

2013 Vermont Long-Term Care Consumer Survey Report

Prepared For:



Department of Disabilities, Aging & Independent Living
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Prepared By:



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Table of Contents

A. Executive Summary	1
B. Background and Introduction	3
C. Survey Methodology	4
1. Customer Survey and Population	4
2. Survey Protocol	4
3. Response Rate	4
4. Sample Characteristics	4
5. Statistical Testing.....	5
D. Key Findings	6
1. Sources of Information and Familiarity with Programs.....	6
2. Trend Comparisons – Select Overall Ratings and Quality of Life Items	6
3. Overall Ratings of Quality	7
4. Case Manager	9
5. Quality Ratings of Individual Programs.....	10
6. Quality and Service Improvement.....	15
7. Quality of Life Improvement.....	15
E. Detailed Findings with Trending Comparisons	18
1. Proxy Respondents	18
2. Information and Awareness of LTC Programs	20
2.1. Responses by Program.....	25
2.2. Responses by County.....	27
3. General Ratings of Services	30
3.1. Ratings of Long-Term Care Services.....	30
3.2. Agreement with Statements about Receipt of Services	43
3.3. Open-Ended Comments	48
4. Improvement in Quality of Life	50
4.1. Improvement in Quality of Life by Program.....	51
4.2. Improvement in Quality of Life by County	53

5. Quality of Life Measures	55
5.1. Quality of Life Measures by Program.....	61
5.2. Quality of Life Measures by County	71
6. Health Status	80
6.1. Health Status by Program.....	81
6.2. Health Status by County	83
7. Case Management	84
7.1. Case Management by Program.....	86
7.2. Case Management by CFC Agency.....	889
8. Attendant Services Program	93
8.1. Attendant Services Program by County	95
8.2. Problems with Attendant Services Program.....	95
8.3. Open-Ended Comments	95
9. Personal Care Services	97
9.1. Personal Care Services by Service and Agency.....	100
9.2. Personal Care Services by County	105
9.3. Adding New Providers of Personal Care Services	110
9.4. Problems with Personal Care Services.....	115
9.5. Open-Ended Comments	115
10. Homemaker Services	120
10.1. Homemaker Services by County.....	123
10.2. Adding New Providers of Homemaker Services	128
10.3. Problems with Homemaker Services	130
10.4. Open-Ended Comments	130
11. Adult Day Services	134
11.1. Adult Day Services by County	136
11.2. Problems with Adult Day Centers	138
11.3. Open-Ended Comments	138
12. Traumatic Brain Injury (TBI) Program	140
12.1. Traumatic Brain Injury Program Program by County	142

12.2. <i>Problems with Traumatic Brain Injury Program</i>	142
12.3 <i>Open-Ended Comments</i>	142
13. Home-Delivered Meals Program.....	144
13.1. <i>Home-Delivered Meals Program by County</i>	148
13.2. <i>Problems with Home Delivered Meals Program</i>	155
13.3. <i>Open-Ended Comments</i>	155
14. Additional Comments.....	158
15. Comparison to Statewide Measures	159
F. Multivariate Analyses of 2013 Key Indicators	160
1. Quality of Life and Satisfaction Indices	160
1.1. <i>Quality of Life and Satisfaction Indices by Gender</i>	163
1.2. <i>Quality of Life and Satisfaction Indices by Age</i>	164
1.3. <i>Quality of Life and Satisfaction Indices by Level of Need</i>	166
1.4. <i>Quality of Life and Satisfaction Indices by Program</i>	167
1.5. <i>Quality of Life and Satisfaction Indices by County</i>	170
2. Correlations Between Quality of Life Measures	173
G. Quality Improvement Analysis and Recommendations	174
1. Overall Choices for Care Program.....	175
1.1. <i>Overall Value of Services Received</i>	175
1.2. <i>Recommendation of Choices of Care</i>	176
2. Case Management Services.....	177
2.1. <i>Satisfaction with Case Manager</i>	177
2.2. <i>Recommendation of Case Manager</i>	178
3. Attendant Services Program.....	179
3.1. <i>Satisfaction with Attendant Services Program</i>	179
3.2. <i>Recommendation of Attendant Services Program</i>	180
4. Personal Care Services	181
4.1. <i>Satisfaction with Personal Care Services</i>	181
4.2. <i>Recommendation of Personal Care Services</i>	182

5. Homemaker Services	183
5.1. Satisfaction with Homemaker Services.....	183
5.2. Recommendation of Homemaker Services.....	184
6. Adult Day Centers.....	185
6.1. Satisfaction with Adult Day Centers.....	185
6.2. Recommendation of Adult Day Centers.....	186
7. Home Delivered Meals Program.....	187
7.1. Satisfaction with Home Delivered Meals Program.....	187
7.2. Recommendation of Home Delivered Meals Program.....	188
H. Appendix 1: Survey Methodology	189
1. Survey	189
2. Survey Population and Sample	189
3. Data Collection	190
4. Response Rates.....	191
5. Sample Characteristics.....	192
6.. Data Weighting.....	193
6.1. Post Stratification Weighting	193
6.2. Population Size Reflected in the Final Data Set	195
I. Appendix 2: Survey Instrument	196

A. Executive Summary

In 2013, the Vermont Department of Aging and Independent Living (DAIL) again surveyed its consumers receiving the following long-term care programs/services regarding their satisfaction with services and quality of life:

- Choices for Care (CFC) Case Management Services
- Personal Care Services
 - Consumer-Directed Personal Care Services
 - Surrogate-Directed Personal Care Services
 - Agency-Directed Personal Care Services
- Homemaker Services
- Adult Day Services
- Attendant Services Program
- Traumatic Brain Injury Program
- Home-Delivered Meals Program

Summary Statement

The results of the survey suggest that the large majority of consumers are satisfied with DAIL programs, satisfied with the services they receive, and consider the quality of these services to be excellent or good. The survey results are a clear indication that DAIL is in large part fulfilling its goal “to make Vermont the best state in which to grow old or to live with a disability ~ with dignity, respect and independence.” This high level of satisfaction continues a trend observed in the survey results since 2008. Based upon the views and attitudes of the large majority of consumers, the survey results did not identify any major systemic problems with the programs and services provided by DAIL. DAIL is providing the services needed by the vast majority of its consumers in a manner that is effective, appropriate and that clients appreciate. The programs are viewed by consumers as providing an important service that allows them to remain in their homes.

Improving and Maintaining Performance

Thoroughbred Research Group conducted a key driver analysis called attributable effects analysis to determine what attributes drive overall satisfaction and recommendation of the various long-term care services and programs provided by DAIL. This analysis identifies two types of drivers. Potential drivers are attributes where the greatest benefit can be realized through improvements in quality. Maintenance drivers are those that would result in the greatest loss of satisfaction/recommendation if quality declined in these attributes.

The Provision of Services is among the strongest Potential and Maintenance drivers. Staff Attributes are also important, with ensuring competency of staff as a top Potential and Maintenance driver, and having courteous and respectful caregivers as a top Maintenance driver. Consumer Choice is another important driver of satisfaction with services provided and recommendation of the programs/services to others.

DAIL should focus on improving the quality of services received, the competency of staff, the receipt

of all services that consumers need, when and where needed, and the choice and control consumers have in their care in order to improve its overall rating. DAIL should focus on maintaining the quality of services received, the courtesy and respect of caregivers, staff competency, the receipt of all services that consumers need, and the choice and control consumers have in their care.

Top Potential Drivers	Top Maintenance Drivers
Quality of Services Received	Quality of Services Received
Staff Competency	Courteous and Respectful Caregivers
Consumers Receive Services That Meet Needs	Staff Competency
Receive Services When and How Needed	Consumers Receive Services that Meet Needs
Consumers Have Choice/Play Role in Care	Consumer Have Choice/Play Role in Care

B. Background and Introduction

The Department of Disabilities, Aging and Independent Living (DAIL) within the state of Vermont (VT) manages Medicaid Long Term Care (LTC) services and conducts survey research to evaluate consumer satisfaction with LTC programs and services. Since 2006, DAIL has been conducting an annual consumer survey assessing satisfaction with services and overall quality of life provided by the various LTC programs (including Choices for Care home and community based services, Adult Day services, Homemaker services, the Attendant Service Program, the Traumatic Brain Injury Program, and home delivery of meals). This LTC Consumer Survey is used for evaluating the services provided and has led to redesigning some services in order to impact satisfaction. This survey was designed for home and community-based recipients. Several questions from the MyInner View Survey tool (a survey instrument used with individuals in nursing and assisted living facilities to assess their satisfaction with services and overall quality of life) were adopted and added to this survey instrument. By adopting these items, in the future we will be able to make direct comparisons between long-term care consumers that are home- and community-based and those living in nursing and independent living facilities.

In 2013, Vermont DAIL contracted with Thoroughbred Research Group to conduct the 2013 Vermont Long-Term Care (LTC) Consumer Survey. The 2013 Vermont LTC survey population consisted of all consumers using one or more of the following DAIL-funded services: Choices for Care home and community based services, Adult Day services, Homemaker services, the Attendant Services Program, and the Traumatic Brain Injury Program. Data collection occurred from late September – late November and consisted of a mixed-mode methodology (mail, telephone). Surveys were first mailed to recipients of LTC services. Non-respondents to the mail survey were contacted by telephone in an attempt to obtain a completed survey.

C. Survey Methodology

A detailed description of the survey methodology is provided in Appendix 1.

1. CUSTOMER SURVEY AND POPULATION

The Vermont Department of Disabilities, Aging and Independent Living Long-Term Care Services and Programs Customer Survey is based on mail surveys and telephone interviews conducted among current customers receiving services. The target population for the 2013 DAIL Long-Term Care Services and Programs Customer Survey consisted of all residents receiving services.

A random sample of customers was selected within each program to participate in the survey. The survey used an instrument developed by DAIL and Thoroughbred in 2013. Many of the items in the survey included questions that were asked in prior surveys. The 2013 survey instrument added additional questions to those from prior years to address other topic areas and to assess recommendation of programs/services and competency of staff. A copy of the survey is included in Appendix 2.

2. SURVEY PROTOCOL

The 2013 Vermont LTC Consumer survey protocol that generated the data summarized in this report used a mixed methodology mail and telephone contact protocol. The protocol incorporated 2 mail attempts and 6 contact attempts by telephone.

3. RESPONSE RATE

A total of 1,268 surveys were completed by consumers by mail (630) and telephone (638), for a total response rate of 58.54%. Response rates were calculated using the AAPOR Response Rate 1 formula.

4. SAMPLE CHARACTERISTICS

The table below provides the breakout of completes by program, county, age category, and gender. All reported percentages include design effect adjustments.

Program	N	%
Case Management	1,149	90.3%
Personal Care Services	653	48.3%
<i>Consumer-Directed</i>	164	11.0%
<i>Surrogate-Directed</i>	212	16.8%
<i>Agency-Directed</i>	354	25.5%
Flexible Choices*	45	3.90%
Adult Day Centers	209	16.10%
Homemaker Services	428	37.10%
Attendant Services Program*	64	4.00%
Traumatic Brain Injury Program*	11	1.80%

County	N	%
Addison*	101	7.5%
Bennington*	90	8.0%
Caledonia*	116	7.6%
Chittenden*	166	16.5%
Essex*	21	1.8%
Franklin*	63	5.5%
Grand Isle*	15	0.9%
Lamoille*	61	3.9%
Orange*	66	4.7%
Orleans*	110	7.5%
Rutland	204	15.5%
Washington*	78	6.5%
Windham*	72	5.9%
Windsor*	105	8.2%
Age Category	N	%
< 50	132	11.5%
50 – 64	276	22.8%
65 – 74	304	23.1%
75 – 84	305	22.3%
85+	250	20.3%
Gender	N	%
Female	896	68.2%
Male	372	31.8%

* Results did not meet 95/5 statistical criteria and findings should be interpreted with caution

5. STATISTICAL TESTING

Two types of statistical comparisons were used: z-tests for difference of proportions and t-tests for means of independent samples. In the tables that follow, an upward arrow in any cell indicates that the cell is significantly higher than the total, and a downward arrow in any cell indicates that the cell is significantly lower than the total.

Due to not having enough information for historical data, statistical testing between 2013 and 2012 data was not performed.

D. Key Findings

1. SOURCES OF INFORMATION AND FAMILIARITY WITH PROGRAMS

Consumers first heard about long-term care services through a variety of sources. This included an area agency on aging (22%), family and friends (20% of consumers), health care providers (16%), and home health agencies (15%), among other sources. Eighty percent of consumers indicate they have spoken with someone about ways to get needed help with daily activities and 91% were somewhat or very satisfied with the information they were provided.

Only 41% of consumers indicate they are somewhat or very familiar with the LTC Ombudsman program. More than half (58%) are very or somewhat familiar with the Adult Protective Services program.

2. TREND COMPARISONS – SELECT OVERALL RATINGS AND QUALITY OF LIFE ITEMS

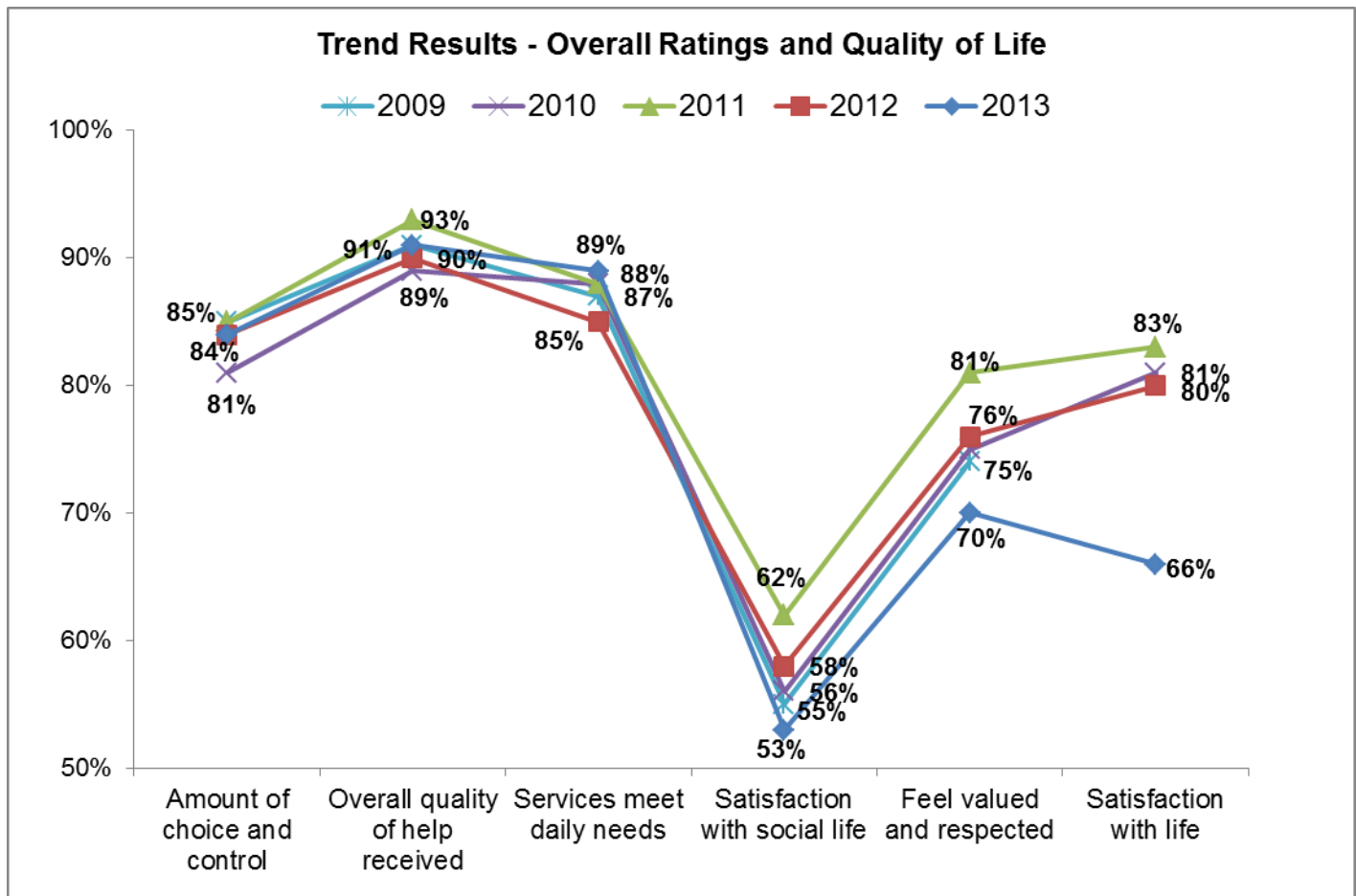
Figure 1 displays data from the past 5 years (2009 – 2013) for select overall ratings and quality of life items:

- The amount of choice and control you had when you planned the services or care you would receive (% Excellent or Good)
- The overall quality of help you receive (% Excellent or Good)
- The degree to which the services meet your daily needs such as bathing, dressing, meals, and housekeeping (% Excellent or Good)
- I feel satisfied with my social life (% Yes)
- I feel valued and respected (% Yes)
- In general, how satisfied are you with your life? (% Very Satisfied or Satisfied)

In general, we see similar responses over the past five years on several overall ratings of services and quality of life items. 2011 saw an increase in both satisfaction with social life and feeling valued and respected, but 2012 and 2013 saw a decrease again in both these measures. In fact, in 2013, satisfaction with social life and feeling valued and respected are the lowest they have been in the past 5 years.

In 2013, we added a “neither agree nor disagree” response category to the satisfaction with life question. Here we see a shift where only 2/3 of consumers are reporting being satisfied or very satisfied with their lives. This finding is perhaps because with the addition of a “middle of the road” response category, more people that endorsed “satisfied” before are now endorsing the lower response category.

Figure 1. Trend comparisons on several top overall rating and quality of life items



Note: In 2013, we added a “Neither Satisfied or Dissatisfied” option to the response scale, thus increasing the scale from a 4-point scale to a 5-point scale.

3. OVERALL RATINGS OF QUALITY

A summary of overall measures of satisfaction and quality is provided in Table 1. Based on the overall measures of quality, a large majority of consumers are satisfied with the services they receive and those providing these services. Ninety-three percent of consumers rate the value of the services they receive as excellent or good and 91% rate the quality of the help they receive as excellent or good. More than eight in ten (84%) rate as excellent or good their involvement in planning for the services or care they receive and controlling this care. Eighty-five percent rate the timeliness of the services as excellent or good and 89% rate as excellent or good when they receive their services. Overall, 89% rate the degree to which the services meet their needs as excellent or good. Nearly eight in ten (79%) strongly agree or agree that they receive all the services they need and want exactly when and how they need and want the services.

Consumers are also satisfied with those providing these services, with 90% rating their reliability, 96% their courtesy, 89% how well people listen to consumers’ needs and preferences, and 86% rating how well their problems or concerns are taken care of as excellent or good. Ninety percent of consumers rate the communication with those that are providing services or care as excellent or good.

The services provided to consumers are making a significant difference in their lives. Ninety-one percent of consumers indicate that the services and care they receive has made their life better. Seventy-five percent of consumers indicate it would be difficult for them to remain in their homes if they did not receive these long-term care services provided. Eighty-seven percent said the services they receive help them maintain or improve their health.

Comparisons to 2012 data are discussed in the detailed findings section.

Table 1. Summary of Overall Ratings of Quality

	All Consumers 2013	All Consumers 2012
How would you rate the amount of choice and control you had when you planned the services or care you would receive? (% excellent or good)	84%	84%
How would you rate the overall quality of the help you receive? (% excellent or good)	91%	90%
How would you rate the timeliness of your services? (% excellent or good)	85%	83%
How would you rate when you receive your services or care? (% excellent or good)	89%	88%
How would you rate the communication between you and the people who help you? (% excellent or good)	90%	90%
How would you rate the reliability of the people who help you? (% excellent or good)	90%	90%
How would you rate the degree to which the services meet your daily needs such as bathing, dressing, meals, and housekeeping? (% excellent or good)	89%	85%
How would you rate how well problems or concerns you have with your care are taken care of? (% excellent or good)	86%	84%
How would you rate the courtesy of those who help you? (% excellent or good)	96%	96%
How would you rate how well people listen to your needs and preferences? (% excellent or good)	89%	91%
Overall, how do you rate the value of the services you receive? (% excellent or good)	93%	93%
What is your recommendation of Choices of Care to others? (% indicating excellent or good)	90%	N/A
I receive all the services I need and want exactly when and how I need and want the services (% agree or strongly agree)	79%	72%
My services help me to achieve my personal goals (% agree or strongly agree)	83%	75%

	All Consumers 2013	All Consumers 2012
My current residence is the setting in which I choose to receive services (% agree or strongly agree)	94%	89%
I receive services exactly where I need and want services (% agree or strongly agree)	89%	85%
Has the help you received made your life... (% somewhat or much better)	91%	88%
How easy would it be for you to stay in your home if you did not receive services? Would you say... (% difficult or very difficult)	75%	76%
My services help me to maintain or improve my health (% agree or strongly agree)	87%	85%

4. CASE MANAGER

A summary of satisfaction and quality measures with case managers is provided in Table 2. Consumers rate the quality of service they receive from their case manager very positively, believe that their case manager understands their specific situation, and are also satisfied with the amount of involvement they are given by their case manager. Nearly nine in ten consumers (89%) with a case manager are very or somewhat satisfied with their case manager and 88% would give an excellent or good recommendation of their case manager to others. Nine in 10 consumers (90%) rate the competency of case management staff as excellent or good.

