Dane County Department of Human Services

2021 ADRC Client Satisfaction Survey Results

September 2021

Contents

Background

About the Aging and Disability Resource Center

The Aging and Disability Resource Center Program is a national program and an essential component of the "No Wrong Door" system model.[1] The No Wrong Door initiative is a collaborative effort of the U.S. Administration on Community Living, the Centers for Medicare & Medicaid Services (CMS), and the Veterans Health Administration. Each of the 72 counties in Wisconsin have service available through an Aging and Disability Resource Center. This report focuses on the Aging and Disability Resource Center of Dane County – for simplicity referred to as "ADRC" throughout this report.

The Aging and Disability Resource Center of Dane County ("ADRC") provides information about resources and support on all aspects of life related to aging or living with a disability. The ADRC is a one-stop shop for older adults, people with disabilities, and their families. ADRC staff are unbiased, knowledgeable professionals who listen to concerns, help clarify options, and direct people to appropriate resources. The ADRC serves as the access point for information about long-term care and applying for public benefits. ADRC services are free and available to all Dane County residents.

> ADRC of Dane County's mission is to support seniors, adults with disabilities, their families, and caregivers by providing useful information, assistance and education on community services, and long-term care options by serving as the single entry point for publically funded long-term care services while at all times respecting the rights, dignity, and preference of the individual.

Surveying history

The ADRC of Dane County opened in November 2012. In 2015, the ADRC worked with the Department of Human Services Planning & Evaluation staff to conduct a client satisfaction survey. People who had contacted the ADRC by telephone and/or had a home visit between July 2014 and December 2014 were invited to complete the survey ("2014 survey"). Surveys for the 2014 study were mailed February 19, 2015 and were due by April 3, 2015. The 2014 survey questions were based on:

- Maine's Aging & Disability Resource Center satisfaction survey
- Performance Outcome Measurement Project (POMP) Information and Assistance Survey

To avoid replication and survey fatigue from broader Aging and Disability Resource Center surveys, the ADRC of Dane County survey was not repeated after 2014. However, circumstances driven by COVID-19 resulted in the ADRC of Dane County's board needing to conduct a survey in 2021. So, the 2014 surveys were adapted to meet ADRC of Dane County's needs. Two versions of the 2014 survey were created – one for people who contacted ADRC by telephone and another for people who had a home visit. Because COVID-19 forced the ADRC to stop in-person services, the telephone survey served as the baseline for the 2021 survey (see Appendix A - Survey Instrument).

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[1] "Aging and Disability Resource Centers Program/No Wrong Door System," Administration for Community Living, March 5, 2021, https://acl.gov/programs/connecting-people-services/aging-and-disability-resource-centers-programno-wrong-door.

Key Findings

Overall, the ADRC of Dane County ("ADRC") receives high marks for their service

- 99% said ADRC staff are courteous and respectful ("definitely yes" or "yes")
- 98% said ADRC staff listened carefully to what they wanted ("definitely yes" or "yes")
- 96% said the information they received was clear ("definitely yes" or "yes")
- 96% said ADRC staff explained things in a way they could understand ("definitely yes" or "yes")
- 96% said ADRC staff understood what they wanted ("definitely yes" or "yes")
- 95% said ADRC staff are knowledgeable about the services and information they asked about ("definitely yes" or "yes")
- 90% are "very satisfied" or "satisfied" with their overall experience with the ADRC
- 89% said the information they received was helpful ("definitely yes" or "yes")
- 85% are "very satisfied" or "satisfied" with the amount of time they waited to speak with ADRC staff about their needs
- 13% gave praise to the ADRC when directed to answer, "What future or ongoing needs of aging adults or adults with disabilities are not currently being met in Dane County?"
  - "They have helped me every time I have called."
  - "The information they gave/mailed to me was above and beyond the help I needed. TY."

However, there is opportunity to improve helping aging adults and adults with disabilities navigate the wide range of services available

- **Continue to customize support to the caller's needs**
  - Follow-up phone calls are used for people not directed to long-term care but needing some additional support, 56% of respondents who were not directed to long-term care recall getting a follow-up phone call
  - Likewise, Zoom calls are intended for more complex cases that cannot be resolved on the initial call. One-third (33%) of survey respondents remember being offered a virtual visit via Zoom during their call. Almost none of those who say they were not offered a Zoom visit would have scheduled one (4%).
- **Critically explore ADRC's role in opportunities for improvement**
  - Respondents were asked if they pursued services as a result of their phone call with the ADRC. Four of the 26 who said they have not pursued services later in the comments said they are still waiting to hear if they are eligible for services.
    - It is not clear when the delay occurred. The comments did not specify if the delay is in getting Information & Enrollment Counseling from the ADRC or if they are waiting on services from other providers. Between this and the small number of people impacted, making improvement is difficult.
  - Additionally, the largest gaps in the need for help but not getting information from the ADRC is with "support for caregivers" and "help with a disability"
  - Lastly, when asked where Dane County as a whole is not meeting current and future needs, respondents mentioned wanting more timely responses and expanded eligibility requirements

- **Continue to nurture and provide ways people can navigate a resource rich county**
  - The ADRC provides unbiased information and decision making tools so individuals can make service decisions that are right for them
  - While not a direct reflection on the work ADRC does, respondents say an area where Dane County overall could do better now and into the future is with more coordinated services
    - Respondents struggle with just receiving a list of referrals, which is overwhelming for them to go through and follow-up
    - Still, respondents say they want better coordination throughout the county
      - "Active, easy referrals **to** ADRC from other government agencies."
      - "Attempting to seek help is almost impossible to get. It is a continuous battle of call this place, call the next place and on and on. You qualify but no help available. You fall through the cracks with requirements and get kicked down the road."
    - The ADRC tries to address this by offering follow-up calls, options counseling, and referrals to case management

Relations with persons of color has room for improvement

- Few (n=29) persons of color responded to the survey, their results should be taken directionally and combined with anecdotal experiences when making decisions
  - The lower number of persons of color responding to the survey (n=29) compared to a larger number of white survey completers (n=142) is likely a contributor to differences not registering as statistically significant
  - Notably, persons of color are underrepresented in survey results (15%) when compared to the number of persons of color calling the ADRC (22%)

Table 1: POC v White Ratings

Measure	POC (n=5-23)*	White (n=26*-108)
Overall satisfaction ("very satisfied"/"satisfied")	87%	90%
Wait time ("very satisfied"/"satisfied")	74%	86%
Received a follow-up call ("yes")	60%	62%
Pursued a service ("yes")	94%	71%
Staff… ("definitely yes")		
Knowledgeable	75%	84%
Courteous & respectful	80%	91%
Explained things well	79%	83%
Understood you	74%	81%
Listened carefully	75%	81%
Information provided was… ("definitely yes")		
Helpful	68%	78%
Clear	75%	80%

*Caution: Small base
Each row represents a question. The number of people answering each question varies, so a range is presented in the header. For instance, POC (n=5-23) means between 5 and 23 persons of color answered the corresponding question.

- Although there were no statistically significant differences between answers given by persons of color compared to white respondents, it is notable that almost all ratings were lower among persons of color compared to white respondents (see Table 1)
- The only exception is that persons of color more frequently report pursuing a service, it is possible disparities in eligibility are a driver of this result

Consider improvements to gathering consumer feedback

- This survey was put in place in response to the pandemic. Usually the Dane County ADRC Board would hold listening sessions to hear improvements to the ADRC and long term care. However, due to safety precautions these sessions could not be held. Unfortunately, we found that the survey is not a good replacement for listening sessions – we struggled to get responses from people of color, non-English speakers, and users of long term care.
- Still, ADRC should plan for future waves of consumer feedback to align with the Dane County Department of Human Services Strategic Plan, Priority 4 – Strengthen Our Partnerships, Initiative 2 "seek feedback on the experience of our clients to broaden the community and lived-experience voice in service delivery"[2]
  - Consider adding other methods of data collection to the mail survey to boost participation among people of color and non-English speakers
    - Example methodologies include focus groups, one-on-one interviews, exit surveys (when in-person services resume), or phone interviews
    - Work to identify Spanish and Hmong speakers so they can be proactively mailed a survey in their language rather than having to request a translated survey
  - Be aware that as response rates to a one-time mail survey continue to fall, it may become necessary to incorporate a second mailing of the survey for meaningful results
  - Explore ways to reduce the time between service and being asked to complete a survey – for some people there was a nine month gap between when they last called the ADRC and when the survey was mailed

Methodology

2021 survey

Impact of COVID-19

The COVID-19 pandemic began sweeping across the globe in 2020. Public health strategies to respond to the virus included "flattening the curve," physical distancing, wearing masks, quarantining, and limiting travel/movement outside of one's home. These efforts ultimately led to the closing of many physical business locations. Businesses quickly adapted service delivery to distance and/or virtual formats.

The ADRC of Dane County was not immune to these significant changes in service delivery. Dane County strongly encouraged people to conduct business with the County through phone or email with the intention to slow the spread of COVID-19 and protect the most vulnerable populations – including older

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[2] "Dane County Department of Human Services Vision: Next 2021-2026," accessed August 8, 2021, https://strategic-plan.dcdhs.com/documents/pdf/VisionNext-final.pdf.

adults and people with certain health conditions. So, the ADRC shutdown their walk-in services and traditional in-home visits. The public was directed to reach out to the ADRC by telephone and, during that phone call, they were offered a virtual in-home visit via Zoom. The ADRC's consumer feedback practices were also impacted by COVID-19 and these guidelines. The ADRC board typically does in-person listening sessions with consumers, but COVID-19 restricted in-person activities so a mail survey was developed in 2021 at the direction of the ADRC of Dane County's board.

