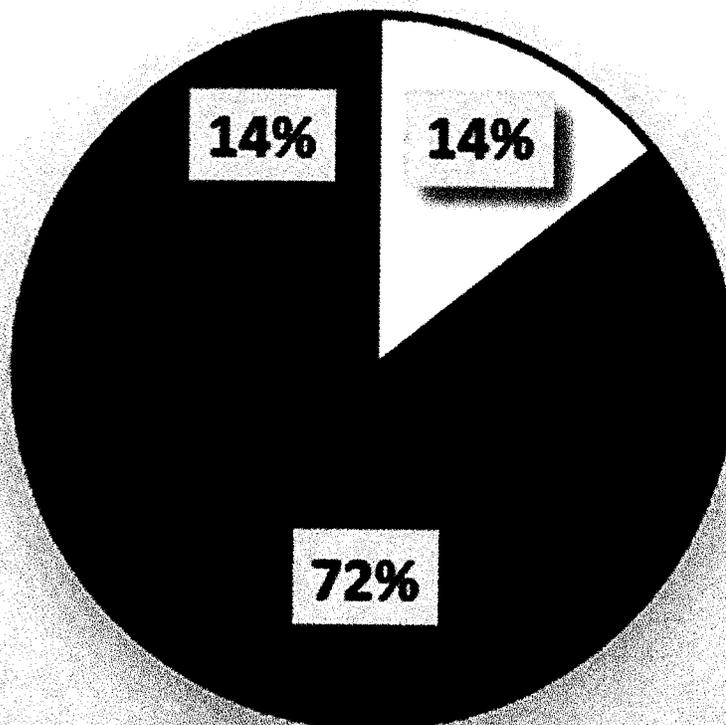
☐ Needs Improvement

■ Meets Expectations

g. CAMHD's Family Court Liaison Branch (FCLB): The timeliness of the coordination of services by FCLB.

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Needs Improvement	1	2.0	14.3	14.3
	Meets Expectations	6	12.2	85.7	100.0
	Total	7	14.3	100.0	
Missing	98	41	83.7		
	99	1	2.0		
	Total	42	85.7		
Total		49	100.0		

**Family Court Liaison Branch (FCLB):
Aloha/Professionalism of FCLB Clerical and Administrative Staff**



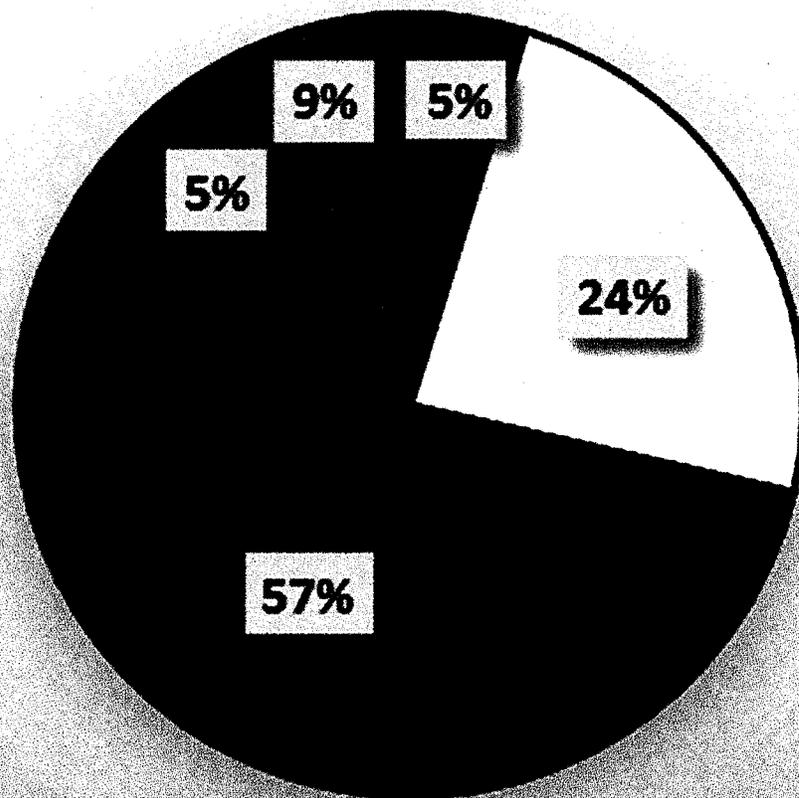
n = 7

Needs Improvement
 Meets Expectations
 Exceeds Expectations

i. CAMHD's Family Court Liaison Branch (FCLB): The Aloha/professionalism of FCLB Clerical and Administrative Staff in your communications.

