Child and Adolescent Mental Health Division

PROVIDER SATISFACTION SURVEY REPORT

Fiscal Year 2017

July 1, 2016-June 30, 2017

A Project by the Program Improvement and Communication Office and the Research, Evaluation and Training Office
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 a hospital-based residential (HBR) program 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. There are multiple methods of capturing information that guides the CAMHD's efforts toward improvement and administrative/operational changes as needed, and the Provider Satisfaction Survey is one of those methods.

The CAMHD conducted its annual survey of its provider network, covering the period from July 01, 2016 through June 30, 2017. 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. Central Administrative Office (3 items)
2. Clinical Services Office (CSO; 6 items)
3. Research and Evaluation Team (RET; 6 items)
4. Program Monitoring Office: Program Monitoring (5 items)
5. Program Monitoring Office: Grievance Office (3 items)
6. Program Monitoring Office: Sentinel Events (5 items)
7. Health Systems Management Office: Facilities Certification (3 items)
8. Health Systems Management Office: Credentialing Office (3 items)
10. Administrative Supports (Fiscal Office; 4 items)
11. Each of the CAMHD Family Guidance Centers and the Family Court Liaison Branch (11 items each)
   a. Hawaii
   b. Central Oahu
   c. Honolulu
   d. Leeward Oahu
   e. Maui
   f. Kauai
   g. Family Court Liaison Branch

**METHOD**

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 Program Improvement and Communication Office and the Research, Evaluation and Training Office e-mailed the Survey Monkey web link to the administrators of the CAMHD contracted provider agencies and designated provider staff. Providers could respond to the survey between September 1, 2017 and September 30, 2017. A total of 126 individuals from 15 agencies were invited to participate.

**SURVEY MEASURES**

In the 2017 online survey, providers were asked to rate all sections of the CAMHD with which they had contact on several business functions. All 2017 items were scored on a five point Likert scale (0-4), with higher scores relating to higher satisfaction with the CAMHD offices/FGCs/services for those items. Ratings of '2' or greater indicate that respondents believe that the CAMHD is, "Meeting or Exceeding Expectations", while ratings that are less than '2' indicate that providers believe that the CAMHD office/FGC/service is not "Meeting Expectations". Mean scores of less than '1' suggest that the CAMHD office/FGC/service "Needs Improvement".
SURVEY RESULTS

Response Rate. 51 of 126 individuals completed the survey for a response rate of 40.47%. This is the highest response rate observed since 2013. The table below depicts the survey response rate over the past five years.

![Provider Satisfaction Survey Response Rate 2012-2017](image)

Professionalism, Timeliness, and Helpfulness across CAMHD. To obtain an overall measure of satisfaction across CAMHD offices/FGCs/services, three items were assessed for each of the 17 CAMHD offices/FGCs/services (PMO, CSO, RET, FGCs, etc.), in addition to other items that were tailored for each office/section/process surveyed. The evaluation items common to all offices/FGCs/services of CAMHD asked providers to rate the extent of their satisfaction with:

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.”

A mean value was calculated for all responses offered for each of the three items (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 the 17 means for each of the three survey items. The rating scores in the table below for
the questions related to "Professionalism," "Timeliness," and "Helpfulness" are calculated 'mean of mean' values across the 17 CAMHD offices/FGCs/services. The resulting scores for these three items suggest that for all three areas, providers perceive CAMHD as performing at a level that is between "Meets Expectations," (score=2) and "Exceeding Expectations" (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 "Exceeds Expectations." The results also suggest that since the 2015 study, the CAMHD has declined slightly in two of the areas ("Timeliness," "Helpfulness") but improved slightly in one area ("Professionalism"). It is unclear, however, whether these slight differences constitute a statistically significant difference.