Who was surveyed?

The survey was mailed to people who called the ADRC between October 1, 2020 and March 31, 2021 (approximately the most recent six months to mailing the survey on June 4, 2021). The WellSky/SAMS database was queried to identify appropriate records. The survey was sent to the caller, the person who actually spoke to ADRC staff, and not the client, the person for which services are sought. Note there are cases when the caller is also the client, but this is not true for every case. If a caller did not have an address on file in WellSky/SAMS or the caller was anonymous, the record was excluded from the query results. After several steps to clean the sample 1,185 surveys were mailed.

The surveys were picked up for processing by mail services on June 4, 2021. Surveys were mailed in DCDHS Department envelopes with "Return Service Requested" printed below the return address. Respondents were asked to mail back their completed survey in the provided postage-paid, business reply envelope no later than June 30, 2021. Thirty envelopes came back with a forwarding address and were remailed on June 11 or June 18. Forwarding addresses arriving after June 18 were not remailed. Analysis was conducted on surveys arriving no later than July 21, 2021.

Table 2: 2021 Survey Schedule

OCTOBER 2020	DECEMBER 2020	FEBRUARY 2021	APRIL 2021	JUNE 2021
S M T W T F S	S M T W T F S	S M T W T F S	S M T W T F S	S M T W T F S
1 2 3	1 2 3 4 5	1 2 3 4 5 6	1 2 3	1 2 3 ▣ 5
4 5 6 7 8 9 10	6 7 8 9 10 11 12	7 8 9 10 11 12 13	4 5 6 7 8 9 10	6 7 8 9 10 ▣ 12
11 12 13 14 15 16 17	13 14 15 16 17 18 19	14 15 16 17 18 19 20	11 12 13 14 15 16 17	13 14 15 16 17 ▣ 19
18 19 20 21 22 23 24	20 21 22 23 24 25 26	21 22 23 24 25 26 27	18 19 20 21 22 23 24	20 21 22 23 24 25 26
25 26 27 28 29 30 31	27 28 29 30 31	28	25 26 27 28 29 30	27 28 29 ⬤

NOVEMBER 2020	JANUARY 2021	MARCH 2021	MAY 2021	JULY 2021
S M T W T F S	S M T W T F S	S M T W T F S	S M T W T F S	S M T W T F S
1 2 3 4 5 6 7	1 2	1 2 3 4 5 6	1	1 2 3
8 9 10 11 12 13 14	3 4 5 6 7 8 9	7 8 9 10 11 12 13	2 3 4 5 6 7 8	4 5 6 7 8 9 10
15 16 17 18 19 20 21	10 11 12 13 14 15 16	14 15 16 17 18 19 20	9 10 11 12 13 14 15	11 12 13 14 15 16 17
22 23 24 25 26 27 28	17 18 19 20 21 22 23	21 22 23 24 25 26 27	16 17 18 19 20 21 22	18 19 20 🔍 22 23 24
29 30	24 25 26 27 28 29 30	28 29 30 31	23 24 25 26 27 28 29	25 26 27 28 29 30 31
	31		30 31	

How was the sample cleaned?

Once the Planning & Evaluation Team received the sample from the state, the sample was cleaned (see Table 3). First, records were removed where the listed address was undeliverable as-is and would not result in a match when run through the National Change of Address (NCOA) database – this included those whose address was listed as only "homeless." Additionally, if the caller was not an actual person (e.g., was a business) or the record was a minor (less than 18 years old) it was also removed from the sample. Lastly, out of state records were removed.

Table 3: Sample Cleaning

Total records received from WellSky/SAMS	1,663
Less records where	
The address is insufficient to run through NCOA/would be undeliverable as-is	-6
The address was listed only as "homeless"	-11
The caller is not a person (entity/business)	-76
The caller was a minor (< 18 years old)	-11
The address is out of state	-2
Cleaned records	**1,557**
Less duplicate records in the same household	-253
Sent to National Change of Address (NCOA)	**1,304**

Next, the records were de-duplicated by household and 253 records were removed (see Table 3). The decision to de-duplicate by household was made to discourage people from throwing away what can appear as junk mail (e.g., when multiple of the same information is mailed to different people at the same address). For this step, a hierarchy of decision-making was followed when choosing which record to keep:

1. Kept the record with the most complete information (e.g., date of birth or age range, race/ethnicity, inquiry type, etc.)
2. If they had the same amount of information, then kept the record with the most recent contact to aid in respondent recall of the service interaction

De-duplicating by household left 1,304 records to be run through the National Change of Address (NCOA) database. This step proactively identifies people with forwarding addresses. In addition to getting the survey to the intended person sooner, using NCOA is good stewardship of resources – reducing postage cost wasted on undeliverable mail and reducing staff time to resend mail. From the 1,304 records sent to NCOA, 119 were removed for the reasons below (see Table 4). **This resulted in mailing a total of 1,185 surveys.**

Table 4: NCOA Results

Sent to National Change of Address (NCOA)	1,304
Less	
Addresses marked as undeliverable by USPS	-95
Addresses marked as vacant	-7
Addresses where the recipient moved but doesn't have a forwarding address	-14
The recipient moved out of state	-3
TOTAL SURVEYS MAILED	**1,185**

113 address were updated via NCOA before mailing

What was asked?

The 2021 ADRC Improvement Survey was based on the 2014 telephone survey. However, changes were made to reflect how people moved through the ADRC during COVID-19 operations and the ADRC board's current priority areas. The survey is available in Appendix A - Survey Instrument and covers the following areas:

- Satisfaction
- Zoom/Virtual visits
- Evaluation of ADRC staff/information provided
- Long-term care
- Needs versus services/information offered

Due to space restrictions, demographic questions were not included in the survey. Instead, experiential questions were prioritized. The survey contained a randomly assigned code that was used to append available demographic information for the caller. Unlike 2014, the survey did not promise anonymity but did ensure confidentiality.

How could people participate?

People who called the ADRC were asked to complete a paper survey and mail it back to the Department of Human Services in a postage-paid, business reply envelope. Initial surveys were mailed in English. All English surveys contained a phone number recipients should call to request a copy of the survey in Spanish or Hmong (these directions were translated into both Spanish and Hmong). *It is notable that no one called the phone line to request a Spanish or Hmong survey.* Surveys were mailed on June 4, 2021 and recipients were encouraged to complete the survey and mail it back by June 30, 2021.

In all, 190 completed surveys were returned and analyzed. In order to compute a response rate, we need to know the number of eligible records. For this survey, eligible records are anyone who called the ADRC from October 2020 through March 2021 and could be reached by mail (see   Table 5). Dividing completed surveys by eligible records gives us the survey response rate. For this survey, the response rate is 17.8% (190 completed surveys/1,065 eligible records).

Table 5: Record Dispositions

Survey mailed	**1,185**
Less ineligible records	
Wrong address, no forwarding	-115
Deceased	-3
Mail stopped	-2
Eligible sample	**1,065**
Total completed surveys	**190**
English	190
Spanish	-
Hmong	-
Returned, incomplete	6
Response rate completed surveys/eligible sample	**17.8%**

The 2014 survey response rate for recipients of telephone services was 24% (n=168).

Can we trust the results of this survey?

Three measures to consider when evaluating the trustworthiness of a survey are the response rate, the margin of error, and if respondents are representative (see Appendix B – Survey Trustworthiness).

- Studies have argued a high response rate does not ensure survey quality and that response rates have been falling over time. So, we should not discard the results of this survey based solely on a lower response rate in 2021 (17.8%) than 2014 (24%).
- The margin of error for this survey is ±6.45%, which falls into the generally acceptable range of between 4% and 10%.
- The representativeness of survey respondents to the population could be better (see Table 6). Some of these differences are driven by differences in the eligible records and the population.

Table 6: Comparison to Survey Respondents

Attribute	Population (n=1,663)	Eligible Records (n=1,065)	Respondents (n=190)
Gender			
Male	34%	35%	29%
Female	**61%**	64%	70%
Unknown	**6%**	1%	1%
Age			
17 – 21	4%	5%	2%
22 – 59	24%	**30%**	21%
60 – 99	**35%**	**44%**	54%
100 – 150	0%	0%	0%
Unknown	**37%**	22%	23%
Reason for Call ("Outcome") – Multiple Reponses Accepted per Record			
Information & Assistance	60%	63%	59%
Options Counseling	4%	4%	5%
Enrollment Counseling	**6%**	5%	2%
Disenrollment Counseling	2%	1%	1%
Other	32%	30%	34%
Caller Challenges ("Disability") – Multiple Responses Accepted per Record			
Alzheimer's	7%	5%	6%
Developmental or Intellectual Disability	**18%**	16%	12%
Elderly	**50%**	**48%**	59%
Mental Health	19%	20%	17%
Physical Disability	33%	36%	31%
Substance Use	2%	2%	2%
Unknown	2%	2%	1%
Race/Ethnicity			
Non-white	**22%**	**22%**	15%
White	**68%**	68%	75%
Unknown	10%	10%	10%

Statistically significant differences in respondents from the population or eligible sample are shown in orange, bold font
Statistically significant differences in the eligible sample from the population is shown with a grey background

Overall, the trustworthiness measures lean closest to "could be better" (see Figure 1). So although our survey results are not optimal (all "good"), it is promising that none of these measures of trustworthiness are "concerning."

