

# LONG TERM SUPPORT SERVICES

(LTSS) Baseline Outcomes of
Persons Receiving Skills Building Services
And

Living Arrangements Satisfaction Survey

Summary Report/DRAFT

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#### **INTRODUCTION:**

This summary is a baseline report to develop specific goals that will assist in the effective evaluation of DWIHN members receiving LTSS care and treatment. In an attempt to ascertain this baseline data, DWIHN developed an approach that would identify members who by survey would identify their level of satisfaction of their LTSS care, rate their awareness of the role of the Individual Plan of Service (IPOS) in achieving their goals and permit feedback as it relates to their satisfaction of their personal living arrangements.

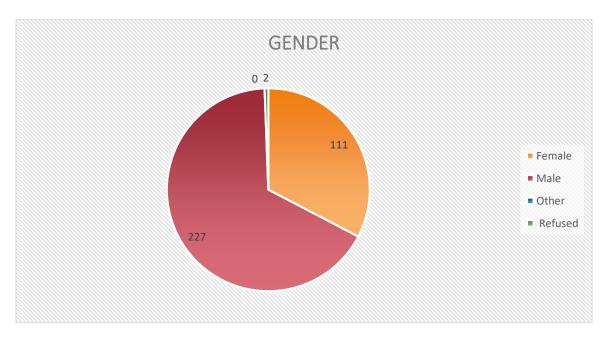
Following the analysis of the baseline data, DWIHN intends to assess the overall trends of the findings, and further develop a study for members who may be interested in participating in a long-term intervention to help improve satisfaction with their LTSS care. The goal would be to offer concentrated efforts within the study group to receive greater facilitation of the IPOS through education and facilitation toward the development of the members personal goals, including when possible promoting pathways for interested parties to further explore the options they may have to change or elevate their living arrangements that support greater independence. The intervention would also provide trainings and strategic development of best practices for providers so that systemic implementation of the effective methods could be established. The goal is to help support the personal growth and overall wellbeing of all members receiving LTSS services.

## **METHODOLOGY:**

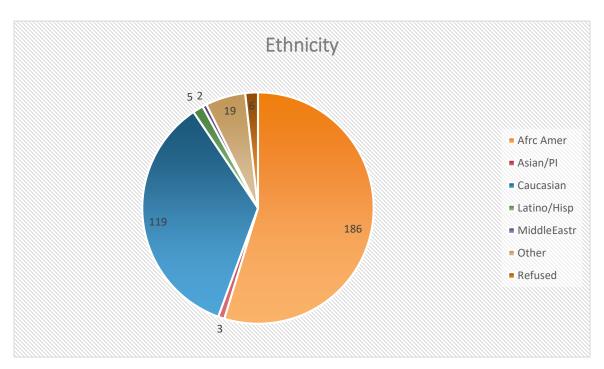
The baseline survey was developed for the purpose of identifying persons who were actively in LTSS care. DWIHN Staff was provided a random list of adult persons who within the past twelve (12) months received LTSS treatment. Those persons who were self-responsible, without guardians were randomly called. For the purpose of this survey we thought it was most important that we could effectively measure members satisfaction directly and not that of guardians at this time. DWIHN wanted members to have the ability to express their feelings of satisfaction directly. The survey period was administered within a time frame of about one month during June 2022, allowing for data collection to occur on a rotational basis during the day time, evenings hours and on Saturday's. All participants were asked a set of demographic questions followed by one qualifying question. The qualifying question was to determine if the respondent was still actively receiving LTSS care. An affirmative response from the participant would allow the respondent to continue the next portion of the survey, a negative answer that indicated they no longer were receiving services would end the respondent's participation in the balance of the survey.

## **DEMOGRAPHICS:**

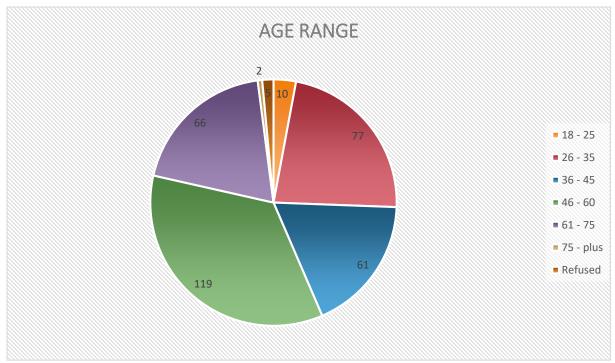
Various pie charts depict the depth of participants for the baseline of this study. The gender trend will show that male respondents nearly doubled the female respondents. Though both African-American and Caucasians are closely aligned in their representation at 55% and 35% respectively other minorities appear to be under-represented. A more specific analysis of all person receiving LTSS may not concur, however, that this is a disproportion of representation for persons receiving LTSS. (See gender and ethnicity charts on next page).