Consumers believe that their case manager is responsive to their needs with 84% indicating their case manager always or almost always asks what they want, 85% indicating their case manager or support coordinator always or almost always coordinates their services to meet their needs, and 83% percent indicating that they feel they always or almost always have a part in the planning of their care. Eighty-three percent also indicate that their case manager always or almost always helps them to understand the different service options that are available. Consumers also indicate that their case manager is available to meet their needs; 82% indicate they can always or almost always talk to their case manager when they need to and 87% indicate their case manager always or almost always helps when the consumer asks for something. Finally, consumers believe that their case manager is helping them to remain independent with 83% indicating their case manager always or almost always understands the services they need to stay in their current living situation.

Comparisons to 2012 data are discussed in the detailed findings section.

Table 2. Summary of Items Evaluating Case Manager

	All Consumers 2013	All Consumers 2012
How satisfied are you with your case manager? (% very or somewhat satisfied)	89%	95%
What is your recommendation of your case manager to others? (% indicating excellent or good)	88%	N/A
I feel I have a part in planning my care with my case manager. (% indicating always or almost always)	83%	86%
My case manager coordinates my services to meet my needs. (% indicating always or almost always)	85%	88%
My case manager understands which services I need to stay in my current living situation. (% indicating always or almost always)	89%	90%
I can talk to my case manager when I need to. (% indicating always or almost always)	82%	87%
My case manager helps me when I ask for something. (% indicating always or almost always)	87%	89%
My case manager asks me what I want. (% indicating always or almost always)	84%	83%
My case manager helps me understand the different service options that are available. (% indicating always or almost always)	83%	86%
Please rate case management services on the competency of staff (% indicating excellent or good)	90%	N/A

5. QUALITY RATINGS OF INDIVIDUAL PROGRAMS

A summary of items evaluating individual programs and services is provided in Table 3 starting on page 14. Due to overlapping samples (a consumer might receive more than one type of service/be enrolled in more than one program) and the way the questions were set up (asked separately for each program), statistical comparisons between programs/services were not made for the program-specific items.

Personal Care Services (Consumer, Surrogate, and Home Health Agency Directed)

Consumers in Personal Care Services and/or enrolled in Flexible Choices were asked a series of questions about the services they receive.

Consumers in Personal Care Services are highly satisfied and also highly rate the quality of these services. Nearly all consumers (95%) are very or somewhat satisfied with the services they receive and 95% of consumers rate the quality of services as excellent or good. Ninety-five percent of consumers rate their recommendation of Personal Care Services as excellent or good. Ninety-two percent of consumers also indicate that the services they receive always or almost always meet their

needs. Ninety-three percent of consumers rate the competency of Personal Care Services staff as excellent or good.

Nearly all consumers (97%) report their caregivers always or almost always treat them with respect and courtesy. Ninety-two percent of consumers indicate they always or almost always know who to contact if they have a complaint about the program or if they need more help. Ninety-two percent of consumers indicate the program always or almost always provides services when and where they are needed.

A majority of consumers agree that they were also able to choose their providers and schedule. Eighty-seven percent of consumers strongly agree or agree they were able to choose their services while 85% strongly agree or agree they were able to choose the provider of their services. A small majority (63%) strongly agrees or agrees that they were able to select their provider from a variety of providers. Eighty-five percent of consumers indicate they strongly agree or agree that they were able to choose the scheduling of services to meet their needs.

A little more than half (51%) strongly agrees or agrees that having more providers would better meet their needs though only 24% agree that there are services they need that they cannot get. These include more time, transportation assistance, therapy or rehabilitation services, and medical equipment.

Only 15% of consumers report they have experienced problems during the past 12 months. Fifty-eight percent of consumers that experienced problems during the prior 12 months indicate that Personal Care Services worked to resolve their problems.

Nearly half of consumers (45%) indicate it would be helpful or very helpful to add new Personal Care Services providers and 48% of consumers strongly agree or agree that adding new providers of Personal Care Services would improve their ability to have services when and where needed. Over one in three consumers (37%) strongly agree or agree that adding new providers of Personal Care Services would improve the cost effectiveness of the services they receive, and 40% strongly agree or agree that adding new providers of Personal Care Services would improve the quality of the services they receive. The comments offered by respondents about adding new providers is mostly positive, but some consumers feel that it is not needed.

Homemaker Services

Consumers are highly satisfied with the Homemaker Services they receive and highly rate the quality of the services. Nearly all consumers receiving Homemaker Services (90%) are very or somewhat satisfied with the services they receive and 88% of consumers rate the quality of services as excellent or good. Ninety-five percent of consumers rate their recommendation of Homemaker Services as excellent or good. Eighty-three percent of consumers also indicate that the services they receive always or almost always meet their needs. Eighty-nine percent of consumers rate the competency of Homemaker Services staff as excellent or good.

Nearly all consumers (98%) report their caregivers always or almost always treat them with respect and courtesy. Eighty-eight percent of consumers indicate they always or almost always know who to contact if they have a complaint about the program or if they need more help. Eighty-seven percent of consumers indicate the program always or almost always provides services when and where they are needed.

Sixty-seven percent of consumers strongly agree or agree they were able to choose their services though only 48% strongly agree or agree they were able to choose the provider of their services. Less than a third (32%) strongly agrees or agrees that they were able to select their provider from a variety of providers. Seventy percent of consumers indicate they strongly agree or agree that they were able to choose the scheduling of services to meet their needs. In addition, only 46% agree that there are services they need that they cannot get.

Among those in Homemaker Services, 24% report they have experienced problems during the past 12 months. Over half (55%) of consumers that experienced problems during the prior 12 months indicate that Homemaker Services worked to resolve their problems.

Fifty-four percent of consumers indicate it would be helpful or very helpful to add new Homemaker Services providers, and 50% of consumers strongly agree or agree that adding new providers of Homemaker Services would improve their ability to have services when and where needed. However, only 43% of consumers strongly agree or agree that having more providers would better meet their needs, just 39% percent strongly agree or agree that adding new providers of Homemaker Services would improve the cost effectiveness of the services they receive, and less than half (46%) strongly agree or agree that adding new providers of Homemaker Services would improve the quality of the services they receive. The comments offered by respondents about adding new providers include that it is a good idea because many people need help, need more qualified providers and better training, adding new providers would help with scheduling and would allow caregivers more time with clients, and they are happy with their current provider, among others. It then appears that the addition of more providers is met with mixed feelings; on one hand, it would help with scheduling and therefore, would be helpful to add new providers. On the other hand, many consumers are already satisfied with their providers and see no need to be provided with more options. In addition, some consumers appear to only feel that the addition of more providers would be helpful provided that the caregivers are qualified and better trained.

Adult Day Centers

Consumers are very satisfied with the Adult Day Center they attend and value the quality of the services provided at the center. Nearly all consumers attending Adult Day Centers (94%) are very or somewhat satisfied with the services they receive and 94% of consumers rate the quality of services as excellent or good. Ninety-four percent of consumers rate their recommendation of their Adult Day Center as excellent or good. Ninety-two percent of consumers also indicate that the services they receive always or almost always meet their needs. Ninety-four percent of consumers rate the competency of their Adult Day Center staff as excellent or good.

Nearly all consumers (96%) report their caregivers always or almost always treat them with respect and courtesy. Nine in ten consumers (90%) indicate they always or almost always know who to contact if they have a complaint about the program or if they need more help. Ninety-three percent of consumers indicate the program always or almost always provides services when and where they are needed.

Among those attending an Adult Day Center, only 12% report they have experienced problems during the past 12 months. Seventy-three percent of consumers that experienced problems during the prior 12 months indicate that the Adult Day Center worked to resolve their problems.

Attendant Services Program

Due to the low response rate obtained for Attendant Services Program participants, findings for the Attendant Services Program should be interpreted with caution.

In general, consumers are highly satisfied with the Attendant Services Program and highly rate the quality of services they receive through the program. Nine in ten consumers in the Attendant Services Program (90%) are very or somewhat satisfied with the services they receive, and 97% of consumers rate the quality of services as excellent or good. Ninety-six percent of consumers rate their recommendation of Attendant Services Program as excellent or good. Ninety-five percent of consumers also indicate that the services they receive always or almost always meet their needs. Ninety-five percent of consumers rate the competency of Attendant Services Program staff as excellent or good.

All consumers (100%) report their caregivers always or almost always treat them with respect and courtesy. Eighty-seven percent of consumers indicate they always or almost always know who to contact if they have a complaint about the program or if they need more help. Ninety-three percent of consumers indicate the program always or almost always provides services when and where they are needed.

Only 5% of consumers report they have experienced problems during the past 12 months. Over one half (55%) of consumers that experienced problems during the prior 12 months indicate that the Attendant Services Program worked to resolve their problems.

Traumatic Brain Injury Program

Due to the low response rate obtained for Traumatic Brain Injury Program participants, findings should be interpreted with caution.

Respondents are satisfied with the services they receive through the Traumatic Brain Injury Program. Eighty-five percent of respondents in the Traumatic Brain Injury Program are very or somewhat satisfied with the services they receive and 92% of respondents rate the quality of services as excellent or good. Eighty-three percent of consumers rate their recommendation of the Traumatic Brain Injury Program as excellent or good. Ninety-two percent indicate that the services they receive always or almost always meet their needs. Ninety-two percent of consumers rate the competency of the Traumatic Brain Injury Program staff as excellent or good.

All respondents (100%) report their caregivers always or almost always treat them with respect and courtesy. Eighty-three percent of respondents indicate they always or almost always know who to contact if they have a complaint about the program or if they need more help. Ninety-two percent of respondents indicate the program always or almost always provides services when and where they are needed.

Among respondents in the Traumatic Brain Injury Program, 20% report they have experienced problems during the past 12 months. Over one half (59%) of consumers that experienced problems during the prior 12 months indicate that the Traumatic Brain Injury Program worked to resolve their problems.

Table 3. Summary of Items Evaluating Individual Programs and Services

	Personal Care Services	Home-maker Services	Adult Day Center	Attendant Services Program	TBI Program
How satisfied are you with the services you receive from the ___? (% very or somewhat satisfied)	95%	90%	94%	90%	85%
How do you rate the quality of the services you receive from the ___? (% excellent or good)	95%	88%	94%	97%	92%
What is your recommendation of the services you receive from the ___ to others? (% excellent or good)	95%	88%	94%	96%	83%
The services I receive from the ___ meet my needs. (% always or almost always)	92%	83%	92%	95%	92%
My caregivers in the ___ treat me with respect and courtesy. (% always or almost always)	97%	98%	96%	100%	100%
I know who to contact if I have a complaint about the ___ or if I need more help. (% always or almost always)	92%	88%	90%	87%	83%
The ___ provides services to me when and where I need them. (% always or almost always)	92%	87%	93%	93%	92%
Please rate the ___ on the competency of staff. (% excellent or good)	93%	89%	94%	95%	92%
Have you experienced any problems with the ___ during the past 12 months? (% Yes)	15%	24%	12%	5%	20%
I was able to choose my _____ services (% agree or strongly agree)	87%	67%	--	--	--
I was able to choose the provider of my _____ services (% agree or strongly agree)	85%	48%	--	--	--
I was able to choose the scheduling of _____ services that meets my needs (% agree or strongly agree)	85%	70%	--	--	--
I was able to select my _____ services provider from a variety of providers (% agree or strongly agree)	65%	32%	--	--	--
Having more providers who offer _____ services would allow me to better meet my needs (% agree or strongly agree)	52%	43%	--	--	--
There are _____ services that I need that I CAN'T GET (% agree or strongly agree)	24%	24%	--	--	--

Quality Ratings of Home Delivered Meals Program

Respondents to the Long Term Care Consumer Survey were asked if, in addition to other long term care services, whether they also currently receive meals through the Home Delivered Meals Program. Of the 1,182 respondents, 316 indicated that they also receive services through the Home Delivered Meals Program.

There is a high level of satisfaction with the Home Delivered Meals Program with 84% of consumers indicating they are very or somewhat satisfied with the program. Eighty-nine percent of consumers rate the service they receive as good or excellent, and 83% of consumers give an excellent or good recommendation of the Home Delivered Meals Program.

A majority also express satisfaction with the food they receive. Seventy percent of consumers indicate that the food they receive through the Home Delivered Meals Program always or almost always tastes good, and 74% indicate that the food always or almost always looks good. Eighty-one percent of consumers indicate that the meals provided always or almost always provide a variety of foods. Seventy-three percent of consumers believe that the food offered always or almost always meets their specific dietary needs. Eighty-three percent of consumers always or almost always eat the meals that are delivered.

A large majority also rate the delivery of the food highly. Eighty-three percent indicate that the meals are always or almost always delivered on time. Eighty percent indicate that when delivered, the hot food is always or almost always hot and 85% indicate that the cold food is always or almost always cold.

Consumers also see the benefits of the Home Delivered Meals Program; 87% of consumers indicate that the Home Delivered Meals Program has helped them a lot or somewhat financially. A majority of consumers indicate the program has helped them eat healthier foods (84%), achieve or maintain a healthy weight (73%), improve their health (75%), feel better (76%), and continue to live at home (91%).

On the days that consumers eat a meal from home-delivered meals, one in three state that the meals represent between one-third and one-half of the food eaten in a day, just over one in four (25%) state that the meals represent about one-half of the food eaten in a day, and just under one in four (23%) state that the meals represent more than half of the food eaten in a day.

Only 14% of consumers have experienced problems with the Home Delivered Meals Program during the past 12 months. Over one in three consumers that experienced problems during the prior 12 months (37%) indicate that the Home Delivered Meals Program worked to resolve their problems

6. QUALITY AND SERVICE IMPROVEMENT

The results of the DAIL Long-Term Care Services and Programs Consumer Survey suggest that the large majority of consumers are satisfied with DAIL programs, satisfied with the services they receive, and consider the quality of these services to be excellent. The survey results are a clear indication that DAIL is in large part fulfilling its goal “to make Vermont the best state in which to grow old or to live with a disability ~ with dignity, respect and independence.”

Based upon the views and attitudes of the large majority of consumers, the survey results did not identify any major systemic problems with the programs and services provided by DAIL.

DAIL is providing the services needed by the vast majority of its consumers in a manner that is effective, appropriate and that clients appreciate. The programs are viewed by consumers as providing an important service that allows them to remain in their homes.

Some of the key positive highlights include:

- 91% of consumers rate the quality of services they receive through DAIL programs as excellent or good.
- 93% of consumers rate the value of the services they receive as excellent or good.
- 90% of consumers rate the reliability of the people that help them as excellent or good.
- 90% of consumers rate the recommendation of Choices for Care to others as excellent or good.
- The programs that generally had the lowest scores in 2012 (Traumatic Brain Injury) saw an increase on a number of program specific measures; continuing a trend observed from 2010 to 2012. However, these results should be interpreted with caution due to a low sample size.
- Overall satisfaction with DAIL has increased slightly in a number of dimensions.

There does seem to be a slight decrease in positive experiences with case managers. When looking at the items rating case managers, all but one has declined since 2012 (with 6 out of 7 dropping by at least a percentage point). Two of these measures show a larger decline (by 4 percentage points or more) since 2012:

- Satisfaction with case manager (from 95% in 2012 to 89% in 2013, see Table 2 on page 10)
- Being able to talk to a case manager when needed (from 87% in 2012 to 82% in 2013; see Table 2 on page 10)

As with any quality assurance process, the survey did identify some areas of concern or focus for quality improvement. The survey results also show the concerns expressed by some consumers regarding the lack of communication, scheduling issues, role of the consumer in their services, and shortage of qualified caregivers to provide these services. The results do suggest that there are some areas on which DAIL and provider organizations can focus to improve consumer satisfaction:

- In looking at these overall measures, the measures with the lowest percentage of respondents that provided a positive response focus on the receipt of services when and how needed (79%), services helping achieve personal goals (83%), amount of choice and control when planning services (84%), timeliness of services (85%), and problem resolution (86%).
- When looking at program specific measures, the measures that generally have the lowest scores are those that focus on the access to services and availability of providers (see Table 3 on pages 13-14). This continues the trend observed in 2012.
- In the feedback provided by consumers, four of the most common themes concern access to services, the need for more qualified providers, problems with scheduling, and communication issues (see Open-Ended Comments in each program-specific section). This is similar to the feedback provided by consumers in 2012.
- Among the consumers indicating they experienced problems, the most common problems were concerns or problems with caregiver and scheduling issues. A fairly high percentage indicated that their case managers and/or service providers did not work to resolve their

problems with caregivers.

7. QUALITY OF LIFE IMPROVEMENT

The results of this survey also suggest that the large majority of consumers receiving services through DAIL programs experience a good quality of life and improved quality of life through receipt of services.

Some of the key positive quality of life highlights include:

- 91% of consumers feel the help they receive has made their life better.
- 87% of consumers believe that the services they receive has helped them improve their health.
- 89% of consumers feel safe in their home.
- 89% of consumers have someone they can count on in an emergency.
- 81% of consumers can get around their house as much as they need to.
- 81% of consumers have someone they can count on to listen to them when they need to talk.

However, as we know that improving one's quality of life through meeting social, emotional and physical needs, leads to better outcomes and better health, there are several areas in which DAIL and provider organizations can focus on to improve quality of life outcomes:

- Ensuring that the services provided make it easy for consumers to stay in their home (3 out of 4 consumers agree that it would be difficult to stay in their home if they didn't receive services).
- Ensuring consumers feel safe in their community (only 71% feel safe in their community).
- Helping consumers get where they need or want to go (only 57% of consumers report being able to get to where they need or want to go).
- Making consumers feel valuable (only 70% feel valued and respected and less than half of consumers (43%) feel a part of their community).
- Ensuring that consumers have their social needs met (only 64% of consumers are satisfied with the amount of contact they have with family and friends, just over half of consumers (53%) feel satisfied with their social life, and 71% have someone to do something enjoyable with).
- Helping consumers find activities for their leisure time (only 65% are satisfied with how they spend their free time and less than 2 in 3 (60%) feel they have something to do in their leisure time).
- Ensuring the emotional health of consumers (15% always or usually felt blue in the past week).
- Ensuring that consumers get adequate social and emotional support (only 62% of consumers feel they get the social and emotional support they need).
- Increasing the degree to which consumers are satisfied with their life (66% of consumers feel satisfied or very satisfied with their lives, a dramatic decrease from 2012¹).

¹ In 2013, we added a "Neither Satisfied or Dissatisfied" option to the response scale, thus increasing the scale from a 4-point scale to a 5-point scale.

E. Detailed Findings with Trending Comparisons

1. PROXY RESPONDENTS

Around 1 in 3 consumers had help completing the survey. Not surprisingly, over 2 in 3 consumers receiving Surrogate-Directed Personal Care Services had someone help them complete their survey. Those in the Attendant Services Program received the least amount of help completing the survey.

For the mail survey, the most cited ways consumers received help were by having questions read to them and having someone record the answers they gave.

Of those receiving help, over 1 in 3 were helped by a paid caregiver. Those receiving Consumer-Directed, Surrogate-Directed Personal Care Services, and Flexible Choices, and those enrolled in the Attendant Services Program had the highest amount of consumers receiving help completing the survey from a paid caregiver.