<table>
<thead>
<tr>
<th>Year</th>
<th>Professionalism</th>
<th>Timeliness</th>
<th>Helpfulness</th>
</tr>
</thead>
<tbody>
<tr>
<td>2014</td>
<td>2.58</td>
<td>2.51</td>
<td>2.43</td>
</tr>
<tr>
<td>2015</td>
<td>2.5</td>
<td>2.45</td>
<td>2.47</td>
</tr>
<tr>
<td>2017</td>
<td>2.55</td>
<td>2.42</td>
<td>2.46</td>
</tr>
</tbody>
</table>

**Section-, Office-, Center-, and Branch-Specific Results.** Mean scores on each of the items for all 17 CAMHD offices/FGCs/services were calculated. The following office-, FGC-, and service-specific stacked bar graphs present the percent of respondents who rated items as “Unacceptable or Needs Improvement,” “Meets Expectations,” and “Exceeds Expectations or Outstanding.” Items listed on the y-axis are sorted by means from high to low, such that the items on which providers reported the greatest satisfaction are at the top of the graph, while items on which providers indicated lower satisfaction are at the bottom of the graph.
**Areas of Strength.** The CAMHD offices/FGCs/services can and should celebrate items on which they received higher scores of satisfaction. As an example, items listed at the top of the y-axis on the following stacked bar graphs are items of relative strength for the CAMHD offices/FGCs/services.

**Opportunities for Improvement.** 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 indicate the need for improvement on that item. The CAMHD Administrator will discuss plans for addressing those particular items with the managers or chiefs of the specific section/branch/center.

**Common Themes Identified in Individual Comments.** On the survey, if respondents rated satisfaction on an item as “Unacceptable” (0) or “Needs Improvement” (1), they were prompted to provide information on reasons for the low rating. Some common themes were:

- Slow Credentialing Process
- Delays in Service Authorizations
- Delays in Response Time for Returning Phone Calls
- Training Needed – Technical/Billing
Central Administrative Office

- **a. The professionalism and courteousness of CAMHD Administration staff in your communications (N=45; Mean=2.71)**
  - Exceeds Expectations or Outstanding: 43.5%
  - Meets Expectations: 47.8%
  - Unacceptable or Needs Improvement: 8.7%

- **c. The helpfulness of CAMHD Administration staff in their response to your inquiries. (N=46; Mean=2.48)**
  - Exceeds Expectations or Outstanding: 43.5%
  - Meets Expectations: 52.2%
  - Unacceptable or Needs Improvement: 4.3%

- **b. The timeliness of CAMHD Administration staff to respond to your inquiries or requests (N=46; Mean=2.43)**
  - Exceeds Expectations or Outstanding: 43.5%
  - Meets Expectations: 47.8%
  - Unacceptable or Needs Improvement: 8.7%
Clinical Services Office (CSO)

d. Knowledge of the CAMPHS "Orange Book" by CSO staff. (N=38; Mean=2.58)

f. Effectiveness of responses by CSO staff to clinical inquiries. (N=37; Mean=2.57)

c. The helpfulness of CSO staff in their response to your inquiries. (N=37; Mean=2.57)

a. The professionalism and courteousness of CSO staff in your communications. (N=36; Mean=2.56)

b. The timeliness of CSO staff to respond to your inquiries or requests. (N=37; Mean=2.46)

e. Effectiveness of responses by CSO staff to resource management requests. (N=38; Mean=2.42)

- Exceeds Expectations or Outstanding
- Meets Expectations
- Unacceptable or Needs Improvement
b. The timeliness of RET staff to respond to your inquiries or requests. (N=30; Mean =2.43)

c. The helpfulness of RET staff in their response to your inquiries. (N=31; Mean=2.52)

d. The usefulness of RET reports shared with your agency. (N=34; Mean=2.50)

e. The quality of the ‘Provider Feedback’ reports produced by this team. (N=34; Mean=2.50)

f. The quality of the presentations (e.g., Data Party, Annual Report) shared with you by this team. (N=34; Mean=2.53)

a. The professionalism and courteousness of RET staff in your communications. (N=32; Mean=2.56)
Performance Management Office: Performance Monitoring

b. The timeliness of their staff to respond to your inquiries or requests. (N=41; Mean =2.59)

2.4% Exceeds Expectations or Outstanding
48.8% Meets Expectations
48.8% Unacceptable or Needs Improvement

a. The professionalism and courteousness of their staff in your communications. (N=41; Mean=2.56)

2.4% Exceeds Expectations or Outstanding
46.3% Meets Expectations
51.2% Unacceptable or Needs Improvement

c. The helpfulness of their staff in their response to your inquiries. (N=41; Mean=2.54)

2.4% Exceeds Expectations or Outstanding
43.9% Meets Expectations
53.7% Unacceptable or Needs Improvement

d. The timeliness of sharing feedback. (N=40; Mean=2.53)