Figure 1: Trustworthiness Measures

17.8% response rate	±6.45% margin of error	alignment with population
Good	Could be better	Concerning

Results - Satisfaction

Those who remember calling ADRC since October 2020, were asked a series of questions about their experience. If the respondent did not remember calling the ADRC or said they did not call the ADRC, they skipped the transactional survey questions (Q2 – Q15) and were asked to indicate what services they need in addition to describing what needs are not being met by Dane County and the biggest challenges to staying in one's home (Q16 – Q18).

More than three-fourths (78%) remember calling the ADRC since October 2020 (see Figure 2). This metric may be improved by decreasing the length of time between the call and receiving a survey. For some people, the gap was as long as nine months.

Figure 2: Called the ADRC
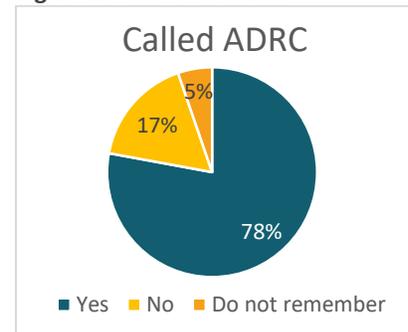
Base=Total sample (n=190)
Q1. Since October 2020, have you called the ADRC of Dane County?

Overall satisfaction
The ADRC receives strong, positive satisfaction scores

Those who remembered the phone call were asked to rate their overall satisfaction with ADRC of Dane County as either "very satisfied," "satisfied," "neutral," "dissatisfied," or "very dissatisfied" (see Figure 3). The majority of respondents are "very satisfied" (68%). While just nine (6%) were "dissatisfied" or "very dissatisfied." There were no statistically significant differences by race/ethnicity, gender, or who they called for (see Table 8).

Figure 3: Overall Satisfaction
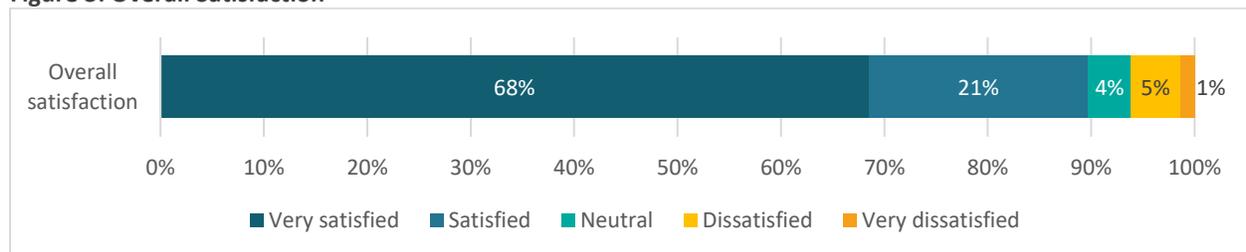
Base=Those who remember calling ADRC of Dane County since October 2020 and answering (n=146)
Q2. Overall, how satisfied are you with your contact with the ADRC of Dane County?

Table 7: Statistical Testing of Overall Satisfaction

	White (n=108)	POC* (n=23)**	Male (n=43)	Female (n=100)	Called for Self (n=89)	Someone else (n=56)
Very satisfied	69%	70%	74%	66%	70%	66%
Satisfied	21%	17%	16%	24%	20%	23%
Neutral	3%	9%	5%	4%	4%	4%
Dissatisfied	6%	4%	2%	5%	4%	5%
Very dissatisfied	2%	-	2%	1%	1%	2%

Race and gender are assigned by values in sample. Called for is assigned by answer to Q3.
*Person of Color (anyone with a known identity that is not White, non-Hispanic)
**Caution: Small base
Two-tailed z-test of difference of proportions at the 95% confidence level was performed using SPSS

Satisfaction with wait time
Maintain wait times to speak with staff as most people are satisfied with the wait time

In addition to strong overall satisfaction, respondents are also satisfied with the amount of time they waited to speak with ADRC staff about their needs (see Figure 4). While asked differently from 2014 to 2021, the positive outcome for wait time is approximately the same (see Figure 4):

- 2014: 63% rated *how quickly were you able to speak to someone about your needs* the most positive choice, "very quickly" (n=163 telephone services survey respondents)
- 2021: 65% rated *overall, how satisfied are you with the amount of time you waited to speak with ADRC of Dane County staff about your needs* the most positive choice, "very satisfied" (n=136)

Figure 4: 2021 Wait Time
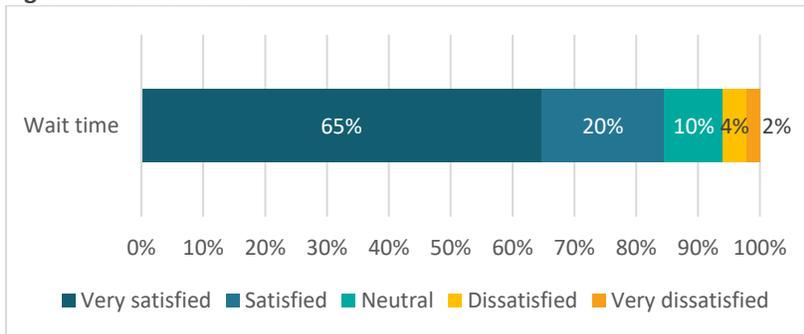
Figure 5: Trending Wait Time
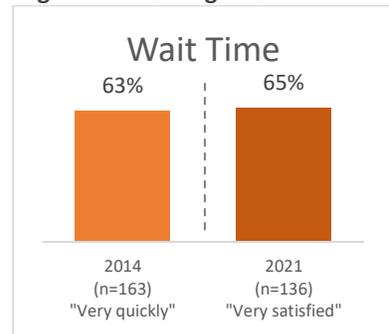
Base=Those who remember calling ADRC of Dane County since October 2020 and answering (n=136)
Q6. Overall, how satisfied are you with the amount of time you waited to speak with ADRC of Dane County staff about your needs?

Table 8: Statistical Testing of Wait Time (2021)

	White (n=102)	POC* (n=19)**	Male (n=38)	Female (n=95)	Called for	
					Self (n=80)	Someone else (n=54)
Very satisfied	66%	63%	68%	64%	68%	59%
Satisfied	20%	11%	21%	19%	18%	24%
Neutral	9%	16%	5%	12%	10%	9%
Dissatisfied	4%	5%	3%	3%	3%	6%
Very dissatisfied	2%	5%	3%	2%	3%	2%

Race and gender are assigned by values in sample. Called for is assigned by answer to Q3.
*Person of Color (anyone with a known identity that is not White, non-Hispanic)
**Caution: Small base
Two-tailed z-test of difference of proportions at the 95% confidence level was performed using SPSS

Results - Evaluation of ADRC Staff/Information Provided

ADRC staff
ADRC staff stand out for being courteous and respectful

Respondents were asked to rate ADRC staff on five attributes (see Figure 6). Each of these attributes received the most positive rating ("definitely yes") from about 80% of respondents. Notably, the attribute **the person you talked to was courteous and respectful** slightly stands out from the rest with 88% saying "definitely yes" and none responding "definitely no."

Figure 6: Ratings of ADRC Staff
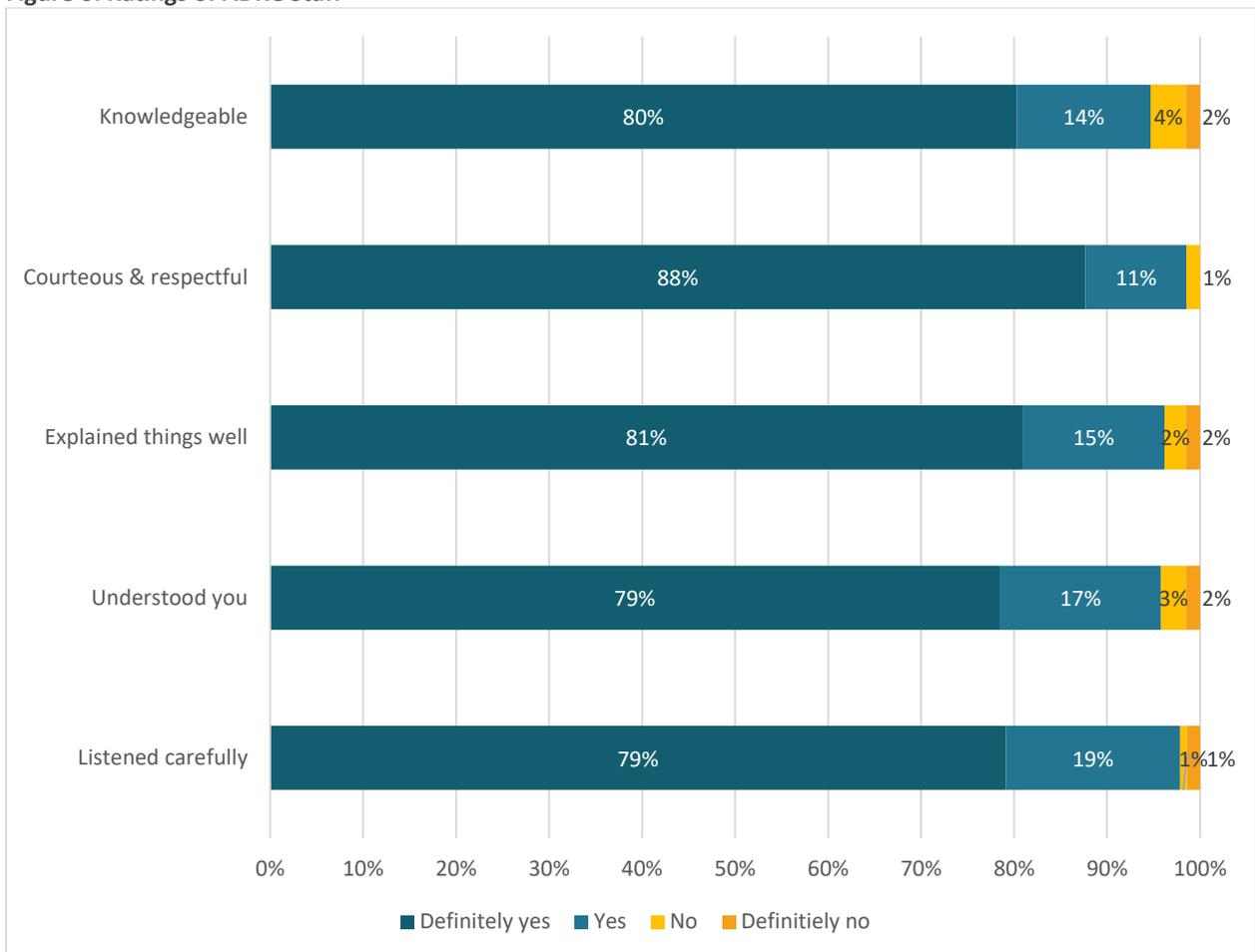
Base=Those who remember calling ADRC of Dane County since October 2020 and answering