**DWIHN 2022 LTSS Baseline Survey Participants:** N = 340 33% females / 67% male participation

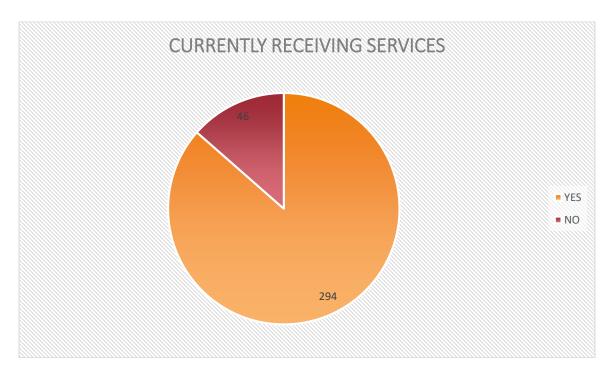


DWIHN 2022 LTSS Baseline Survey: Person's self-identified their Ethnicity with 55% African American participating and 35% Caucasian respondents. The next group presenting only 5% identified as "other". More research on the racial make-up of all participants would be needed to determine if any group is disproportionately under-represented in this survey or whether this random group represents an accurate view of persons overall who receive LTSS in our system.



**DWIHN LTSS Baseline Survey Participants: Chart describes the greater portion of respondents** 

at 35% were respondents between 46-60 as noted in the green portion of the pie. Followed by those aged 26-35 at 23% in the crimson section, followed by 61-75 in purple, and 19% and 36-45 at 18%. This survey was administered to adults only.



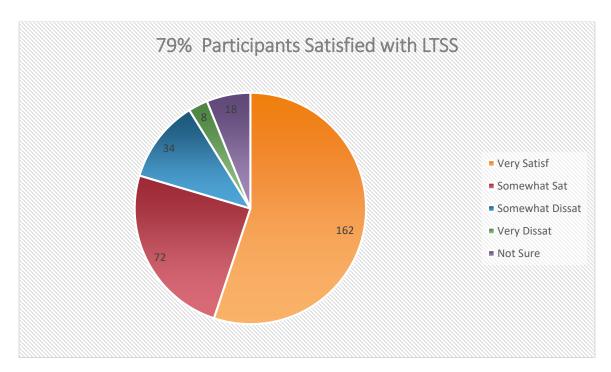
**DWIHN LTSS Baseline Survey Participants: DWIHN wanted to explicitly solicited the feedback of** 

Members who remained current and active in receiving services. Respondents that indicated they no longer were receiving services were terminated from the balance of the survey. N converted from 340 to N=294 for the balance of the survey.

The balance of the data collected from participating respondents were to measure satisfaction. The group identified for the LTSS were focused on skills-building services with persons who reported as of June 2022 that they were actively receiving LTSS/Skills building services in Wayne County.

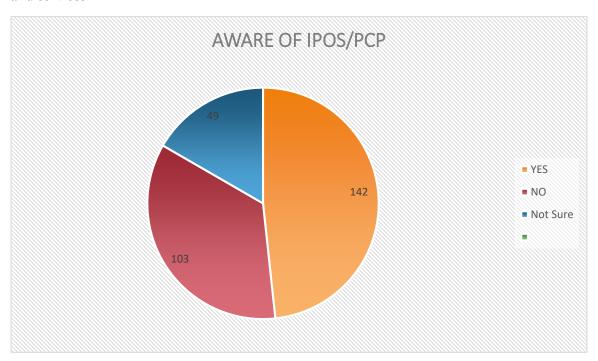
## **FINDINGS:**

When asked specifically about their level of satisfaction of their services, respondents were offered the option of describing their services within a range of Very Satisfied to Very Dissatisfied, the survey did not use a neutral option as being neither satisfied or dissatisfied but rather gave them the opportunity for the respondent to say they are not sure. All answers were offered to the respondents. Overwhelmingly nearly 80% of respondents stated they were Satisfied with 55% stating they were Very Satisfied with their LTSS.