5.0% Exceeds Expectations or Outstanding
42.5% Meets Expectations
52.5% Unacceptable or Needs Improvement

e. The helpfulness of program monitoring feedback. (N=41; Mean=2.39)

4.9% Exceeds Expectations or Outstanding
34.1% Meets Expectations
61.0% Unacceptable or Needs Improvement

- Exceeds Expectations or Outstanding
- Meets Expectations
- Unacceptable or Needs Improvement
Performance Management Office: Grievances

- a. The professionalism and courteousness of their staff in your communications. (N=32; Mean = 2.22)
  - Exceeds Expectations or Outstanding: 28.1%
  - Meets Expectations: 68.8%
  - Unacceptable or Needs Improvement: 3.1%

- b. The timeliness of their staff to respond to your inquires or requests. (N=32; Mean = 2.16)
  - Exceeds Expectations or Outstanding: 21.9%
  - Meets Expectations: 75.0%
  - Unacceptable or Needs Improvement: 3.1%

- c. The helpfulness of their staff in their response to your inquiries. (N=32; Mean = 2.19)
  - Exceeds Expectations or Outstanding: 25.0%
  - Meets Expectations: 71.9%
  - Unacceptable or Needs Improvement: 3.1%

- d. A thorough explanation of the grievance procedure by their staff. (N=32; Mean = 2.09)
  - Exceeds Expectations or Outstanding: 15.6%
  - Meets Expectations: 81.3%
  - Unacceptable or Needs Improvement: 3.1%

- e. The attempts made by staff to mediate or problem solve the issue. (N=32; Mean = 2.09)
  - Exceeds Expectations or Outstanding: 15.6%
  - Meets Expectations: 81.3%
  - Unacceptable or Needs Improvement: 3.1%
Performance Management Office: Sentinel Events

<table>
<thead>
<tr>
<th>Category</th>
<th>Exceeds Expectations or Outstanding (%)</th>
<th>Meets Expectations (%)</th>
<th>Unacceptable or Needs Improvement (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. The professionalism and courteousness of their staff in your communications. (N=34; Mean=2.47)</td>
<td>47.1</td>
<td>52.9</td>
<td>0</td>
</tr>
<tr>
<td>b. The timeliness of their staff to respond to your inquiries or requests. (N=34; Mean=2.47)</td>
<td>41.2</td>
<td>58.8</td>
<td>0</td>
</tr>
<tr>
<td>c. The helpfulness of their staff in their response to your inquiries. (N=34; Mean=2.53)</td>
<td>41.2</td>
<td>58.8</td>
<td>0</td>
</tr>
</tbody>
</table>
Health Systems Management Office: Facilities Certification

a. The professionalism and courteousness of their staff in your communications. (N=30; Mean=2.23)

b. The timeliness of their staff to respond to your inquiries or requests. (N=30; Mean=2.17)

c. The helpfulness of their staff in their response to your inquiries. (N=30; Mean=2.13)

Percent of respondents

- Exceeds Expectations or Outstanding
- Meets Expectations
- Unacceptable or Needs Improvement
### Health Systems Management Office: Credentialing

- **a.** The professionalism and courteousness of their staff in your communications. *(N=41; Mean=2.61)*
  - Exceeds Expectations or Outstanding: 41.5%
  - Meets Expectations: 34.1%
  - Unacceptable or Needs Improvement: 19.5%

- **b.** The timeliness of their staff to respond to your inquiries or requests. *(N=41; Mean=2.32)*
  - Exceeds Expectations or Outstanding: 58.5%
  - Meets Expectations: 34.1%
  - Unacceptable or Needs Improvement: 19.5%

- **c.** The helpfulness of their staff in their response to your inquiries. *(N=41; Mean=2.56)*
  - Exceeds Expectations or Outstanding: 48.8%
  - Meets Expectations: 43.9%
  - Unacceptable or Needs Improvement: 7.3%
Health Systems Management Office: Management Information Systems

- **c. The helpfulness of their staff in their response to your inquiries. (N=27; Mean=2.51)**
  - Exceeds Expectations or Outstanding: 44.4%
  - Meets Expectations: 55.6%

- **a. The professionalism and courteousness of their staff in your communications. (N=27; Mean=2.48)**
  - Exceeds Expectations or Outstanding: 37.0%
  - Meets Expectations: 63.0%

