Supportive Services for Veteran Families (SSVF) Webinar Series

SSVF Veteran Experience thru:
Unannounced Standardized Veterans (USV) Program and
Participant Satisfaction Survey 2018 Report

January 10, 2019

Link to Audio Recording
Presenters

Saul Weiner, MD, Deputy Director, VHA Center of Innovation for Complex Chronic Healthcare, and Professor at the University of Illinois at Chicago.

Amy Binns-Calvey, Research Specialist, VHA Center of Innovation for Complex Chronic Healthcare

Daniel Goscicki, M Davis, Survey Programmer and Research Assistant

Rico Aiello, SSVF Project Coordinator

Katie Morrissett, LCSW, SSVF Regional Coordinator
Webinar Format

- Webinar will last approximately 1.5 hours
- Participants’ phone connections are “muted” due to the high number of callers
- Questions can also be submitted anytime to SSVF@va.gov
QUESTIONS…

Submit questions and comments via the Questions panel
Unannounced Standardized Veterans: A quality improvement effort to disseminate best practices across Supportive Services for Veteran Families (SSVF).

Saul Weiner MD, Deputy Director
VHA Center of Innovation for Complex Chronic Healthcare

Alan Schwartz, PhD,
University of Illinois at Chicago

Amy Binns-Calvey, BA VHA Center of Innovation for Complex Chronic Healthcare

January 2019
• Mystery Shoppers are widely employed in retail, service and hospitality industries to provide “ground truth” about the customer experience.

• VHA has pioneered research adapting the “mystery shopper” concept to highly structured methods for assessing how health care is actually delivered at the point of service by introducing the “unannounced standardized Veteran” (USV) which combines the “mystery shopper” and standardized patient. The USV is an actor trained to consistently adhere to a specific script while seeking a pre-identified set of services at multiple sites.

• The USV collects the same data at each site and documents what they observed using standardized measures of access, ICARE values, and process (e.g. number of steps, length of time, and need for assertiveness) while attempting to obtain services as would actual Veterans.

• With assistance from the Health Eligibility Center and the Office of Informatics and Analytics, the identities portrayed are entered into VHA information systems at the start of each project to assure authenticity and then moved out of the production environment to prevent corruption of VA data.
Implementation

- USVs visited 63 SSVFs from February to July of 2018. They also visited all 31 Community Resource and Referral Sites (CRRCs). CRRC sites were also visited in 2017.

- Areas assessed by the USV project included customer satisfaction and streamlined access to VA services in alignment with the VA mission and ICARE values.

- Upon completion of all USV site visits, the results were consolidated into a report to share amongst the SSVF, CRRC and Homeless Program Office (HPO) leadership to ensure more consistent implementation of identified best practices. SSVF leadership will work with select individual SSVFs around specific site specific opportunities for improvements where identified.
Three Cases

**Case 1:** Male, Caucasian, OEF Veteran with PTSD

**Case 2:** Female, Caucasian, Desert Storm Veteran with High Blood Pressure

**Case 3:** Male, African American, Vietnam Veteran with Alcoholism
ACCESS Items

- Were you provided with housing options that meet your needs?
- Were you provided with food?
- Were you provided with appropriate income counseling (employment, education, job-training, VA Benefits, SSI/SSDI)?
- Did you receive Post Traumatic Stress Syndrome referral to a primary care or mental health provider? (USV #1 only)
- Did you receive information about accessing healthcare for high blood pressure/pre-diabetes? (USV #2 only)
- Did you receive substance use disorder referral or assistance for your alcoholism? (USV #3 only)
- Did you receive services without having to go somewhere else first? (i.e. local VA Medical Center)
- Were you able to access services without having to be very assertive?
- Were you provided transportation options to access some or all of the services?
- Did you receive a follow-up phone call or text message?
- Upon showing your VA ID card, were you able to access services without a DD214?
## Access Items: Scoring Rubric

Example: Were you provided with housing options that meet your needs?