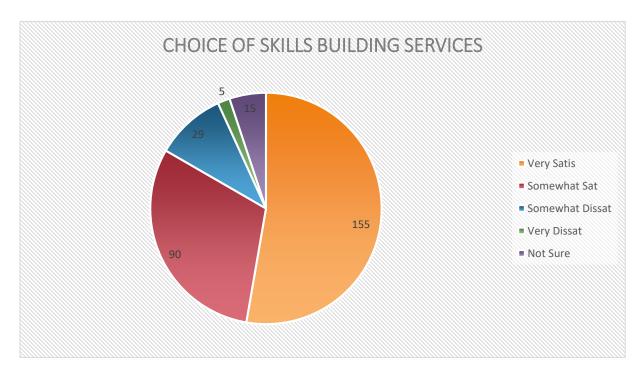
DWIHN LTSS Baseline Data Participants: Above Chart depicts satisfaction of services with LTSS care and treatment. Less than 3% (green) reported being Very Dissatisfied.

One of the goals of this survey was to explore some of the root analysis of responses that indicated dissatisfaction of their LTSS treatment to see if there might be any correlation between the dissatisfaction and the participants awareness of the goals within their IPOS/Person-centered planned. The following chart shows that a little more than half of the respondents said they were aware of their IPOS its role in the planning of their services. Interestingly the total number of persons reporting they were not sure if they understood what the IPOS (49) was not much less than the total 60 respondents (combined) that reported either being somewhat dissatisfied, very dissatisfied or uncertain of their satisfaction of treatment in the LTSS care they were receiving. This is not a direct implication related to the question, but there continues to be the concern that members may not quite understand how their Individual Plan of Service assists in driving their care and services.



With 35% of survey participants reporting that they are unaware of the IPOS/PCP is there a potential opportunity to improve satisfaction in LTSS by providing better assistance and independent facilitation toward developing goals and plans as outlined in the persons plan?

The follow up questioned focused on the participants choice of the kind of skills building services offered to them. Impressively, the findings indicate again overwhelming satisfaction.

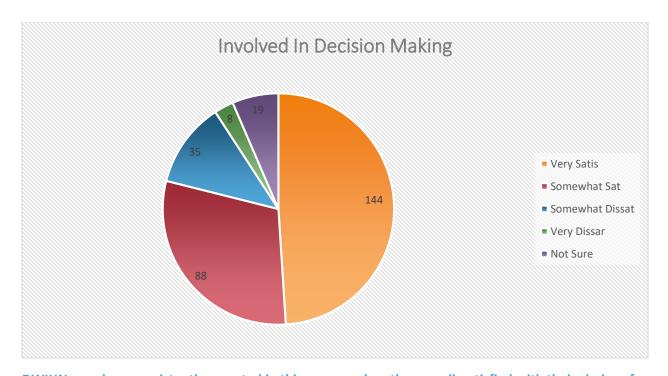


83% of respondents were Satisfied with their choice of LTSS care offered to them by DWIHN providers as shown in the colored pie depicted in the orange and crimson sections: The blue and green portions of the pie represent 12% of persons who reported being dissatisfied with their choice of services.

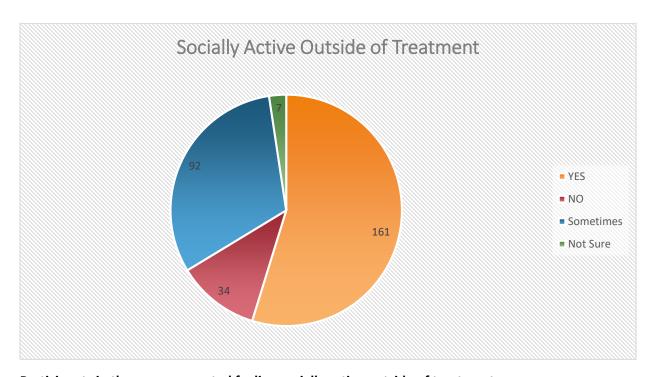
An aspect of exploration on how to broach innovation, care and treatment for the member receiving LTSS care is to better understand how they assess their own involvement in in their own decision making. While participants were randomly selected they still represented persons who were under their own guardianship with the ability to self-direct their care and to have meaningful shared decision making about their treatment.

A positive validating response are included in the findings, in this case 80 percent of participants were satisfied with their ability to participate in their decision making related to their LTSS care. These findings are consistent with their satisfaction related to their personal choice of skills building services.

In the following pie chart there is a direct correlation that points to the consistency of satisfaction as the numbers and percentages practically mirror each other in each category including in the section represented by persons who were unsure about their satisfaction with their choice in services and their involvement with their own decision making.



DWIHN members consistently reported in this survey, when they are dissatisfied with their choice of LTSS services they are also within the same margin - dissatisfied with their involvement in their decision making. As noted in the blue section in the two previous pie charts. Still overwhelmingly more than 80% of the respondents are equally as consistent reporting satisfaction in both offered services and their ability to participate in their decision making related to their LTSS treatment.

