

Client Satisfaction Survey 2017 Results

I. Introduction

Ways to Wellness (WtW) completed a client satisfaction survey in the summer of 2017. The aims of the survey were to build upon client interview [findings](#) from Newcastle University Institute of Health and Society and to further explore client opinion and experience particularly related to the following areas:

- 1) client engagement, including both facilitators and barriers to engagement (access and consent limits contact of those who did not engage)
- 2) client initial understanding and expectations of service
- 3) client experience of service meeting their own needs (situation and priorities)
- 4) client views on their achievement of positive changes resulting from involvement in service
- 5) client views on potential areas of service improvement for Ways to Wellness
- 6) client general level of satisfaction and likelihood to recommend the service

II. Methods

a. Client Identification and Survey Groups

During an initial appointment, WtW Link Workers (LWs) ask each client for consent to share their contact information in order that they might potentially be contacted regarding a client satisfaction survey. In April 2017, the WtW Management Information System (MIS) generated a report identifying clients who had provided this consent, resulting in 1,865 clients. Clients were divided across three survey groups, depending upon their stage of involvement in the service as of April 2017, as shown in Table 1 below.

Table 1: Client Survey Groups

Survey Group	Numbers who Consented	Number of Surveys Sent
1. Referred clients who did not complete first Well-being Star and have been discharged	19	19
2. Clients who have completed at least a first Well-being Star and have been discharged or are still engaged ('live') on the service	1,838	421
3. Clients who are still 'live' on service but have not yet completed a 1st Well-being Star	8	8

Given the small numbers in Survey Groups 1 and 3, all eligible consenting clients in were included. 421 clients were randomly selected from the larger Survey Group 2. A total of 448 clients were sent a postal survey (24% of those who had provided consent for this purpose) on the 28th of June 2017. To maximise the return rate a self-addressed, pre-stamped return envelope was included and clients were informed that returning a completed survey prior to the 28th of July 2017 would enter them into a prize draw to win a £50 shopping centre voucher.

b. Survey Questionnaire Format

Structured surveys posted to WtW clients contained questions covering the six thematic areas previously described. The survey questions were tailored to the clients' level of engagement in the service resulting in Survey Group 1 receiving six questions, Survey Group 2 twelve questions and Survey Group 3 seven questions.

Responses provided both quantitative and qualitative data. All but one of the questions required structured responses from the clients to allow for quantitative analysis – Likert-type scales were predominately used, with one or two (depending on survey group) multiple-choice questions. Questions alternated between wording that reflected favourably and unfavourably on the WtW service to reduce bias in answers. Most of the structured questions were followed by a free text box, inviting clients to provide comments to further explain their response. The final question on all surveys was an open-text question inviting comments regarding experience of the service or suggestions for improvement. All open-text responses provided qualitative data.

III. Results

a. Responses

Ways to Wellness received a total of 116 responses providing an overall response rate of 25% (Table 2), exceeding the return rate expectation of approximately 10 – 20%.

Table 2: Responses returned by Survey Group

Survey Group	Number returned	Percentage returned of those posted	Percentage of total responses received
1. Referred clients who did not complete first Wellbeing Star and have been discharged	3	16%	3%
2. Clients who have completed at least a first wellbeing star and have been either been discharged or are still live on the service	110	26%	95%
3. Clients who are still 'live' on service but have not yet completed a 1st wellbeing star	3	38%	3%

b. Characteristics of Respondents

At the end of the survey, respondents were asked several monitoring questions, for which the following information was captured:

- 51 females (44%), 60 males (52%) and 5 'prefer not to say' (4%).
- 106 white British (91%), 3 Asian/Asian British (3%), 1 Black/Black British (1%), 1 'All of the Above' (1%) and 5 'prefer not to say' (4%).
- 10 respondents (9%) aged 40 – 49 years, 22 respondents (19%) aged 50 – 59 years, 43 respondents (37%) aged 60 – 69 years, 33 respondents (38%) aged 70 – 77 years and 8 respondents (7%) 'prefer not to say'.

c. Analysis Approach

Due to the limited responses received for Survey Groups 1 and 3 (three responses each), only the 110 responses from Survey Group 2 were analysed. The structured question responses were analysed quantitatively (see below and Appendices 1 and 2). The qualitative data from open-text responses were analysed for thematic

content. Following close reading of each set of open-text responses, a coding scheme was developed based upon the themes which emerged from the data.

d. Summary of Results

Analysis of responses to both structured and unstructured questions demonstrate predominantly favourable client feedback and experience of WtW service. Tables 3-6 summarise results from the responses to the survey questions. A summary of the results from from ten Likert-type scaled questions are shown in Table 3.