Table 4a. Help completing survey by program

	Help Completing Survey (% Yes)	How helped				
		Read questions to me	Wrote down answers I gave	Answered questions for me	Translated questions	Some other way
Total	33.58%	43.30%	44.70%	18.10%	6.05%	2.60%
CFC Case Mgmt	33.87%	42.32%	43.56%	18.49%	5.37%	2.18%
Personal Care Services	44.57%↑	35.28%↓	35.88%↓	18.63%	4.33%	1.02%
<i>Consumer-Directed</i>	18.84%↓	47.25%	46.17%	6.34%	--	2.84%
<i>Surrogate-Directed</i>	67.75%↑	27.21%↓	23.81%↓	21.29%	7.53%↓	--
<i>Agency-Directed</i>	39.54%↑	41.56%	45.85%	19.62%	1.83%	1.59%
Flexible Choices*	32.32%	52.28%	55.15%	6.06%	7.34%	5.06%
Adult Day Centers	47.65%↑	35.10%	35.51%	22.87%	1.07%	3.79%
Homemaker Services	19.51%↓	64.91%↑	69.22%↑	14.56%	9.81%	5.44%
Attendant Services Program*	14.33%↓	56.49%	56.94%	24.35%	--	--
Traumatic Brain Injury Program*	64.48%	53.01%	57.65%	18.12%	26.01%	12.39%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 4b. Help completing survey by program

	Paid Carergiver (% Yes)	Relationship to Consumer			
		Spouse	Immediate Family	Extended Family	Unrelated/ Other
Total	38.24%	24.45%	31.83%	4.96%	38.76%
CFC Case Mgmt	37.50%	24.64%	29.97%	5.42%	39.96%
Personal Care Services	44.25%	30.47%	29.18%	5.94%	34.42%
<i>Consumer-Directed</i>	72.16% ↑	21.29%	20.18%	2.37%	56.16%
<i>Surrogate-Directed</i>	51.77% ↑	26.93%	32.08%	8.73%	32.25%
<i>Agency-Directed</i>	30.24%	33.64%	30.53%	3.56%	32.27%
Flexible Choices*	60.05%	35.73%	29.68%	--	34.60%
Adult Day Centers	29.14%	29.12%	34.43%	5.29%	31.16%
Homemaker Services	20.61% ↓	6.85% ↓	29.59%	5.27%	58.29% ↑
Attendant Services Program*	78.45%	10.76%	56.11%	--	33.12%
Traumatic Brain Injury Program*	13.66%	15.24%	71.10%	--	13.66%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

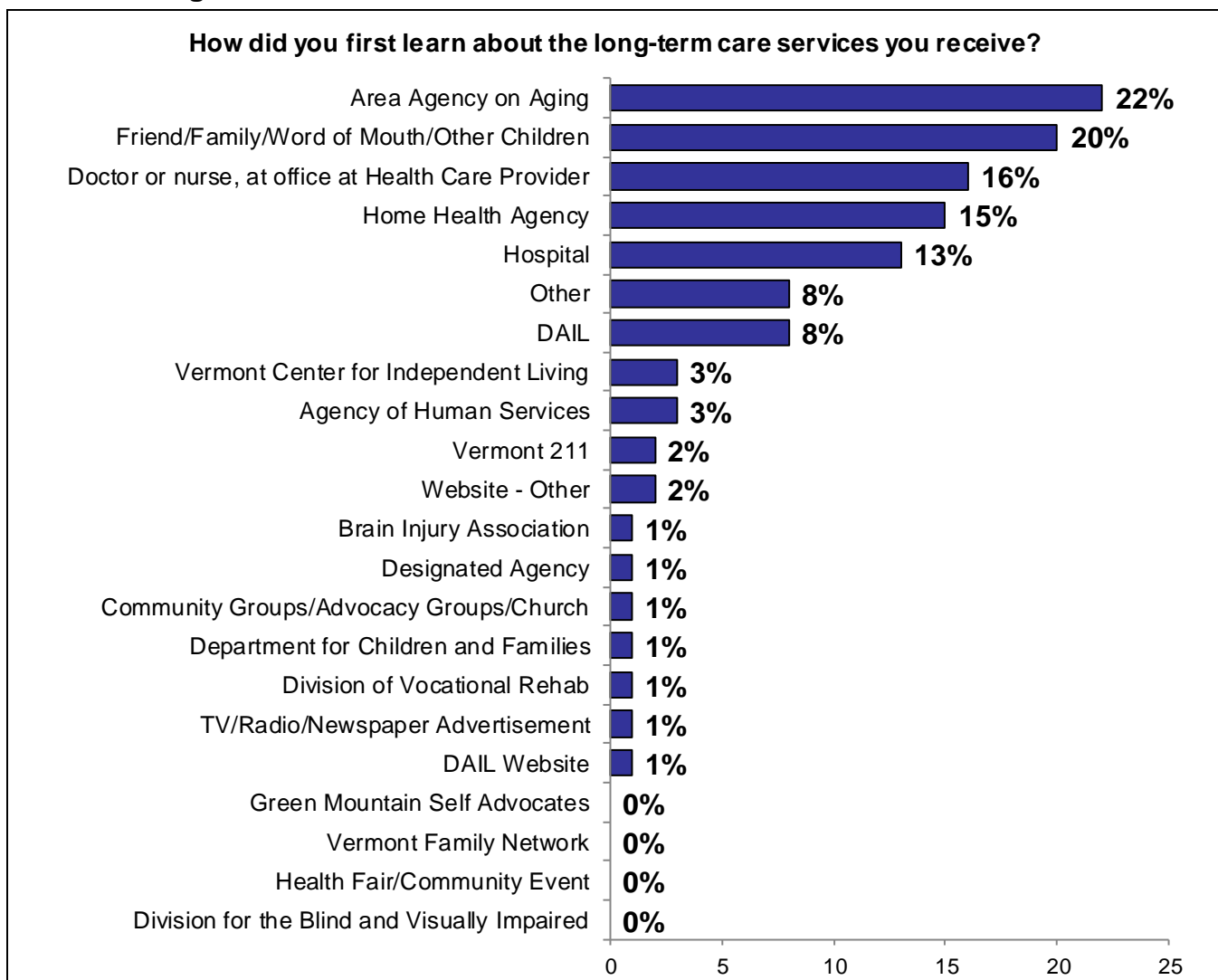
* Program did not meet 95/5 statistical criteria and should be interpreted with caution

2. INFORMATION AND AWARENESS OF LTC PROGRAMS

As shown in Figure 1 below, a little more than one in five consumers (22%) found out about the long-term care services they receive through the Area Agency on Aging. In addition, one in five (20%) consumers found out about the long-term care services they receive from a friend, family member, child, or other word-of-mouth. Other sources of information include doctor or nurses, home health agencies, and hospitals.

2013 marks a steep rise in learning about long-term care services from the Agency of Aging, up from only 3% in 2012.

Figure 2. Percentage of respondents who learned about the long-term care services they receive through various means



Among other sources of information, the Visiting Nurse Association and case managers/social workers top the list. Additionally, 9% of those who responded “Other” indicated that they were already aware of the program, mostly by working in the long-term care field.

Table 5. Other sources of information about long-term care services

How did you first learn about the long-term care services you receive? Other	
Number answering question (unweighted)	114
Area agency on aging, council on aging, NGO	3%
Day care, senior center	1%
General awareness of programs, services available	9%
Home health	2%
Nursing home	5%
Personal research - phone book, internet	2%
Rehabilitation center	5%
Visiting nurses, VNA	16%
Was contacted - direct mail, called	5%
VA - veteran's affairs	2%
Specific name - no affiliation	2%
Case manager; social worker	10%
Employer	1%
Choices for Care	1%
Agency - general, non-specific	1%
Person, friend, family, word of mouth, other children	9%
Doctor, nurse, health care provider, hospital	4%
Government office - general	1%
Other	22%
Unsure	2%
Total	100%

Four in five consumers reported that someone talked to them about getting the help needed with daily activities. As shown in Table 10 below, almost 1 in 5 individuals reported a specific name with no affiliation. Other sources of information are area agencies or councils on aging (14%) and case managers or social workers (11%). Fourteen percent of consumers are unsure who they spoke with regarding getting help with daily activities.

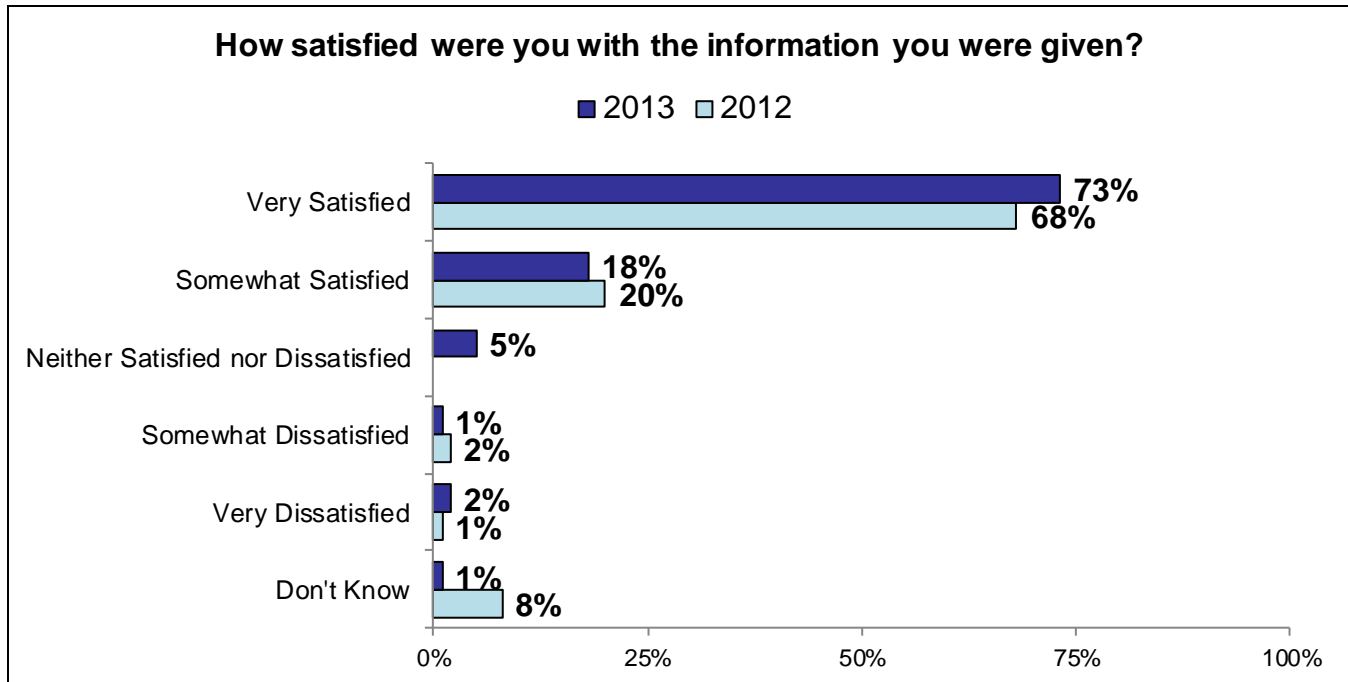
Table 6. Who talked to consumers about way to get help needed with daily activities

Did someone talk with you about ways of getting the help you needed with daily activities?	
Number answering question (unweighted)	1,238
Yes	80%
No	16%
Don't Know	4%

Did someone talk with you about ways of getting the help you needed with daily activities? (Specify)	
Number answering question (unweighted)	1,000
Community groups, advocacy groups, non-profit, church	1%
Dept of Disabilities, Aging and Independent Living	1%
Doctor, nurse, health care provider	9%
Hospital	3%
Person, friend, family, word of mouth, other children	5%
Area agency on aging, council on aging, ngo	14%
Day care, senior center	1%
Home health	8%
Nursing home	1%
Rehabilitation center	1%
Visiting nurses, VNA	8%
Specific name - no affiliation	17%
Case manager; social worker; counselor	11%
Choices for Care	1%
Other	4%
Unsure	14%
Total	100%

Approximately three in four consumers are Very Satisfied with the information they were given about ways of getting the help they needed with daily activities. Overall, 91% of consumers are Very Satisfied or Satisfied with the information they were given, a slight increase from 2012 (88%).

Figure 3. Percentage of respondents' satisfaction with the information they were given about getting needed help with daily activities



One in three consumers who reported being somewhat or very dissatisfied with the information they were given did so due to a lack of information or communication received. Another 13% did not receive the needed help.

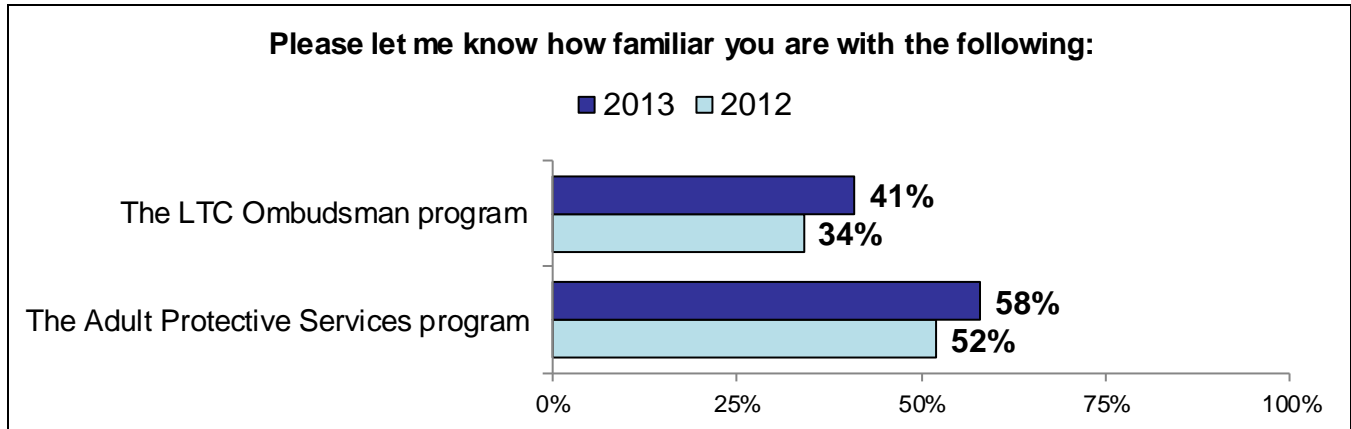
Table 7. Why consumers are dissatisfied with the information they were given about getting needed help with daily activities

Why are you dissatisfied with the information you were given?	
Number answering question (unweighted)	31
Conflicting/incorrect information	11%
Cost of services is a burden	5%
Did not receive needed assistance	13%
Had to do a lot of research ourselves	6%
No follow-through, get run around	6%
Need more information, communication	33%
Did not receive as much assistance as I expected, require	3%
Wait too long	2%
Other	13%
Unsure	6%
Total	100%

Familiarity with the LTC Ombudsman program is up from 34% in 2012 to 41% in 2013, and familiarity with the Adult Protective Services program rose slightly from 52% in 2012 to 58% in 2013.

Overall, consumers are more familiar with the Adult Protective Services program than the LTC Ombudsman program.

Figure 4. Percentage of respondents Very Familiar or Somewhat Familiar with the LTC Ombudsman program and the Adult Protective Services program



2.1. RESPONSES BY PROGRAM

Satisfaction with information given ranged from 80% in the Traumatic Brain Injury Program to 96% in Surrogate-Directed Consumers Services and the Attendant Services Program.

Surrogate-Directed Personal Care Services: Consumers in Surrogate-Directed Personal Care Services are significantly more satisfied with the information they received than consumers in other programs.

Table 8. Percentage of respondents' satisfaction with the information they were given by Program

	Satisfaction with Information Given	
	% Very or Somewhat Satisfied	
	n	%
Total	1,075	91%
CFC Case Mgmt	978	91%
Personal Care Services	590	93%
<i>Consumer-Directed</i>	152	91%
<i>Surrogate-Directed</i>	193	96% ↑
<i>Agency-Directed</i>	313	91%
Flexible Choices*	40	93%
Adult Day Services	177	92%
Homemaker Services	339	88%
Attendant Services Program*	49	96%
Traumatic Brain Injury Program*	9	80%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Familiarity with the LTC Ombudsman program ranged from 28% in Homemaker Services to 54% in Surrogate-Directed Personal Care Services, and familiarity with the Adult Protective Services program ranged from 39% in the Traumatic Brain Injury Program to 75% in Consumer-Directed Personal Care Services.

Personal Care Services: Consumers receiving Personal Care Services are more likely than those in other programs to be familiar with both the LTC Ombudsman program and the Adult Protective Services program compared to consumers in other programs.

Homemaker Services: Those receiving Homemaker Services are less likely to be familiar with both programs compared to consumers in other programs.

Table 9. Percentage of respondents Very Familiar or Somewhat Familiar with the LTC Ombudsman Program and the Adult Protective Services Program by Program

	The LTC Ombudsman program		The Adult Protective Services program	
	% Very or Somewhat Familiar		% Very or Somewhat Familiar	
	n	%	n	%
Total	1,268	41%	1,268	58%
CFC Case Mgmt	1,149	41%	1,149	58%
Personal Care Services	653	50% ↑	653	67% ↑
<i>Consumer-Directed</i>	164	49% ↑	164	75% ↑
<i>Surrogate-Directed</i>	212	54% ↑	212	73% ↑
<i>Agency-Directed</i>	354	48% ↑	354	59%
Flexible Choices*	45	54%	45	59%
Adult Day Services	209	47%	209	59%
Homemaker Services	428	28% ↓	428	47% ↓
Attendant Services Program*	64	36%	64	68%
Traumatic Brain Injury Program*	11	46%	11	39%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

2.2. RESPONSES BY COUNTY

Satisfaction with information given ranged from 85% in Bennington to 100% in Essex and Windsor counties.

Windham County: Consumers in Windham County are significantly more satisfied with the information they received than consumers in other counties.

Table 10. Percentage of respondents' satisfaction with the information they were given by county

	Satisfaction with Information Given	
	% Very or Somewhat Satisfied	
	n	%
Total	1,075	91%
Addison*	89	92%
Bennington*	80	85%
Caledonia*	93	92%
Chittenden*	137	90%
Essex*	15	100%
Franklin*	55	92%
Grand Isle*	12	91%
Lamoille*	47	93%
Orange*	55	91%
Orleans*	101	93%
Rutland	176	92%
Washington*	60	90%
Windham*	59	100% ↑
Windsor*	96	89%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Familiarity with the LTC Ombudsman program ranged from 29% in Washington County to 53% in Franklin County, and familiarity with the Adult Protective Services program ranged from 47% in Washington County and 76% in Franklin County.

Chittenden County: Consumers in Chittenden County are more likely than those in other counties to be familiar with both the LTC Ombudsman program.

Franklin County: Residents of Franklin County are more likely than those in other counties to be familiar with the Adult Protective Services program.

Rutland County: Consumers residing in Rutland County are less likely to be familiar with both programs compared to consumers in other counties.

Washington County: Residents of Washington County are less likely to be familiar with the LTC Ombudsman program compared to consumers in other counties.

Table 11. Percentage of respondents Very Familiar or Somewhat Familiar with the LTC Ombudsman program and the Adult Protective Services program by County

	The LTC Ombudsman program		The Adult Protective Services program	
	% Very or Somewhat Familiar		% Very or Somewhat Familiar	
	n	%	n	%
Total	1,268	41%	1,268	58%
Addison*	101	43%	101	64%
Bennington*	90	46%	90	53%
Caledonia*	116	43%	116	59%
Chittenden*	166	52% ↑	166	65%
Essex*	21	31%	21	52%
Franklin*	63	53%	63	76% ↑
Grand Isle*	15	45%	15	67%
Lamoille*	61	35%	61	56%
Orange*	66	34%	66	50%
Orleans*	110	45%	110	67%
Rutland	204	33% ↓	204	51% ↓
Washington*	78	29% ↓	78	47%
Windham*	72	42%	72	55%
Windsor*	105	32%	105	55%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

3. GENERAL RATINGS OF SERVICES

3.1. RATINGS OF LONG-TERM CARE SERVICES

The 2013 survey included 10 questions to assess consumers' ratings of following aspects of service delivery:

1. The amount of choice and control that the consumer had when s/he planned the services or care they would receive
2. The overall quality of the help received
3. The timeliness of the services (e.g., services received when needed).
4. The degree to which the timing of services or care fit with the consumer's schedule
5. The communication between the consumer and their care provider(s)
6. The reliability of the consumer's care provider(s)
7. The degree to which the services meet the consumer's daily needs (e.g., activities of daily living; housekeeping)
8. How well problems or concerns about the consumer's care are resolved
9. The courtesy of the consumer's care provider(s)
10. How well people listen to the consumer's needs and preferences

The survey also included two questions assessing the overall value of services provided by DAIL and the Choices for Care program:

1. Overall how do you rate the value of the services you receive?
2. What is your recommendation of Choices of Care to others?

Consumers rated these items on a four-point scale: "excellent", "good", "fair", or "poor". For each survey item we indicate the percentage of respondents who endorsed either "excellent", or "good" as a percentage of all valid responses.

Amount of Choice and Control

In 2013, 84% of all long-term care participants rate the amount of choice and control that they had when planning their services or care as "excellent" or "good". This was the same rating given in 2012.

Quality of Help Received

In 2013, 91% of consumers rate the quality of the help they received as "excellent" or "good". This percentage was similar to consumers surveyed in 2012 (90%).

Timeliness of Services

In 2013, 85% of consumers rate the timeliness of the services as "excellent" or "good". This percentage was similar to consumers surveyed in 2012 (83%).

Service Scheduling

In 2013, 89% of consumers rate the scheduling of their services as “excellent” or “good”. This percentage was similar to those surveyed in 2012 (88%).

Communication with Caregivers

In 2013, 90% of consumers rate the communication with their caregivers as “excellent” or “good”. This percentage was unchanged from those surveyed in 2012 (90%).

Caregiver Reliability

In 2013, 90% of consumers rate the reliability of their caregivers as “excellent” or “good”. This percentage was unchanged from consumers surveyed in 2012 (90%).

Services Meet Needs

In 2013, 89% of consumers rate the degree to which services meet their needs as “excellent” or “good”. This percentage was slightly higher than those surveyed in 2012 (85%).

Problem Resolution

In 2013, 86% of consumers rate the manner in which problems or concerns with their care were resolved as “excellent” or “good”. This percentage was similar to those surveyed in 2012 (84%).

Caregiver Courtesy

In 2013, 96% of consumers rate the courtesy of their caregivers as “excellent” or “good”. This percentage was unchanged from consumers surveyed in 2012 (96%).