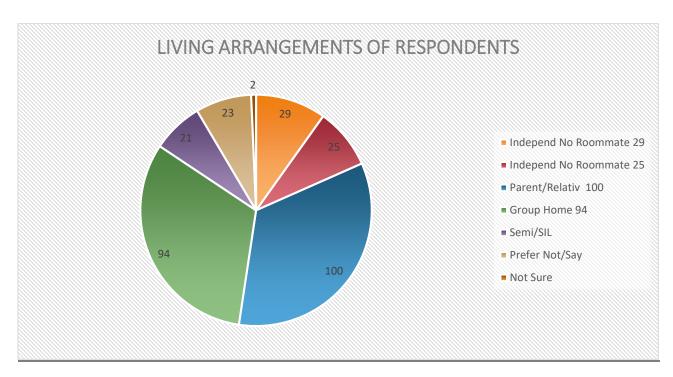


Participants in the survey reported feeling socially active outside of treatment.

DWIHN members participating in this survey reported essential ability to get have other social activity outside of treatment. Only 12% reported that they did not have the opportunity for social interaction. The 12% also coincidently remains the consistent percentage among the persons reporting dissatisfaction with their choice of services, however there is no evidence to support there is a correlation of these two measurements.

## **ENHANCED DEMOGRAPHIC:**

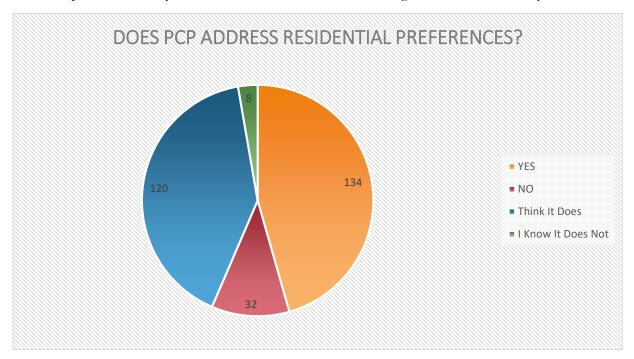
In an effort to also study the living arrangements and satisfaction of members regarding their residential preferences the survey specifically addressed participants type of living arrangements. This chart shows a diverse participation of home settings ranging from persons who live totally independent to persons who are living in group home settings. The largest group of respondents are represented by persons who live either with a parent or relative.



Group Home participants in the survey represent a nearly a third of total respondents, N=294. A significant number of respondents are in SIL, live with roommates independently, or have living arrangements that indicate they are fully independent.

Critical to knowing the living arrangements of our participants were also to determine if they were satisfied with these living arrangements and to note any correlation between their satisfaction in their residential preferences and their understanding of the planning elements within their IPOS. 200 of the participants reported they were satisfied with their living arrangements, 29 stated no

they were not satisfied and 63 reported they were not sure. Consequential the next question was to ask respondents if they know whether their IPOS/PCP has goals about where they want to live?



Findings appear to support that while most persons - more than 80% seem to be satisfied with their living arrangements, there is still no evidence that they correlate that satisfaction with the knowledge of the role their PCP may be playing in supporting their goals or developing hopes and drams toward changing or advancing their living arrangements.

## **POTENTIAL OPPORUNITIES:**

DWIHN wants to continue to review and study the various opportunities to improve satisfaction within the LTSS community of members. While the data supports that a good sampling of our members are actually satisfied with LTSS/Skills-building services and their residential living arrangements there still remains some areas that with some interventions may help to increase satisfaction throughout the system. A great portion of the attention could focus on member education about the IPOS, helping to advance the individual's understanding of how the IPOS is used to initiate goals and to direct services would be advantageous for all members. DWIHN supports current programming which sends staff and or trained "ambassadors" directly to AFC Homes to discuss the IPOS and to extend information about Independent Facilitation that may help to further promote increased satisfaction. DWIHN also continues to explore the opportunity for a more intense study of LTSS participants, identifying a group of persons who might extend their participation in a year long study to address the growth in their satisfaction. Participants of this current study were asked about their potential interest in a study of this nature of the 294 qualifying respondents, only 79 expressed interest in a long term more intense study on the subject. DWIHN would like to further investigate pursuing a study in which we identify specifically a means to measure more specifically the level of satisfaction, beyond the broad categories presented in this

survey, as well as addressing satisfaction of LTSS progress and treatment from the guardian's point of view. Exploration of this continues as well as a plan which includes annual issue of a satisfaction survey of persons receiving LTSS services within our system of care.

This report is a summary and is not an exhaustive or final report, but rather beginning implementation of an ongoing study and review to be further explored by the Quality Improvements Steering Committee for recommendations and relevant next step undertakings to be supported by DWIHN and the provider system in Wayne County.