Q7. Did the person you talked with…?
    Listen carefully to what you wanted (n=139)
    Understand what you wanted (n=132)
    Explain things in a way you could understand (n=131)
Ratings statements paraphrased to fit space.

Q8. Was the person you talked with…?
    Courteous and respectful (n=138)
    Knowledgeable about the services and information
    you asked about (n=132)

Because the rating scale was simplified from 2014 to 2021 direct comparison of the results should not be made. So, statistical testing was not performed on the graph below to identify differences from 2014 to 2021 (see Figure 7). Instead, it is shown to display generalizations about the results from one time period to the next. Generally, respondents rated four of the five attributes similarly. However, there is a 7 percentage point increase in the proportion of people saying "definitely yes" that the person they talked to was knowledgeable about services and information.

Figure 7: Trending Ratings of ADRC Staff
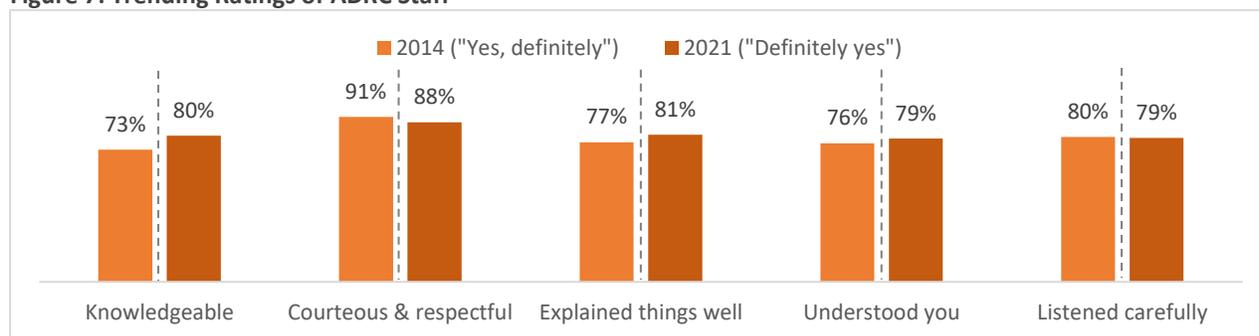
Ratings statements paraphrased to fit space.
2014 and 2021 scales differ. Chart shows "Yes, definitely" (2014) compared to "Definitely, yes" (2021).[3]

Although there are no statistically significant differences by race/ethnicity, gender, or who the person called for, a smaller proportion of POC (person of color) respondents said "definitely yes" to all of these attributes compared to their white counterparts (see Table 9). The difference ranges from 4 to eleven percentage points. ***There is opportunity to improve perception of quality of service among the POC community.***

Table 9: Statistical Testing of Ratings of ADRC Staff

2021 % Definitely yes	White (n=98-104)	POC* (n=19-20)**	Male (n=39-41)	Female (n=90-95)	Self (n=76-83)	Called for Someone else (n=53-54)
Knowledgeable	84%	75%	82%	80%	82%	77%
Courteous & respectful	91%	80%	83%	89%	87%	89%
Explained things well	83%	79%	85%	79%	84%	75%
Understood you	81%	74%	82%	78%	83%	72%
Listened carefully	81%	75%	78%	80%	82%	74%

Race and gender are assigned by values in sample. Called for is assigned by answer to Q3.
*Person of Color (anyone with a known identity that is not White, non-Hispanic)
Ratings statements paraphrased to fit space.
**Caution: Small base
Two-tailed z-test of difference of proportions at the 95% confidence level was performed using SPSS

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[3] 2014 scale - "Yes, definitely" "Yes, I think so" "I'm not sure" "No, I don't think so" "No, definitely not" (n=214-2016)
2021 scale – "Definitely yes" "Yes" "No" "Definitely no" (n=131-139)

Zoom/Virtual visits
The data suggests Zoom calls are being offered to those who need it, with only a small portion of people who would have scheduled a Zoom call not being offered the option.

In 2020, the COVID-19 pandemic forced business as usual to pivot. The world went from in-person to virtual services. The ADRC had to stop traditional in-home visits, but they offered virtual in-home visits via Zoom as an alternative. One-third of respondents recall being offered a Zoom visit (33%), overall less than one in five choose to schedule the Zoom (17%) (see Figure 8). The rest do not recall being offered a Zoom visit (67%) but a small portion would have wanted to schedule a Zoom visit (4%). It is notable that while two-thirds say they were not offered a Zoom visit, the ADRC did not have the capability of doing Zoom visits until mid-March 2021, so this result is not surprising or concerning.

Figure 8: Zoom Visits
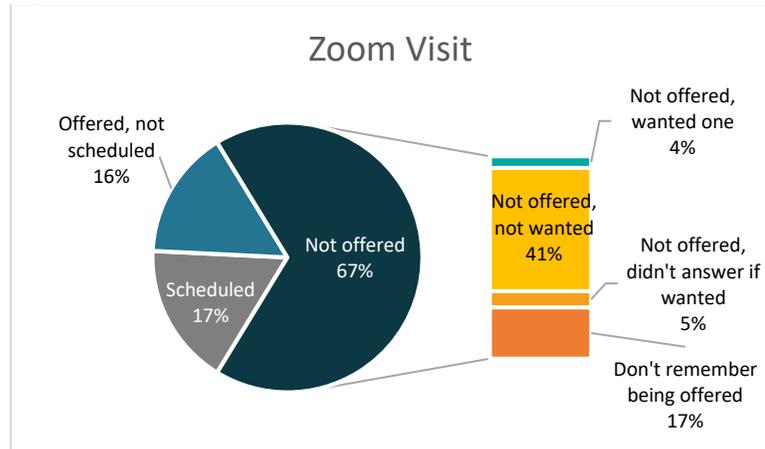
Base=Those who remember calling ADRC of Dane County since October 2020 and answering (n=129)
Q4. Did the ADRC of Dane County staff you talked to <u>offer</u> to set up a Zoom meeting or video call (this may also be called a "virtual home visit")? / Did you set up a Zoom/video call? / Would you have wanted a Zoom/video call?

Table 10: Statistical Testing Zoom Visits

	White (n=97)	POC* (n=17)**	Male (n=38)	Female (n=88)	Called for	
					Self (n=76)	Someone else (n=51)
Scheduled a Zoom	15%	35%	16%	18%	8%	27%
Offered, did not schedule a Zoom	16%	12%	21%	14%	18%	12%
Was not offered, but would want one	3%	-	-	6%	4%	4%
Was not offered, did not want one	41%	35%	39%	40%	43%	39%
Was not offered, did not answer if wanted	4%	12%	3%	7%	5%	6%
Do not remember if offered	20%	6%	21%	16%	21%	12%

Race and gender are assigned by values in sample. Called for is assigned by answer to Q3.
*Person of Color (anyone with a known identity that is not White, non-Hispanic)
Categories paraphrased and derived
**Caution: Small base
Two-tailed z-test of difference of proportions at the 95% confidence level was performed using SPSS

Information about wait time for a Zoom call should be used with extreme caution – the number of people responding is small (22) and self-reported data is always less preferred than checking call records for accuracy. Wait time between the initial call and getting a Zoom visit is not well remembered. About one-third (32%) do not remember how long they waited (see Figure 9: Wait for Zoom Call Figure 10). However, a similar proportion (36%) reported they waited just 1-3 days. The rest waited 4 or more days. All ADRC's in Wisconsin are expected to schedule appointments, such as home visits (Zoom calls for this survey window), within 10 business days or at another time preferred by the customer.[4] The survey results indicate that the ADRC of Dane County is complying with this expectation.

