



State of Oregon Family Planning Program 2009 Customer Satisfaction Survey Results



Background

The Oregon Family Planning Program administers a Customer Satisfaction Survey (CSS) in selected family planning clinics every two years. September 2009 marked the fifth of such surveys. Information from the CSS is an important component of the program's ongoing evaluation and quality improvement efforts and is used to monitor the provision of select services and client satisfaction throughout the state.

Client satisfaction, quality of care and client provider interaction are all inextricably linked to client choice of family planning services and continued adherence to effective contraceptive use. Thus, the CSS is an important evaluation tool. Additionally, the CSS provides an opportunity for clients to give feedback on their clinic experience as well as an opportunity for clinic staff to hear and respond to client feedback. Results from the survey are distributed to participating clinics, key stakeholders, and family planning program partners.

Methodology

Twenty-three clinics were randomly selected to participate in this year's survey. Clinics serving less than 40 clients per week were excluded from the sampling frame. However, because of the timing of the 2009 survey, School Based Health Centers (SBHCs) and University Health Centers were included to more fully capture the teen/student population.

In previous years, selected clinics typically administered the surveys within a specified one-week timeframe. However, due to the additional workload on clinic staff during this time of year, surveys were administered between the months of September and October over a five-day period of the clinic's choice. Each family planning client seen during the survey administration period was asked to complete the survey in either English or Spanish after his or her visit. Client participation was voluntary, and those who participated received a five-dollar cash value incentive. Participating clinics are listed in the table below.

Among the sampled clinics, the response rate ranged between 31% and 100%. The average response rate among the 23 clinics was 68%. A total of 808 surveys were completed.

TABLE 1 Clinic Participation				
Agency Name	Clinic Name	Number of Completed Surveys	Number of Family Planning Clients Seen	Response Rate
PPCW	SE Portland Clinic	88	207	42.5%
	Beaverton Center	122	176	69.3%
PPSO	Springfield	65	87	74.7%
Oregon State University	Student Health Center OSU	41	92	44.6%
Clackamas County	Oregon City Clinic	24	55	43.6%
Deschutes County	Bend Clinic	59	67	88.1%
	Becky Johnson Center	28	32	87.5%
Douglas County	Roseburg Clinic	49	78	62.8%
Hood River County	Hood River Health Department	33	43	76.7%
Tillamook County	Tillamook Clinic	15	48	31.3%
Umatilla County	Pendleton Clinic	25	26	96.2%
	Hermiston Clinic	35	56	62.5%
Union County	La Grande Clinic	33	55	60.0%
Washington County	Beaverton Clinic	76	95	80.0%
Multnomah County	Roosevelt High SBHC	8	18	44.4%
	Cleveland High SBHC	17	16	106.3%
	Jefferson High SBHC	7	7	100.0%
	Grant High SBHC	13	23	56.5%
	East County Teen Clinic	15	16	93.8%
	North Portland Health Clinic	15	15	100.0%
	Northeast Health Clinic	10	29	34.48%
Morrow County	Boardman Clinic	7	12	58.3%
Lane County	Riverstone	23	60	38.3%
	TOTAL	808	1,313	Average: 68.0%

Results

Demographics:

The tables below detail the demographic characteristics of the survey respondents. Comparisons were made between the sample and the statewide client population (using Clinic Visit Record data) seen at all family planning clinics during the sample period. Analyses indicate that the age breakdown of the sample was comparable to the statewide population; however, females and people of color were slightly over-represented in the survey sample.

	CSS Survey Sample %(n)	Total Client Population % (n)
Survey Language		
English	81.4% (658)	N/A
Spanish	18.6% (150)	N/A
Age Characteristics		
17 and younger	12.4% (97)	12.4% (3,387)
18-19	11.4% (89)	12.8% (3,484)
20-24	33.9% (265)	31.7% (8,632)
25-29	22.6% (177)	20.6% (5,631)
30-34	9.2% (72)	10.9% (2,985)
35 and over	10.5% (82)	11.6% (3,150)
Mean Age	24.7 Years	25.0 Years
Sex		
Male	0.7% (6)	2.1% (581)
Female	99.3% (798)	97.9% (26,688)

Race & Ethnicity:

Race	CSS Survey Sample %(n)	Total Client Population % (n)
White	76.1% (577)	82.1%(22,390)
American Indian/Alaska Native	2.9% (22)	0.9%(254)
Black/African American	3.8% (29)	2.1% (583)
Native Hawaiian/Pacific Islander	2.0% (15)	0.6% (154)
Asian	3.3% (25)	2.3% (632)
Other*/Unknown**	12.4% (94)	11.7% (3,194)
Ethnicity		
	Total State Sample	
Hispanic or Latino	27.3% (211)	22.3% (6,085)
Not Hispanic or Latino	72.7% (561)	77.7% (21,184)
<p><i>*The majority of respondents who indicated 'Other' race on the 2009 CSS reported being of Mexican, Hispanic/ Latino, or Multi-Racial descent. **Unknown or not reported race on Clinic Visit Record data from sample period.</i></p>		