People Listen to Needs

In 2013, 89% of consumers rate how well people listened to their needs as “excellent” or “good”. This percentage was similar to consumers surveyed in 2012 (91%).

Overall Value of Services

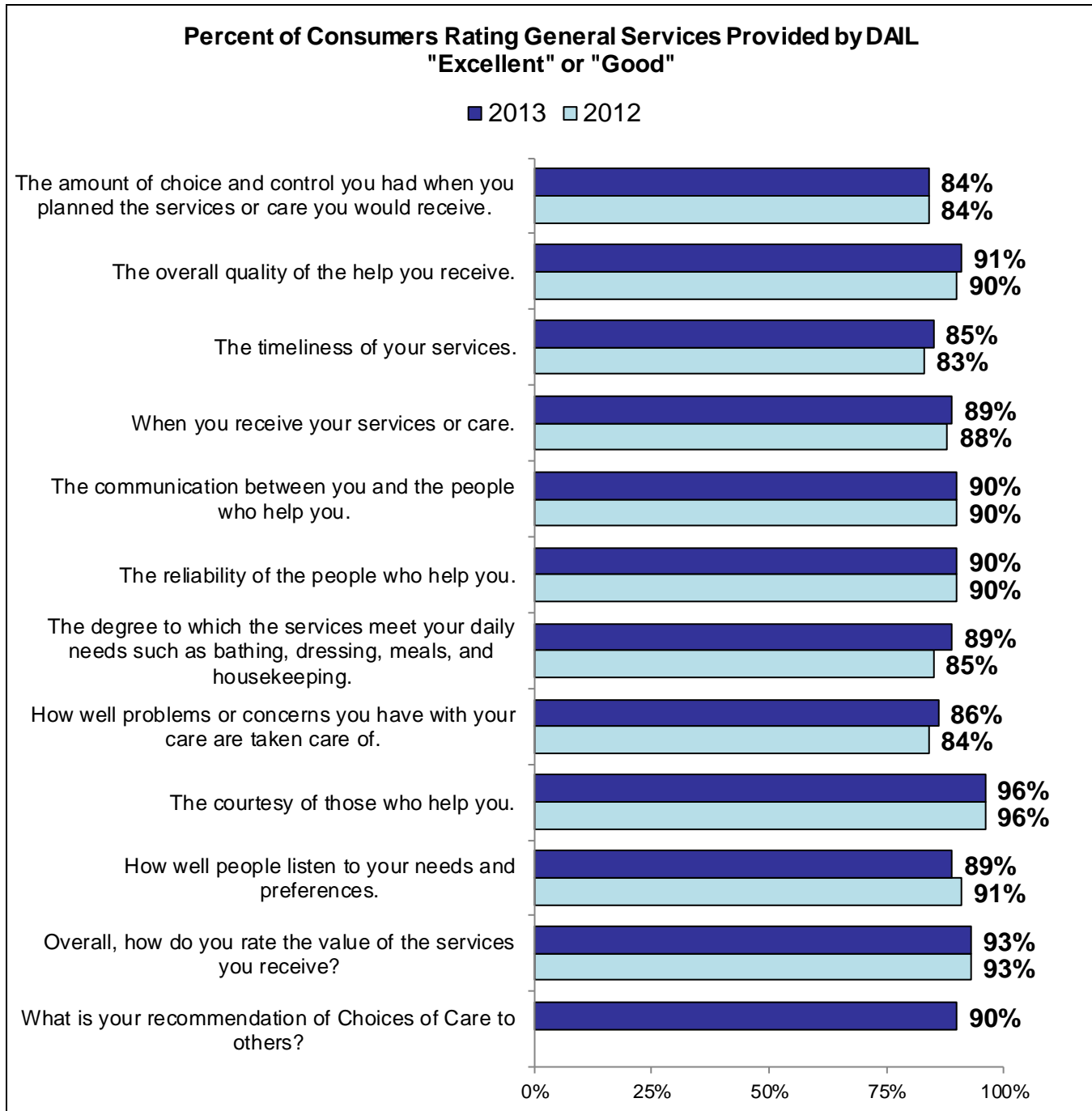
In 2013, 93% of consumers rate the overall value of services as “excellent” or “good”. This percentage was unchanged from consumers surveyed in 2012 (93%).

Recommendation of Choices of Care to Others

New survey item in 2013. 90% of consumers give Choices for Care an “excellent” or “good” rating.

Figure 5 displays the survey results for the 12 long-term care service rating items summarized above.

Figure 5. Percentage of respondents' rating General Services "Excellent" or "Good"



3.1.1. RATINGS OF LONG-TERM CARE SERVICES BY PROGRAM

Personal Care Services: Consumers receiving Personal Care Services give higher ratings compared to other consumers on: degree to which service meet needs, problem resolution, people listening to needs, and the recommendation of Choices of Care to others.

Consumer-Directed Personal Care Services: Consumers receiving Consumer-Directed Personal Care Services give higher ratings compared to other consumers on: when services and care are received, the reliability of caregivers, and the degree to which services meet needs.

Surrogate-Directed Personal Care Services: Consumers receiving Surrogate-Directed Personal Care Services give higher ratings compared to other consumers on: the amount of choice and control they had, overall quality of help, timeliness of services, service scheduling, communication with caregivers, caregiver reliability, degree to which service meet needs, problem resolution, people listening to needs, the overall value of services, and the recommendation of Choices of Care to others. Given the high percentage of proxy respondents among Surrogate-Directed Personal Care Services, it is not surprising that these respondents have more positive experiences with their services. It is highly likely that the person helping complete the survey on behalf of the respondent is the same person that employs their caregivers.

Flexible Choices: Consumers in Flexible Choices give higher ratings compared to other consumers on: overall rating of the value of services received and the recommendation of Choices of Care to others.

Homemaker Services: Consumers receiving Homemaker Care Services give lower ratings compared to other consumers on problem resolution, how well people listen to needs, and the recommendation of Choices of Care to others.

Attendant Services Program: Consumers in the Attendant Services Program give higher ratings compared to other consumers on: the amount of choice and control they had, overall quality of help, service scheduling, problem resolution, and the recommendation of Choices of Care to others. Like consumers in Surrogate-Directed Personal Care Services, consumers in the Attendant Services Program are likely to have their services directed by a surrogate. Therefore, it is highly likely that the person helping complete the survey on behalf of the respondent is the same person that employs their caregivers.

Table 12a. Percentage of respondents' rating General Services "Excellent" or "Good" by Program

	Amount of Choice and Control		Overall Quality of Help		Timeliness of Services	
	% Excellent or Good		% Excellent or Good		% Excellent or Good	
	n	%	n	%	n	%
Total	1,268	84%	1,268	91%	1,268	85%
CFC Case Mgmt	1,149	83%	1,149	90%	1,149	85%
Personal Care Services	653	85%	653	92%	653	88%
<i>Consumer-Directed</i>	164	83%	164	93%	164	87%
<i>Surrogate-Directed</i>	212	91% ↑	212	96% ↑	212	90% ↑
<i>Agency-Directed</i>	354	81%	354	90%	354	87%
Flexible Choices*	45	88%	45	92%	45	89%
Adult Day Services	209	84%	209	91%	209	86%
Homemaker Services	428	81%	428	87%	428	81%
Attendant Services Program*	64	94% ↑	64	98% ↑	64	87%
Traumatic Brain Injury Program*	11	90%	11	92%	11	83%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 12b. Percentage of respondents' rating General Services "Excellent" or "Good" by Program

	When you Receive Services/Care		Communication between You and the People who Help You		Reliability of People who Help You	
	% Excellent or Good		% Excellent or Good		% Excellent or Good	
	n	%	n	%	n	%
Total	1,268	89%	1,268	90%	1,268	90%
CFC Case Mgmt	1,149	89%	1,149	90%	1,149	90%
Personal Care Services	653	91%	653	92%	653	92%
<i>Consumer-Directed</i>	164	94% ↑	164	93%	164	95% ↑
<i>Surrogate-Directed</i>	212	95% ↑	212	95% ↑	212	95% ↑
<i>Agency-Directed</i>	354	87%	354	89%	354	88%
Flexible Choices*	45	91%	45	89%	45	93%
Adult Day Services	209	88%	209	93%	209	88%
Homemaker Services	428	86%	428	87%	428	87%
Attendant Services Program*	64	97% ↑	64	95%	64	97% ↑
Traumatic Brain Injury Program*	11	92%	11	83%	11	91%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 12c. Percentage of respondents' rating General Services "Excellent" or "Good" by Program

	Degree to Which Services Meet Your Daily Needs		How Well Problems or Concerns are Taken Care Of		The Courtesy of Those Who Help You	
	% Excellent or Good		% Excellent or Good		% Excellent or Good	
	n	%	n	%	n	%
Total	1,268	89%	1,268	86%	1,268	96%
CFC Case Mgmt	1,149	89%	1,149	86%	1,149	96%
Personal Care Services	653	92% ↑	653	89% ↑	653	96%
<i>Consumer-Directed</i>	164	93% ↑	164	90%	164	97%
<i>Surrogate-Directed</i>	212	95% ↑	212	94% ↑	212	98%
<i>Agency-Directed</i>	354	90%	354	86%	354	95%
Flexible Choices*	45	93%	45	91%	45	95%
Adult Day Services	209	88%	209	86%	209	96%
Homemaker Services	428	86%	428	81% ↓	428	96%
Attendant Services Program*	64	92%	64	94% ↑	64	97%
Traumatic Brain Injury Program*	11	82%	11	64%	11	91%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 12d. Percentage of respondents' rating General Services "Excellent" or "Good" by Program

	How Well People Listen to Your Needs & Preferences		Overall Rating of Value of Services You Receive		Recommendation of Choices of Care to Others	
	% Excellent or Good		% Excellent or Good		% Excellent or Good	
	n	%	n	%	n	%
Total	1,268	89%	1,268	93%	1,268	90%
CFC Case Mgmt	1,149	88%	1,149	93%	1,149	90%
Personal Care Services	653	92% ↑	653	95%	653	93% ↑
<i>Consumer-Directed</i>	164	91%	164	93%	164	94%
<i>Surrogate-Directed</i>	212	96% ↑	212	97% ↑	212	97% ↑
<i>Agency-Directed</i>	354	90%	354	93%	354	91%
Flexible Choices*	45	89%	45	100% ↑	45	100% ↑
Adult Day Services	209	89%	209	92%	209	89%
Homemaker Services	428	84% ↓	428	90%	428	86% ↓
Attendant Services Program*	64	92%	64	93%	64	96% ↑
Traumatic Brain Injury Program*	11	90%	11	83%	11	72%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

3.1.2. RATINGS OF LONG-TERM CARE SERVICES BY COUNTY

Addison County: Consumers residing in Addison County give higher ratings compared to those in other counties on overall quality of help received, people listening to needs, overall value of services, and the recommendation of Choices of Care to others.

Bennington County: Consumers in Bennington County give higher ratings of meeting daily needs and recommendation of Choices of Care to others compared to those in other counties.

Caledonia County: Consumers in Caledonia County give higher ratings of problem resolution compared to those in other counties.

Franklin County: Consumers residing in Franklin County give higher ratings of when services and care are received than those in other counties.

Orleans County: Residents of Orleans County give higher ratings on people listening to needs and the recommendation of Choices of Care to others than those in other counties.

Windsor County: Consumer residing in Windsor County are less likely than those in other counties to rate their recommendation of Choices of Care to others as “excellent” or “good”.

Table 13a. Percentage of respondents' rating General Services "Excellent" or "Good" by County

	Amount of Choice and Control		Overall Quality of Help		Timeliness of Services	
	% Excellent or Good		% Excellent or Good		% Excellent or Good	
	n	%	n	%	n	%
Total	1,268	84%	1,268	91%	1,268	85%
Addison*	101	88%	101	95%↑	101	90%
Bennington*	90	88%	90	87%	90	85%
Caledonia*	116	81%	116	90%	116	85%
Chittenden*	166	83%	166	92%	166	82%
Essex*	21	86%	21	90%	21	94%
Franklin*	63	88%	63	94%	63	88%
Grand Isle*	15	80%	15	88%	15	87%
Lamoille*	61	87%	61	92%	61	80%
Orange*	66	79%	66	88%	66	81%
Orleans*	110	85%	110	90%	110	87%
Rutland	204	82%	204	89%	204	86%
Washington*	78	82%	78	92%	78	85%
Windham*	72	80%	72	91%	72	84%
Windsor*	105	82%	105	86%	105	83%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 13b. Percentage of respondents' rating General Services "Excellent" or "Good" by County

	When you Receive Services/Care		Communication between You and the People who Help You		Reliability of People who Help You	
	% Excellent or Good		% Excellent or Good		% Excellent or Good	
	n	%	n	%	n	%
Total	1,268	89%	1,268	90%	1,268	90%
Addison*	101	92%	101	95%	101	93%
Bennington*	90	92%	90	93%	90	89%
Caledonia*	116	88%	116	90%	116	89%
Chittenden*	166	92%	166	92%	166	92%
Essex*	21	85%	21	94%	21	85%
Franklin*	63	96%↑	63	90%	63	92%
Grand Isle*	15	81%	15	100%	15	94%
Lamoille*	61	88%	61	93%	61	93%
Orange*	66	82%	66	84%	66	84%
Orleans*	110	92%	110	87%	110	94%
Rutland	204	88%	204	88%	204	88%
Washington*	78	88%	78	91%	78	92%
Windham*	72	84%	72	88%	72	91%
Windsor*	105	85%	105	82%	105	84%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 13c. Percentage of respondents' rating General Services "Excellent" or "Good" by County

	Degree to Which Services Meet Your Daily Needs		How Well Problems or Concerns are Taken Care Of		The Courtesy of Those Who Help You	
	% Excellent or Good		% Excellent or Good		% Excellent or Good	
	n	%	n	%	n	%
Total	1,268	89%	1,268	86%	1,268	96%
Addison*	101	92%	101	90%	101	95%
Bennington*	90	95% ↑	90	86%	90	95%
Caledonia*	116	86%	116	91% ↑	116	95%
Chittenden*	166	90%	166	86%	166	97%
Essex*	21	78%	21	81%	21	90%
Franklin*	63	94%	63	92%	63	98%
Grand Isle*	15	100%	15	87%	15	100%
Lamoille*	61	91%	61	91%	61	99%
Orange*	66	88%	66	81%	66	91%
Orleans*	110	89%	110	91%	110	97%
Rutland	204	91%	204	85%	204	98%
Washington*	78	81%	78	84%	78	96%
Windham*	72	86%	72	76%	72	97%
Windsor*	105	86%	105	78%	105	92%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 13d. Percentage of respondents' rating General Services "Excellent" or "Good" by County

	How Well People Listen to Your Needs & Preferences		Overall Rating of Value of Services You Receive		Recommendation of Choices of Care to Others	
	% Excellent or Good		% Excellent or Good		% Excellent or Good	
	n	%	n	%	n	%
Total	1,268	89%	1,268	93%	1,268	90%
Addison*	101	94% ↑	101	97% ↑	101	97% ↑
Bennington*	90	88%	90	94%	90	96% ↑
Caledonia*	116	92%	116	90%	116	90%
Chittenden*	166	86%	166	91%	166	90%
Essex*	21	89%	21	94%	21	94%
Franklin*	63	91%	63	93%	63	91%
Grand Isle*	15	94%	15	100%	15	100%
Lamoille*	61	88%	61	93%	61	89%
Orange*	66	83%	66	91%	66	82%
Orleans*	110	94% ↑	110	96%	110	96% ↑
Rutland	204	90%	204	91%	204	91%
Washington*	78	88%	78	95%	78	87%
Windham*	72	87%	72	93%	72	86%
Windsor*	105	81%	105	90%	105	83% ↓

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

3.2. AGREEMENT WITH STATEMENTS ABOUT RECEIPT OF SERVICES

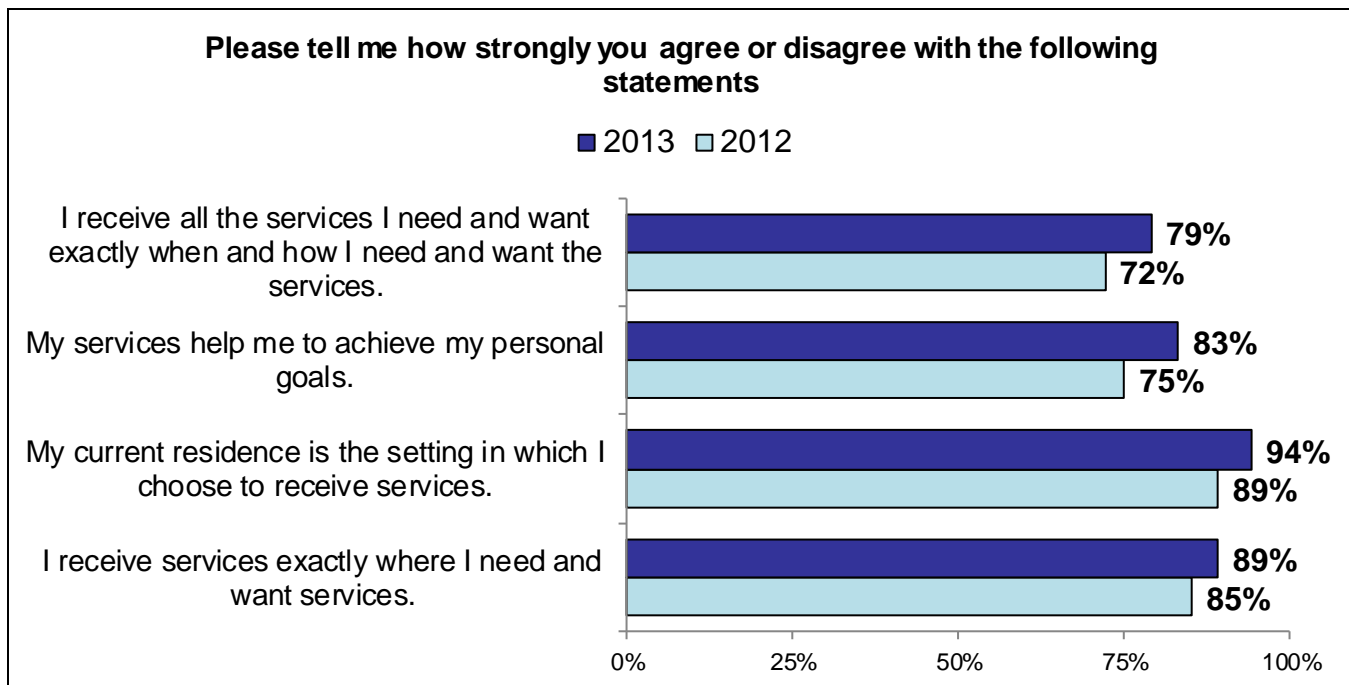
The 2013 survey included 4 questions to assess consumers' satisfaction with the following aspects of service delivery:

1. Receipt of all the services the consumer needs and wants exactly when and how they need and want them
2. Services help consumer achieve personal goals
3. The consumer's current residence is the setting in which they choose to receive services
4. Consumer receives services exactly where they need and want services

Consumers rated these items on a five-point scale: "strongly agree", "agree", "neither agree nor disagree", "disagree", "strongly disagree". For each survey item we indicate the percentage of respondents who endorsed either "strongly agree", or "agree" as a percentage of all valid responses.

As shown in Figure 6 below, respondents rate these statements higher in 2013 compared to 2012.

Figure 6. Percentage of respondents' strongly agreeing or agreeing with statement about the receipt of services



3.2.1. AGREEMENT WITH STATEMENTS ABOUT RECEIPT OF SERVICES BY PROGRAM

Personal Care Services: Consumers receiving Personal Care Services are more likely to agree or strongly agree compared to other consumers on: 1) the receipt of all services that are needed and wanted when and how they are needed and wanted and 2) the receipt of all services where they are needed and wanted.

Surrogate-Directed Personal Care Services: Consumers receiving Surrogate-Directed Personal Care Services are more likely to agree or strongly agree compared to other consumers on: the receipt of all services that are needed and wanted when and how they are needed, services helping to achieve personal goals, current residence is where they receive their services, and the receipt of all services where they are needed and wanted.

Flexible Choices: Consumers in Flexible Choices are more likely than consumers in other programs to agree or strongly agree with the statement that they receive services exactly where they are needed and wanted.

Homemaker Services: Individuals receiving Homemaker services are less likely to agree or strongly agree compared to other consumers on: the receipt of all services that are needed and wanted when and how they are needed and the receipt of all services where they are needed and wanted.

Attendant Services Program: Consumers in the Attendant Services Program are more likely to agree or strongly agree with the statement that services help them to achieve their personal goals compared to those in other programs.