<table>
<thead>
<tr>
<th>Response to USV Need</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Info Provided:</td>
<td>0</td>
</tr>
<tr>
<td><strong>General Information only</strong>. No specific person’s name and contact information provided (email, phone, and/or address). You didn’t access service,</td>
<td>25</td>
</tr>
<tr>
<td><strong>Cold Hand-off</strong>. Given information, along with a specific name and their direct email, phone and/or address who represents the service. You didn’t access service.</td>
<td>50</td>
</tr>
<tr>
<td><strong>Warm Hand-off</strong>. Given information, and a direct connection was made with someone on your behalf – on the phone, email, or in-person. You didn’t access service.</td>
<td>75</td>
</tr>
<tr>
<td><strong>Accessed Service</strong> (e.g.: Shelter bed confirmed, provided food, and offered immediate primary or mental healthcare)</td>
<td>100</td>
</tr>
</tbody>
</table>
Please rate how the staff at the Community Resource and Referral Center met the following objectives:

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Integrity</strong> – Did the staff act with high moral principles? Did they treat you in a professional manner? Did they maintain your trust and confidence?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Commitment</strong> – Did the staff work diligently to serve you? Were they organized? Did they appear to do their assigned job based on compliance or centered around your satisfaction as a customer?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Advocacy</strong> – Did the staff identify your stated needs, consider them and advance your interests?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Respect</strong> – Did the staff treat you with dignity and respect by listening to your story and calling you by your name?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Excellence</strong> – Did the staff strive for your satisfaction? Were they willing to admit mistakes and work toward correcting them?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Scoring Process and Time

**Process:** The *fewer steps*, the more points

**Time:** The *less time*, the more points

<table>
<thead>
<tr>
<th>Process Place a “1” if the step occurred*</th>
<th>Unique Step Description</th>
<th>Time Spent in min.</th>
<th>Time Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Sign in with registrar</td>
<td>5</td>
<td>1-5 = 7pts.</td>
</tr>
<tr>
<td>1</td>
<td>Waited in waiting room</td>
<td>120</td>
<td>6-15 = 6 pts.</td>
</tr>
<tr>
<td>1</td>
<td>Interview with intake counselor</td>
<td>30</td>
<td>16-35 = 5 pts.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>36-59 = 4 pts.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>60-89 = 3 pts.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>90-120 = 2 pts.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>&gt;120 = 1</td>
</tr>
</tbody>
</table>

*1-5 steps = 15 pts.; 6-10 steps = 10 pts.; 11-15 steps = 4 pts.; 16–29 steps = 3 pts.; 30+ = 1 pts.
USVs score their visits: Access+ICARE+Process+Time

<table>
<thead>
<tr>
<th>Site</th>
<th>Case</th>
<th>ACCESS score</th>
<th>ICARE score</th>
<th>Process Steps</th>
<th>Time Spent</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>All SSVF</td>
<td>All</td>
<td>164.5</td>
<td>32.7</td>
<td>14.2</td>
<td>20.8</td>
<td>232.1</td>
</tr>
<tr>
<td>All CRRC</td>
<td>All</td>
<td>250.0</td>
<td>37.1</td>
<td>12.5</td>
<td>31.4</td>
<td>331.0</td>
</tr>
</tbody>
</table>
## Top 3 & Bottom 3: Performance

<table>
<thead>
<tr>
<th>Top Scores</th>
<th>SSVF</th>
<th>CRRC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Top 1</td>
<td>602</td>
<td>517</td>
</tr>
<tr>
<td>Top 2</td>
<td>521</td>
<td>516</td>
</tr>
<tr>
<td>Top 3</td>
<td>510</td>
<td>514</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Bottom Scores</th>
<th>SSVF</th>
<th>CRRC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bottom 1</td>
<td>15</td>
<td>46</td>
</tr>
<tr>
<td>Bottom 2</td>
<td>38</td>
<td>49</td>
</tr>
<tr>
<td>Bottom 3</td>
<td>47</td>
<td>81</td>
</tr>
</tbody>
</table>

Average Score: **264 (331 for CRRC, 232 for SSVF)**
Cases aligned for comparison

Case 1: Male, Caucasian, OEF Veteran with PTSD
Case 2: Female, Caucasian, Desert Storm Veteran with High Blood Pressure
Case 3: Male, African American, Vietnam Veteran with Alcoholism
SSVF and CRRC aligned for comparison

Case 1: Male, Caucasian, OEF Veteran with PTSD
Case 2: Female, Caucasian, Desert Storm Veteran with High Blood Pressure
Case 3: Male, African American, Vietnam Veteran with Alcoholism
## Intake Process by Site: Accessing Services at SSVF and CRRC