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Needs Improvement	1	2.0	14.3	14.3
	Meets Expectations	5	10.2	71.4	85.7
	Exceeds Expectations	1	2.0	14.3	100.0
	Total	7	14.3	100.0	
Missin	98	42	85.7		
Total		49	100.0		

**Hawaii (Big Island) Family Guidance Center (FGC):
Timeliness of Service Authorizations by FGC staff**

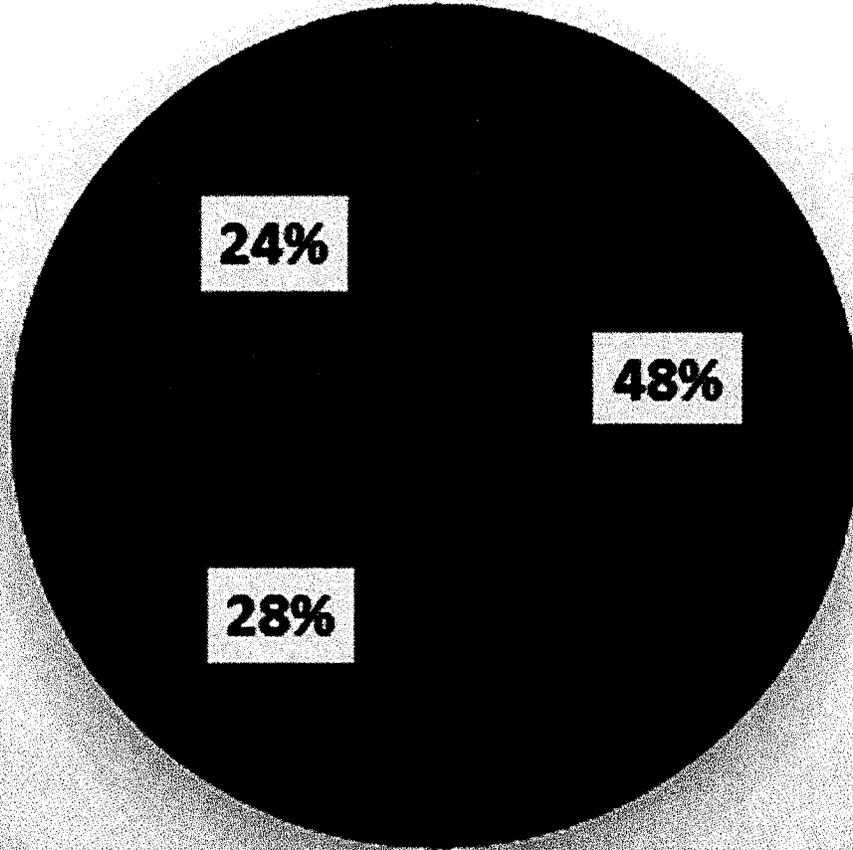


Unacceptable Needs Improvement Meets Expectations
 Exceeds Expectations Outstanding

e. Hawaii (Big Island) Family Guidance Center (FGC): The timeliness of service authorizations by Big Island FGC.

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Unacceptable	1	2.0	4.8	4.8
	Needs Improvement	5	10.2	23.8	28.6
	Meets Expectations	12	24.5	57.1	85.7
	Exceeds Expectations	1	2.0	4.8	90.5
	Outstanding	2	4.1	9.5	100.0
	Total	21	42.9	100.0	
Missing	98	23	46.9		
	99	5	10.2		
	Total	28	57.1		
Total		49	100.0		