Respondents are "very satisfied" or "satisfied" with the wait time (86%) regardless of if they received help via phone or a Zoom (see Figure 9: Wait for Zoom Call Figure 10). While the proportion of "very satisfied" people who set up a Zoom (80%) is visually much larger than those who contacted the ADRC by phone and are "very satisfied" (64%), this difference is not statistically significant.

Figure 9: Wait for Zoom Call

Wait for Zoom Call

1-3 days: 36%
4-6 days: 9%
7-10 days: 14%
More than 10 days: 9%
Do not remember: 32%
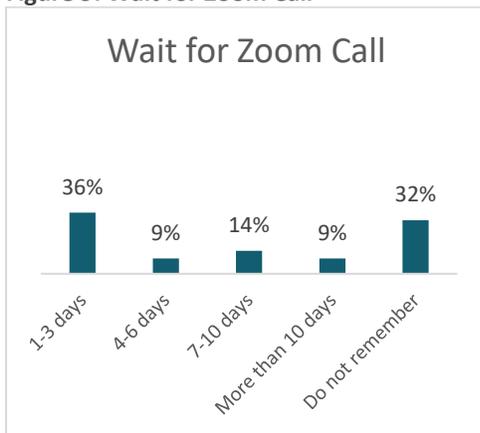
Base=Those who remember calling ADRC of Dane County since October 2020, scheduled a Zoom call and answering (n=22)*
*Caution: small base
Q5. How long did you wait for a Zoom/video call?

Figure 10: Satisfaction with Wait to Speak to ADRC Staff

Satisfaction with Wait Time

	Overall	Phone	Zoom
Very satisfied	66%	64%	80%
Satisfied	20%	23%	5%
Neutral	10%	10%	10%
Dissatisfied	4%	3%	5%
Very dissatisfied	2%	2%	5%
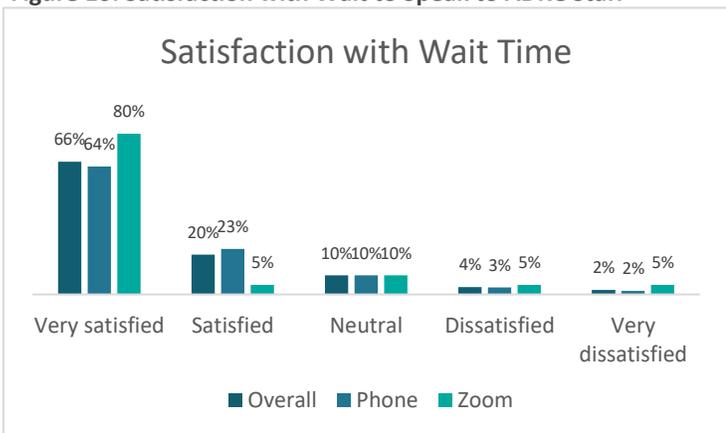
Base=Those who remember calling ADRC of Dane County since October 2020 and answering (Overall n=136; Phone=115; Zoom n=21*)
*Caution: small base
Q6. Overall, how satisfied are you with the amount of time you waited to speak with ADRC of Dane County staff about your needs?

Information provided

In addition to rating the person they talked to at the ADRC, respondents rated the information they were given (see Figure 11). The information the ADRC provides is clear (96% saying "definitely yes" or "yes") and commonly it is considered helpful (89% "definitely yes" or "yes"). However, 11% (14 respondents) said the information was not or definitely not helpful. We do not have evidence in the survey to explain why these 14 people found the information they received from the ADRC not helpful.

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[4] "Scope of Services for the Aging & Disability Resource Center Grant Agreement with the Wisconsin Department of Health Services Division of Public Health," Wisconsin Department of Health Services, p. 12, Accessed September 10, 2021, https://www.dhs.wisconsin.gov/adrc/pros/2021-adrc-scope-services.pdf.

Figure 11: Ratings of Information Provided

Helpful	75%	14%	9%	2%
Clear	78%	18%	3%	1%

■ Definitely yes ■ Yes ■ No ■ Definitiely no
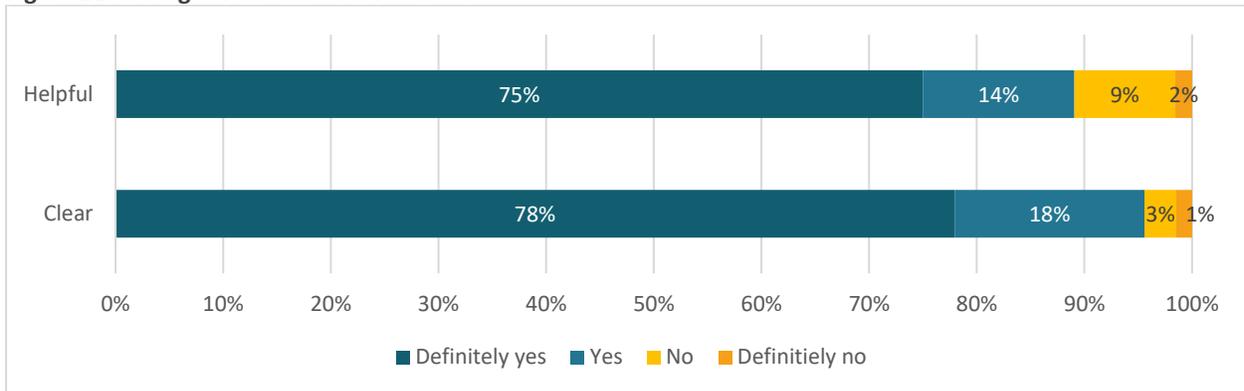
Base=Those who remember calling ADRC of Dane County since October 2020 and answering
Q9. Overall, was the information you received…?
  Clear (n=136)
  Helpful (n=128)

Table 11: Statistical Testing Ratings of Information Provided

% Definitely yes	White (n=96-102)	POC* (n=19-20)**	Male (n=38-39)	Female (n=86-95)	Called for	
					Self (n=74-80)	Someone else (n=52-54)
Helpful	78%	68%	77%	74%	78%	69%
Clear	80%	75%	76%	79%	83%	70%

Race and gender are assigned by values in sample. Called for is assigned by answer to Q3.
*Person of Color (anyone with a known identity that is not White, non-Hispanic)
**Caution: Small base
Two-tailed z-test of difference of proportions at the 95% confidence level was performed using SPSS

The ADRC is not a direct service provider. Rather, it gathers information and passes along appropriate resources in an unbiased manner. They are also the door to access publically funded long-term care. In all, 67% of respondents report being directed somewhere for services (see Figure 12). These are about evenly split between long-term care (32%) and other services (35%). Three-fourths (75%) of people who were directed to long-term care or somewhere else pursued services (see Figure 13).

Figure 12: Call Outcome

Directed to...

Nowhere 33%
Somewhere 67%
Long Term Care 35%
Other services 32%
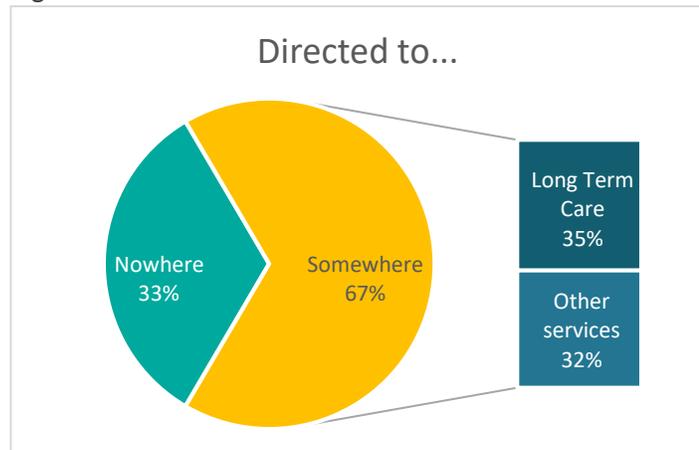
Base=Those who remember calling ADRC of Dane County since October 2020 and answering (n=139)
Q13. Were you directed to other places for service or more information?

Those who were directed to other services (not long-term care) may receive a follow-up call from ADRC if their case is complex, more than one-half (56%) said they did received this call (see Figure 13).

Figure 13: After Call Outcomes
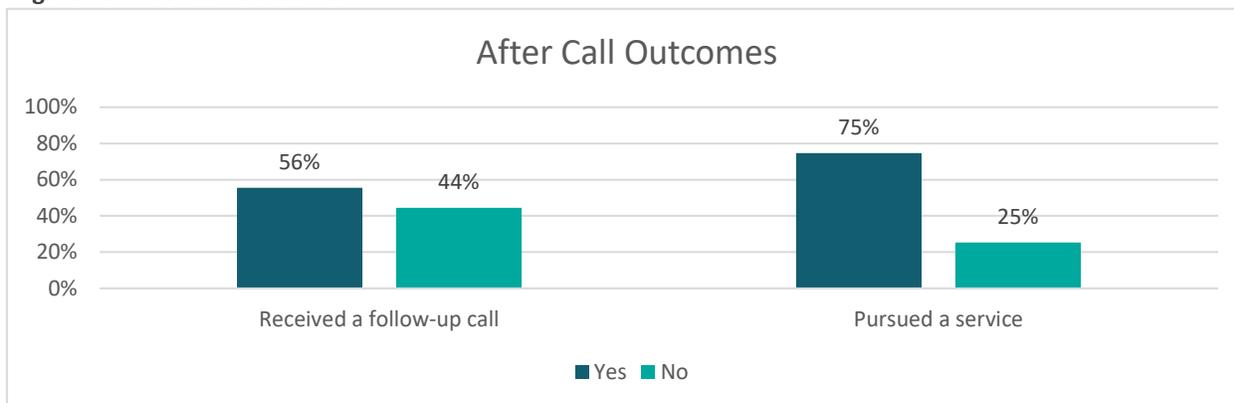
Base=Those who remember calling ADRC of Dane County since October 2020, were directed to a service other than Long Term Care and answering (n=36)
Q17. Did you receive a follow-up call from the ADRC of Dane County after your initial phone call or a Zoom call?