<table>
<thead>
<tr>
<th>Site</th>
<th># of Sites</th>
<th>Received care without going somewhere else</th>
<th>Accessed care without being assertive</th>
<th>Provided transportation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>All (SSVF)</strong></td>
<td>64</td>
<td>41%</td>
<td>42%</td>
<td>25%</td>
</tr>
<tr>
<td><strong>All (CRRC)</strong></td>
<td>31</td>
<td>58%</td>
<td>68%</td>
<td>55%</td>
</tr>
</tbody>
</table>
## Intake Process by Site: Accessing Services at SSVF and CRRC

<table>
<thead>
<tr>
<th>Case</th>
<th>Site</th>
<th>n</th>
<th>Received care without going somewhere else</th>
<th>Accessed care without being assertive</th>
<th>Provided transportation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case 1</td>
<td>SSVF</td>
<td>21</td>
<td>48%</td>
<td>43%</td>
<td>19%</td>
</tr>
<tr>
<td>Case 2</td>
<td>SSVF</td>
<td>28</td>
<td>36%</td>
<td>43%</td>
<td>32%</td>
</tr>
<tr>
<td>Case 3</td>
<td>SSVF</td>
<td>15</td>
<td>40%</td>
<td>40%</td>
<td>20%</td>
</tr>
<tr>
<td>Case 1</td>
<td>CRRC</td>
<td>10</td>
<td>70%</td>
<td>70%</td>
<td>50%</td>
</tr>
<tr>
<td>Case 2</td>
<td>CRRC</td>
<td>12</td>
<td>58%</td>
<td>92%</td>
<td>83%</td>
</tr>
<tr>
<td>Case 3</td>
<td>CRRC</td>
<td>9</td>
<td>44%</td>
<td>33%</td>
<td>22%</td>
</tr>
</tbody>
</table>
Unable to Access without a DD 214

<table>
<thead>
<tr>
<th>Case 1</th>
<th>SSVF</th>
<th>CRRC</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>9%</td>
<td>11%</td>
</tr>
<tr>
<td>Case 2</td>
<td>24%</td>
<td>8%</td>
</tr>
<tr>
<td>Case 3</td>
<td>44%</td>
<td>57%</td>
</tr>
</tbody>
</table>
Miscellaneous Barriers to Access

- Site said they no longer serve Veterans because they lost funding.
- Veteran “out of jurisdiction” for sleeping in Walmart parking lot just outside of area covered.
- SSVF said they had to send someone to the parking lot he said he was sleeping in to confirm he is homeless.
- USV told they would have been able to get him more services if he had a criminal record.
- USV told he should say he’s been in county for 3 months to qualify.
- Several of these SSVF sites had the wrong address listed on the internet. They also were difficult to confirm on the phone, sometimes the person on the phone would still give the wrong address.
### Follow up: Phone Call or Text Message

<table>
<thead>
<tr>
<th></th>
<th>CRRC</th>
<th>SSVF</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phone Number Requested or assisted with obtaining a no cost Lifeline mobile phone plan</td>
<td>84%</td>
<td>57%</td>
</tr>
<tr>
<td>Follow-up Call or Text Message Received</td>
<td>43%</td>
<td>30%</td>
</tr>
</tbody>
</table>
## Summary of Findings

<table>
<thead>
<tr>
<th>Item</th>
<th>SSVF</th>
<th>CRRC</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Received care without having to go to medical center first</td>
<td>41%</td>
<td>58%</td>
<td></td>
</tr>
<tr>
<td>VA ID sufficient (no DD 214)</td>
<td>76%</td>
<td>79%</td>
<td></td>
</tr>
<tr>
<td>Able to access services without having to be very assertive</td>
<td>42%</td>
<td>68%</td>
<td></td>
</tr>
<tr>
<td>Provided transportation options to access some or all of the services</td>
<td>25%</td>
<td>55%</td>
<td>Not always applicable to SSVF sites, depending on local available services.</td>
</tr>
<tr>
<td>NO info provided for housing options</td>
<td>8%</td>
<td>10%</td>
<td></td>
</tr>
<tr>
<td>NO food provided</td>
<td>39%</td>
<td>19%</td>
<td></td>
</tr>
<tr>
<td>NO income counseling (employment, education, job-training, VA Benefits, SSI/SSDI)</td>
<td>33%</td>
<td>23%</td>
<td></td>
</tr>
<tr>
<td>NO PTSD referral</td>
<td>71%</td>
<td>20%</td>
<td></td>
</tr>
<tr>
<td>NO alcohol abuse referral</td>
<td>47%</td>
<td>44%</td>
<td></td>
</tr>
<tr>
<td>NO follow-up phone call or text message received</td>
<td>70%</td>
<td>57%</td>
<td>Majority of locations collected phone number.</td>
</tr>
</tbody>
</table>
Conclusions and Recommendations

