

2008

**ATLANTA EMA
HIV CLIENT
SATISFACTION SURVEY**

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Prepared for:
Fulton County Government
Metropolitan Atlanta HIV Health Services Planning Council

By:
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Agency Data Collection Sites

- AID Atlanta
- AID Atlanta- Fulton County Health and Wellness
- AID Atlanta - DeKalb County Board of Health
- AID Atlanta - Grady Infectious Disease Program
- AID Atlanta - St. Joseph's Mercy Care Services
- AID Atlanta - Veteran's Administration
- AID Atlanta - Cobb and Douglas Public Health
- AID Atlanta - Infectious Disease Associates/Clayton County Health Department
- AID Gwinnett
- Cobb and Douglas Public Health
- Emory Infectious Disease Clinic at Emory Crawford Long Hospital
- DeKalb County Board of Health
- Fulton County Health and Wellness - Aldredge
- Fulton County Health and Wellness - Adamsville
- Fulton County Health and Wellness - South Fulton
- Fulton County Health and Wellness - College Park
- Grady Infectious Disease Program
- St. Joseph's Mercy Care Services
- Positive Impact
- Positive Impact - AID Gwinnett
- Positive Impact - Our Common Welfare
- Positive Impact - Emory Infectious Disease Clinic at Emory Crawford Long Hospital
- Positive Impact - St. Joseph's Mercy Care Services
- Positive Impact - Cobb and Douglas Public Health
- Open Hand
- Morehouse School of Medicine
- Grady Women's Health

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BACKGROUND

For Fiscal Year 2007, goals for the Atlanta EMA Quality Management Committee included the development and administration of an Atlanta EMA Client Satisfaction Survey. Patient satisfaction is an important measure of quality for service delivery because higher rates of satisfaction can result in important behavioral effects, including the following:

- Retain more stable relationships with providers
- Adhere more faithfully to medical recommendations and treatment
- Keep appointments¹

In 2007-2008, the Quality Management Committee of the Metropolitan Atlanta HIV Services Planning Council collaborated with their Ryan White Part B and D partners, the Georgia Division of Public Health (GDPH) HIV Section and the Atlanta Family Circle Network, respectively, to develop and implement a statewide Ryan White Client Satisfaction Survey.

METHODOLOGY

Planning for the Client Satisfaction Survey began in 2007 during meetings of the Quality Management Committee attended by representatives from Fulton County Government's Ryan White Part A Program, Ryan White funded agencies in the EMA and, GDPH's HIV Division, and the Center for Applied Research and Evaluation Studies (CARES) at SEATEC. The committee based the design and methodology on the 2002 Patient Satisfaction Survey for HIV Ambulatory Care developed by the AIDS Institute at the New York State Department of Health.

The survey consisted of General Questions and eight modules addressing Ambulatory/Outpatient Care, Food/Nutrition Services, Oral Health Care, Case Management, Self Management, Outpatient Mental Health Services, Outpatient Substance Use Treatment, and Peer Counseling Services. The survey was piloted at agencies in Metro Atlanta in August 2007 and Kathy White of Fulton County Government presented results to the Quality Management Committee and the EMA's Part B and D partners. As a result of the pilot and discussions with the EMA Case

¹ New York State Department of Health, AIDS Institute. 2002. Patient Satisfaction Survey for HIV Ambulatory Care (PSS-HIV). http://www.hivguidelines.org/admin/Files/qoc/qi%20res/pss/pss-hiv_091802.pdf (accessed November 10, 2008).

Management Task Force and GDPH, the modules were expanded to include a module for Self Management and questions regarding the AIDS Drug Assistance Program (ADAP). The finalized survey was available in both English and Spanish.

Finalized surveys were programmed using Scantron© Class Climate software provided by the HIV Section at GDPH so that completed surveys could be scanned and analyzed, reducing manual data entry and analysis time. The sampling plan was derived from the AIDS Institute at the New York State Department of Health.² The minimum sample numbers required for each agency by survey module were calculated by CARES and the HIV Section at GDPH based on caseloads as reported by agencies in the 2007 Ryan White Data Report (RDR). Atlanta EMA agency designees were trained how to administer the survey and were provided printed surveys and an agency-specific sampling plan, including weekly targets, on July 8, 2008. Each agency and their satellite locations were assigned unique site numbers. Based on feedback from the training, agencies were also provided instructions for clients and flyers advertising the survey, both in English and in Spanish.

From July 14, 2008 through August 22, 2008, the Client Satisfaction Survey was administered at 27 sites in the Atlanta EMA, including agency satellite locations. Completed surveys were returned to Fulton County Government by August 29, 2008 and were scanned into databases using at GDPH using Scantron© Class Climate software. A total of 4,193 surveys from across the state of Georgia were scanned. GDPH provided Fulton County Government and the Quality Management Committee aggregated reports of the statewide survey results and SPSS data files for each service module in English and in Spanish on September 18, 2008.

² New York State Department of Health, AIDS Institute. 2002. Patient Satisfaction Survey for HIV Ambulatory Care (PSS-HIV), p.11.

REPORTING FORMAT

The document is presented in three sections. A brief discussion of the background and methodology followed the Ryan White client satisfaction survey results for the eight service delivery systems in the Atlanta EMA. The quantitative and qualitative analysis of the client satisfaction data are provided in aggregate by English and Spanish responses for the EMA by service category as follows: General Questions and with modules addressing Ambulatory/Outpatient Care, Food/Nutrition Services, Oral Health Care, Case Management, Self Management, Outpatient Mental Health Services, Outpatient Substance Use Treatment, and Peer Counseling Services. The analysis is also provided in this same manner for the individual twelve agencies as specified by agency site locations. Appendices include the English and Spanish survey instruments and cross tables for each service area and site location.