Employment Status:

Respondents were asked to show how their day is spent; that is, whether they worked, attended school, were unemployed, etc. This question was particularly important this year due to the current economic downturn. Respondents replied as follows:

Are you currently?	
Working-Full Time	18.9% (148)
Working-Part Time	28.7% (225)
Student	38.6% (302)
Out of work-more than one year	8.2% (64)
Out of work-less than one year	12.8% (100)
Homemaker	18.1% (142)
Retired	0.1% (1)
Other (See below)	4.7% (37)

**Note: percentages may not add up to 100% as respondents could check multiple responses*

Remarkably, over 20% of survey respondents reported being out of work, highlighting the increased need for publicly funded family planning services.

Those who marked “other” to this question identified responses that they felt best fit their situation. These respondents most commonly reported that they were disabled or injured, had temporary/seasonal work, were self-employed, or were looking for work.

Visit Characteristics:

Respondents were asked a number of questions regarding the purpose of their visit and their satisfaction with the visit.

What was the main reason for your visit today?	
Birth control supplies or shot	61.6% (497)
PAP smear and/or annual pelvic exam	34.6% (279)
Other: (See below)	9.4% (76)
Pregnancy test	7.7% (62)
Emergency Contraception (EC) pills	6.3% (51)
Sexually Transmitted Disease (STD) testing	4.1% (33)
Primary care (general health services-not family planning)	1.9% (15)

**Note: percentages may not add up to 100% as respondents could check multiple responses*

For those who marked the “other” category, respondents primarily noted birth control-related care (e.g. condoms, Plan B, IUD's, Depo-Provera), and general health care services (e.g. check-ups, treating infections, sports physicals, flu shots).

Over three-quarters of survey participants attending the clinics had a scheduled visit.

What kind of visit did you have today?	
Scheduled Visit	75.7% (612)
Walk-In Visit	23.8% (192)
Total	100.0% (808)

This year, two additional questions were asked about the nature of respondents' clinic visits. During the survey administration period, 67.8% of clients statewide were continuing clients; however, the majority of survey respondents (81.9%) were returning clients, representing a higher proportion than the general client population.

Is this your first time to this clinic?	
Yes	18.1% (143)
No	81.9% (645)
Total	100.0% (788)

Do you consider this clinic "your place" for family planning services and birth control?	
Yes	96.4% (674)
No	3.6% (25)
Total	100.0% (699)

Of those who reported that they had been to this clinic before, 97.9% (n=618) also reported that they considered the clinic "their place" for family planning services and birth control.

Additionally, we assessed the primary reasons why individuals chose to access services at these clinics. Three-quarters of respondents (74.5%) indicated that the free or low-cost services provided by the clinic was the primary motivator in choosing the clinic. Location (70.9%) and the quality of services (60.6%) were also key factors in respondents' decision-making.

Why did you choose this clinic?	
The clinic has free or low-cost services	74.5% (602)
The clinic is close by or easy to get to	70.9% (573)
The services are high-quality	60.6% (490)
The services are confidential	57.2% (462)
I don't have insurance	53.7% (434)
A friend or family member recommended it	30.9% (250)
Other (See below)	8.7% (70)
I saw an ad for the clinic	3.8% (31)
<i>*Note: percentages may not add up to 100% as respondents could check multiple responses</i>	

The main themes from those who reported an “other” reason for choosing the clinic were overwhelmingly related to the friendliness of the staff (n=27). Additionally, a sense of comfort (n=6), being long-time clients (n=8), or receipt of a referral by someone other than a friend or family member (n=10) were cited reasons. Some individuals who attended University or an SBHC cited the on-campus location as a reason for choosing the clinic (n=7).

Visit Satisfaction:

As in previous years, respondents were asked their level of satisfaction with a variety of services. Overall, participants were very satisfied with services. The majority of respondents rated their satisfaction with a score of “A”, with percentages ranging from approximately 60% to 94%. The amount of time waiting in the reception area had the least level of satisfaction, but the majority of participants still rated this aspect with a score of an “A”. The results are detailed below.

How satisfied were you with...

