Customer Service Report July 2021-June 2022

All clients receiving services from Davidson County Health Department (DCHD) during one week periods of each quarter (September, December, March, and June) were requested to complete a customer satisfaction survey. Survey cards are also always available in the lobby/waiting areas, at reception areas and on the Davidson County Health Department website. Environmental Health staff also attaches the web link to all emails. During July 2021 through June 2022 a total of 1,000 surveys were completed by clients. The following information is related to the data compiled from these survey responses and quality improvement activities implemented or planned in response to this data.

# Summary

Out of the total customer service survey responses received (1,000) only 5 (.005%) clients felt that a staff member was lacking in customer service skills. 113 respondents felt strongly enough to write additional complimentary comments on their survey regarding staff. Several staff was individually identified by clients as having provided exceptional service. Length of visit time, difficulty obtaining an appointment (open access scheduling) and need for varied hours appear to be primary concerns of clients. Complaints of poor customer service skills and other areas for improvement were shared with division directors.

# Analysis of Data by Division

**Personal Health**: The total number of surveys completed was 285. (271 received clinical services; 14 received off-site services which includes CC4C-Care Coordination for Children, Newborn Home Visits, and OB Pregnancy Care Management).

1. **Customer service skills** 284 (99.9 %) contained all positive responses regarding staff (46 of these had additional written compliments). One client reported that a staff member was not courteous or polite.

### Matters of concern:

* + 5.76% (14 of 243) clients of disapproved of the length of their visit time.
  + 2 reported dissatisfaction with Open Access appointment scheduling/needing to pre-book appointment
  + 1.48% (4 of 271) requested later/more flexible hours for services.

1. **Referral Source** (How did client hear about us) 199 (72%) of clients responded.
   * Most (39.70%) were referred by family and friends
   * 21.11% were previously seen for services
   * 8.54% walked in or were referred by our staff
   * 5.03% were referred by school personnel
   * 4.52% by a doctor
   * 4.02% by an employer
   * 4.02% by social services
   * The remaining were aware of services by other means, including by living locally and the internet

**WIC**: The total number of surveys completed was 694.

1. **Customer service skills**: 99.41% contained all positive responses regarding staff customer service skills (57 of these had additional written compliments). Four clients reported a concern with staff customer service skills.

### Matters of concern:

* + 4.80% (29 of 575) voiced concerns about their length of visit time.
  + 2 reported dissatisfaction with Open Access appointment scheduling/needing to pre-book appointment
  + 5.62% (5 of 89) requested later/more flexible hours for services.

1. **Referral Source** (How did client hear about us): 426 (61%) of clients responded.
   * Most (37.32%) were referred by family
   * 14.79% were referred by DSS
   * 14.59% indicated previously receiving services
   * 11.74% walked in or were referred by our staff
   * 9.39% were referred by a doctor
   * The remaining were aware of services by other means, including by living locally and the internet

**Environmental Health** – total surveys completed was 21

1. **Customer service skills**: 21 (100%) contained all positive responses regarding staff customer service skills. 14 of these (67%) had additional written compliments.
2. **Matters of concern**: no areas of concern were identified.

# Community Surveys

Community surveys are taken to outreach events, such as health fairs, for participants to complete. Total number of surveys completed was 93.

### Services received from DCHD:

* 51 reported receiving services from Health Department previously (question was left blank on all others).
* Vast majority of respondents had received immunizations, followed by Family Planning and WIC services.

**Hours of operation:** 12% (11 of 93) reported that our business hours kept them from receiving services.

* Of those 11, 82% had received services previously so it may be that hours are more an inconvenience than an access to care issue.
* When asked what hours would help, 5 of the 11 responded - 2 said after 5pm, 1 said after 6pm, and 2 said evening and weekend.

### Services provided at DCHD

* 47.06% (16 of 34) suggested increased access to care. This included adult dental care, eye care, family planning services for men, cheaper immunizations, flu vaccines at school and general health care for all.
* Other recommendations included a teen clinic, transportation for teens and seminars/health education
* 23.53% had no recommendations/felt services provided were sufficient
* 14.71% of respondents were “unsure” or answered “anything”

### Suggestions for improving our services

* 29.41% (5 of 17) suggested later hours
* 29.41% (5 of 17) chose “other” and recommended more community interaction, more nurses, and a Thomasville office.
* 11.76% (2 of 17) suggested being quicker
* 29.41% (5 of 17) said nothing needed improved

### Health priorities for DCHD

* 96.67% (87 of 90) of respondents agreed with DCHD’s community health priorities.
* Other suggested priorities included meth labs, “self-respect” classes, cancer, and vaccines for children and against communicable disease.

**Quality Improvement (QI) Activities Implemented**

The QI Council which was established in 2013 continues to evaluate programs, services, activities, and processes in all areas of the department in order to improve efficiency, effectiveness, productivity and customer value.

**QI Projects**

* **Scanning Medical Records:** As we transitioned to an electronic medical record, we learned there was no single factor or set criteria being used to determine what to scan and whether to outsource scanning. This project focused on determining whether all records need scanned and whether scanning needed to be outsourced. Scanning costs were calculated for both. It was decided that we will scan in- house while maintaining a decreased amount of funds in the budget for outsourcing if it should be needed. If we decide to do a back-file conversion (scanning an entire record / records spanning multiple years), we will need to use outsourced vendor.
* **Clinic Confidentiality/Sound System:** Client privacy in the clinic has been a continued concern. To increase confidentiality we had already moved to patient centered rooms, allowed no patients to wait in hallway, installed overhead sound (music) system, and educated staff on the issue. We continued have issues - conversations held in normal conversational tone could be heard between the patient-centered rooms. The project focused on determining whether portable sound machines were sufficient or whether an overhead system was required. Although the portable machines were very effective, their placement in the rooms would have required a contractor to install outlets and shelving. It was decided to purchase an overhead system. There have been no privacy complaints since installation. The portable machines are available for use by staff if want to use in other areas outside the clinic.
* **Clinic Nurse Profile Show Rate:** this is currently in progress. The project focus is to increase the show rate for family planning appointments. By improving the appointment show rate for clients retuning for Depo Provera injections and birth control pills we will maximize utilization of staff, and maintain clinic flow.
* **PH QI 101 Project – Clinic Check-In:** We have been afforded the opportunity from the Center for Public Health Quality to participate in the PH QI 101 training again. We solicited all staff for an idea on what to focus on and clinic check-in was chosen. The team is currently at work on the project to improve the efficiency of that area.

## Internal Customer Service

* As a part of the PH QI 101 program, a survey was sent to all staff titled "How CQI Oriented is your Culture?” This survey helped us begin to identify areas within our agency that support a culture of

continuous QI and areas that are opportunities for improvement. All surveys responses were anonymous. Communication and employee recognition were identified as primary concerns. We plan to have QI projects that specifically focus on these.

* “Caught in the Act” Certificates and “Bright Idea” Certificates were distributed to staff that excelled in customer service or submitted innovative ideas for improvement.
* The annual Employee Appreciation Luncheon was held for staff in April. Staff were given the option this year of choosing from items that they would like as a gift (majority ruled and lunch bags were given).