**Hawaiī (Big Island) Family Guidance Center (FGC):
Aloha/Professionalism of FGC Clerical and Administrative Staff**



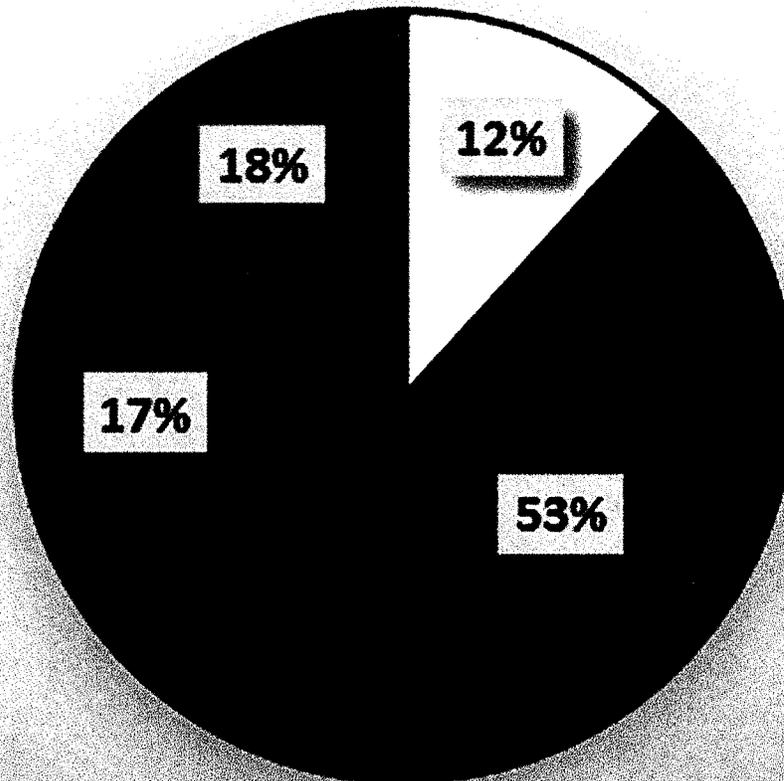
n = 25

■ Meets Expectations ■ Exceeds Expectations ■ Outstanding

i. Hawaii (Big Island) Family Guidance Center (FGC): The Aloha/professionalism of Big Island FGC Clerical and Administrative Staff in your communications.

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Meets Expectations	12	24.5	48.0	48.0
	Exceeds Expectations	7	14.3	28.0	76.0
	Outstanding	6	12.2	24.0	100.0
	Total	25	51.0	100.0	
Missing	98	23	46.9		
	99	1	2.0		
	Total	24	49.0		
Total		49	100.0		

**Kauai Family Guidance Center (FGC): Timeliness of FGC
Clinical Staff to Respond to your Inquiries**



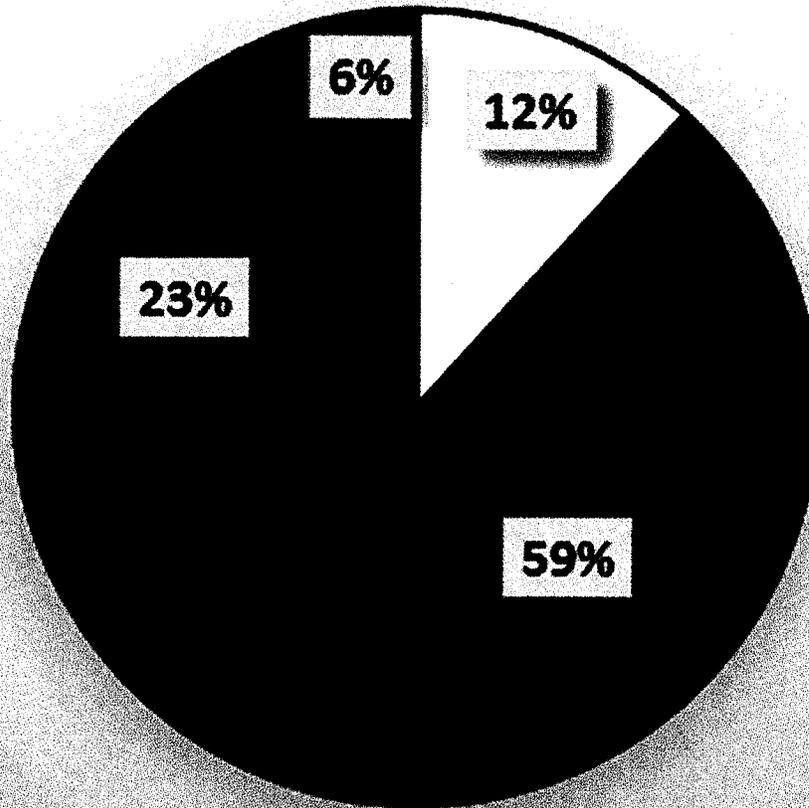
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Needs Improvement
 Meets Expectations
 Exceeds Expectations
 Outstanding