Getting an appointment as soon as you wanted?	
Grade “A”	80.9% (640)
Grade “B”	10.7% (85)
Grade “C”	3.8% (30)
Grade “D”	0.9% (7)
Grade “F”	0.5% (4)
Not Applicable	3.2% (25)

The process of making an appointment	
Grade “A”	83.0% (654)
Grade “B”	8.4% (66)
Grade “C”	2.2% (17)
Grade “D”	0.0% (0)
Grade “F”	0.6% (5)
Not Applicable	5.8% (46)

The courtesy and respect of the front office staff	
Grade “A”	94.2% (746)
Grade “B”	4.8% (38)
Grade “C”	0.5% (4)
Grade “D”	0.1% (1)
Grade “F”	0.3% (2)
Not Applicable	0.1% (1)

The amount of time you waited in the reception area	
Grade “A”	59.7% (471)
Grade “B”	25.6% (202)
Grade “C”	9.8% (77)
Grade “D”	2.4% (19)
Grade “F”	1.8% (14)
Not Applicable	0.8% (6)

How well the health care staff answered your questions or concerns	
Grade “A”	94.5% (744)
Grade “B”	4.3% (34)
Grade “C”	0.4% (3)
Grade “D”	0.1% (1)
Grade “F”	0.3% (2)
Not Applicable	0.4% (3)

When asked what the best thing about their visit was, respondents had overwhelmingly positive things to say. A sample of responses is included below:

What was the best thing about your visit today?

- *“A very compassionate, caring staff”*
- *“Able to get an appointment on short notice”*
- *“All my questions were answered”*
- *“All the useful info on birth control”*
- *“Being able to speak freely with all staff”*
- *“Doctor was friendly & professional & answered all my questions. Also that the visit was free”*
- *“Everyone was friendly, & super informative. I was worried about cost, but it was covered!”*
- *“Fast, friendly and easy”*
- *“Friendly staff who don't judge”*
- *“Got all my questions answered”*
- *“I felt comfortable with the staff”*
- *“Once I was in the room, the visit was quick”*

Respondents were also asked to describe one thing that could be done to make their visit better. The majority of responses were related to wait times, but overall, respondents were very satisfied with their visit and would not have changed a thing. A selection of their responses is included below:

Name one thing we could do to make your next visit better:

- *“Absolutely nothing...you rock!”*
- *“Can't think of anything”*
- *“Communication over the phone about what was going to take place for visit”*
- *“Faster, I waited in the waiting room for awhile”*
- *“Make sure to ask the patient if they have any questions at the visits end...”*
- *“Not a thing. You guys are amazing!”*
- *“Shorter wait/more chairs in waiting room”*
- *“When I schedule appointment remind me to bring proper ID's (birth cert or passport)”*

When asked whether or not they received all of the services they wanted, 99% of respondents stated that they did. Of those who stated that they did not, their primary concerns were centered on medication-related questions. A selection of their responses is included below:

Did you get all of the services that you wanted?	
Yes	99.0% (793)
No (See below)	1.0% (8)
Total	100.0% (801)

- *“I wanted to get a medication but she told me to wait”*
- *“More info for side affects”*
- *“Not enough time for UTI discussion”*

General Health Insurance/Services:

As the issue of health care reform continues to dominate national attention, questions around clients’ access to general health insurance and services are particularly relevant. Nearly three-quarters of respondents (73.1%) indicated not having any health insurance that covers primary care (i.e. non-emergency, general health services).

Do you have health insurance that covers primary care (non-emergency, general health services)?	
Yes	26.9% (213)
No	73.1% (579)
Total	100.0% (792)

Employment status was strongly related to whether respondents reported having coverage for general health insurance.

Employment Status	Health insurance coverage for primary care?	
	Yes	No
Working full-time (n=119)	31.9%	68.1%
Working part-time (n=185)	20.0%	80.0%
Student (n=244)	41.0%	59.0%
Out of work > 1 year (n=49)	16.3%	83.7%
Out of work < 1 year (n=71)	12.7%	87.3%

Most notably, respondents who were working part-time and who had been out of work (both less than and over 1 year) were less likely to report having health insurance that covers primary care services.

This year, clients were also asked where they usually go for general health services. Nearly half (43.3%) indicated that they used their family planning clinic for general health services as well. However, the remainder went nowhere else, accessed another clinic or doctor, or went to the Emergency Room or Urgent care for general health services.

Where do you usually go for general health services?

Where do you usually go for general health services?	
This clinic	43.3% (357)
Another clinic or doctor	25.6% (211)
Nowhere	21.6% (178)
Emergency room (ER) or urgent care	9.6% (79)
<i>*Note: percentages may not add up to 100% as respondents could check multiple responses</i>	

Not surprisingly, the location where clients reported accessing general health services was related to their insurance status. Over 90% of those going nowhere for general health services reported having no insurance coverage for primary care.