Table 3: Headline responses to the Likert-type scale questions

57% felt they were not managing their health well prior to their referral to WtW
79% felt the healthcare staff's explanation of WtW was good or very good
49% reported that the service did not initially appeal to them
85% remembered that they could see how the service might help them make positive changes in their lives at the first appointment
89% reported that their Link Worker listened to them and was flexible in making sure the service worked well for them
82% felt their Link Worker helped them to achieve goals that are important to them
53% felt that they will struggle (or are struggling) to maintain changes without the support of their Link Worker
78% have found that the activities or services that their Link Worker suggested have helped them to reach their goals and/or improve their health and wellbeing
89% are happy with the service overall
94% would recommend the service to their family or friends

Two multiple choice questions invited respondents to select as many answers as were relevant for them. Tables 4 and 5 list the most common responses,

Table 4: Top responses to the multiple-choice question 'If you are no longer actively involved in the Ways to Wellness service, please tell us why'

I am managing my health well (36%)
My Link Worker has done all they can to support me (27%)
I have achieved all my goals (17%)
I don't feel ready to make more changes (14%)

Table 5: Top responses to multiple-choice question 'Please tell us what the Ways to Wellness service has helped you to achieve'

I know who and where to go to when I need support (64%)
I feel more positive (53%)
I understand my health condition better (47%)
I have more energy and motivation (39%)
I am more confident (36%)

Qualitative analysis of the open text responses to questions revealed several broad themes amongst respondents (Table 6).

Table 6: Themes from the qualitative (open text) data

1. Clients feel that the WtW service has helped them to achieve changes in their lives
2. Clients report that their Link Worker (LW) has been essential to them making changes through the development of a positive relationship, defined by the LW being approachable, understanding, friendly, flexible and providing support and encouragement.
3. Many clients report that LW signposting to other groups and services and identification of options has been helpful in achieving goals and making changes.
4. Many clients identify similar priority areas: weight loss, healthy eating, management of their Long-term condition, increased activity and exercise.
5. A few clients report that the service helps with isolation and has improved their mental health.
6. A few clients report that their LW has not followed up with them, that a change in LWs has been disruptive or LWs have been unable to accommodate clients' work schedule.
7. A few clients found the service to be of little help because they felt they were coping well.

IV. Discussion

Analysis of the results from this client satisfaction survey indicate that the WtW service effectively supports change management for people living with long-term health conditions. A high proportion of clients are receiving good initial referral information and their early appointments are helping them to identify areas of priority and ways in which they might make positive changes to their lives. Clients find that their involvement in the service results in them feeling more supported, positive and confident about how to manage their health condition. They also report that the service has helped them to achieve their goals and/or improve their health and wellbeing. Furthermore, many clients are managing, or expect to manage, to maintain improvements following engagement in the service.

Though many respondents indicate that a positive relationship with their Link Worker underpins their success, approximately 6% of respondents have expressed dissatisfaction with some aspects of the service such as limited availability of the service on evenings and weekends, change in staff or the level of follow-up from Link Workers.

The survey results provided limited insight into the barriers experienced by clients who did not engage as we had limited consent to contact this group and received few (3) responses from this group.

V. Limitations and Future Recommendations

The results from this survey were limited by several factors:

- a) This survey did not collect data or (to protect client anonymity) link existing data related to characteristics of the clients such as long-term condition (LTC) or co-morbidity levels. Therefore, possible links between client service experience and LTC type, health status or medical complexity cannot be explored.
- b) Aside from the initial survey groupings, the clients were not grouped by their length of engagement with the service. Therefore, we are unable to identify whether more positive outcomes are associated with longer term intervention.

- c) The survey did not measure the health or wellbeing improvements of clients, either objectively or subjectively. This is measured in other ways by the service but is not linked to this client satisfaction data due to protect client anonymity.
- d) The survey was developed, implemented and analysed in-house by staff who are not experts in the involved areas of work.

If another client satisfaction survey is completed in the future, the client numbers may be sufficiently high to provide adequate responses from clients who did not engage (Survey Group 1). It is furthermore recommended a future survey look to subdivide clients into survey groups based on length of engagement on the service. The viability and value of collecting or linking further client data to survey responses should also be considered.