**c. Kauai Family Guidance Center (FGC): The timeliness of Kauai FGC
Clinical Staff to respond to your inquiries or requests.**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Needs Improvement	2	4.1	11.8	11.8
	Meets Expectations	9	18.4	52.9	64.7
	Exceeds Expectations	3	6.1	17.6	82.4
	Outstanding	3	6.1	17.6	100.0
	Total	17	34.7	100.0	
Missing	98	31	63.3		
	99	1	2.0		
	Total	32	65.3		
Total		49	100.0		

**Kauai Family Guidance Center (FGC):
Timeliness of Service Authorizations by FGC staff**

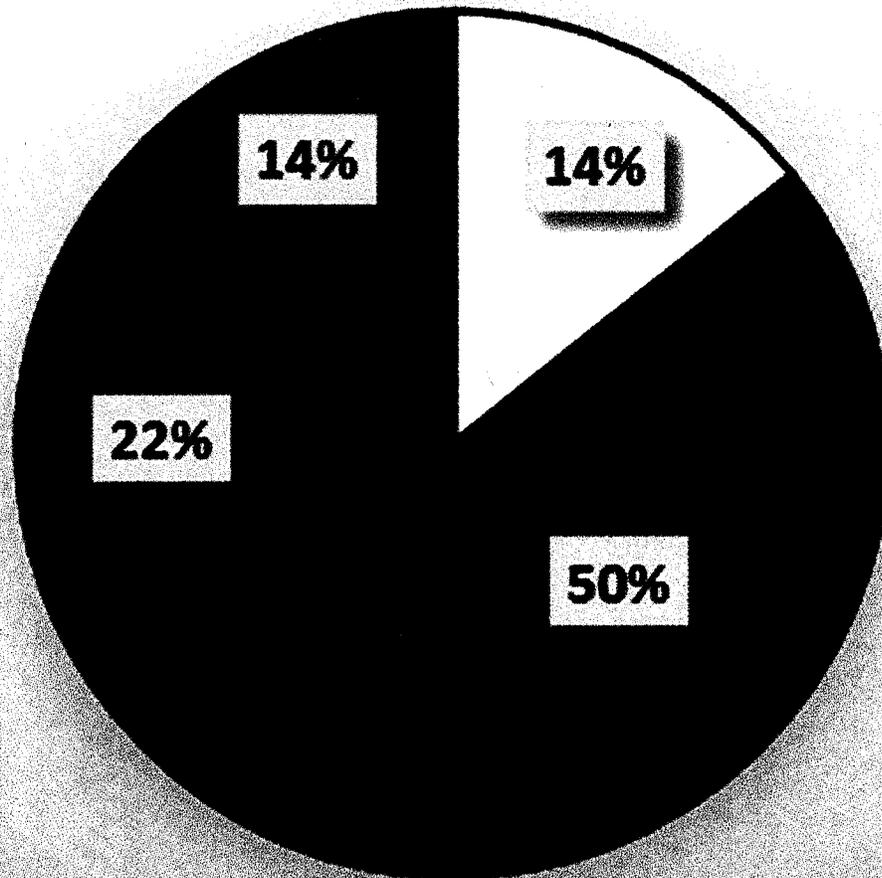


Needs Improvement
 Meets Expectations
 Exceeds Expectations
 Outstanding

e. Kauai Family Guidance Center (FGC): The timeliness of service authorizations by Kauai FGC.

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Needs Improvement	2	4.1	11.8	11.8
	Meets Expectations	10	20.4	58.8	70.6
	Exceeds Expectations	4	8.2	23.5	94.1
	Outstanding	1	2.0	5.9	100.0
	Total	17	34.7	100.0	
Missing	'98	31	63.3		
	'99	1	2.0		
	Total	32	65.3		
Total		49	100.0		