- **b. The timeliness of their staff to respond to your inquiries or requests. (N=26; Mean=2.46)**
  - Exceeds Expectations or Outstanding: 34.6%
  - Meets Expectations: 65.4%

- **d. The effectiveness of any training you’ve participated in (N=24; Mean=2.21)**
  - Exceeds Expectations or Outstanding: 29.2%
  - Meets Expectations: 62.5%

- **e. The quality of the training offered by staff. (N=23; Mean=2.13)**
  - Exceeds Expectations or Outstanding: 26.1%
  - Meets Expectations: 65.2%
  - Unacceptable or Needs Improvement: 8.7%
CAMHD Administrative Supports (Fiscal)

- a. The professionalism and courteousness of CAMHD Fiscal staff in your communications. (N=32; Mean=2.53)
  - Exceeds Expectations or Outstanding: 46.9%
  - Meets Expectations: 53.1%

- b. The timeliness of CAMHD Fiscal staff to respond to your inquiries or requests. (N=31; Mean=2.29)
  - Exceeds Expectations or Outstanding: 74.2%
  - Meets Expectations: 25.8%

- c. The helpfulness of CAMHD Fiscal staff in their response to your inquiries. (N=31; Mean=2.39)
  - Exceeds Expectations or Outstanding: 67.7%
  - Meets Expectations: 32.3%

- d. The accuracy of claims payments processed by CAMHD Fiscal staff (N=30; Mean=2.33)
  - Exceeds Expectations or Outstanding: 66.7%
  - Meets Expectations: 30.0%

- 3.3% of respondents rated the timeliness and helpfulness of CAMHD Fiscal staff as unacceptable or needing improvement.
The timeliness of service authorizations by Big Island FGC. (N=16; Mean=2.00)

The timeliness of utilization management/review decisions by Big Island FGC. (N=11; Mean=2.27)

The timeliness of coordination of services by Big Island FGC. (N=14; Mean=2.29)

The Aloha/professionalism of Big Island FGC Clerical and Administrative Staff in your communications. (N=16; Mean=2.56)

The timeliness of coordination of services by Big Island FGC. (N=14; Mean=2.29)

The timeliness of fiscal oversight (e.g., audits) by Big Island FGC. (N=11; Mean=2.36)

The co-management of clinical services for the youth we share with Big Island FGC. (N=15; Mean=2.53)

The timeliness of service authorizations by Big Island FGC. (N=16; Mean=2.00)

The timeliness of coordination of services by Big Island FGC. (N=14; Mean=2.29)

The aloha/professionalism of Big Island FGC Clerical and Administrative Staff in your communications. (N=16; Mean=2.56)

The timeliness of coordination of services by Big Island FGC. (N=14; Mean=2.29)
The timeliness of service authorizations by Central Oahu FGC. (N=12; Mean=2.33)

The timeliness of coordination of services by Central Oahu FGC. (N=12; Mean=2.42)

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The timeliness of coordination of services by Central Oahu FGC. (N=12; Mean=2.42)
<table>
<thead>
<tr>
<th>Item</th>
<th>Percent of Respondents</th>
<th>Exceeds Expectations or Outstanding</th>
<th>Meets Expectations</th>
<th>Unacceptable or Needs Improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>i. The Aloha/professionalism of Honolulu FGC Clerical and Administrative Staff in your communications. (N=16; Mean=3.06)</td>
<td>37.5</td>
<td>62.5</td>
<td></td>
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<tr>
<td>k. The helpfulness of Honolulu FGC Clerical and Administrative Staff in their response to your inquiries. (N=16; mean=2.94)</td>
<td>43.8</td>
<td>56.3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>j. The timeliness of Honolulu FGC Clerical and Administrative Staff to respond to your inquiries or requests. (N=16; mean=2.94)</td>
<td>43.8</td>
<td>56.3</td>
<td></td>
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<tr>
<td>h. The timeliness of fiscal oversight (e.g., audits) by Honolulu FGC. (N=11; Mean=2.82)</td>
<td>45.5</td>
<td></td>
<td></td>
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<tr>
<td>f. The timeliness of utilization management/review decisions by Honolulu FGC. (N=14; Mean=2.79)</td>
<td>50.0</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. The professionalism and courteousness of Honolulu FGC Clinical Staff in your communications. (N=17; Mean=2.76)</td>
<td>29.4</td>
<td>58.8</td>
<td></td>
<td></td>
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<tr>
<td>g. The timeliness of coordination of services by Honolulu FGC. (N=17; Mean=2.65)</td>
<td>47.1</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>d. The helpfulness of Honolulu FGC Clinical Staff in their response to your inquiries. (N=17; Mean=2.64)</td>
<td>41.2</td>
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<td></td>
<td></td>
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<tr>
<td>c. The timeliness of Honolulu FGC Clinical Staff to respond to your inquiries or requests. (N=17; Mean=2.65)</td>
<td>41.2</td>
<td></td>
<td></td>
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<tr>
<td>e. The timeliness of service authorizations by Honolulu FGC. (N=15; Mean=2.60)</td>
<td>40.0</td>
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</tr>
<tr>
<td>a. The co-management of clinical services for the youth we share with Honolulu FGC. (N=17; Mean=2.53)</td>
<td>41.2</td>
<td></td>
<td></td>
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</tbody>
</table>

