

# Advocate Support Services, Inc.

## Psychiatric Rehabilitation Program Client Satisfaction Survey

**Survey Data:** Advocate Support Services, Inc. Clients

**Start Date:** 11/15/2022

**Location:** ALL

**End Date:** 01/31/2023

**Client Type:** Psychiatric Rehabilitation Program

**As of Date:** 01/31/2023

**Total Surveys:** 24

**Company Average:** 3.63

### Number of Participants / Average

<b>GENDER: Count / Avg</b>	<b>RACE: Count / Avg</b>	<b>AGE: Count / Avg</b>	<b>TIME IN PROG: Count / Avg</b>
Male: 8 /3.79	African American: 22 /3.64	11 and under: 0 /0.00	< 3 months: 2 /3.57
Female: 16 /3.55	Caucasian: 1 /3.53	12-17: 0 /0.00	3 to 5 months: 1 /4.00
Transgender: 0 /0.00	Hispanic: 0 /0.00	18-21: 0 /0.00	6 to 8 months: 0 /0.00
No Response: 0 /0.00	Asian: 0 /0.00	22-29: 2 /3.85	9 to 11 months: 1 /3.97
	Native American: 0 /0.00	30-39: 3 /3.62	1 to 2 years: 1 /3.75
	Indian: 0 /0.00	40-49: 2 /3.47	> 2 years: 19 /3.60
	Arabic: 0 /0.00	50-59: 8 /3.64	No Response: 0 /0.00
	Other: 1 /3.53	60+: 9 /3.61	
	No Response: 0 /0.00	No Response: 0 /0.00	

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1	2	3	4	5
Strongly Disagree	Disagree	Agree	Strongly Agree	N/A

### Access/Admission/Orientation

	Question	Low	High	Average	Disagree	Agree
1	I was admitted to the program in a reasonable amount of time.	1	4	3.46	2 / 8%	22 / 92%
2	If there was a Waiting List, appropriate contact was made to me so that admittance into the program occurred seamlessly.	1	4	3.43	1 / 4%	22 / 92%
3	The staff who admitted and oriented me to available services were knowledgeable and professional.	1	4	3.67	1 / 4%	23 / 96%
4	I reviewed and was provided a Handbook (Guide to Services) that explained the program rules, program limitations, as well as financial responsibilities including billing, no show policy, and insurance information.	1	4	3.54	1 / 4%	23 / 96%
5	The Mission, Values, and Goals of the Program were explained to me.	1	4	3.58	1 / 4%	23 / 96%

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### Referrals, Transition and/or Discharge

	Question	Low	High	Average	Disagree	Agree
1	I was provided with relevant community referrals when I asked for them or as the staff became aware of my need.	1	4	3.50	2 / 8%	12 / 50%
2	If a level of care change or other type of Transition occurred, I was informed and participated in this change.	1	4	3.55	1 / 4%	10 / 42%
3	Upon Discharge, I was consulted and participated in reviewing my progress.	3	4	3.67	0 / 0%	3 / 12%
4	Upon Discharge, the need or availability for additional services was discussed with	3	4	3.67	0 / 0%	3 / 12%
5	Upon Discharge, I was provided with a copy of my Discharge Summary.	3	4	3.67	0 / 0%	3 / 12%
6	After Discharge, follow up contact was performed within 30 days.	3	4	3.67	0 / 0%	3 / 12%

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Strongly Disagree	Disagree	Agree	Strongly Agree	N/A

### Input from Persons Served

Question	Low	High	Average	Disagree	Agree
1 People who work here seem interested in my progress and services provided.	1	4	3.67	1 / 4%	23 / 96%
2 I am encouraged to give my opinion about my treatment, the staff, as well as the program and services.	3	4	3.87	0 / 0%	23 / 96%
3 There are several different ways to offer feedback about the program (suggestion box, satisfaction survey, online survey, etc.).	3	4	3.73	0 / 0%	22 / 92%
4 I understand how my opinion is used to improve business practices including the program and services.	2	4	3.74	1 / 4%	22 / 92%

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Strongly Disagree	Disagree	Agree	Strongly Agree	N/A