**Maui Family Guidance Center (FGC): Timeliness of FGC
Clinical Staff to Respond to your Inquiries**



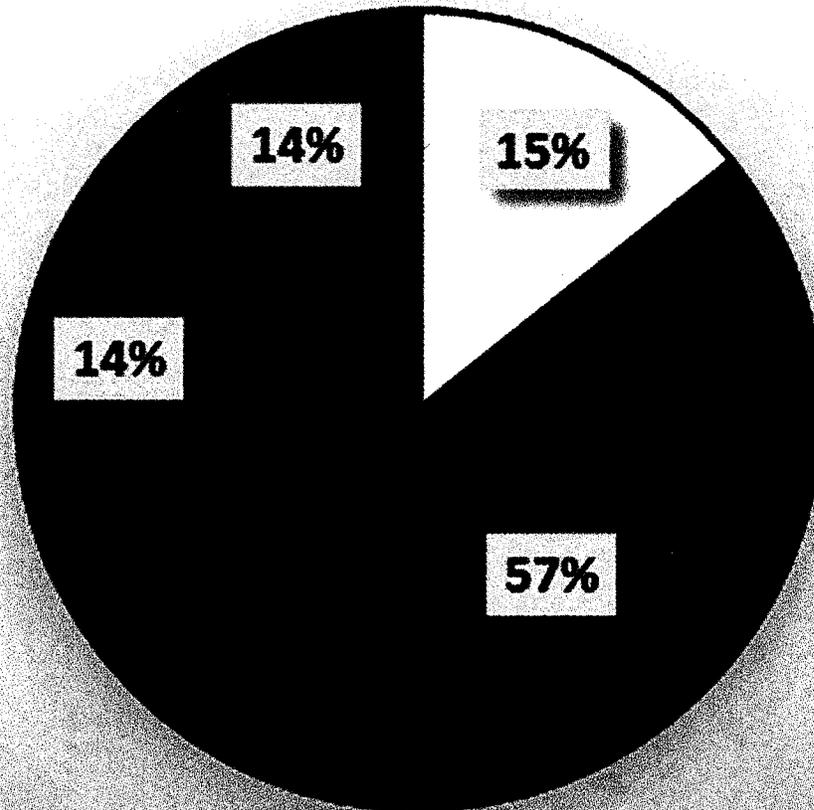
n = 14

□ Needs Improvement ■ Meets Expectations ■ Exceeds Expectations ■ Outstanding

**c. Maui Family Guidance Center (FGC): The timeliness of Maui FGC
Clinical Staff to respond to your inquiries or requests.**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Needs Improvement	2	4.1	14.3	14.3
	Meets Expectations	7	14.3	50.0	64.3
	Exceeds Expectations	3	6.1	21.4	85.7
	Outstanding	2	4.1	14.3	100.0
	Total	14	28.6	100.0	
Missing	98	34	69.4		
	99	1	2.0		
	Total	35	71.4		
Total		49	100.0		