- SSVF sites generally underperformed compared with CRRC sites, but this is partly an “apples” to “oranges” comparison considering their different roles and functions. ICARE scores were lower, however.
- Barriers should be addressed, particularly not accepting the VA ID without a DD 214. Also often required birth certificate, social security card, state ID all in addition to VA-ID
- Follow up phone calls or text messages less common at SSVF sites (about 1/3 the time) compared to the CRRCs (half the time). Also, SSVF sites requested a phone number or assisted the client with obtaining a no cost USAC Lifeline phone plan less frequently (about 1/2 the time) compared to CRRCs (about 2/3rd of the time)
- SSVF sites that asked for a working mobile phone number and followed up with a phone call or text message were also the most accessible. We recommend this best practice be disseminated and reinforced across all SSVF sites, given the importance of follow-up and reminders that phone calls and text messages provide.
Conclusions and Recommendations (Continued)

- Need to address systemic bias. Compared to the CRRC sites, however, the USV portraying an African American Vietnam Veteran had fewer access barriers (i.e. DD 214 requirement, and being sent somewhere else first).
- SSVF sites had a variety of idiosyncratic barriers that can be addressed on a site by site basis, including –
  - Indicating they are no longer funded to serve Veterans,
  - that the Veteran is sleeping outside of their catchment area,
  - that they need to first visit and confirm the location the Veteran reports they are residing at,
  - that they have not experienced homelessness within the county long enough, or
  - that the listed address is not correct.

Note: Despite these hurdles, USVs often experienced a high level of caring and compassion from front line staff. Staff expressed heartfelt concern but were often rule-bound, or misinformed about rules they believed they had to follow.
Draft Bill of Rights

As a Veteran, you have the right…

1. to be treated equally, professionally, and with respect, regardless of your gender, legal history, ability/disability, age, sexuality, race, ethnicity, housing status, or any other protected class

2. to be assessed for available services as a Veteran with your Department of Veterans Affairs (VA) issued photo identification (ID), whether or not you have your DD214.

3. to access or be directly referred to services you need for which you are eligible and that are available within your local community.

4. to have your phone number and general location with a time you can be reached requested so you can receive a text message, phone call, or in-person follow-up within a reasonable time, and to assist you with applying for a subsidized Universal Services Administration Lifeline phone plan, when needed.

Who to contact with concerns: SSVF@va.gov
SSVF Program Office FY19 USV Goals

• Debrief call with each FY18 USV site to include discussion of program strengths as well as action planning for areas identified for improvement

• Draft SSVF “Bill of Rights”

• SSVF ICARE training

• Collect accurate SSVF Grantee contact information
VA SSVF Program Participant Satisfaction Survey: FY18 Year End Report
Overview

- Trends in response rates and overall program satisfaction over a 3-year period
- Satisfaction with staff as a function of overall satisfaction
- Open-end responses – What do veterans want?

Presented By M. Davis and Company, Inc.
Overall Statistics 2016-2018

Number of Grantees

- 2016: 380
- 2017: 367
- 2018: 313

Number of Registrations

- 2016: 19941*
- 2017: 44638
- 2018: 49147

Presented By M. Davis and Company, Inc.
Overall Statistics 2016-2018

Number of Completed Surveys

- 2016: 2766*
- 2017: 5809
- 2018: 10024

Presented By M. Davis and Company, Inc.
Q1 - How would you rate the quality of the services you have received from this supportive services provider?