### Rights and Responsibilities

	Question	Low	High	Average	Disagree	Agree
1	I am treated with dignity and respect.	3	4	3.96	0 / 0%	24 / 100%
2	My rights and responsibilities were clearly explained to me and I was offered a copy for my records.	3	4	3.83	0 / 0%	24 / 100%
3	If something happens that I dont like or I feel like my rights have been violated, I know how to file a complaint or a	3	4	3.77	0 / 0%	22 / 92%
4	Duty to Warn and Limits to Confidentiality were explained to me.	3	4	3.79	0 / 0%	24 / 100%
5	My rights regarding privacy and confidentiality was explained to me.	3	4	3.75	0 / 0%	24 / 100%

The average score for this section is: 3.82

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Strongly Disagree	Disagree	Agree	Strongly Agree	N/A

### The Assessment Process

	Question	Low	High	Average	Disagree	Agree
1	My needs were identified and discussed with an educated and respectful staff member.	3	4	3.79	0 / 0%	24 / 100%
2	I felt heard, listened to, and safe when disclosing my reasons for seeking services.	3	4	3.83	0 / 0%	23 / 96%
3	I understand why I am asked questions about my history, goals, and preferences.	3	4	3.83	0 / 0%	23 / 96%
4	I felt respected when sharing my history and developing a plan for services.	3	4	3.83	0 / 0%	23 / 96%

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Strongly Disagree	Disagree	Agree	Strongly Agree	N/A

### Treatment Planning

	Question	Low	High	Average	Disagree	Agree
1	I participated in the development of my treatment plan.	3	4	3.85	0 / 0%	20 / 83%
2	I have a copy of my treatment plan or was offered a copy.	3	4	3.90	0 / 0%	20 / 83%
3	I signed and reviewed my treatment goals and objectives on a regular basis.	2	4	3.67	1 / 4%	20 / 83%
4	My treatment plan is revised or updated when things change or at my request.	2	4	3.43	3 / 12%	18 / 75%

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1	2	3	4	5
Strongly Disagree	Disagree	Agree	Strongly Agree	N/A

### Quality of Care

	Question	Low	High	Average	Disagree	Agree
1	I would recommend the services I was provided to my family and friends.	2	4	3.71	1 / 4%	20 / 83%
2	The staff seem educated and competent when providing care.	3	4	3.77	0 / 0%	22 / 92%
3	The staff discussed with me and provided me with relevant and current therapeutic interventions while I was receiving services.	3	4	3.71	0 / 0%	21 / 88%
4	The environment and energy of the facility felt welcoming, professional, private, and safe.	3	4	3.65	0 / 0%	20 / 83%
5	I am encouraged to include family and/or my other support systems when engaging in services.	2	4	3.45	3 / 12%	17 / 71%

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1	2	3	4	5
Strongly Disagree	Disagree	Agree	Strongly Agree	N/A

### Quality of Life

	Question	Low	High	Average	Disagree	Agree
1	My overall Quality of Life has improved since beginning services.	3	4	3.68	0 / 0%	19 / 79%
2	I am doing better in school, work, and/or other daily activities.	2	4	3.63	1 / 4%	15 / 62%
3	My personal relationships, family relationships, and/or support system dynamic has improved.	1	4	3.13	4 / 17%	12 / 50%
4	My social interaction is healthier and I feel more confident with my life situations.	1	4	3.42	3 / 12%	16 / 67%
5	I am more self-aware and better at managing my Mental Health needs.	1	4	3.24	3 / 12%	18 / 75%

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1	2	3	4	5
Strongly Disagree	Disagree	Agree	Strongly Agree	N/A

### Cultural Competency

Question	Low	High	Average	Disagree	Agree
1 My religious or spiritual beliefs and/or practices are respected.	3	4	3.79	0 / 0%	19 / 79%
2 The staff has a professional understanding of my educational, social, socioeconomic, and family background.	1	4	3.33	2 / 8%	19 / 79%
3 I can easily understand the staff when they are speaking to me.	2	4	3.43	2 / 8%	19 / 79%
4 Other Complementary Health Approaches such as Yoga, Nutrition Management, Chiropractic Care, Acupuncture, Exercise, and Meditation were discussed.	3	4	3.53	0 / 0%	19 / 79%
5 The staff seemed self-aware, displayed an open attitude including knowledge and skills, and appeared open toward others.	3	4	3.74	0 / 0%	19 / 79%