Base=Those who remember calling ADRC of Dane County since October 2020, were directed to a service or long-term care and answering (n=87)
Q18. As a result of talking to ADRC staff, did you pursue any services?

Table 12: Statistical Testing After Call Outcomes

% Yes	White (n=26-63)**	POC* (n=5-16)**	Male (n=11-28)**	Female (n=24-57)**	*Called for* Self (n=21-46)**	*Called for* Someone else (n=15-40)**
Received a follow-up call	62%	60%	73%	50%	57%	53%
Pursued a service	71%	94%	82%	72%	70%	80%

Race and gender are assigned by values in sample. Called for is assigned by answer to Q3.
*Person of Color (anyone with a known identity that is not White, non-Hispanic)
**Caution: Small base
Two-tailed z-test of difference of proportions at the 95% confidence level was performed using SPSS

Forty-six (33%) were not directed to long-term care or other places for service or more information (see Figure 12). Although direct follow-up questions were not asked, open-ended comments suggest this is because they were ineligible for services, their eligibility was still being determined, or they were looking for services that do not exist.

- "Honestly, this is a relatively new situation for me, so I really don't know what is lacking other than the speed of the process to determine eligibility."
- "I called because my new insurance doesn't cover the donut hole for prescriptions. I'm far from being wealthy but don't qualify for any of the programs. I feel I am being penalized for having been responsible – working and saving. Now I am faced with very expensive ($2,000) drugs. Other seniors only pay $5 to $45."
- "I was calling to see if ADRC had anyone who could help me with some tax questions. I was told no, so I got help elsewhere."
- "Need more help with housing for people with autism or other disabilities. Need to know who and where to call to get help with housing (not generic printout sheet)."

Results - Needs

Everyone was asked to identify what services they need; those who remembered their call with ADRC were also asked to mark if they got information about this service from the ADRC. This creates a gap analysis between services needed and information shared.

Of the 148 people who remember their call with the ADRC, 57 (39%) answered both what they needed and the information they received from the ADRC. With more than one-half not answering both questions this could indicate (1) the question set up was confusing and needs to be refined or (2) survey fatigue had set in as the 10 attribute matrix question appeared on the last page of the survey.

For those that marked at least one attribute as "needed" and at least one attribute as "got information from the ADRC," their need versus information received was derived into one of four categories

- Needed service & got information - marked the attribute as both a need and got information
- Needed service but did not get information – marked attribute as only a need
- Got information but did not need service – marked attribute as only getting information
- Do not need and did not get information – attribute left blank for need and getting information

If we just looked at the percent marking the attribute as a need and the percent marking the attribute as getting information from ADRC, it looks like information going out is meeting the needs (see Table 13). But by looking at the data person-by-person, we see between 7% and 19% of people are not getting information for the services they need. *The most common gaps in service need and information given is with "support for caregivers" and "help with a disability."*

Table 13: Gap Analysis

Attribute	Responses	Need Service	Got Information
Support for caregivers	19% / 30% / 7% / 44%	49%	37%
How I can stay in my home	9% / 23% / 12% / 56%	32%	35%
Long Term Care options	9% / 35% / 9% / 47%	44%	44%
Help finding housing with services	9% / 16% / 9% / 67%	25%	25%
Help with a disability	18% / 32% / 9% / 42%	49%	40%
How to get in-home personal care	11% / 18% / 12% / 60%	28%	30%
Help paying for services	12% / 32% / 12% / 44%	44%	44%

Table 15: Gap Analysis (continued)

Attribute	Responses	Need Service	Got Information
Talk through worries about memory loss	7% 9% 7% 77%	16%	16%
Resources for getting food	7% 9% 7% 77%	16%	16%
Help applying for public benefits such as Medicare, Medicaid, and FoodShare	12% 39% 7% 42%	51%	46%
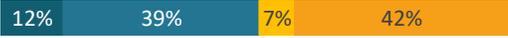
■ Needed service but did not get information ■ Needed service & got information
■ Do not need but got information ■ Do not need & did not get information

Base=Those who remember calling ADRC of Dane County since October 2020 and marked a need and information given (n=57)
Q16. For each row, please check if this is a service you need and if you received information about this service from ADRC of Dane County

The most reliable data from this question is from those who did not or do not remember calling the ADRC since October 2020. They were simply asked to mark their needs, and more than four in five selected at least one need (83%). All of the services are needed, with 29%-48% selecting each attribute (see Figure 14). The services "help paying for services," "help with a disability," "resources for getting food," "support for caregivers," and "help applying for public benefits such as Medicare, Medicaid, and FoodShare" were selected slightly more frequently than the other services.

Figure 14: Service Needs of Those Who Do Not Remember Calling the ADRC

Services Needed
Those who don't recall calling ADRC

Service	Percent
Support for caregivers	41%
How I can stay in my home	33%
Long Term Care options	38%
Help finding housing with services	36%
Help with a disability	45%
How to get in-home personal care	33%
Help paying for services	48%
Talk through worries about memory loss	29%
Resources for getting food	43%
Help applying for public health benefits such as Medicare, Medicaid, and FoodShare	41%

Base=Those who don't remember calling ADRC of Dane County since October 2020 and marked a need (n=35)*
*Caution: small base
Q16. For each row, please check if this is a service you need and if you received information about this service from ADRC of Dane County

Future and ongoing needs

Respondents were given the opportunity to explain in their own words what future or ongoing needs of aging adults or adults with disabilities are not currently being met in Dane County. This question focused on Dane Count overall and not just the ADRC of Dane County. Results may or may not be within the control of the ADRC of Dane County.

Eighty (42%) shared their opinions. Themes and examples of statements fitting in the theme are shown in this report – note this is not an exhaustive list of all comments.

Just more than one-third (34%) of those eighty responses focused on their *needs at home*. Themes that emerged include

- needing more and affordable housing/specialized care as well as housing adapted for the physical needs of older adults and people with disabilities
    - o "More housing for low income adults with disabilities. Mainly kitchen/bathroom needs."
    - o "Having trouble doing stairs. Support bars in bathroom."
    - o "Assisted living seems to be at a premium – more would be helpful."
- wanting a variety of in-home caregivers – from personal care professionals to someone to help with chores and provide company
    - o "Need more high quality in home providers who have decent pay and benefits."
    - o "Keeping seniors in their own home with 24x7 (if needed) caregiver options. […] it is difficult to find reliable, cost effective services. Live in facilities do not have enough help and are so costly!!"
    - o "To find someone dependable to help with lawn work and shoveling in the winter. […] Can't see real well."

One-fourth (25%) mentioned *specific services outside of in-home services* that are needed

- Transportation
    - o "Transportation for elderly in smaller towns, villages in Dane County."
    - o "More affordable transportation."
    - o "Bus service to Fitchburg."
- Socialization
    - o "Social skills for adults with autism and dating skills. […] Dating coaching is needed."
    - o "Social activities."
- Respite
    - o "Can NOT find workers for respite!"
    - o "Longer respite breaks for families doing caregiving. Hard to find respite for a weekend. Never get to take a real vacation without worry."
- Other: SSI state benefits for dependents, finding trustworthy guardians, help with taxes, emergency services, first responders, seniors falling, finance, and church

Fewer (21%) mentioned *comments that could directly improve services provided in Dane County*

- Timeliness and expanded eligibility
    - o "Having a financial limit to get help."
    - o "I was never contacted for five months after they made an initial visit. Heard nothing after that."
    - o "I was finally told the only way to get unenrolled from MyChoice Wisconsin was through ADRC. For months I was charged for services I never received. I was pushed back and forth by two agencies. No one in these agencies said anything about ADRC. Found you through New Bridge."

- Better coordination between services
  - "As a [older] sole caretaker for my wife I need actual help in caring for my wife, not a list of referrals."
  - "Attempting to seek help is almost impossible to get. It is a continuous battle of call this place, call the next place and on and on. You qualify but no help available. You fall through the cracks with requirements and get kicked down the road."
  - "Active, easy referrals to ADRC from other government agencies."