Table 14. Percentage of respondents' strongly agreeing or agreeing with statement about the receipt of services by Program

	Receive All Services Need/Want When and How I Need Them		My Services Help Me to Achieve Personal Goals		My Current Residence is Where I Receive Services		Receive Services Exactly Where I Need and Want Them	
	% Strongly Agree or Agree		% Strongly Agree or Agree		% Strongly Agree or Agree		% Strongly Agree or Agree	
	n	%	n	%	n	%	n	%
Total	1,268	79%	1,268	83%	1,268	94%	1,268	89%
CFC Case Mgmt	1,149	79%	1,149	83%	1,149	94%	1,149	89%
Personal Care Services	653	84%↑	653	86%	653	96%	653	92%↑
<i>Consumer-Directed</i>	164	80%	164	85%	164	96%	164	91%
<i>Surrogate-Directed</i>	212	92%↑	212	91%↑	212	97%↑	212	96%↑
<i>Agency-Directed</i>	354	80%	354	84%	354	94%	354	90%
Flexible Choices*	45	71%	45	84%	45	96%	45	95%↑
Adult Day Services	209	80%	209	85%	209	90%	209	87%
Homemaker Services	428	72%↓	428	79%	428	93%	428	72%↓
Attendant Services Program*	64	86%	64	95%↑	64	97%	64	88%
Traumatic Brain Injury Program*	11	83%	11	81%	11	81%	11	73%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

3.2.2. AGREEMENT WITH STATEMENTS ABOUT RECEIPT OF SERVICES BY COUNTY

Addison County: Consumers in Addison County are more likely to agree or strongly agree with statements about receiving services when and how they want and need them, services helping them achieve personal goals, and receiving services where they need and want them.

Bennington County: Residents of Bennington County report that their services help them achieve their personal goals more than those in other counties.

Windham County: Residents of Windham County are more likely to agree with the statement that their current residence is where they receive services than those in other counties.

Table 15. Percentage of respondents' strongly agreeing or agreeing with statement about the receipt of services by County

	Receive All Services Need/Want When and How I Need Them		My Services Help Me to Achieve Personal Goals		My Current Residence is Where I Receive Services		Receive Services Exactly Where I Need and Want Them	
	% Strongly Agree or Agree		% Strongly Agree or Agree		% Strongly Agree or Agree		% Strongly Agree or Agree	
	n	%	n	%	n	%	n	%
Total	1,268	79%	1,268	83%	1,268	94%	1,268	89%
Addison*	101	90%↑	101	91%↑	101	92%	101	94%↑
Bennington*	90	79%	90	92%↑	90	97%	90	90%
Caledonia*	116	78%	116	87%	116	91%	116	90%
Chittenden*	166	80%	166	84%	166	95%	166	91%
Essex*	21	76%	21	60%	21	89%	21	79%
Franklin*	63	83%	63	89%	63	96%	63	88%
Grand Isle*	15	87%	15	86%	15	94%	15	94%
Lamoille*	61	80%	61	84%	61	96%	61	91%
Orange*	66	78%	66	77%	66	91%	66	85%
Orleans*	110	78%	110	83%	110	97%	110	86%
Rutland	204	79%	204	78%	204	92%	204	88%
Washington*	78	73%	78	80%	78	91%	78	82%
Windham*	72	75%	72	84%	72	100%↑	72	88%
Windsor*	105	71%	105	80%	105	90%	105	86%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

3.3. OPEN-ENDED COMMENTS

Consumers were asked whether there was anything that could improve the services offered to them and others. Over 1 in 3 consumers responded yes. Of those, over 1 in 5 reported that services could be improved by providing more care. One in ten respondents indicated that services could be improved by offering more hours, improving scheduling/planning, dependability and reliability, and improving communication between consumers, caregivers, and caseworkers. Almost 1 in 3 respondents indicated they didn't know if services could be improved.

Table 16. Open-Ended Comments regarding improvement of services

Is there anything that could improve the services offered to you and others?	
Number answering question (unweighted)	1,184
Yes	37%
No	32%
Don't Know	31%

Is there anything that could improve the services offered to you and others? (Specify)	
Number answering question (unweighted)	437
More hours needed	10%
Better scheduling, planning, dependability/reliability	10%
Access to more providers, More people to help	1%
More communication with caregivers, caseworkers	11%
More care needed	21%
<i>More care needed - household chores, cleaning</i>	5%
<i>More care needed - nighttime, overnight care</i>	1%
<i>More care needed - in-home healthcare / medical equipment</i>	4%
<i>More care needed - meal preparation</i>	1%
<i>More care needed - assistance with rehabilitation</i>	1%
<i>More care needed - personal hygiene, bathing assistance</i>	2%
<i>More care needed - transportation</i>	4%
<i>More care needed - general, non-specific</i>	4%
Would choose my own caregivers	1%
Social hours, friendship, outside activities	2%
Assistance with paperwork, insurance, answering questions, coordinating services, less paperwork	2%
More qualified, caring caregivers; better training	4%
More funding, More money & benefits for caregivers	4%
More services available	4%
Have a substitute available if caregiver calls out	2%
More information needed, Types of services available	2%
Keep same caregivers, Less turnover, Need more employees	5%
Other	8%
None, happy with choices and services	7%
More care needed - financial	3%
Don't Know	3%
Total	100%

Consumers were also asked if they had complete choice, control, and flexibility, would their service plan look different. Almost 1 in 3 respondents indicated yes. Of those that said yes, almost 1 in 5 indicated that they needed more care, 17% indicated that their service plan would include more hours, and over 1 in 10 said they would have better scheduling/planning, dependability and reliability, and more flexibility. 1 in 3 respondents didn't know if their service plan would look different given complete choice, control, and flexibility.

Table 17. Open-Ended Comments regarding how service plan would look if had complete choice, control and flexibility

If you had complete choice, control and flexibility, would your service plan look different?	
Number answering question (unweighted)	1,185
Yes (Specify:)	31%
No	35%
Don't Know	34%

If you had complete choice, control and flexibility, would your service plan look different? (Specify)	
Number answering question (unweighted)	352
Communication Issues - Miscommunications, improve communications, do not return or slow to return calls	2%
Cuts in Services or Delays, Need Funding	2%
Access to more providers, More people to help	1%
More hours needed	17%
Better scheduling, planning, dependability/reliability, more flexibility	11%
More care needed	19%
<i>More care needed - household chores, cleaning</i>	4%
<i>More care needed - nighttime, overnight care</i>	2%
<i>More care needed - in-home healthcare / medical equipment</i>	1%
<i>More care needed - meal preparation</i>	1%
<i>More care needed - personal hygiene, bathing assistance</i>	2%
<i>More care needed - transportation</i>	5%
<i>More care needed - general, non-specific</i>	3%
Would choose my own caregivers	2%
Social hours, friendship, outside activities	3%
More qualified, caring caregivers; better training	3%
More funding, More money & benefits for caregivers	3%
More services available	2%
Have a substitute available if caregiver calls out	1%
Keep same caregivers, Less turnover, Need more employees	6%
I would do more on my own, have more control	4%
More care needed - assistance with rehabilitation	2%
Other	7%
None, Nothing	10%
Unsure	5%
Total	100%

4. IMPROVEMENT IN QUALITY OF LIFE

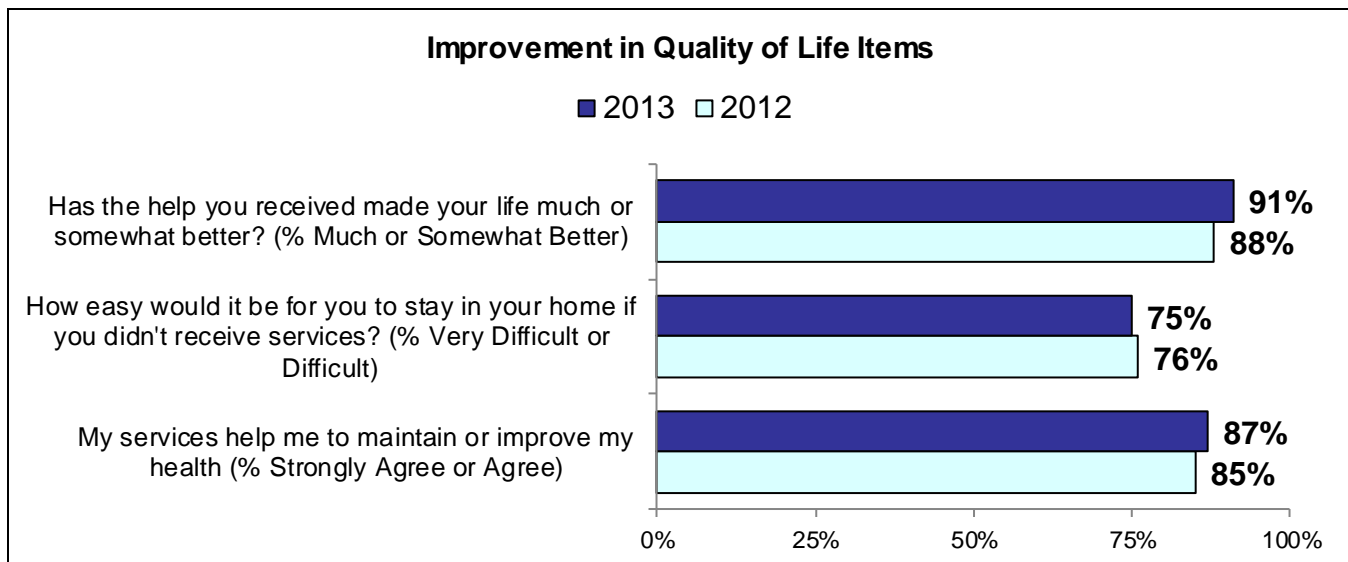
The 2013 survey included 3 questions to assess the improvement in consumers' quality of life as a result of receiving long-term care services:

1. Has the help they received made their life better, somewhat better, about the same, somewhat worse, much worse
2. The ease it would be to stay in their home if they didn't receive services (very easy, easy, about the same, difficult, very difficult)
3. The agreement with the statement that their service help them to maintain or improve their health (strongly agree, agree, neither agree nor disagree, disagree, strongly disagree)

Consumers rated these items on a five-point scale, as indicated above.

As shown in Figure 7 below, 9 in 10 respondents report that receipt of services has made their life somewhat or much better, a slight increase from 2012. Three in four respondents reported that it would be difficult or very difficult to stay in their home if they didn't receive these services. Almost 9 in 10 respondents reported that the services help maintain or improve their health.

Figure 7. Improvement in Quality of Life items



4.1. IMPROVEMENT IN QUALITY OF LIFE BY PROGRAM

Personal Care Services: Consumers receiving Personal Care Services are more likely to report that it would be difficult or very difficult to stay in their home if they didn't receive services compared to those in other programs.

Consumer-Directed Personal Care Services: Consumers receiving Consumer-Directed Personal Care Service are more likely to agree or strongly agree that the services they receive help them maintain or improve their health compared to those in other programs.

Surrogate-Directed Personal Care Services: Consumers receiving Surrogate-Directed Personal Care Services are more likely to report that it would be difficult or very difficult to stay in their home if they didn't receive services compared to those in other programs.

Agency-Directed Personal Care Services: Consumers receiving Agency-Directed Personal Care Services are more likely to report that it would be difficult or very difficult to stay in their home if they didn't receive services compared to those in other programs.

Flexible Choices: Consumers in Flexible Choices are more likely than consumers in other programs to report that the help they received has made their life much or somewhat better compared to those in other programs.

Homemaker Services: Individuals receiving Homemaker services are less likely to report that it would be difficult or very difficult to stay in their home if they didn't receive services compared to those in other programs.

Attendant Services Program: Consumers in the Attendant Services Program are more likely than those in other programs to report that the help they received has made their life much or somewhat better, that it would be difficult or very difficult to stay in their home if they didn't receive services compared to those in other programs, and they strongly agree or agree that the services received help them maintain or improve their health.

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Table 18. Improvement in Quality of Life items by Program

	Help Received Made Life Much or Somewhat Better		Ease of Staying in Home if Didn't Receive Services		Services Help Me Maintain or Improve Health	
	% Much or Somewhat Better		% Very Difficult or Difficult		% Strongly Agree or Agree	
	n	%	n	%	n	%
Total	1,268	91%	1,268	75%	1,268	87%
CFC Case Mgmt	1,149	90%	1,149	74%	1,149	86%
Personal Care Services	653	92%	653	82% ↑	653	90%
<i>Consumer-Directed</i>	164	92%	164	81%	164	94% ↑
<i>Surrogate-Directed</i>	212	93%	212	82% ↑	212	91%
<i>Agency-Directed</i>	354	92%	354	83% ↑	354	87%
Flexible Choices*	45	100% ↑	45	83%	45	94%
Adult Day Services	209	88%	209	70%	209	83%
Homemaker Services	428	89%	428	68% ↓	428	83%
Attendant Services Program*	64	98% ↑	64	90% ↑	64	97% ↑
Traumatic Brain Injury Program*	11	93%	11	73%	11	82%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

4.2. IMPROVEMENT IN QUALITY OF LIFE BY COUNTY

Addison County: Consumers in Addison County are more likely to report that the help they have received has made their life somewhat or much better compared to those in other counties.

Bennington County: Residents of Bennington County are more likely to report that the help they have received has made their life much or somewhat better compared to those in other counties.

Caledonia County: Residents of Caledonia County are less likely to report that it would be difficult or very difficult to stay in their home if they didn't receive services than those in other counties.

Franklin County: Residents in Franklin County report that it would be difficult or very difficult to stay in their home if they didn't receive services to a greater extent than those in other counties.

Table 19. Improvement in Quality of Life items by Program

	Help Received Made Life Much or Somewhat Better		Ease of Staying in Home if Didn't Receive Services		Services Help Me Maintain or Improve Health	
	% Much or Somewhat Better		% Very Difficult or Difficult		% Strongly Agree or Agree	
	n	%	n	%	n	%
Total	1,268	91%	1,268	75%	1,268	87%
Addison*	101	96% ↑	101	77%	101	90%
Bennington*	90	97% ↑	90	79%	90	92%
Caledonia*	116	92%	116	65% ↓	116	83%
Chittenden*	166	91%	166	73%	166	88%
Essex*	21	83%	21	70%	21	71%
Franklin*	63	95%	63	91% ↑	63	93%
Grand Isle*	15	94%	15	85%	15	93%
Lamoille*	61	87%	61	73%	61	88%
Orange*	66	91%	66	72%	66	84%
Orleans*	110	92%	110	77%	110	88%
Rutland	204	88%	204	73%	204	85%
Washington*	78	86%	78	68%	78	85%
Windham*	72	94%	72	82%	72	89%
Windsor*	105	86%	105	80%	105	85%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

5. QUALITY OF LIFE MEASURES

The 2013 survey included 21 questions intended to measure aspects of consumers' quality of life.

The first 14 items asked consumers to respond either "Yes", "Somewhat", or "No". Items included the following (Figure 8):

1. Feel safe in the home where they live
2. Feel safe out in their community
3. Can get where they need or want to go
4. Can get around inside their home as needed
5. Are satisfied with how they spend their free time
6. Are satisfied with the amount of contact with family and friends
7. Have someone they can count on in an emergency
8. Are satisfied with their social life
9. Feel valued and respected
10. Feeling connected to their community
11. Have someone they can count on to listen to them when they need to talk
12. Have someone to do something enjoyable with
13. In their leisure time, they don't like what they are doing but don't know what else to do
14. During leisure time, they almost always have something to do

The next four items are new for 2013 and asked consumers to indicate need for help around the house and the help they receive from non-paid caregivers (Figure 9):

1. Need more help with things around the house than they are receiving (yes, no)
2. Family member or friends helped with things around in the house in the past week (yes, no)
3. Whether there are people who are not paid who help them stay at home and get around in the community (yes, no)
4. How often they see that person during the week (less than one time a week, one time a week, more than one time a week)

The next question (new for 2013) assessed mental health by asking the consumer to rate how often they felt sad or blue during the past week on a five-point scale (always, usually, sometimes, rarely, never). These items are displayed in Figure 10.

The last two items asked about emotional support and satisfaction with life (Figure 9):

1. How often they get the social and emotional support they need on a five-point scale (always, usually, sometimes, rarely, never)
2. Overall satisfaction with life (very satisfied, satisfied, neither satisfied or dissatisfied, dissatisfied, very dissatisfied)

Safety in Home

In 2013, 89% of consumers reported feeling safe in their homes. This percentage is similar to consumers surveyed in 2012 (90%).

Safety in Community

In 2013, 71% of consumers reported feeling safe when out in their community. This percentage was slightly less than those surveyed in 2012 (75%).

Mobility Outside the Home

In 2013, 57% of consumers indicated that they could get where they needed and wanted to go outside of the home. This percentage is slightly less than those surveyed in 2012 (60%).

Mobility Inside the Home

In 2013, 81% of consumers indicated that they were able to get around inside their home. This percentage is similar to consumers surveyed in 2012 (83%).

Satisfaction with Free Time

In 2013, 65% of consumers indicated being satisfied with how they spent their free time. This percentage was slightly lower than consumers surveyed in 2012 (69%).

Contact with Family and Friends

In 2013, 64% of consumers indicated being satisfied the amount of contact they had with family and friends. This percentage was lower than consumers surveyed in 2012 (70%).

Support in an Emergency

In 2013, 89% of consumers indicated having support in the event of an emergency. This percentage is similar to consumers surveyed in 2012 (91%).

Social Life

In 2013, 53% of consumers indicated being satisfied with their social life. This percentage is lower than consumers surveyed in 2012 (58%).

Valued and Respected

In 2013, 70% of consumers reported feeling valued and respected. This percentage was lower than responses of consumers surveyed in 2012 (76%).

Connection with Community

In 2013, 43% of consumers indicated feeling connected to the community. This percentage was much lower than consumers surveyed in 2012 (52%).

Support when Need to Talk

In 2013, 81% of consumers indicated they have someone they can count on to listen to them when they need to talk. This percentage was slightly lower than consumers surveyed in 2012 (85%).

Someone to Do Something Enjoyable with

In 2013, 71% of consumers indicated they had someone to do something enjoyable with. This percentage was slightly lower than consumers surveyed in 2012 (75%).

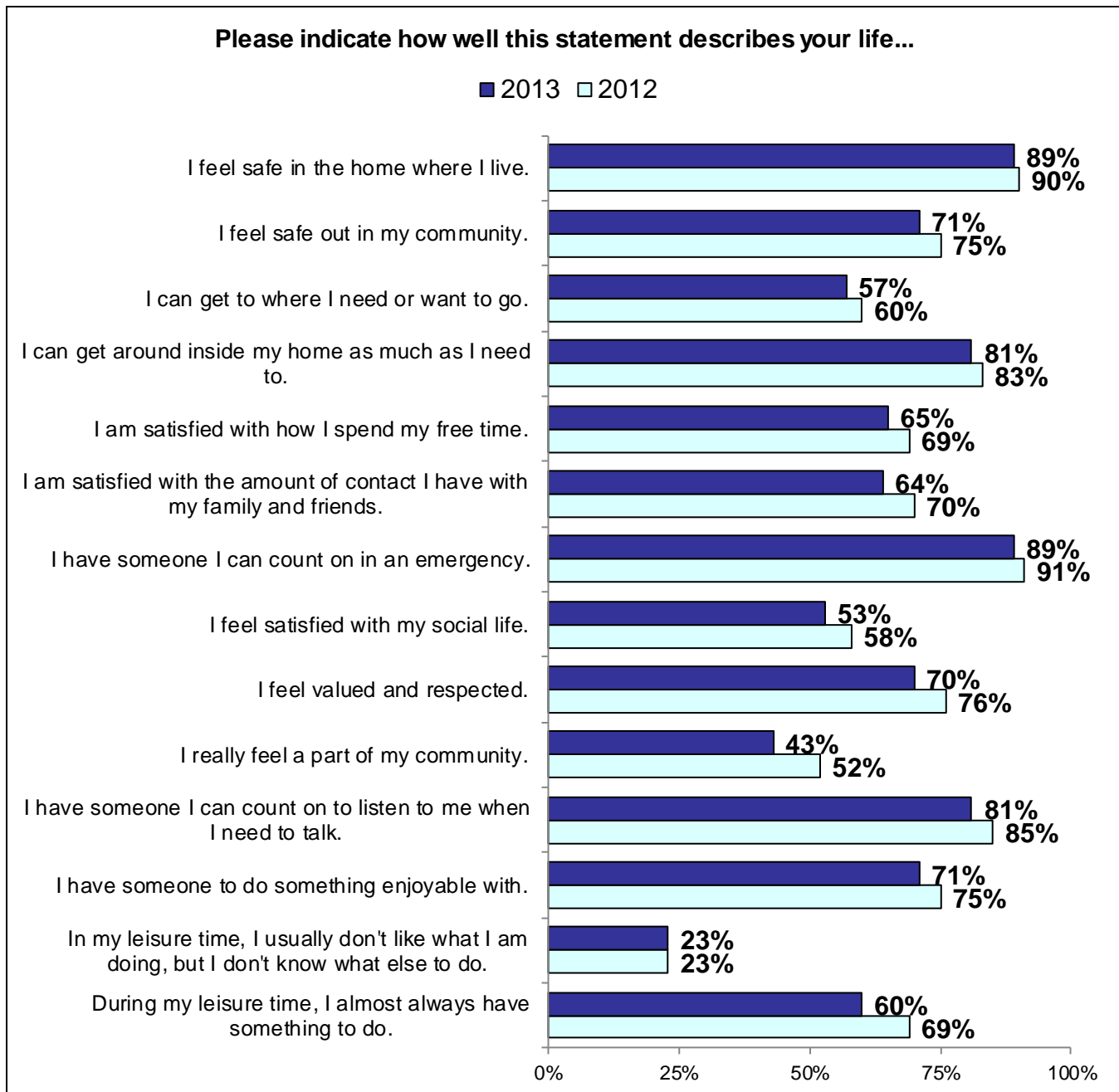
Don't Like what Doing in Leisure Time

In 2013, 23% of consumers indicated that they do not like what they are going in their leisure time, but do not know what else to do. This percentage was unchanged from 2012 (25%).