Leeward Oahu Family Guidance Center
a. The co-management of clinical services for the youth we share with Leeward FGC. (N=15; Mean=2.33)

b. The professionalism and courteousness of Leeward FGC Clinical Staff in your communications. (N=15; Mean=2.40)
c. The timeliness of Leeward FGC Clinical Staff to respond to your inquiries or requests. (N=15; Mean=2.27)
d. The helpfulness of Leeward FGC Clinical Staff in their response to your inquiries. (N=15; Mean=2.33)
e. The timeliness of service authorizations by Leeward FGC. (N=13; Mean=2.23)
f. The timeliness of utilization management/review decisions by Leeward FGC. (N=12; Mean=2.41)
g. The timeliness of coordination of services by Leeward FGC. (N=15; Mean=2.40)
h. The timeliness of fiscal oversight (e.g., audits) by Leeward FGC. (N=11; Mean=2.45)
i. The Aloha/professionalism of Leeward FGC Clerical and Administrative Staff in your communications. (N=15; Mean=2.33)
j. The timeliness of Leeward FGC Clerical and Administrative Staff to respond to your inquiries or requests. (N=14; Mean=2.36)
k. The helpfulness of Leeward FGC Clerical and Administrative Staff in their response to your inquiries. (N=14; Mean=2.43)
d. The helpfulness of Maui FGC Clinical Staff in their response to your inquiries. (N=9; Mean=2.44)

e. The timeliness of service authorizations by Maui FGC. (N=8; Mean=2.75)

f. The timeliness of utilization management/review decisions by Maui FGC. (N=7; Mean=2.71)

g. The timeliness of coordination of services by Maui FGC. (N=8; Mean=2.88)
h. The timeliness of fiscal oversight (e.g., audits) by Maui FGC. (N=5; Mean=2.60)
i. The timeliness of Maui FGC Clinical Staff to respond to your inquiries or requests. (N=9; Mean=2.67)
j. The timeliness of Maui FGC Clerical and Administrative Staff to respond to your inquiries or requests. (N=7; mean=2.86)
k. The helpfulness of Maui FGC Clerical and Administrative Staff in their response to your inquiries. (N=7; mean=2.86)
l. The professionalism and courteousness of Maui FGC Clinical Staff in your communications. (N=9; Mean=2.67)
m. The professionalism and courteousness of Maui FGC Clerical and Administrative Staff in your communications. (N=8; Mean=2.75)

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Maui Family Guidance Center

- Exceeds Expectations or Outstanding
- Meets Expectations
- Unacceptable or Needs Improvement