Ten (13%) gave praise to the ADRC

- "When retirement time and health issues came about, I contacted ADRC. The young woman who helped me was excellent!"
- "[Client] died [date]. Form completed by [name], her father and personal representative. ADRC & IRIS were great for [client]!"
- "Unfortunately most people don't have a constant person helping them like I do for my wife. We have also been fortunate enough to be signed up with CCS and utilize a service facilitator."
- "They have helped me every time I have called."
- "[…] I think Dane Co ADRC, ABC for Health are wonderful […]"
- "I worked with [ADRC staff member] from [date] to present. She's top in all categories."
- "Due to virus have not been able to visit ADRC. I know I will be calling or visiting in the future. Great service."
- "Not sure, only contacted twice. First time the only answer was drive thru COVID vaccination. 2nd call lady set up for my husband who is homebound to get COVID vaccination at home for which I am truly grateful. I called several places trying to find out about getting my husband shots @ home! No one seemed to be aware of this service."
- "They do their best."
- "The information they gave/mailed to me was above and beyond the help I needed. TY."

Less mentioned future and ongoing needs around medical expenses (8%) and access to food (4%).

Biggest challenges to staying in the home

The last survey question asked everyone to describe in their own words the biggest challenges facing aging adults or adult with disabilities who want to stay in their own homes. Again, responses may or may not be within the control of ADRC.

More than one-half (56%) named at least one challenge, *most often the challenge was financial* (25%).

- Some didn't explain beyond saying finances/cost/money/bills
- Others listed paying for housing such as rent, nursing home, or assisted living fees
  - "Help with rental payments."
  - "It just seems sad that in the world we live in you can work your entire life and if you have to go to a nursing home you can lose it all quite fast with the price of nursing homes. I know this has nothing to do with your agency, which is trying to help people but it's not right the nursing homes can charge what they do and get away with it. Thankfully government agencies like yours are trying to help people."
  - "Assisted living housing that is low income."
  - "Paying mortgage and Medicaid co-pay."
- Additional financial strain comes from the affordability of drugs and health insurance, guardianship, co-pays, food, in-home care, and general necessities
  - "I'm not sure personally, but the cost for in home care is prohibitive for many people, which is unfortunate because familiar surroundings with loved ones improves quality of life."
  - "Affordable medical care and drugs."
  - "Inexpensive health insurance when you have too much equity."

Housing, in-home care, and finding caregivers are concerns to staying in the home (44%) that were also mentioned as future and ongoing needs that are not being met by Dane County.

- Safe, appropriate housing can be difficult to find/afford and waitlists are long– be it housing with services, low income housing, or housing designed for those with physical limitations
    - "I need help with housing vouchers/community resources. Was ignored."
    - "They don't want to go to a nursing home – they want to remain independent. Having living options in one living community that provide the continuum of care may make a move more palatable. Please consider housing communities that go from independent to ALF to NH care. Maybe folks would be open if they could start out being relatively independent. Thanks!"
    - "I'm a renter. But, it's difficult during winter to manage steps to my entrance of apartment. Ice is worse. No laundry facilities; have to go out to laundromat. Becoming hard to carry foods."
    - "Finding affordable living options. The waiting list for places like 1 W Wolfe St are long and slow."
- It is difficult to find reliable caregivers – professional or family
    - "I worry about what will happen to my son when I can't take care of him anymore."
    - "Cost and finding the right fit of caregivers for a loved one."
    - "Finding services so that [family with disabilities] will be okay."
    - "Home health care when family is not near adult."
    - "Getting help for the caregiver."
- They also need help around the home with chores, daily tasks, and getting to appointments or shopping centers
    - "Cooking or cleaning, item repair."
    - "I am losing my eye sight. Getting to doctors' appointments. Assistance in minor cleaning."
    - "Need someone to help clean my garage and yard work and shoveling in the winter. Rides to doctor appointments and shopping for groceries."
    - "Getting dressed & undressed for me."
    - "People to come in and help them cook, clean, and shower/bathe."

One in ten (10%) mentioned health problems that are threatening their ability to stay independent.
Specifically, they mentioned vision loss, memory issues, hearing problems, lack of balance, restricted mobility, and hernias.

Appendix A - Survey Instrument

Aging and Disability Resource Center of Dane County (ADRC) 2021 Improvement

DANE COUNTY EXECUTIVE – Joe Parisi
DEPARTMENT DIRECTOR – Shawn Tessmann
DIVISION ADMINISTRATOR – Todd Campbell
ADRC MANAGER – Jennifer Fischer

Thank you for filling out this optional survey for the Aging and Disability Resource Center (ADRC) of Dane County. Your responses are confidential. Your answers will not impact your services in any way. Your answers help ADRC of Dane County know how well our service is meeting your needs and how we could improve services for adults with disabilities, older adults, and their caretakers.

Please mail back your completed survey in the postage paid envelope no later than June 30, 2021.

Favor de llamar al (608) 240-7462 para pedir copia de esta encuesta en Español.

Thov hu rau (608) 240-7462 yog koj xav tau daim ntawv soj ntsuam no txhais lus Hmoob.

Q1. Since October 2020, have you called the ADRC of Dane County?

- ☐¹ Yes
- ☐² No → GO TO Q16
- ☐⁹ Do not remember → GO TO Q16

Q2. Overall, how satisfied are you with your contact with the ADRC of Dane County?

- ☐¹ Very satisfied
- ☐² Satisfied
- ☐³ Neutral
- ☐⁴ Dissatisfied
- ☐⁵ Very dissatisfied

Q3. When you contacted the ADRC of Dane County, were you seeking services for yourself or someone in your care?

- ☐¹ Myself
- ☐² Someone in my care

Q4. Did the ADRC of Dane County staff you talked to <u>offer</u> to set up a Zoom meeting or video call (this may also be called a "virtual home visit")?

- □¹ Yes → Did you set up a Zoom/video call? □¹ Yes □² No
- □² No → Would you have wanted a Zoom/video call? □¹ Yes □² No
- □⁹ Do not remember

Q5. How long did you wait for a Zoom/video call?

- □¹ Did not set up or was not offered a Zoom/video call
- □² 1-3 days
- □³ 4-6 days
- □⁴ 7-10 days
- □⁵ More than 10 days
- □⁹ Do not remember

Q6. Overall, how satisfied are you with the amount of time you waited to speak with ADRC of Dane County staff about your needs?

- □¹ Very satisfied
- □² Satisfied
- □³ Neutral
- □⁴ Dissatisfied
- □⁵ Very dissatisfied

Q7. Did the person you talked with…?	Definitely yes	Yes	No	Definitely no
Listen carefully to what you wanted	□¹	□²	□³	□⁴
Understand what you wanted	□¹	□²	□³	□⁴
Explain things in a way you could understand	□¹	□²	□³	□⁴

Q8. Was the person you talked with…?	Definitely yes	Yes	No	Definitely no
Courteous and respectful	□¹	□²	□³	□⁴
Knowledgeable about the services and information you asked about	□¹	□²	□³	□⁴

Q9. Overall, was the information you received…?	Definitely yes	Yes	No	Definitely no
Clear	□¹	□²	□³	□⁴
Helpful	□¹	□²	□³	□⁴

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Q10. Were you directed to other places for service or more information?

    ☐¹   Yes, including Long Term Care   →   CONTINUE
    ☐²   Yes, but not to Long Term Care   →   ANSWER Q14 AND Q15
    ☐³   No   →   GO TO Q16

Q11. Which, if any, Long Term Care program are you (or the person you care for) enrolled in?
Check only one.

    ☐⁰¹   Not enrolled →   GO TO Q15
    ☐⁰²   Community Care – Family Care
    ☐⁰³   *i-Care* – Partnership
    ☐⁰⁴   IRIS - Connections
    ☐⁰⁵   IRIS – First Person
    ☐⁰⁶   IRIS – Progressive Community Services (PCS)
    ☐⁰⁷   IRIS – TMG
    ☐⁰⁸   My Choice Wisconsin – Family Care
    ☐⁰⁹   My Choice Wisconsin – Partnership
    ☐¹⁰   Enrolled, but not sure which program

Q12. How satisfied are you with the Long Term Care program?

    ☐¹   Very satisfied
    ☐²   Satisfied
    ☐³   Neutral
    ☐⁴   Dissatisfied
    ☐⁵   Very dissatisfied

Q13. What can the Long Term Care program do better?
Explain in the box then GO TO Q15.

Q14. Did you receive a follow-up call from the ADRC of Dane County after your initial phone call or Zoom/video call?

    ☐¹   Yes
    ☐²   No

Q15. As a result of talking to ADRC of Dane County staff, did you pursue any services?

    ☐¹   Yes
    ☐²   No

Q16. For each row, please check if this is a service you need and if you received information about this service from ADRC of Dane County.

	Everyone answer: Need this service	Answer if called ADRC: Got information from ADRC
Support for caregivers	☐ 01	☐ 01
How I can stay in my home	☐ 02	☐ 02
Long Term Care options	☐ 03	☐ 03
Help finding housing with services	☐ 04	☐ 04
Help with a disability	☐ 05	☐ 05
How to get in-home personal care	☐ 06	☐ 06
Help paying for services	☐ 07	☐ 07
Talk through worries about memory loss	☐ 08	☐ 08
Resources for getting food	☐ 09	☐ 09
Help applying for public benefits such as Medicare, Medicaid, and FoodShare	☐ 10	☐ 10

Q17. What future or ongoing needs of aging adults or adults with disabilities are not currently being met in Dane County?

Q18. What are some of the biggest challenges facing aging adults or adults with disabilities who want to stay in their own home?