**Overall Satisfaction 2016-2018**

Presented By M. Davis and Company, Inc.
Q6 - How satisfied are you with the courteousness of the staff person that you initially spoke with when you contacted the provider?

n = 8681

Presented By M. Davis and Company, Inc.
Courteousness of Staff – initially spoke with
vs. Overall Satisfaction

- Red bars show each response to overall satisfaction as a percentage of FY18 respondents who were ‘dissatisfied’ or ‘very dissatisfied’ with courteousness of initial staff.
- Orange bars show each response to overall satisfaction as a percentage of all FY18 respondents.

Presented By M. Davis and Company, Inc.
Courteousness of Staff – initially spoke with vs. Overall Satisfaction

- Green bars show each response to overall satisfaction as a percentage of FY18 respondents who were ‘satisfied’ or ‘very satisfied’ with courteousness of initial staff.
- Orange bars show each response to overall satisfaction as a percentage of all FY18 respondents.

Presented By M. Davis and Company, Inc.
Q7 - How satisfied are you with the courteousness of the staff person that you dealt with most often while you were working with this provider?  

n = 8617

Presented By M. Davis and Company, Inc.
Courteousness of Staff – dealt with most often vs. Overall Satisfaction

Respondents who answered Dissatisfied or Very Dissatisfied to Q7 n = 854
All Respondents n = 10024

- Red bars show each response to overall satisfaction as a percentage of FY18 respondents who were ‘dissatisfied’ or ‘very dissatisfied’ with courteousness of staff dealt with the most
- Orange bars show each response to overall satisfaction as a percentage of all FY18 respondents

Presented By M. Davis and Company, Inc.
Courteousness of Staff – dealt with most often vs. Overall Satisfaction

- Green bars show each response to overall satisfaction as a percentage of FY18 respondents who were ‘satisfied’ or ‘very satisfied’ with courteousness of staff dealt with the most.
- Orange bars show each response to overall satisfaction as a percentage of all FY18 respondents.

Presented By M. Davis and Company, Inc.
Q8 - How satisfied are you with the timeliness of communication with the staff person that you dealt with most often while you were working with this provider?

n = 8626

Presented By M. Davis and Company, Inc.
Timeliness of Communication vs. Overall Satisfaction

- Red bars show each response to overall satisfaction as a percentage of FY18 respondents who were ‘dissatisfied’ or ‘very dissatisfied’ with timeliness of communication.
- Orange bars show each response to overall satisfaction as a percentage of all FY18 respondents.

Presented By M. Davis and Company, Inc.
Timeliness of Communication vs. Overall Satisfaction

Presented By M. Davis and Company, Inc.

- Green bars show each response to overall satisfaction as a percentage of FY18 respondents who were ‘satisfied’ or ‘very satisfied’ with timeliness of communication.
- Orange bars show each response to overall satisfaction as a percentage of all FY18 respondents.
Open Ended Responses - Positive

Q9 - Positive Experiences n = 6727

- Housing
- SSVF System as a Whole
- Speed of Services
- Caseworker or Staff
- Rent Assistance
- Childcare
- Legal
- Transportation
- Financial Planning
- Daily Living
- Healthcare
- Employment
- Healthcare
- Rent Assistance
- Childcare
- Legal
- Transportation
- Financial Planning
- Daily Living
- Employment
- SSVF System as a Whole
- Housing

Presented By M. Davis and Company, Inc.
Open Ended Responses - Negative

Q10 - Negative Experiences n = 3229

- Poor Communication
- Caseworker or Staff
- Poor Communication
- Caseworker or Staff
- Poor Communication
- Caseworker or Staff
- Poor Communication
- Caseworker or Staff

Presented By M. Davis and Company, Inc.
Open Ended Responses - Suggestions

Q11 - Suggestions n = 2876

- Don't change anything and continue the program
- Relationships with Landlords
- Accessibility of Facilities
- Less Paperwork
- More Funding
- Better Staffing
- Better Communication
- Advertising
- Other

Presented By M. Davis and Company, Inc.
QUESTIONS?

- MDAC
  - Please email or call have any questions
    - vassvf@mdavisco.com
    - 215-790-8900 ext 124

- Resources available on SSVF website
  - Webinar slides, copy of survey
    - https://www.va.gov/homeless/ssvf

Presented By M. Davis and Company, Inc.
Supportive Services for Veteran Families

Thank you

Powerpoint Presentation will be posted on http://www.va.gov/homeless/ssvfuniversity.asp

Questions?
Go To: http://www.va.gov/homeless/ssvf.asp
Email: SSVF@va.gov