Have Something to Do in Leisure Time

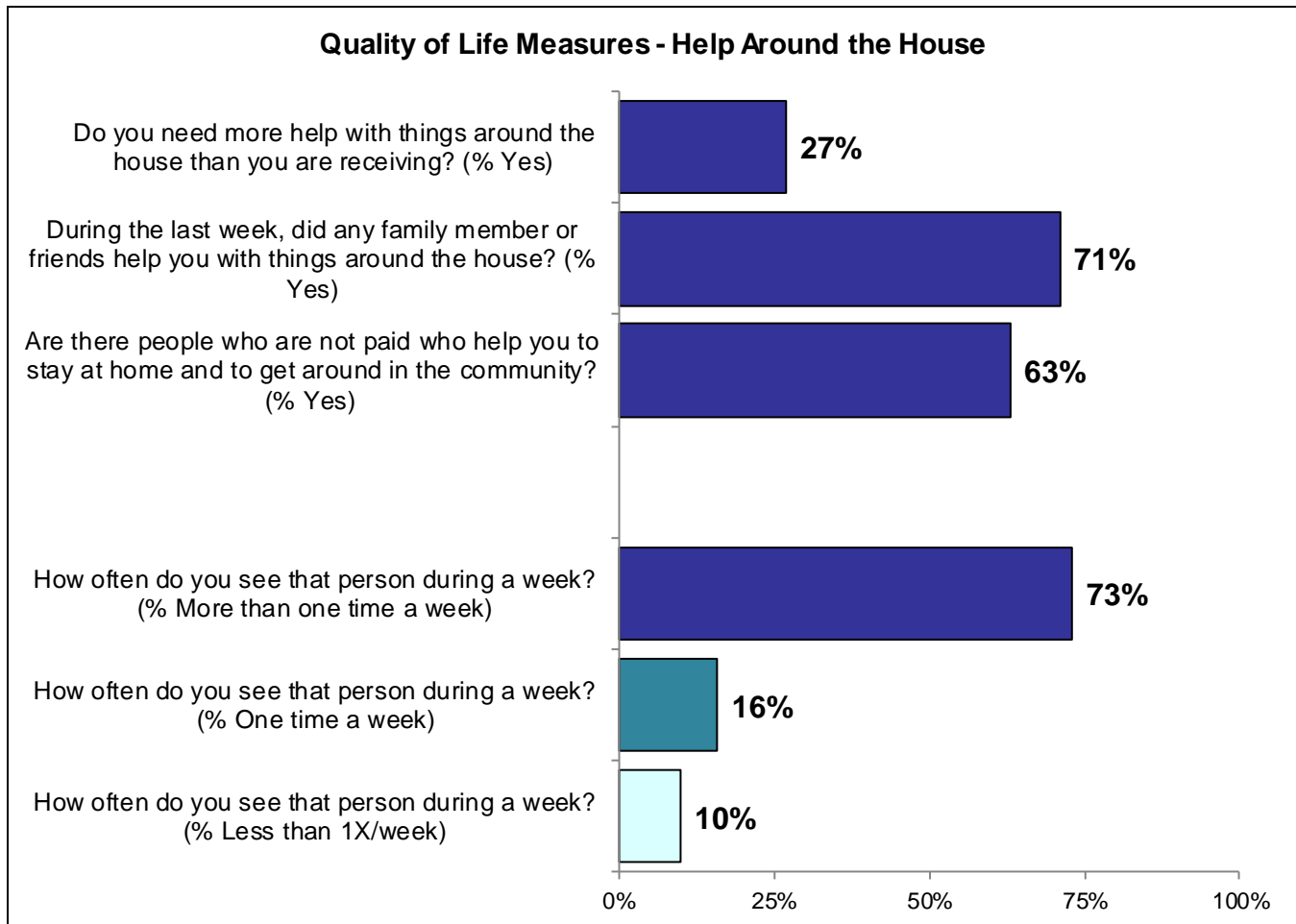
In 2013, 60% of consumers indicated they almost always had something to do in their leisure time. This percentage was lower than consumers surveyed in 2012 (69%).

Figure 8. Quality of Life items



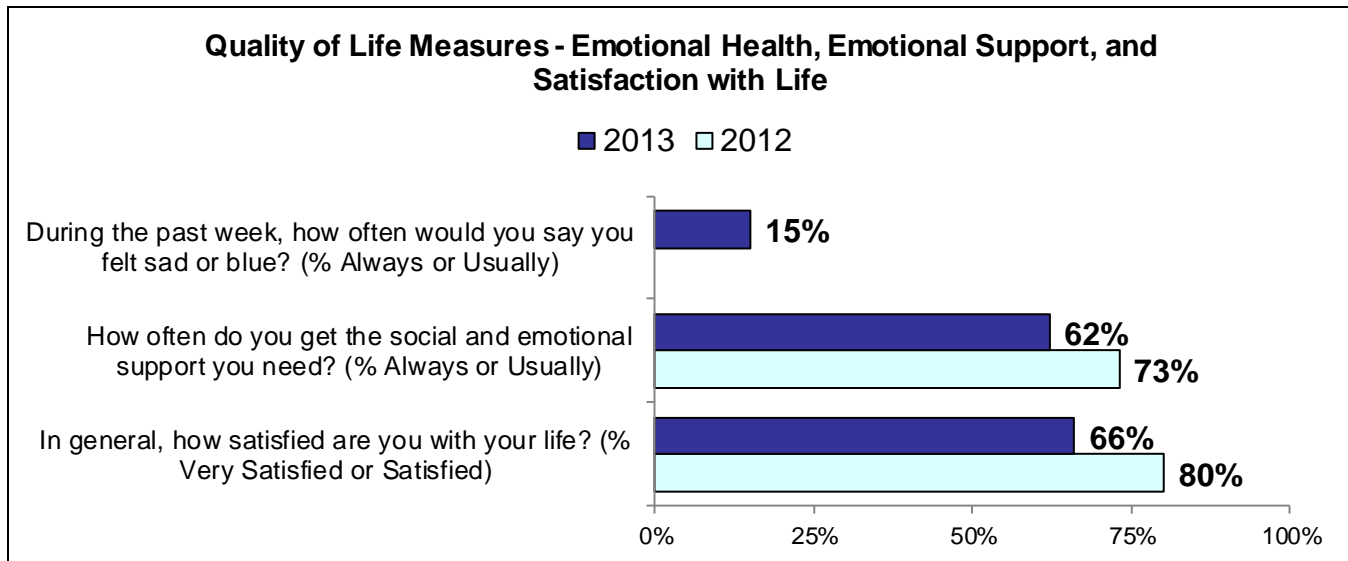
Over 1 in 5 consumers report that they need more help around the house than they are currently receiving. Almost 3 in 4 consumers report having a family member or friend help them around the house in the past week, and almost 2 in 3 consumers have help staying in the house and getting around the community from people who are not paid. Almost 3 in 4 people receiving this help see this person more than once a week.

Figure 9. Quality of Life items – Help Around the House



Fifteen percent of consumers reporting always or usually feeling blue in the past week. In 2013, 62% of consumers report always or usually getting the social and emotional support they need, down from 73% in 2012. In 2013, 66% of consumers report being satisfied or very satisfied with their life, down from 80% in 2012.

Figure 10. Quality of Life items – Emotional Health, Emotional Support, and Satisfaction with Life



Note: In 2013, we added a “Neither Satisfied or Dissatisfied” option to the response scale, thus increasing the scale from a 4-point scale to a 5-point scale.

5.1. QUALITY OF LIFE MEASURES BY PROGRAM

Personal Care Services: Consumers enrolled in Personal Care Services are more likely than those in other programs to report having someone they can count on in an emergency, feeling valued and respected, and having someone to do something enjoyable with.

Consumer-Directed Personal Care Services: Respondents receiving Consumer-Directed Personal Care Services are more likely to have someone they can count on in an emergency and someone they can count on to listen to them when they need to talk, but less likely to be able to get around inside their house as much as they need to, compared to respondents in other programs.

Surrogate-Directed Personal Care Services: Consumers enrolled in Surrogate-Directed Personal Care Services are more likely to report feeling safe in their home and in their community, being able to get where they need to go, being satisfied with the amount of contact they have with family and friends, having someone they can count on in an emergency, feeling satisfied with their social life, feeling valued and respected, having someone they can count on to listen to them when they need to talk, and having someone to do something enjoyable with than those in other programs.

Flexible Choices: Flexible Choices consumers are more likely to have someone they can count on in an emergency and to do something enjoyable with than those in other programs.

Adult Day Services: Adult Day Center consumers are more likely to be satisfied with their social life and feel valued and respected than those in other programs.

Homemaker Services: Recipients of Homemaker Services are more likely to be able to get around their house as much as they need to but less likely to feel safe in their home, be satisfied with the amount of contact they have with family and friends, have someone to count on in an emergency, feel valued and respected, and have someone to do something enjoyable with compared to those in other programs.

Attendant Services Program: Consumers enrolled in the Attendant Services Program are more likely to be satisfied with how they spend their free time, be satisfied with the amount of contact they have with family and friends, have someone they can count on in an emergency, have someone to do something enjoyable with, and almost always have something to do during their leisure time, compared to those in other programs.

Table 20a. Quality of Life items by Program

	I feel safe in my home where I live		I feel safe in my community		I can get to where I need or want to go		I can get around inside my house as much as I need to	
	% Yes		% Yes		% Yes		% Yes	
	n	%	n	%	n	%	n	%
Total	1,268	89%	1,268	71%	1,268	57%	1,268	81%
CFC Case Mgmt	1,149	89%	1,149	70%	1,149	57%	1,149	81%
Personal Care Services	653	92%	653	71%	653	60%	653	78%
<i>Consumer-Directed</i>	164	91%	164	66%	164	55%	164	72%↓
<i>Surrogate-Directed</i>	212	96%↑	212	79%↑	212	70%↑	212	80%
<i>Agency-Directed</i>	354	90%	354	68%	354	56%	354	79%
Flexible Choices*	45	91%	45	72%	45	66%	45	70%
Adult Day Services	209	90%	209	74%	209	62%	209	78%
Homemaker Services	428	85%↓	428	67%	428	52%	428	85%↑
Attendant Services Program*	64	93%	64	76%	64	62%	64	79%
Traumatic Brain Injury Program*	11	100%	11	91%	11	46%	11	100%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 20b. Quality of Life items by Program

	I am satisfied with how I spend my free time		I am satisfied with the amount of contact I have with family/friends		I have someone I can count on in an emergency		I feel satisfied with my social life	
	% Yes		% Yes		% Yes		% Yes	
	n	%	n	%	n	%	n	%
Total	1,268	65%	1,268	64%	1,268	89%	1,268	53%
CFC Case Mgmt	1,149	65%	1,149	63%	1,149	88%	1,149	53%
Personal Care Services	653	66%	653	68%	653	93% ↑	653	53%
<i>Consumer-Directed</i>	164	65%	164	64%	164	94% ↑	164	47%
<i>Surrogate-Directed</i>	212	72%	212	78% ↑	212	99% ↑	212	64% ↑
<i>Agency-Directed</i>	354	63%	354	63%	354	90%	354	49%
Flexible Choices*	45	65%	45	64%	45	96% ↑	45	55%
Adult Day Services	209	72%	209	68%	209	92%	209	63% ↑
Homemaker Services	428	65%	428	57% ↓	428	82% ↓	428	51%
Attendant Services Program*	64	78% ↑	64	76% ↑	64	96% ↑	64	59%
Traumatic Brain Injury Program*	11	34%	11	62%	11	100%	11	35%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 20c. Quality of Life items by Program

	I feel valued and respected		I really feel a part of my community		I have someone I can count on to listen to me when I need to talk	
	% Yes		% Yes		% Yes	
	n	%	n	%	n	%
Total	1,268	70%	1,268	43%	1,268	81%
CFC Case Mgmt	1,149	69%	1,149	43%	1,149	80%
Personal Care Services	653	75% ↑	653	44%	653	84%
<i>Consumer-Directed</i>	164	70%	164	38%	164	88% ↑
<i>Surrogate-Directed</i>	212	87% ↑	212	46%	212	88% ↑
<i>Agency-Directed</i>	354	70%	354	46%	354	81%
Flexible Choices*	45	74%	45	42%	45	89%
Adult Day Services	209	77% ↑	209	51%	209	79%
Homemaker Services	428	62% ↓	428	39%	428	77%
Attendant Services Program*	64	75%	64	56%	64	85%
Traumatic Brain Injury Program*	11	72%	11	41%	11	100%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 20d. Quality of Life items by Program

	I have someone to do something enjoyable with		In my leisure time, I usually don't like what I'm doing, but I don't know what else to do		During my leisure time, I almost always have something to do	
	% Yes		% Yes		% Yes	
	n	%	n	%	n	%
Total	1,268	71%	1,268	23%	1,268	60%
CFC Case Mgmt	1,149	69%	1,149	24%	1,149	59%
Personal Care Services	653	76% ↑	653	24%	653	58%
<i>Consumer-Directed</i>	164	76%	164	23%	164	65%
<i>Surrogate-Directed</i>	212	85% ↑	212	24%	212	61%
<i>Agency-Directed</i>	354	69%	354	24%	354	55%
Flexible Choices*	45	90% ↑	45	25%	45	65%
Adult Day Services	209	75%	209	20%	209	63%
Homemaker Services	428	61% ↓	428	24%	428	60%
Attendant Services Program*	64	84% ↑	64	19%	64	72% ↑
Traumatic Brain Injury Program*	11	72%	11	20%	11	60%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Personal Care Services: Consumers enrolled in Personal Care Services are more likely than those in other programs to have a family member or friend help them with things around the house in the past week, and less likely to report needing more help with things around the house.

Consumer-Directed Personal Care Services: Respondents receiving Consumer-Directed Personal Care Services are more likely to have a family member or friend help them with things around the house in the past week, compared to respondents in other programs.

Surrogate-Directed Personal Care Services: Consumers enrolled in Surrogate-Directed Personal Care Services are more likely to have a family member or friend help them with things around the house in the past week and have a person that is not paid help them stay at home or get around the community and are less likely to report needing more help with things around the house than those in other programs.

Among those that receive help around the house and in the community from a person that is not paid, those receiving Surrogate-Directed Personal Care Services are more likely to see that person more than once a week and less likely to see them less than once a week than those in other programs.

Agency-Directed Personal Care Services: Consumers enrolled in Agency-Directed Personal Care Services are less likely to report needing more help with things around the house than those in other programs.

Flexible Choices: Flexible Choices consumers are more likely to report having a family member or friend help them with things around the house in the last week than those in other programs.

Homemaker Services: Consumers receiving Homemaker Services are more likely to report needing more help around the house and less likely to have a family member or friend help them around the house in the past week, compared to those in other programs.

Among those that receive help around the house and in the community from a person that is not paid, those in Homemaker Services are more likely to see that person once a week and less likely to see them more than once a week than those in other programs.

Attendant Services Program: Consumers enrolled in the Attendant Services Program are more likely to have a family member or friend help them around the house in the past week compared to those in other programs.

Table 21a. Quality of Life items – Help around the house by Program

	More Help Needed with Things Around the House		Family Member or Friend Helped with Things Around House in Last Week		People Not Paid to Help You Stay at Home/Get Around Community	
	% Yes		% Yes		% Yes	
	n	%	n	%	n	%
Total	1,268	27%	1,268	71%	1,268	63%
CFC Case Mgmt	1,149	28%	1,149	70%	1,149	63%
Personal Care Services	653	22% ↓	653	81% ↑	653	66%
<i>Consumer-Directed</i>	164	28%	164	83% ↑	164	61%
<i>Surrogate-Directed</i>	212	19% ↓	212	92% ↑	212	74% ↑
<i>Agency-Directed</i>	354	20% ↓	354	74%	354	64%
Flexible Choices*	45	23%	45	86% ↑	45	70%
Adult Day Services	209	22%	209	77%	209	69%
Homemaker Services	428	36% ↑	428	56% ↓	428	58%
Attendant Services Program*	64	22%	64	87% ↑	64	67%
Traumatic Brain Injury Program*	11	--	11	74%	11	76%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 21b. Quality of Life items – Help around the house by Program

How Often See The Person Who Is Not Paid to Help You During a Week		Less than One Time a Week	One Time a Week	More than One Time a Week
	n	%	%	%
Total	1,268	10%	16%	73%
CFC Case Mgmt	1,149	10%	17%	72%
Personal Care Services	653	9%	15%	75%
<i>Consumer-Directed</i>	164	16%	16%	67%
<i>Surrogate-Directed</i>	212	4% ↓	13%	82% ↑
<i>Agency-Directed</i>	354	10%	14%	74%
Flexible Choices*	45	21%	3%	76%
Adult Day Services	209	7%	14%	78%
Homemaker Services	428	12%	21% ↑	67% ↓
Attendant Services Program*	64	11%	20%	69%
Traumatic Brain Injury Program*	11	--	--	87%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Consumer-Directed Personal Care Services: Consumers receiving Surrogate-Directed Personal Care Service are less likely than others to report feeling sad or blue in the past week, and are more likely than others to report getting needed social and emotional support and feeling satisfied with their lives.

Agency-Directed Personal Care Services: Consumers receiving Agency-Directed Personal Care Service are less likely than others to report feeling satisfied with their lives.

Flexible Choices: Consumers in Flexible Choices are more likely than others to report getting needed social and emotional support.

Adult Day Services: Consumers in Adult Day Services are more likely than others to report getting needed social and emotional support.

Homemaker Services: Consumers receiving Homemaker Services are less likely than others to report getting needed social and emotional support.

Attendant Services Program: Consumers in the Attendant Services Program are more likely than others to report getting needed social and emotional support.

Table 22. Quality of Life items – Emotional Health, Emotional Support, and Satisfaction with Life by Program

	How Often Felt Sad or Blue in Last Week		How Often Get Needed Social and Emotional Support		Satisfaction with Life	
	% Always or Usually		% Always or Usually		% Very Satisfied or Satisfied	
	n	%	n	%	n	%
Total	1,268	15%	1,268	62%	1,268	66%
CFC Case Mgmt	1,149	15%	1,149	61%	1,149	66%
Personal Care Services	653	14%	653	67%	653	67%
<i>Consumer-Directed</i>	164	17%	164	64%	164	68%
<i>Surrogate-Directed</i>	212	6% ↓	212	77% ↑	212	75% ↑
<i>Agency-Directed</i>	354	17%	354	62%	354	60% ↓
Flexible Choices*	45	22%	45	80% ↑	45	68%
Adult Day Services	209	11%	209	70% ↑	209	70%
Homemaker Services	428	15%	428	53% ↓	428	66%
Attendant Services Program*	64	11%	64	76% ↑	64	73%
Traumatic Brain Injury Program*	11	9%	11	61%	11	51%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

5.2. QUALITY OF LIFE MEASURES BY COUNTY

Addison County: Consumers residing in Addison County are more likely than those in other counties to report feeling safe in the home where they live and having someone they can count on in emergency.

Bennington County: Consumers in Bennington County are more likely than those in other counties to report having someone they can count on to listen to them when they need to talk and having someone to do something enjoyable with.

Caledonia County: Residents of Caledonia County are more likely report having someone they can count on in an emergency compared to residents of other counties.

Chittenden County: Consumers residing in Chittenden County are more likely to feel satisfied with their social life than those in other counties.

Lamoille County: Residents of Lamoille County are less likely to report that they are able to get to where they need or want to go compared to residents of other counties.

Orange County: Consumers residing in Orange County are less likely to feel valued & respected than those in other counties.

Orleans County: Orleans County residents are more likely to report feeling safe in their community than those in other counties.

Rutland County Rutland County residents are less likely to report feeling safe in their community, than those in other counties.

Washington County: Residents in Washington County are less likely than those in other counties to report being able to get to where they need or want to go, being able to get around their house as much as they need to, feeling a part of their community, and having someone to count on in emergency.