**Maui Family Guidance Center (FGC):
Timeliness of Service Authorizations by FGC staff**

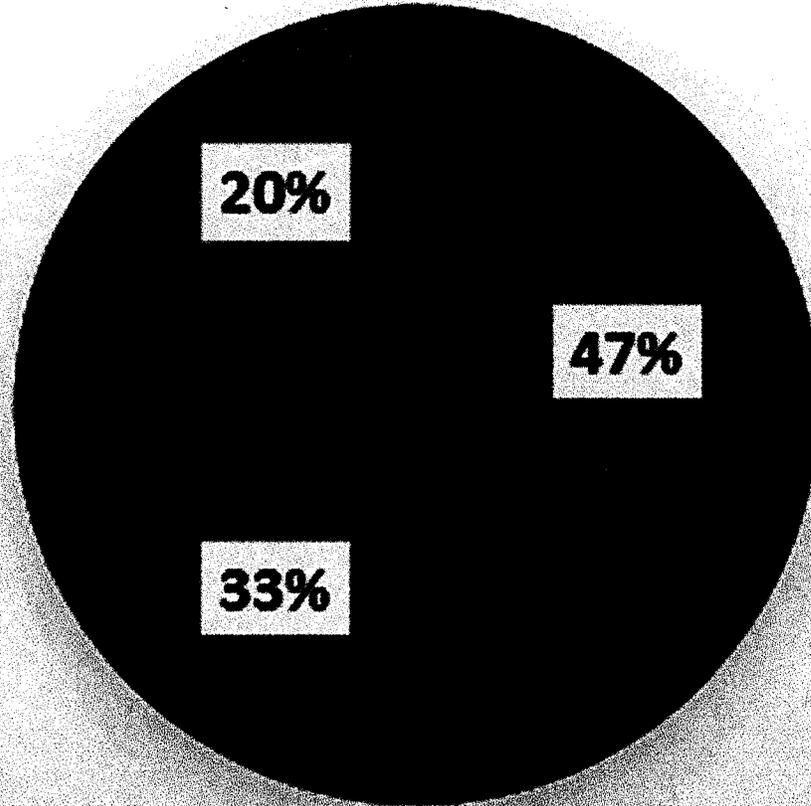


Needs Improvement
 Meets Expectations
 Exceeds Expectations
 Outstanding

e. Maui Family Guidance Center (FGC): The timeliness of service authorizations by Maui FGC.

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Needs Improvement	2	4.1	14.3	14.3
	Meets Expectations	8	16.3	57.1	71.4
	Exceeds Expectations	2	4.1	14.3	85.7
	Outstanding	2	4.1	14.3	100.0
	Total	14	28.6	100.0	
Missing	98	34	69.4		
	99	1	2.0		
	Total	35	71.4		
Total		49	100.0		

**Maui Family Guidance Center (FGC):
Aloha/Professionalism of FGC Clerical and Administrative Staff**



n = 15

■ Meets Expectations ■ Exceeds Expectations ■ Outstanding

i. Maui Family Guidance Center (FGC): The Aloha/professionalism of Maui FGC Clerical and Administrative Staff in your communications.

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Meets Expectations	7	14.3	46.7	46.7
	Exceeds Expectations	5	10.2	33.3	80.0
	Outstanding	3	6.1	20.0	100.0
	Total	15	30.6	100.0	
Missing	98	34	69.4		
Total		49	100.0		



Provider Satisfaction Survey 2014-2015

Every year CAMHD's Provider's Relations Specialist, Carol Evans, sends out a 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 feedback when considering strategies for improving how 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 2014-2015

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 2014-2015

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. Knowledge of the CAMHPS 'Orange Book' 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 2014-2015

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 2014-2015

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. The PMO includes three areas: Program Monitoring, Grievances, and Sentinel Events.

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 feedback.	<input type="radio"/>				
e. The helpfulness of program monitoring feedback.	<input type="radio"/>				

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



Provider Satisfaction Survey 2014-2015

The Performance Management Office (PMO) 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.

5. How would you rate the PMO's Grievance 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. 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 2014-2015

The Performance Management Office (PMO) 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.

6. 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"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. The timeliness of their staff to respond to your inquiries or requests.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. The helpfulness of their staff in their response to your inquiries.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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



Provider Satisfaction Survey 2014-2015

The Health System Management Office (HSMO) oversees three sections in CAMHD: Facilities Certification, Credentialing, and Management Information Systems.

HSMO'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.

7. How would you rate the HSMO'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"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. The timeliness of their staff to respond to your inquiries or requests.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. The helpfulness of their staff in their response to your inquiries.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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



Provider Satisfaction Survey 2014-2015

The Health System Management Office (HSMO) 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.

8. How would you rate the HSMO'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"/>				

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



Provider Satisfaction Survey 2014-2015

The Health System Management Office (HSMO) Information Systems section 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. HSMO insures that only authorized persons have access to information and that the data are free of viruses. HSMO researches and analyzes systems, as well as, tests the contents of information being passed through the system. HSMO supports and makes recommendations regarding the billing process.

9. How would you rate the Health System Management Office (HSMO) Information Systems Unit in terms of:

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

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



Provider Satisfaction Survey 2014-2015

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

10. 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 2014-2015

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)

11. 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 2014-2015

12. 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 2014-2015

13. 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 2014-2015

14. 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:



15. 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 2014-2015

16. 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:



17. 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 2014-2015

18. 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:



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

Yes

No - Go to Q #22 - Kauai FGC



Provider Satisfaction Survey 2014-2015

20. 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:



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

Yes

No - Go to Q #24 - FCLB



Provider Satisfaction Survey 2014-2015

22. 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:



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

Yes

No - Go to End of Survey



Provider Satisfaction Survey 2014-2015

24. 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:



Mahalo for completing this survey. We plan to share the results of this survey with you at one of the future Provider Meetings.