The average score for this section is: 3.56

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1	2	3	4	5
Strongly Disagree	Disagree	Agree	Strongly Agree	N/A

### Accessibility and Technology

	Question	Low	High	Average	Disagree	Agree
1	The building and location are easily accessible for my needs.	2	4	3.42	1 / 4%	11 / 46%
2	My request for Reasonable Accommodations was taken seriously and met my needs.	3	4	3.63	0 / 0%	16 / 67%
3	Utilizing community transportation to and from my appointments fit my needs	2	4	3.30	1 / 4%	9 / 38%
4	Utilizing available Technology Systems such as the client portal to submit or access relevant medical information was simple and straightforward.	3	4	3.42	0 / 0%	12 / 50%
5	Telehealth Services were simple to understand and use.	3	4	3.50	0 / 0%	14 / 58%
6	Technology support was available to me if there were technology system issues.	3	4	3.38	0 / 0%	13 / 54%
7	Using the Phone System including Voicemail or ability to contact staff was simple and current with common technology standards.	3	4	3.54	0 / 0%	13 / 54%
8	Searching the website for location, contact information, services available, hours of operation, or performance outcome measures was easily accessible.	3	4	3.23	0 / 0%	13 / 54%

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Strongly Disagree	Disagree	Agree	Strongly Agree	N/A

### Health and Safety

Question	Low	High	Average	Disagree	Agree
1 The organization provides services in a safe setting.	1	4	3.53	1 / 4%	18 / 75%
2 Services are provided in a clean and sanitary facility.	3	4	3.67	0 / 0%	15 / 62%
3 I feel safe in the neighborhood and parking areas around the business location.	1	4	3.40	1 / 4%	14 / 58%
4 I believe the organization values my personal health and safety by implementing policies that do NOT permit weapons, tobacco, alcohol, and other illicit or illegal drugs on the premises, at agency sponsored events, or on agency owned	3	4	3.75	0 / 0%	20 / 83%
5 In the event of an emergency while receiving services or while at the facility, I can access health and safety information for safe evacuation or other emergency situations.	2	4	3.50	1 / 4%	13 / 54%

The average score for this section is: 3.58

### Comments and Feedback: What do we do best?

You care deeply about your clients.

Communicate

Support my every need.

Check up on me and make sure I'm doing alright.

i feel one of the best things that Advocate Support is understanding the Clients when they have a problem.

More meetings at different places

You care about us.

I like that the person comes to the house also its a social setting. Everyone is friendly.

Diligent about checking on clients and concerns regarding their well-being.

Listen to my problems.

Finding new advocates. Hard keeping mentors with this organization.

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This program has really nice relatable people.
This Advocate program does best which is treat people with respect.
Be there and help me a lot with my mental health.
The only thing i can say, ya'll come see us and call us.
N/A
None, Just fine.
Home Visits are a true benefit to me especially due to difficulty transportation.

### Comments and Feedback: What is the one area we could most improve?

I don't believe you have to do anything different.
Nothing i love the fact i have someone who wants to genuinely help me.
More get togethers.
I need more help with my social skills.
n/a
Have more outings when it's safe.
I'm pleased.
Decrease high turn over rate on counselors leaving after establishing a close support with clients.

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transportation to facility
Fired people, ha! ha! Stand out on faith and come with new ideas. in all areas. You know what you need to change question is doo you want to change?
Stop taking the advocate out of my life after being with time for months and then their gone.Cant hear from them again.
Keeping the same advocate for a long time without switching.
Nowhere in my opinion. Everything is near perfect.
Have some groups where ever ya'll are located so I can attend i guess and do some outings.
N/A
None.
Everything is going well.

### Comments and Feedback: Additional comments:

I appreciate all the assistance.
Glad I'm in the program.
You show us love by sending birthday cards for our birthday. At Christmas time we receive a monetary gift the Advocates plan an outing for is. I appreciate all that you do for us.
Thank you for pairing me with counselors who are dedicated to their craft and are easy to bond with and eager to get to know/help me.

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Overall, its a wonderful program.
can you give me a \$100 gift card for being a part of advocate for so long.
Losing contact with the prior advocate hurts me and sets me back be depressed, need to do something about it.
Summer time do a crab feast, amusement park, cookout. I say this because this is what i like doing mostly and i know others wouldn't mind its called fun.
N/A
None.