Kauai Family Guidance Center
<table>
<thead>
<tr>
<th>Question</th>
<th>Mean</th>
<th>Percent of respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>i. The Aloha/professionalism of Kauai FGC Clerical and Administrative</td>
<td>2.80</td>
<td>50.0  /  50.0</td>
</tr>
<tr>
<td>Staff in your communications. (N=10; Mean=2.80)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>k. The helpfulness of Kauai FGC Clerical and Administrative Staff</td>
<td>2.50</td>
<td>30.0  /  70.0</td>
</tr>
<tr>
<td>in their response to your inquiries. (N=10; mean=2.50)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>j. The timeliness of Kauai FGC Clerical and Administrative Staff to</td>
<td>2.50</td>
<td>30.0  /  70.0</td>
</tr>
<tr>
<td>respond to your inquiries or requests. (N=10; mean=2.50)</td>
<td></td>
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<tr>
<td>h. The timeliness of fiscal oversight (e.g., audits) by Kauai FGC.</td>
<td>2.50</td>
<td>30.0  /  70.0</td>
</tr>
<tr>
<td>(N=10; Mean=2.50)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. The professionalism and courteousness of Kauai FGC Clinical Staff</td>
<td>2.50</td>
<td>30.0  /  70.0</td>
</tr>
<tr>
<td>in your communications. (N=10; Mean=2.50)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. The co-management of clinical services for the youth we share with</td>
<td>2.45</td>
<td>27.3  /  72.7</td>
</tr>
<tr>
<td>Kauai FGC. (N=11; Mean=2.45)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. The timeliness of utilization management/review decisions by Kauai</td>
<td>2.40</td>
<td>20.0  /  80.0</td>
</tr>
<tr>
<td>FGC. (N=10; Mean=2.40)</td>
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<td></td>
</tr>
<tr>
<td>e. The timeliness of service authorizations by Kauai FGC.</td>
<td>2.30</td>
<td>20.0  /  70.0</td>
</tr>
<tr>
<td>(N=10; Mean=2.30)</td>
<td>10.0</td>
<td></td>
</tr>
<tr>
<td>g. The timeliness of coordination of services by Kauai FGC.</td>
<td>2.27</td>
<td>18.2  /  72.7</td>
</tr>
<tr>
<td>(N=11; Mean=2.27)</td>
<td>9.1</td>
<td></td>
</tr>
<tr>
<td>d. The helpfulness of Kauai FGC Clinical Staff in their response to</td>
<td>2.27</td>
<td>20.0  /  70.0</td>
</tr>
<tr>
<td>your inquiries. (N=11; Mean=2.27)</td>
<td>10</td>
<td></td>
</tr>
<tr>
<td>c. The timeliness of Kauai FGC Clinical Staff to respond to your</td>
<td>2.10</td>
<td>20.0  /  50.0</td>
</tr>
<tr>
<td>inquiries or requests. (N=10; Mean=2.10)</td>
<td>30.0</td>
<td></td>
</tr>
</tbody>
</table>

- Exceeds Expectations or Outstanding
- Meets Expectations
- Unacceptable or Needs Improvement
<table>
<thead>
<tr>
<th>Item</th>
<th>Percent of Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>h. The timeliness of fiscal oversight (e.g., audits) by FCLB. (N=7; Mean=3.00)</td>
<td>71.4</td>
</tr>
<tr>
<td>i. The Aloha/professionalism of FCLB Clerical and Administrative Staff in your communications. (N=10; Mean=2.90)</td>
<td>70.0</td>
</tr>
<tr>
<td>b. The professionalism and courteousness of FCLB Clinical Staff in your communications. (N=11; Mean=2.81)</td>
<td>63.6</td>
</tr>
<tr>
<td>k. The helpfulness of FCLB Clerical and Administrative Staff in their response to your inquiries. (N=10; mean=2.80)</td>
<td>70.0</td>
</tr>
<tr>
<td>j. The timeliness of FCLB Clerical and Administrative Staff to respond to your inquiries or requests. (N=10; mean=2.80)</td>
<td>70.0</td>
</tr>
<tr>
<td>f. The timeliness of utilization management/review decisions by FCLB. (N=9; Mean=2.78)</td>
<td>66.7</td>
</tr>
<tr>
<td>g. The timeliness of coordination of services by FCLB. (N=11; Mean=2.73)</td>
<td>63.6</td>
</tr>
<tr>
<td>d. The helpfulness of FCLB Clinical Staff in their response to your inquiries. (N=11; Mean=2.73)</td>
<td>63.6</td>
</tr>
<tr>
<td>c. The timeliness of FCLB Clinical Staff to respond to your inquiries or requests. (N=11; Mean=2.73)</td>
<td>63.6</td>
</tr>
<tr>
<td>a. The co-management of clinical services for the youth we share with FCLB. (N=11; Mean=2.63)</td>
<td>54.5</td>
</tr>
<tr>
<td>e. The timeliness of service authorizations by FCLB. (N=11; Mean=2.55)</td>
<td>54.5</td>
</tr>
</tbody>
</table>

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- Meets Expectations
- Unacceptable or Needs Improvement