Table 23a. Quality of Life items by County

	I feel safe in my home where I live		I feel safe in my community		I can get to where I need or want to go		I can get around inside my house as much as I need to	
	% Yes		% Yes		% Yes		% Yes	
	n	%	n	%	n	%	n	%
Total	1,268	89%	1,268	71%	1,268	57%	1,268	81%
Addison*	101	95% ↑	101	77%	101	64%	101	82%
Bennington*	90	89%	90	76%	90	62%	90	85%
Caledonia*	116	92%	116	76%	116	62%	116	80%
Chittenden*	166	88%	166	67%	166	54%	166	83%
Essex*	21	85%	21	78%	21	72%	21	82%
Franklin*	63	86%	63	76%	63	65%	63	76%
Grand Isle*	15	94%	15	85%	15	52%	15	87%
Lamoille*	61	95%	61	76%	61	44% ↓	61	75%
Orange*	66	84%	66	72%	66	61%	66	76%
Orleans*	110	93%	110	80% ↑	110	61%	110	81%
Rutland	204	86%	204	61% ↓	204	56%	204	84%
Washington*	78	88%	78	64%	78	45% ↓	78	70% ↓
Windham*	72	91%	72	62%	72	53%	72	82%
Windsor*	105	91%	105	75%	105	56%	105	79%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 23b. Quality of Life items by County

	I am satisfied with how I spend my free time		I am satisfied with the amount of contact I have with family/friends		I have someone I can count on in an emergency		I feel satisfied with my social life	
	% Yes		% Yes		% Yes		% Yes	
	n	%	n	%	n	%	n	%
Total	1,268	65%	1,268	64%	1,268	89%	1,268	53%
Addison*	101	66%	101	69%	101	95%↑	101	56%
Bennington*	90	74%	90	58%	90	93%	90	54%
Caledonia*	116	69%	116	72%	116	95%↑	116	58%
Chittenden*	166	67%	166	60%	166	90%	166	62%↑
Essex*	21	51%	21	56%	21	89%	21	32%
Franklin*	63	68%	63	64%	63	88%	63	49%
Grand Isle*	15	39%	15	52%	15	93%	15	12%
Lamoille*	61	68%	61	63%	61	92%	61	50%
Orange*	66	63%	66	56%	66	88%	66	50%
Orleans*	110	60%	110	65%	110	89%	110	54%
Rutland	204	66%	204	67%	204	89%	204	52%
Washington*	78	60%	78	61%	78	76%↓	78	44%
Windham*	72	63%	72	63%	72	87%	72	50%
Windsor*	105	64%	105	68%	105	84%	105	51%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 23c. Quality of Life items by County

	I feel valued and respected		I really feel a part of my community		I have someone I can count on to listen to me when I need to talk	
	% Yes		% Yes		% Yes	
	n	%	n	%	n	%
Total	1,268	70%	1,268	43%	1,268	81%
Addison*	101	76%	101	45%	101	82%
Bennington*	90	73%	90	51%	90	90%↑
Caledonia*	116	76%	116	45%	116	82%
Chittenden*	166	70%	166	50%	166	84%
Essex*	21	70%	21	48%	21	77%
Franklin*	63	67%	63	39%	63	74%
Grand Isle*	15	60%	15	30%	15	80%
Lamoille*	61	77%	61	38%	61	83%
Orange*	66	57%↓	66	39%	66	76%
Orleans*	110	74%	110	49%	110	83%
Rutland	204	71%	204	40%	204	80%
Washington*	78	65%	78	28%↓	78	81%
Windham*	72	61%	72	39%	72	78%
Windsor*	105	66%	105	46%	105	77%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 23d. Quality of Life items by County

	I have someone to do something enjoyable with		In my leisure time, I usually don't like what I'm doing, but I don't know what else to do		During my leisure time, I almost always have something to do	
	% Yes		% Yes		% Yes	
	n	%	n	%	n	%
Total	1,268	71%	1,268	23%	1,268	60%
Addison*	101	74%	101	25%	101	61%
Bennington*	90	80% ↑	90	23%	90	66%
Caledonia*	116	69%	116	21%	116	58%
Chittenden*	166	75%	166	27%	166	56%
Essex*	21	70%	21	35%	21	80%
Franklin*	63	74%	63	16%	63	63%
Grand Isle*	15	73%	15	19%	15	61%
Lamoille*	61	75%	61	21%	61	61%
Orange*	66	65%	66	29%	66	52%
Orleans*	110	66%	110	17%	110	52%
Rutland	204	66%	204	22%	204	58%
Washington*	78	64%	78	17%	78	56%
Windham*	72	69%	72	30%	72	70%
Windsor*	105	70%	105	28%	105	66%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Addison County: Residents of Addison County are less likely to report needing more help around the house than those in other counties.

Bennington County: Consumers in Bennington County are more likely to have an unpaid person help them stay at home and get around the community than those in other counties.

Chittenden County: Those residing in Chittenden County are less likely to report having a family member or friend help around the house in the last week or to have an unpaid person help them stay at home or get around the community.

Among those that receive help around the house or in the community by an unpaid person, those in Chittenden County are less likely to see that person more than once a week compared to those in other counties.

Lamoille County: Residents of Lamoille County are less likely to report needing more help around the house than those in other counties.

Orange County: Among those that receive help around the house or in the community by an unpaid person, those in Orange County are more likely to see that person less than once a week compared to those in other counties.

Rutland County: Among those that receive help around the house or in the community by an unpaid person, those in Rutland County are less likely to see that person less than once a week and more likely to see that person more than once a week compared to those in other counties.

Windsor County: Residents of Windsor County are more likely to report needing more help around the house than those in other counties.

Table 24a. Quality of Life items – Help around the house by County

	More Help Needed with Things Around the House		Family Member or Friend Helped with Things Around House in Last Week		People Not Paid to Help You Stay at Home/Get Around Community	
	% Yes		% Yes		% Yes	
	n	%	n	%	n	%
Total	1,268	27%	1,268	71%	1,268	63%
Addison*	101	11%↓	101	74%	101	64%
Bennington*	90	28%	90	75%	90	77%↑
Caledonia*	116	26%	116	72%	116	66%
Chittenden*	166	32%	166	63%↓	166	51%↓
Essex*	21	29%	21	81%	21	74%
Franklin*	63	25%	63	72%	63	61%
Grand Isle*	15	40%	15	86%	15	87%
Lamoille*	61	13%↓	61	71%	61	58%
Orange*	66	17%	66	78%	66	70%
Orleans*	110	19%	110	77%	110	65%
Rutland	204	28%	204	69%	204	61%
Washington*	78	31%	78	68%	78	70%
Windham*	72	31%	72	73%	72	66%
Windsor*	105	39%↑	105	74%	105	64%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 24b. Quality of Life items – Help around the house by County

How Often See The Person Who Is Not Paid to Help You During a Week		Less than One Time a Week	One Time a Week	More than One Time a Week
	n	%	%	%
Total	1,268	10%	16%	73%
Addison*	101	9%	21%	68%
Bennington*	90	6%	20%	74%
Caledonia*	116	3%	18%	80%
Chittenden*	166	15%	21%	58% ↓
Essex*	21	6%	--	94%
Franklin*	63	9%	11%	80%
Grand Isle*	15	--	18%	82%
Lamoille*	61	8%	13%	79%
Orange*	66	24% ↑	14%	61%
Orleans*	110	13%	14%	73%
Rutland	204	4% ↓	13%	82% ↑
Washington*	78	18%	15%	67%
Windham*	72	12%	23%	65%
Windsor*	105	8%	12%	78%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Addison County: Consumers in Addison County are less likely to report feeling sad or blue in the past week and are more likely to report getting the social and emotional support needed compared to those in other counties.

Caledonia County: Consumers in Caledonia County are less likely to report feeling sad or blue in the past week than those in other counties.

Table 25. Quality of Life items – Emotional Health, Emotional Support, and Satisfaction with Life by County

	How Often Felt Sad or Blue in Last Week		How Often Get Needed Social and Emotional Support		Satisfaction with Life	
	% Always or Usually		% Always or Usually		% Very Satisfied or Satisfied	
	n	%	n	%	n	%
Total	1,268	15%	1,268	62%	1,268	66%
Addison*	101	8% ↓	101	74% ↑	101	73%
Bennington*	90	22%	90	68%	90	64%
Caledonia*	116	8% ↓	116	62%	116	72%
Chittenden*	166	16%	166	62%	166	60%
Essex*	21	8%	21	50%	21	57%
Franklin*	63	11%	63	63%	63	74%
Grand Isle*	15	25%	15	41%	15	39%
Lamoille*	61	8%	61	61%	61	71%
Orange*	66	20%	66	56%	66	61%
Orleans*	110	12%	110	62%	110	74%
Rutland	204	15%	204	61%	204	69%
Washington*	78	16%	78	56%	78	59%
Windham*	72	22%	72	61%	72	61%
Windsor*	105	16%	105	61%	105	67%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

6. HEALTH STATUS

All long-term care services consumers were also asked three questions about their physical health. The results are displayed in Figure 11.

Health Compared to People of the Same Age

Consumers were asked to compare their health to that of other people their own age. In 2013, 21% of consumers rate their own health as either “excellent” or “very good”. This is similar to 2012 (22%).

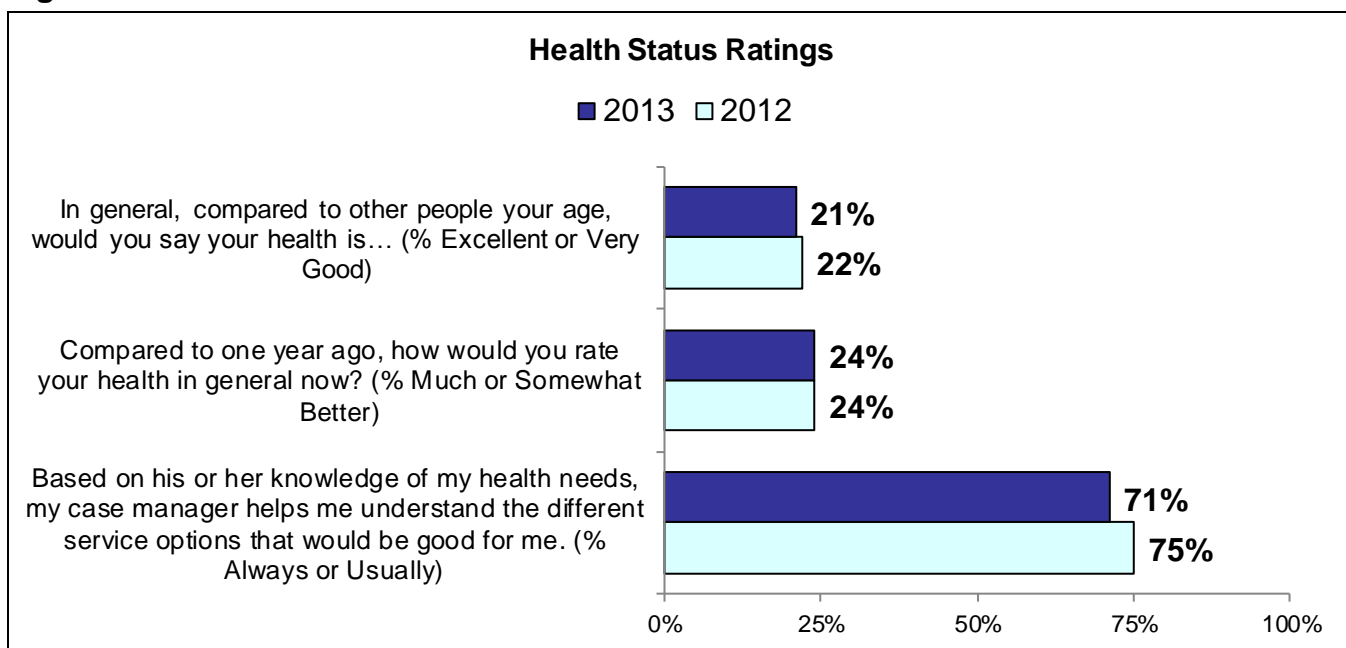
Health Compared to One Year Ago

Consumers were also asked to compare their general health now (at the time of the survey) with their health of one year ago. In 2013, 24% of consumers rate their present general health as either “much better now than one year ago” or “somewhat better now than one year ago”. This was unchanged from the 24% of consumers who rated their health in a similar fashion in 2012.

Case Manager Helps Consumers Understand Different Service Options Based on Health

Consumers were also asked whether their case manager helps them understand the different service options that would be good for them based on their health needs. In 2013, 71% of consumers said their case manager “always” or “usually” did. This is slightly lower than 2012 (75%).

Figure 11. Health Status items



6.1. HEALTH STATUS BY PROGRAM

Personal Care Services: Consumers enrolled in Personal Care Services are more likely than those in other programs to have a case manager help them understand different services options that meet their needs.

Consumer-Directed Personal Care Services: Respondents receiving Consumer-Directed Personal Care Services report worse health compared to other people their age than those in other programs.

Surrogate-Directed Personal Care Services: Individuals receiving Surrogate-Directed Personal Care Services report greater health compared to other people their age and are more likely to have a case manager help them understand different services options that meet their needs than those enrolled in other programs.

Agency-Directed Personal Care Services: Individuals receiving Agency-Directed Personal Care Services are more likely to have a case manager help them understand different services options that meet their needs than those enrolled in other programs.

Homemaker Services: Consumers receiving Homemaker Care Services are less likely to report having a case manager that helps them understand different service options that meet their needs than those in other programs.

Attendant Services Program: Consumers in the Attendant Services Program Services are less likely to report having a case manager that helps them understand different service options that meet their needs than those in other programs.

Table 26. Health Status items by Program

	Health Compared to Other People Your Age		Health Compared to One Year Ago		Case Manager Helps Me Understand Different Service Options	
	% Excellent or Very Good		% Much or Somewhat Better		% Always or Usually	
	n	%	n	%	n	%
Total	1,268	21%	1,268	24%	1,268	71%
CFC Case Mgmt	1,149	22%	1,149	24%	1,149	72%
Personal Care Services	653	21%	653	26%	653	80% ↑
<i>Consumer-Directed</i>	164	12% ↓	164	27%	164	71%
<i>Surrogate-Directed</i>	212	31% ↑	212	25%	212	88% ↑
<i>Agency-Directed</i>	354	18%	354	25%	354	79% ↑
Flexible Choices*	45	20%	45	22%	45	66%
Adult Day Services	209	24%	209	26%	209	76%
Homemaker Services	428	22%	428	21%	428	64% ↓
Attendant Services Program*	64	19%	64	16%	64	54% ↓
Traumatic Brain Injury Program*	11	9%	11	53%	11	65%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

6.2. HEALTH STATUS BY COUNTY

Addison County: Consumers in Addison County are more likely to report having a case manager that helps them understand different service options that meet their needs than those in other programs.

Windsor County: Consumers in Windsor County are less likely to report having a case manager that helps them understand different service options that meet their needs than those in other programs.

Table 27. Health Status items by Program

	Health Compared to Other People Your Age		Health Compared to One Year Ago		Case Manager Helps Me Understand Different Service Options	
	% Excellent or Very Good		% Much or Somewhat Better		% Always or Usually	
	n	%	n	%	n	%
Total	1,268	21%	1,268	24%	1,268	71%
Addison*	101	18%	101	27%	101	81% ↑
Bennington*	90	23%	90	21%	90	77%
Caledonia*	116	29%	116	22%	116	74%
Chittenden*	166	25%	166	27%	166	70%
Essex*	21	15%	21	18%	21	79%
Franklin*	63	14%	63	25%	63	76%
Grand Isle*	15	13%	15	6%	15	51%
Lamoille*	61	25%	61	32%	61	75%
Orange*	66	16%	66	18%	66	72%
Orleans*	110	27%	110	22%	110	74%
Rutland	204	19%	204	21%	204	65%
Washington*	78	15%	78	22%	78	70%
Windham*	72	23%	72	27%	72	73%
Windsor*	105	20%	105	29%	105	61% ↓

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

7. CASE MANAGEMENT

All long-term care services consumers that reported having a case manager were asked 10 questions about their overall experiences with case management services and their case manager. The results are displayed in Figures 12 and 13.

Satisfaction with Case Manager

Almost 9 in 10 consumers reported being very or somewhat satisfied with their case manager in 2013, a slight decrease from 2012 (95%).

Recommendation of Case Manager to Others

New in 2013. Consumers were also asked for their recommendation of case manager to others (Excellent, Good, Fair, Poor). Almost 9 in 10 individuals rated their case manager as “excellent” or “good”.

Rating of Case Management Services on Staff Competency

New in 2013. Consumers were also asked to rate case management services on the competency of staff (Excellent, Good, Fair, Poor). Nine out of ten consumers rate staff competency as “excellent” or “good”.

Experiences with Case Manager

Seven items asked consumers about their experiences with case managers, on a five-point scale of Always, Usually, Sometimes, Rarely, or Never. Consumers rate their case managers highly, ranging from 82%, being able to talk to case manager when needed, to 89%, having a case manager that understands what services they need. Ratings were slightly lower in 2013 compared to 2012 on all items, except the case manager asking them what they want.

Figure 12. Overall Ratings of Case Manager

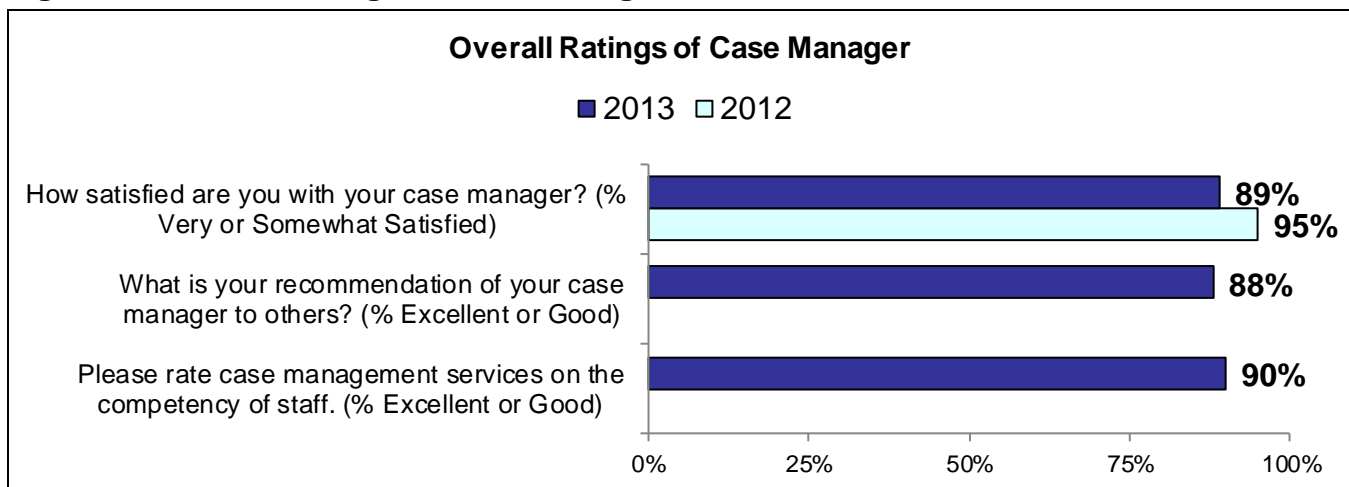


Figure 13. Experiences with Case Manager



Of those that expressed dissatisfaction with their case manager, over 1 in 3 cite lack of contact and poor communication as an issue, and 1 in 5 report reliability and follow-through as a problem.

Table 28. Reasons for Dissatisfaction with Case Manager

Why are you dissatisfied your case manager?	
Number answering question (unweighted)	31
Calls not returned; slow to return calls	4%
Broken promises; unreliable; no follow through	21%
Case manager is rude, insensitive, disrespectful	7%
Disorganized; services inconsistent	3%
Lack of contact, communication with case worker; poor communication	35%
Not given enough assistance, help; short staffed	13%
Staff does not listen to concerns, requests	4%
Don't know who case manager is	3%
Doesn't have/know info; not giving all info; not helpful	6%
Other	4%
Total	100%

7.1. CASE MANAGEMENT BY PROGRAM

Personal Care Services: Consumers enrolled in Personal Care Services are more likely to be satisfied with their case manager and have an excellent or good rating of their case manager to others, compared to those in other programs.

Surrogate-Directed Personal Care Services: Respondents receiving Surrogate-Directed Personal Care Services are more likely to be satisfied with their case manager, recommend their case manager to others, and report competency of case management services staff as excellent or good. Those in Homemaker Services report better experiences with their case manager on all items compared to those in other programs.

Homemaker Services: Consumers receiving Homemaker Services are less likely to be satisfied with their case manager and less likely to recommend their case manager to others than those in other programs. Those in Homemaker Services report lower experiences with their case manager on all items compared to those in other programs.

Please note: TBI case management responses were not included due to a combination of a low number of responses and other methodological concerns.

