

Final Report  
2019

# Consumer Satisfaction with Aging & Disability Resource Connection of Oregon: Round 6

## Part 3. Information and Referral/Assistance

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# Consumer Satisfaction with Aging & Disability Resource Connection (ADRC) Services: Round 6

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## Part 3. Information and Referral/Assistance

An effective ADRC Call Center requires skilled information and referral and assistance (I&R/A) specialists who are knowledgeable about services and are able to communicate clearly with callers. They are the front line to learning about consumer needs, making it possible to provide person-centered services. Multiple survey questions were asked to help determine the extent to which consumers and their family members felt heard by the ADRC I&R/A staff, how well they understood the complex service system and whether they obtained needed information. As will be described throughout this report, consumers and family members were generally satisfied, but ratings were lower than in past years of the survey.

**Materials and other information.** The majority of participants (52%) indicated they had received all of the information they needed when they contacted the ADRC. However, this was substantially lower than in recent years (62% in 2014; 60% in 2015). Fourteen percent indicated they had received none of the information they needed compared to the low percentage of 4% who provided this response in 2015. (Table 3.1<sup>1</sup>). The responses were similar whether the consumer or consumer's family member received Options Counseling (OC) or

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<sup>1</sup> Tables 3.1 – 3.7 are presented at the end of this report. All tables are in Appendix B.

Call Center services only. Similarly, no differences in responses were found between consumers and family members.

Most participants (both consumers and family members) (57%) received written materials after contacting the ADRC, down from 74% in 2015. Of those, almost all (94%) reported the materials were relevant to their concerns (Tables 3.2 & 3.3). This is consistent with past reports. Options Counseling recipients were most likely to have received materials, followed by Call Center participants who reported receiving a home visit. This pattern is consistent with previous years. The comments below highlight the importance of providing print material about services and resources that address consumer needs.

*Make the services more accessible to the people who need it and more written information. The lady who helped me was really nice and respectful. Make housing information more readily available.*

*Some programs that could help my mom, like counseling, going to senior center. She came prepared, brought some brochures and information.*

*In the brochure they mention Legal Services that we will utilize, talking about how to put our house in a trust and deal with our income putting it into the trust as well*

*They should have a list of services that is printed so people can be aware of the services they have. A questionnaire of what services are available would be great so they can meet my needs.*

## Satisfaction with Staff

**Staff attributes.** Satisfaction with services are typically associated with relationships with staff. We asked all participants a series of questions about the

person “from the ADRC that you worked with the most.” It is not possible to determine which type of staff participants rated. We did conduct analyses to determine if there were differences between responses of OC consumers and Call Center only consumers. We also examined differences in consumer and family responses. We note any statistically significant differences between these groups.

A focus of the survey was to determine how well ADRC staff provide person-centered services, and the extent to which services are based on the unique circumstances of the caller. One indicator is whether participants feel listened to and understood. To tap this, we asked whether the staff at the ADRC spent enough time with the consumer to understand their concerns. Although ratings were lower than the past three years, the vast majority of participants (85%) reported that the staff person they talked with had spent enough time with them (Table 3.4). About two-thirds of participants indicated the person they talked with was very knowledgeable (67%) and another 27% rated them as somewhat knowledgeable (Table 3.5). Ratings did not vary by consumer or family member nor were there differences in responses between Call Center and OC participants. Similar ratings were given to the respectfulness of the staff, with 84% rating staff as very respectful and 12% providing ratings of somewhat respectful (Table 3.6). Again, no differences were found between consumers and family member ratings, or between Call Center and OC participants.

The following consumer comments reflect their satisfaction with ADRC staff.

*They recommend things for me to do and I do them. They explain everything to me and they don't hurry me; if you have any questions whatsoever they will answer them before you leave. I have never left with a question unanswered.*

*The person that I ended up connecting with was extremely helpful and really worked hard to resolve my issues. It took a while however, I went through 20 people to get the person that helped me. It was very frustrating up until that point.*

*They were the best government agency that I have ever dealt with. Federal, state, local. [Staff] was fantastic, I can only give them high marks. If you call and can't get a hold of someone they call you back QUICKLY!*

Less than half of participants rated staff as excellent (45%) in explaining how to get the help that they needed and another 29% rated them good (Table 3.7). Almost a quarter (24%) rated them as fair or poor, up from 14% in 2015. The comments below demonstrate these entirely different experiences.

*Do the things they say they will when they say they will. I have had to wait months. I went to appointments they didn't keep 2 weeks in a row, with no contact or a reason why they didn't keep them. It took quite a while for them to get back in contact with me after the initial call. So maybe a faster reply.*

*The only thing I would improve is waiting list. That list is huge, and it would be good to know where you are on the list, if you've been kicked out of the list, or when they will call you back.*

*Getting the right case manager that really cares. Somebody who really cares about you and doesn't just give the pad answers. Just doesn't give answers that fits the situation but that fits my perfect situation.*

*They need to be more educated in what programs are more available for people like myself and I think there needs to be more things available for people like myself.*

Consumer recommendations for improvement in this area included making information more easily understood, and providing better information. The next most common recommendation addressed the need for access to information through the website, making the ADRC 800 number easier to find, and “letting people know they are there.” Participants next indicated the need for more services, a faster qualifying process, better coordination and quality of service, and expanded eligibility to better meet their increasing needs. Next, participants requested better customer service including the need for faster call-back and follow-up times, more appointment time, being better prepared for visits, and communicating in an empathic and caring way. The following comments from consumers emphasize these suggestions.