THANK YOU FOR COMPLETING THIS SURVEY.
Please return it in the postage paid envelope to:
Dane County Department of Human Services
1202 Northport Drive/4th FL
Madison, WI 53704

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Appendix B – Survey Trustworthiness

The American Association for Public Opinion (AAPOR) states the response rate "has historically been central to survey research in the United States because of the assumption that the larger the proportion of participating sample units, the more accurate the survey estimates."[5] The same article goes on to say

- "Largely due to refusals, responses rates across all modes of survey administration have declined."
- "Results that show the least bias have turned out, in some cases, to come from surveys with less than optimal response rates."
- "Experimental comparisons have also revealed few significant differences between estimates from surveys with low response rates and short field periods and surveys with high response rates and long field periods."

This tells us a high response rate does not ensure survey quality and seeing a dip in response rate from 2014 to 2021 is expected. So, we should not discard the results of this survey based solely on a lower response rate.

Notably, although the response rate for 2021 (17.8%) is lower than in 2014 (24%), the margin of error is almost equal for the two surveys. We know everyone who is asked to complete a survey will not answer, creating non-response bias. While we cannot completely avoid non-response bias we are hopeful those that did respond are representative *enough*. That's where margin of error and comparing survey respondents to the population are useful tools in assessing the trustworthiness of survey results.

> "The goal of sampling strategies in survey research is to obtain a sufficient sample that is representative of the population of interest. It is often not feasible to collect data from an entire population of interest (e.g., all individuals with lung cancer); therefore a subset of the population or sample is used to estimate the population response (e.g., individuals with lung cancer currently receiving treatment). […] In order to accurately draw conclusions about the population, the sample must include individuals with characteristics similar to the population."[6]

When we make important decisions we want to be sure in those decisions. The more important the decision or the larger the impact a decision will have, the more sure we want to be. In scientific testing they repeat experiments to prove they get the same results time and time again. This provides confidence in the conclusions. However, the results of the repeated experiments are not likely to be exactly the same every time, rather they are close enough to no be considered different. Like with scientific testing we want to be sure of our survey results. But repeating surveys several times is not

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[5] "Response Rates – An Overview," American Association for Public Opinion, accessed June 28, 2021, https://www.aapor.org/Education-Resources/For-Researchers/Poll-Survey-FAQ/Response-Rates-An-Overview.aspx.
[6] Julie Ponto. "Understanding and Evaluating Survey Research," *Journal of the Advanced Practitioner in Oncology* 6, no. 2 (Mar-Apr 2015): 168-171, Accessed June 29, 2021, https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4601897/.

feasible, so we must determine how much variation we can accept. This is called the **margin of error**. There is no hard and fast rule for a desirable margin of error, but many people accept surveys with margins of error be between 4% and 10%[7].

- Pollfish (a hybrid-service survey platform) states "an acceptable margin of error used by most survey researches typically falls between 4% and 8% at the 95% confidence level."[8]
- DataStar (a market research firm) says "often, an 'acceptable' margin of error falls between 5% and 10% at the 95% confidence level."[9]
- National Institute of Health's paper *Sample Size Calculations for the Modular Grant Application Process Outcome Evaluation Study* states "the margin of error in social science research generally ranges from 3% to 7% and is closely related to sample size."[10]

The maximum margin of error for this survey is ±6.45% (see Table 14) and is within these guidelines, giving reason to trust the survey results.

To the right (see Figure 15) is an example of how to interpret margin of error for the 2021 survey results. If 50% of respondents gave a specific response to a question (such as "satisfied" with the services they received) then it is likely between 43.6% and 56.5% of those who called ADRC (the population) are also "satisfied" with the service they received.

Figure 15: Interpreting Margin of Error
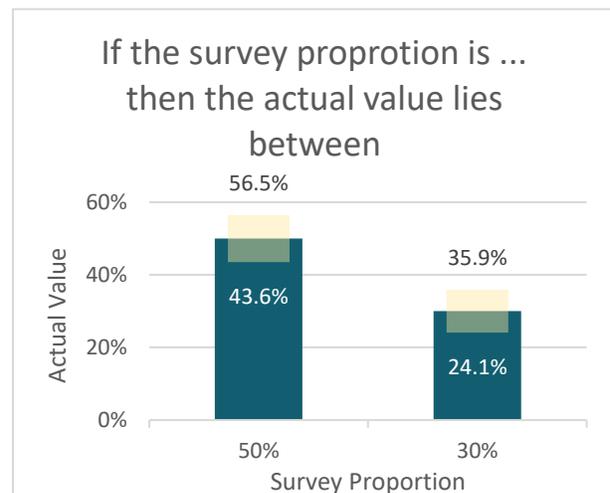
Table 14: Survey Margin of Error

	If the survey proportion is ___ then we can be confident the actual value lies between…				
	10%/90%	20%/80%	30%/70%	40%/60%	50%
2021	±3.87%	±5.16%	±5.91%	±6.32%	±6.45%
2014	±3.45%	±4.60%	±5.27%	±5.63%	±5.75%

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[7] Although there is no one acceptable margin of error, the surveying industry standard is to calculate margin of error based on the 95% confidence level. "Margin of error calculator," SurveyMonkey, accessed June 30, 2021, https://www.surveymonkey.com/mp/margin-of-error-calculator/.

[8] "Margin of Error & Sample Size Calculator," Pollfish, accessed June 30, 2021, https://www.pollfish.com/margin-of-error-calculator/.

[9] "Frequently Asked Questions (FAQs) - StarStat," DataStar, accessed June 30, 2021, http://www.surveystar.com/starstat_faqs.htm.

[10] "Sample Size Calculations for the Modular Grant Application Process Outcome Evaluation Study," NIH, accessed August 8, 2021, https://grants.nih.gov/grants/funding/modular/eval/sample_mgap.doc#:~:text=The%20margin%20of%20error%20in,as%20the%20sample%20size%20increases.&text=Common%20confidence%20levels%20in%20social,closely%20related%20to%20sample%20size.

The last thing to check when evaluating the trustworthiness of a survey is that those responding to the survey have similar characteristics to the population (see Table 15). Statistically significant differences[11] in respondents from the population and eligible records are shown in bold, orange font. Differences in the eligible records from the population have a grey background.

Table 15: Comparison to Survey Respondents

Attribute	Population (n=1,663)	Eligible Records (n=1,065)	Respondents (n=190)
Gender			
Male	34%	35%	29%
Female	**61%**	64%	70%
Unknown	**6%**	1%	1%
Age			
17 – 21	4%	5%	2%
22 – 59	24%	**30%**	21%
60 – 99	**35%**	**44%**	54%
100 – 150	0%	0%	0%
Unknown	**37%**	22%	23%
Reason for Call ("Outcome") – Multiple Reponses Accepted per Record			
Information & Assistance	60%	63%	59%
Options Counseling	4%	4%	5%
Enrollment Counseling	**6%**	5%	2%
Disenrollment Counseling	2%	1%	1%
Other	32%	30%	34%
Caller Challenges ("Disability") – Multiple Responses Accepted per Record			
Alzheimer's	7%	5%	6%
Developmental or Intellectual Disability	**18%**	16%	12%
Elderly	**50%**	**48%**	59%
Mental Health	19%	20%	17%
Physical Disability	33%	36%	31%
Substance Use	2%	2%	2%
Unknown	2%	2%	1%
Race/Ethnicity			
Non-white	**22%**	**22%**	15%
White	**68%**	68%	75%
Unknown	10%	10%	10%

The age/elderly status and racial/ethnic distribution of the eligible records and survey respondents are significantly different. Survey respondents are older than the eligible records and there are fewer non-white survey respondents than in the eligible records – common results of survey research. When comparing survey respondents to the population, the number of statistically significant differences increases. In fact, there is at least one characteristic in each group that is significantly different between respondents and the population. In addition to mirroring the age and racial/ethnic differences,

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[11] Two-tailed Z-test of proportions was used to identify significant differences in the survey population compared to completers. The interactive tool https://www.socscistatistics.com/tests/ztest/default2.aspx was used to perform the calculations at the 95% confidence level.

respondents differ from the population by gender. More females responded to the survey than are in the population, this is another common occurrence in survey research. So although each group has at least one characteristic that is significantly different from the population to survey respondents, we rate respondent alignment as "could be better" and not "concerning" because many of these differences are expected. We did not have a large enough population to over sample to correct for these expected differences as we needed to send surveys to all eligible records in order to achieve an acceptable margin of error.

Overall, the trustworthiness measures lean closest to "could be better" (see Figure 16). So although our survey results are not optimal (all "good"), it is promising that none of these measures of trustworthiness are "concerning." Additionally, the ways in which survey respondents misalign with the population are expected. Therefore, the results of this survey can be trusted, but should not be the sole source of information when making decisions. However, the survey can be one factor in decision making.

Figure 16: Trustworthiness Measures

17.8% response rate	±6.45% margin of error	respondent alignment

| Good | Could be better | Concerning |

Measures were taken to improve the representation of the population:

- It was planned that analysis would be done with surveys returned by July 9, 2021 but this date was extended to July 21, 2021 to accommodate late arriving surveys
- A phone line was designated to allow Spanish-speakers and Hmong-speakers to request a survey in their preferred language. This line was never used but the offer was extended and explained in those languages.
    - Future surveys should consider ways to proactively identify Spanish and Hmong speakers so that the survey can be mailed to them in their preferred language instead of having to request the survey in their preferred language.
- NCOA (the National Change of Address) database was used to decrease undeliverable mail and try to reach as much as the population by mail as possible.