Access general health services...	Health insurance coverage for primary care?	
	Yes	No
Nowhere (n=133)	9.0%	91.0%
This clinic (n=319)	27.0%	73.0%
Another clinic or doctor (n=134)	50.7%	49.3%
Emergency room (ER) or urgent care (n=48)	14.6%	85.4%

Compared to 2007, respondents were more likely to report having been offered information about public health insurance and where to go for general health services from clinic staff. In 2009, nearly 60.0% of respondents received information about public health insurance and 64.2% received information about where to access general health services compared to 43.9% and 41.8% in 2007, respectively. As might be expected, those without insurance for primary care were much more likely to have received information about both public health insurance and accessing general health services than those with insurance.

Offered information about...	Health insurance coverage for primary care?	
	Yes	No
Public health insurance (n=358)	26.8%	73.2%
Where to go for general health services (n=384)	29.7%	70.3%

Visit Reminders and Social Marketing:

As part of the Oregon Family Planning Program's recent efforts to develop a comprehensive social marketing plan, two questions were added to the survey to assess receptivity to new reminder and outreach and education channels.

Respondents were asked about the types of reminders they would like to receive in the future for family planning appointments. While some clinics may already offer some types of appointment reminders, survey results can help inform future activities. Two-

thirds of respondents indicated a preference for receiving phone call reminders, while a quarter of respondents wanted either a card in the mail or a reminder card at checkout. Those who responded to the other category generally stated that they were satisfied with their current reminders, or did not have specific suggestions.

What kind of reminder would you like to receive for family planning appointments?	
Phone Call	66.3% (534)
Card in the mail	26.6% (214)
Reminder card at checkout	25.7% (207)
Text message	20.1% (162)
E-mail	17.0% (137)
No reminders	8.1% (65)
Other	0.9% (7)
<i>*Note: percentages may not add up to 100% as respondents could check multiple responses</i>	

Respondents were asked if they would be interested in receiving information about family planning through a variety of different platforms. The purpose of this question was to assess potential interest in various components that may be implemented as part of the upcoming social marketing campaign. Results from this question overwhelmingly demonstrate respondent interest in visiting websites to receive information.

Would you want to...?	
Visit a Web site about family planning, birth control and sexual health	42.4% (335)
Receive text messages with family planning information	25.9% (205)
"Friend" a family planning facebook or MySpace page	10.4% (82)
Other ways (See Responses Below)	9.9% (78)
Forward a text message to your friends about this clinic	9.5% (75)
Follow family planning "tweets" on Twitter	3.2% (25)
<i>*Note: percentages may not add up to 100% as respondents could check multiple responses</i>	

Some respondents offered additional suggestions such as receiving a brochure (n=6), an email (n=8), a mailing (n=28), or a phone call (n=19). However, there were some respondents (n=17) who reported that they were not interested in receiving any information.

Conclusions

Respondents rated many components of their family planning visit highly, such as courtesy and respect of staff, and how well staff answered questions. However, there remains room for improvement.

As with past years, time in the waiting room has been a longstanding concern for clients. Additionally, disbursement of information and resources about Medicaid, OHP, general health services, etc. has been typically lower than hoped for. Although the goal is for 100% of clients to have been offered information, there has been a marked increase in this area from previous years. Lastly, although most individuals were highly satisfied with overall communication, clients would be interested in knowing more about proper documents to bring to their visit, as well as having enough time to discuss questions or concerns at the end of a visit.

This year's survey included new questions about insurance, medical home, and employment status, which are particularly relevant given current economic conditions. Not only were the majority of respondents uninsured, but also out of work. Many individuals also reported that they have few other options for health care services other than these family planning clinics. This, in addition to the highly rated quality of services, may contribute to the fact that nearly all clients surveyed considered the family planning clinic "their place" to go for family planning services. It is valuable to know that the services being provided by these clinics are not only appreciated, but are heavily relied upon, in many cases, as the only source of health care being utilized. There is an obvious need being met by these services, but there is still more that can be done to reach those who do not yet access care.

Also new to this year's survey was an assessment of potential social marketing strategies. Currently, the family planning program is conducting a social marketing campaign utilizing social media (e.g. social networking site) to promote family planning services; results will help drive future campaign efforts.

As the need for publicly funded services grows, it is worthwhile to continue to explore client characteristics and perceptions of care. The Customer Satisfaction Survey is a useful tool to assess quality of care and satisfaction levels. Future surveys may include questions about the impact of social marketing campaign and outreach efforts, as well as perceptions and acceptability of birth control method of choice.

For more information about this survey or to propose topics for inclusion in future surveys, please contact:

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