*They helped me get food stamps and they helped me get my insurance and explain stuff to me to help and talk with other people about things that I need, like shoes...they help me out when I can't seem to get things done.*

*She helped me with the person that was threatening me and she is assisting me to move out of the place where I live currently. She is helping me with the situation I have here and is trying to find a place for me to live.*

*Hospice care. They helped us figure out that it was time for it, and any time I had a problem with anything really I'd talk to them and they'd give me the number of someone to call. They were just a really good resource for me. And I did use them for neglect or abuse for another person but not me or my husband.*

*The person from the ADRC helped me apply for the Oregon Health Plan.*

*Probably would be dead. I was very anemic, my heart gave out and water on my lungs, so they helped me a lot. I can get out and about again.*

*I got comprehensive help with heating subsidy, food stamps, and Medicare.*

## Conclusions and Recommendations

The ADRC continues to provide information, referral and access to the service system in respectful and informative ways, assisting consumers and their families in better understanding of the resources the service system has to offer. However, in nearly every metric, consumers and family members rated the ADRC lower in 2019 than in recent years. Recommendations include:

- Explore possible issues that may help explain these changes (e.g., service systems, characteristics of the current population).
- Continue to communicate with consumers in empathic, respectful ways that foster greater understanding of how to access available resources.
- Continue efforts to make information about how to contact the ADRC through outreach efforts and provide consumer training on finding services on the website and provide a wider distribution of print material.
- Increase efforts to answer and respond to calls in a prompt and timely manner.

### Part 3. Information and Referral/Assistance

**Table 3.1 When you first contacted the ADRC, did you receive none, some, or all of the information you needed?**

	2011-2012 (n=241)	2012 (n=283)	2013 (n=285)	2014 (n=299)	2015 (n=317)	2019 (n=341)
None	10%	7%	9%	8%	4%	14%
Some	34%	37%	36%	28%	35%	33%
All	55%	54%	54%	62%	60%	52%
No Information Needed	1%	1%	<1%	2%	1%	1%

Note: Standard: at least 55% of consumers report receiving “all” of the information they needed; at least 35% of report that they received “some” of the information they needed.

**Table 3.2 Did you receive written materials?**

	2011-2012 (n=235)	2012 (n=288)	2013 (n=289)	2014 (n=293)	2015 (n=315)	2019 (n=192)
Yes	72%	66%	64%	72%	74%	57%

**Table 3.3 Were the materials relevant to your concerns?**

	2011-2012 (n=162)	2012 (n=178)	2013 (n=180)	2014 (n=206)	2015 (n=219)	2019 (n=170)
Yes	92%	89%	92%	97%	93%	94%

Note: Standard is that of those receiving written materials, 90% will report they are relevant to their concerns.

**Table 3.4 Do you think that the person at the ADRC spent enough time with you to understand your concerns?**

	2011-2012 (n=243)	2012 (n=292)	2013 (n=293)	2014 (n=271)	2015 (n=323)	2019 (n=284)
Yes	87%	86%	90%	90%	92%	85%



**Table 3.5 How knowledgeable was this person about helpful resources and services?**

	2011-2012 (n=237)	2012 (n=286)	2013 (n=281)	2014 (n=293)	2015 (n=318)	2019 (n=324)
Not at all knowledgeable	3%	3%	2%	2%	2%	2%
Not that knowledgeable	5%	4%	1%	2%	2%	4%
Somewhat knowledgeable	18%	20%	18%	20%	15%	27%
Very knowledgeable	74%	73%	78%	77%	80%	67%

Note: Standard is 85% will report that the ADRC staff person was somewhat or very knowledgeable. Those receiving options counseling (with or without a home visit) gave higher ratings of staff knowledge ( $p < .05$ ).

**Table 3.6 How respectful was the person with whom you worked the most?**

	2011-2012 (n=242)	2012 (n=291)	2013 (n=291)	2014 (n=299)	2015 (n=322)	2019 (n=333)
Not at all respectful	<1%	1%	<1%	<1%	1%	2%
Not that respectful	3%	2%	1%	<1%	1%	2%
Somewhat respectful	10%	9%	6%	9%	6%	12%
Very respectful	87%	88%	93%	90%	92%	84%

Note: Standard is 85% will report that ADRC staff are very respectful. Consumers gave higher ratings than family members ( $p < .05$ ).

**Table 3.7 How would you rate this person on explaining how to get the help or information you needed?**

	2011-2012 (n=243)	2012 (n=296)	2013 (n=293)	2014 (n=296)	2015 (n=320)	2019 (n=333)
Poor	10%	8%	7%	6%	7%	8%
Fair	9%	10%	12%	12%	7%	16%
Good	31%	29%	27%	22%	28%	29%
Excellent	49%	49%	53%	60%	57%	45%

Note: Standard is 85% will report that ADRC staff were good or excellent at explaining how to get the help and information needed.