Table 29. Overall Ratings of Case Manager by Program

	Satisfaction with Case Manager		Recommendation of Case Manager to Others		Competency of Case Management Services Staff	
	% Very or Somewhat Satisfied		% Excellent or Good		% Excellent or Good	
	n	%	n	%	n	%
Total	1,193	89%	1,193	88%	1,193	90%
CFC Case Mgmt	1,149	89%	1,149	88%	1,149	90%
Personal Care Services	653	93% ↑	653	92% ↑	653	92%
<i>Consumer-Directed</i>	164	90%	164	88%	164	91%
<i>Surrogate-Directed</i>	212	95% ↑	212	95% ↑	212	94% ↑
<i>Agency-Directed</i>	354	92%	354	91%	354	91%
Flexible Choices*	45	100%	45	100%	45	100%
Adult Day Services	209	90%	209	89%	209	92%
Homemaker Services	428	85% ↓	428	83% ↓	428	87%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Note: Not all Flexible Choices are enrolled in Case Management Services

Table 30a. Experiences with Case Manager by Program

	I feel I have a part in planning my care with my case manager		My case manager coordinates my services to meet my needs		My case manager understands which services I need to stay in my current living situation		I can talk to my case manager when I need to	
	% Always or Usually		% Always or Usually		% Always or Usually		% Always or Usually	
	n	%	n	%	n	%	n	%
Total	1,193	83%	1,193	85%	1,193	89%	1,193	82%
CFC Case Mgmt	1,149	83%	1,149	85%	1,149	89%	1,149	82%
Personal Care Services	653	88% ↑	653	89% ↑	653	93% ↑	653	87% ↑
<i>Consumer-Directed</i>	164	88%	164	88%	164	93%	164	86%
<i>Surrogate-Directed</i>	212	89% ↑	212	92% ↑	212	95% ↑	212	89% ↑
<i>Agency-Directed</i>	354	87%	354	89%	354	92%	354	86%
Flexible Choices*	45	100%	45	100%	45	100%	45	100%
Adult Day Services	209	83%	209	86%	209	87%	209	79%
Homemaker Services	428	78% ↓	428	80% ↓	428	85% ↓	428	77% ↓

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Note: Not all Flexible Choices are enrolled in Case Management Services

Table 30b. Experiences with Case Manager by Program

	My case manager helps me when I ask for something		My case manager asks me what I want		My case manager helps me understand the different service options that are available	
	% Always or Usually		% Always or Usually		% Always or Usually	
	n	%	n	%	n	%
Total	1,193	87%	1,193	84%	1,193	83%
CFC Case Mgmt	1,149	87%	1,149	84%	1,149	83%
Personal Care Services	653	90% ↑	653	89% ↑	653	87% ↑
<i>Consumer-Directed</i>	164	88%	164	88%	164	82%
<i>Surrogate-Directed</i>	212	92% ↑	212	92% ↑	212	91% ↑
<i>Agency-Directed</i>	354	89%	354	87%	354	87%
Flexible Choices*	45	100%	45	100%	45	100%
Adult Day Services	209	90%	209	81%	209	83%
Homemaker Services	428	82% ↓	428	77% ↓	428	77% ↓

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Note: Not all Flexible Choices are enrolled in Case Management Services

7.2. CASE MANAGEMENT BY CFC AGENCY

Caledonia Home Health: Consumers receiving Choices for Care services through Caledonia Home Health report more satisfaction with their case manager and a better recommendation of their case manager than those receiving services from other agencies. Consumers in Caledonia Home Health are also more likely to report that their case manager understands which services they need in order to stay in their current living situation than those receiving services from other agencies.

Central Vermont Council on Aging: Consumers receiving services from Central Vermont Council on Aging are more likely than those receiving services from other agencies to report their case manager always or usually helps them when they ask for something.

Northeast Vermont Area Agency on Aging: Consumers receiving services from Northeast Vermont Area on Aging are more likely than those receiving services from other agencies to report they usually or always feel they have a part in planning their care with their case manager.

Orleans-Essex VNA Association and Hospice: Consumers receiving services from Orleans-Essex VNA Association and Hospice are more likely than those receiving services from other agencies to report their case manager always or usually helps them when they ask for something, their case manager always or usually coordinates services to meet their needs, their case manager usually or always understands what services they need to stay in their current living situation that they usually or always can talk to their case manager when they need to, that their case manager usually or always asks them what they want, and that their case manager usually or always helps them understand the different service options that are available.

Rutland Area VNA Hospice: Consumers receiving services from the Rutland Area VNA Hospice are less likely than those receiving services from other agencies to report their case manager usually or always helps them understand the different service options that are available.

Visiting Nurse Alliance of VT and New Hampshire: Consumers receiving Choices for Care services through Visiting Nurse Alliance of VT and New Hampshire are less likely to have an excellent or good recommendation of their case manager and less likely to rate competency of case management services staff as excellent or good than those receiving services from other agencies. Consumers receiving services from the Visiting Nurse Alliance of VT and New Hampshire are less likely than those receiving services from other agencies to feel they have a part in planning their care with their case manager and that their case manager helps them when they ask for something.

Table 31. Overall Ratings of Case Manager by CFC Agency

	Satisfaction with Case Manager		Recommendation of Case Manager to Others		Competency of Case Management Services Staff	
	% Very or Somewhat Satisfied		% Excellent or Good		% Excellent or Good	
	n	%	n	%	n	%
Total	1,193	89%	1,193	88%	1,193	90%
Addison County Home Health Agency	60	87%	60	93%	60	94%
Caledonia Home Health	52	100%↑	52	95% ↑	52	90%
Central Vermont Council On Aging	117	87%	117	90%	117	91%
Central VT Home Health Agency & Hospice	33	95%	33	94%	33	85%
Champlain Valley Agency on Aging	160	90%	160	87%	160	94%
Council on Aging for Southeastern VT	80	93%	80	92%	80	90%
Franklin County Home Health & Hospice	26	89%	26	100%	26	100%
Lamoille Home Health Agency & Hospice	32	93%	32	93%	32	89%
Manchester Health Services, Inc.	6	100%	6	100%	6	100%
Northeastern Vermont Area Agency on Aging	126	90%	126	92%	126	91%
Orleans-Essex VNA	60	93%	60	87%	60	90%
Rutland Area VNA Hospice	68	82%	68	84%	68	89%
Southwestern Vermont Council on Aging	171	91%	171	88%	171	88%
Visiting Nurse Alliance of VT & New Hampshire	80	82%	80	72% ↓	80	78% ↓
Visiting Nurse Association, Chitt & Grand Isle	62	88%	62	84%	62	91%
VNA & Hospice of Southwestern Vermont	16	77%	16	83%	16	91%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 32a. Experiences with Case Manager by CFC Agency

	I feel I have a part in planning my care with my case manager		My case manager coordinates my services to meet my needs		My case manager understands which services I need to stay in my current living situation		I can talk to my case manager when I need to	
	% Always or Usually		% Always or Usually		% Always or Usually		% Always or Usually	
	n	%	n	%	n	%	n	%
Total	1,193	83% o	1,193	85%	1,193	89%	1,193	82%
Addison County Home Health Agency	60	87%	60	88%	60	96% ↑	60	86%
Caledonia Home Health	52	76%	52	86%	52	86%	52	81%
Central Vermont Council On Aging	117	83%	117	90%	117	89%	117	84%
Central VT Home Health Agency & Hospice	33	73%	33	70%	33	81%	33	78%
Champlain Valley Agency on Aging	160	85%	160	85%	160	88%	160	82%
Council on Aging for Southeastern VT	80	83%	80	83%	80	87%	80	85%
Franklin County Home Health & Hospice	26	87%	26	93%	26	100%	26	100%
Lamoille Home Health Agency & Hospice	32	82%	32	78%	32	89%	32	89%
Manchester Health Services, Inc.	6	100%	6	100%	6	100%	6	100%
Northeastern Vermont Area Agency on Aging	126	89% ↑	126	88%	126	91%	126	84%
Orleans-Essex VNA	60	91% ↑	60	95% ↑	60	97% ↑	60	92% ↑
Rutland Area VNA Hospice	68	84%	68	78%	68	90%	68	72%
Southwestern Vermont Council on Aging	171	80%	171	82%	171	87%	171	77%
Visiting Nurse Alliance of VT & New Hampshire	80	70% ↓	80	77%	80	86%	80	75%
Visiting Nurse Association, Chitt & Grand Isle	62	82%	62	91%	62	90%	62	79%
VNA & Hospice of Southwestern Vermont	16	91%	16	84%	16	91%	16	91%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 32b. Experiences with Case Manager by CFC Agency

	My case manager helps me when I ask for something		My case manager asks me what I want		My case manager helps me understand the different service options that are available	
	% Always or Usually		% Always or Usually		% Always or Usually	
	n	%	n	%	n	%
Total	1,193	87%	1,193	84%	1,193	83%
Addison County Home Health Agency	60	88%	60	82%	60	82%
Caledonia Home Health	52	91%	52	82%	52	85%
Central Vermont Council On Aging	117	92% ↑	117	89%	117	86%
Central VT Home Health Agency & Hospice	33	81%	33	76%	33	76%
Champlain Valley Agency on Aging	160	86%	160	81%	160	84%
Council on Aging for Southeastern VT	80	90%	80	82%	80	82%
Franklin County Home Health & Hospice	26	93%	26	100%	26	81%
Lamoille Home Health Agency & Hospice	32	93%	32	86%	32	81%
Manchester Health Services, Inc.	6	100%	6	100%	6	100%
Northeastern Vermont Area Agency on Aging	126	90%	126	86%	126	89%
Orleans-Essex VNA	60	89%	60	92% ↑	60	92% ↑
Rutland Area VNA Hospice	68	84%	68	82%	68	69% ↓
Southwestern Vermont Council on Aging	171	85%	171	83%	171	85%
Visiting Nurse Alliance of VT & New Hampshire	80	75% ↓	80	72%	80	73%
Visiting Nurse Association, Chitt & Grand Isle	62	83%	62	80%	62	78%
VNA & Hospice of Southwestern Vermont	16	81%	16	91%	16	91%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

8. ATTENDANT SERVICES PROGRAM

All long-term care consumers in the Attendant Services Program were asked 8 questions about their overall experiences with the Attendant Services Program. The results are displayed in Figures 14 and 15. Due to the low response rate obtained for Attendant Services Program participants, findings should be interpreted with caution.

Satisfaction with Attendant Services Program

Nine in ten consumers report being very or somewhat satisfied with the Attendant Services Program in 2013, a decrease from 2012 (98%).

Quality of Services from Attendant Services Program

The majority of consumers (97%) rate the quality of services they receive from the Attendant Services Program in 2013 as “excellent” or “good”, a slight decrease from 2012 (100%).

Recommendation of Attendant Services Program to Others

New in 2013. Consumers were also asked for their recommendation of the Attendant Services Program to others (Excellent, Good, Fair, Poor). Ninety-six percent of consumers rate their Attendant Services Program as “excellent” or “good”.

Rating of Attendant Services Program on Staff Competency

New in 2013. Consumers were also asked to rate the Attendant Services Program on the competency of staff (Excellent, Good, Fair, Poor). Ninety-five percent of consumers rate staff competency as “excellent” or “good”.

Experiences with Attendant Services Program

Four items asked consumers about their experiences with the Attendant Services Program, on a five-point scale of Always, Usually, Sometimes, Rarely, or Never.

In 2013, 95% of consumers rate the Attendant Services Program as always or usually meeting their needs, which is similar to the 2012 rating of 96%.

In both 2013 and 2012, all Attendant Services Program participants said that their caregivers always or usually treat them with courtesy and respect.

2013 shows a slight increase from 2012 in knowing who to contact if they have a complaint about the Attendant Services Program or need help (87% compared to 83%).

In 2013, 93% of participants rate the Attendant Services Program as usually or always providing services to them when and where they need them. This is a slight decrease from the rating of 96% in 2012.

Figure 14. Overall Ratings of Attendant Services Program

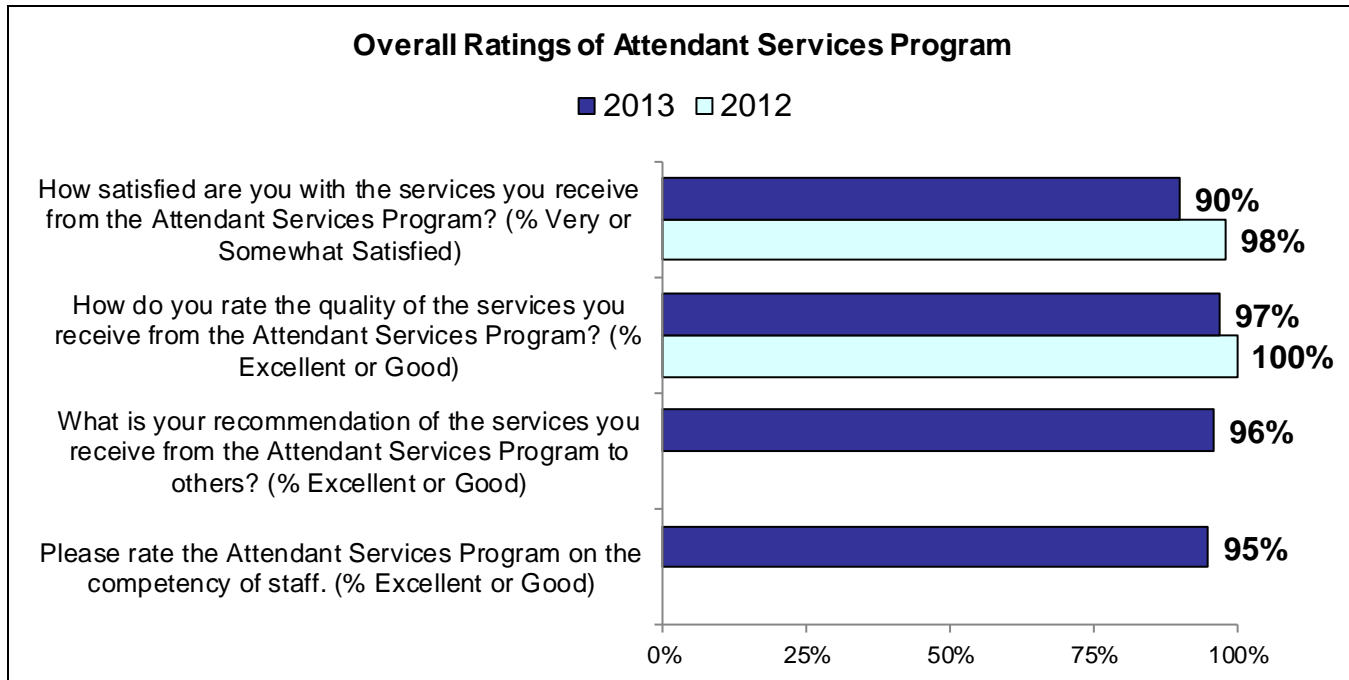


Figure 15. Experiences with Attendant Services Program



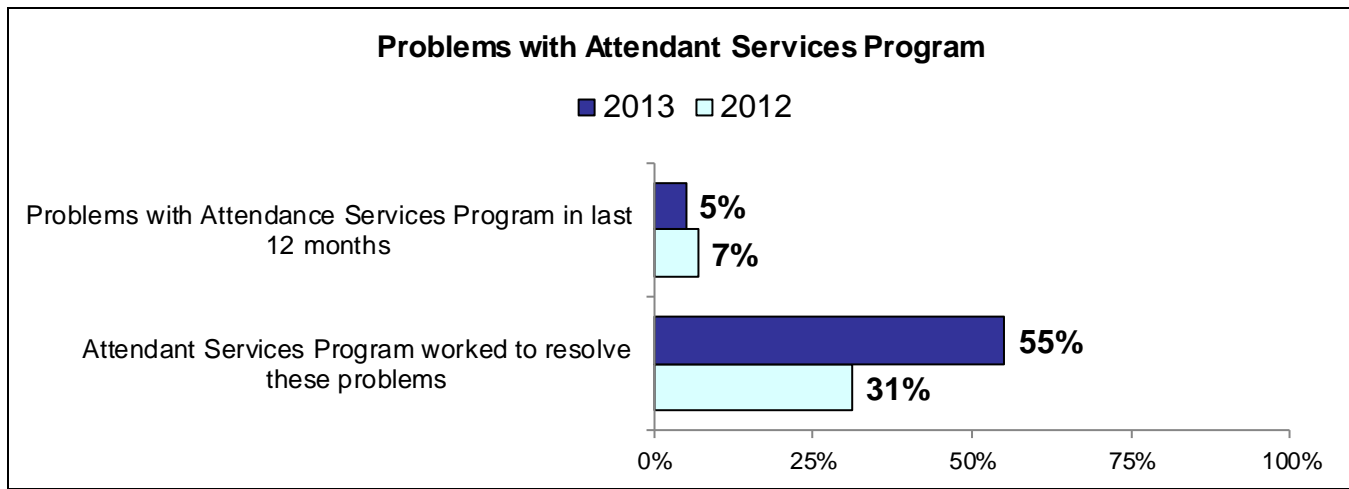
8.1. ATTENDANT SERVICES PROGRAM BY COUNTY

Sample size is too low for the Attendant Service Program to examine differences by county.

8.2. PROBLEMS WITH ATTENDANT SERVICES PROGRAM

Only 5% of consumers in the Attendant Services Program report having a problem in 2013, a slight decrease from 7% in 2012. Over half of consumers report that the Attendant Services Program worked to resolve these problems, up from just under 1 in 3 in 2012.

Figure 16. Problems with Attendant Services Program



8.3. OPEN-ENDED COMMENTS

Of the few individuals who indicated they were dissatisfied with the Attendant Services Program, three report that they needed more time, and one reports that wages were too low to find good helpers.

Table 33. Reasons for Dissatisfaction with Attendant Services Program

Why are you dissatisfied with the services you receive from the Attendant Services Program?	
(% among customers indicating they had a problem)	
Number answering question (unweighted)	4
lack of hours. (sic)	
the wages are too low to find good helpers. (sic)	
there is not enough time (sic)	
would like more time (sic)	

Problems experienced by consumers in the Attendant Services Program include problems with payment of staff and needing more help.

Table 34. Problems Experienced with Attendant Services Program

What problems did you experience?	
(% among customers indicating they had a problem)	
Number answering question (unweighted)	3
can't find good help - pay is too low. (sic)	
the payment of my caregiver. they were closed for a government day. and the caregiver didn't get paid. the caregiver helped me but didn't get paid. (sic)	
they denied me the extra time i needed (sic)	

Approximately 1 in 4 consumers in the Attendant Services Program believe that there was something DAIL could do to improve services offered by the Attendant Services Program. Of those that report things that could be improved, 1 in 3 cite issues with caregivers not being paid enough, and almost 1 in 3 cite problems with needing more hours and help.

Table 35. Improvement of Services Offered by Attendant Services Program

Is there anything that could improve services offered to you and others by the Attendant Services Program?	
Number answering question (unweighted)	57
Yes	27%
No	72%
Don't Know	1%

Is there anything that could improve services offered to you and others by the Attendant Services Program? (Specify)	
Number answering question (unweighted):	16
Caregivers not paid enough, need benefits	33%
Difficult to find adequate caregivers / need training	7%
Need more help	30%
Problems with paperwork, new forms	7%
Programs need more funding, keep them going	11%
Problems with communication	4%
Help finding good providers	7%
Other	4%
Total	100%

9. PERSONAL CARE SERVICES

All long-term care consumers receiving Personal Care Services or enrolled in Flexible Choices were asked 14 questions about their overall experiences with Personal Care Services. The results are displayed in Figures 17, 18, and 19.

Satisfaction with Personal Care Services

Ninety-five percent of ten consumers report being very or somewhat satisfied with the Personal Care Services in 2013, similar to 2012 (96%).

Quality of Services from Personal Care Services

The majority of consumers rate the quality of services they receive from the Personal Care Services as “excellent” or “good” in 2013 (95%), the same rating as 2012 (95%).

Recommendation of Personal Care Services to Others

New in 2013. Consumers were also asked for their recommendation of the Personal Care Services to others (Excellent, Good, Fair, Poor). Ninety-five percent of consumers rate their Personal Care Services as “excellent” or “good”.

Rating of Personal Care Services on Staff Competency

New in 2013. Consumers were also asked to rate Personal Care Services on the competency of staff (Excellent, Good, Fair, Poor). Ninety-three percent of consumers rate staff competency as “excellent” or “good”.

Experiences with Personal Care Services

Four items asked about consumers’ experiences with Personal Care Services, on a five-point scale of Always, Usually, Sometimes, Rarely, or Never.

In 2013, 92% of consumers rate Personal Care Services as always or usually meeting their needs, which is similar to the 2012 rating of 91%.

In 2013, 98% of consumers rate Personal Care Services’ caregivers as always or usually treating them with courtesy and respect, which is similar to the 2012 rating of 97%.

In 2013, 92% of consumers report they know who to contact if they have a complaint about the Personal Care Services or need help, similar to 2012 (91%).

In 2013, 92% of participants rate Personal Care Services as usually or always providing services to them when and where they need them, similar to the 91% rating given in 2012.

Agreement with Statements about Personal Care Services

Six items asked consumers their level of agreement with the statement on a five-point scale of Strongly Agree, Agree, Neither Agree nor Disagree, Disagree, or Strongly Disagree.

In 2013, 87% of consumers report being able to choose their Personal Care Services, an increase of 6% from 2012 (81%).

2013 shows a 9% increase in the rating of choosing the provider of their Personal Care Services, from 76% in 2012 to 85% in 2013.

85% of consumers report being able to choose the scheduling of Personal Care Services that met their needs, a slight increase from 2012 (81%).

In 2013, 63% report being able to choose the scheduling of Personal Care Services that meet their needs, similar to 2012 (62%).

Over half of respondents agreed that having more providers who offer Personal Care Services would allow them to better meet their needs, a 7% increase from 2012 (44%).

In 2013, 23% of consumers report that there are Personal Care Services they need but cannot get, slightly higher than 2012 (20%).

Figure 17. Overall Ratings of Personal Care Services

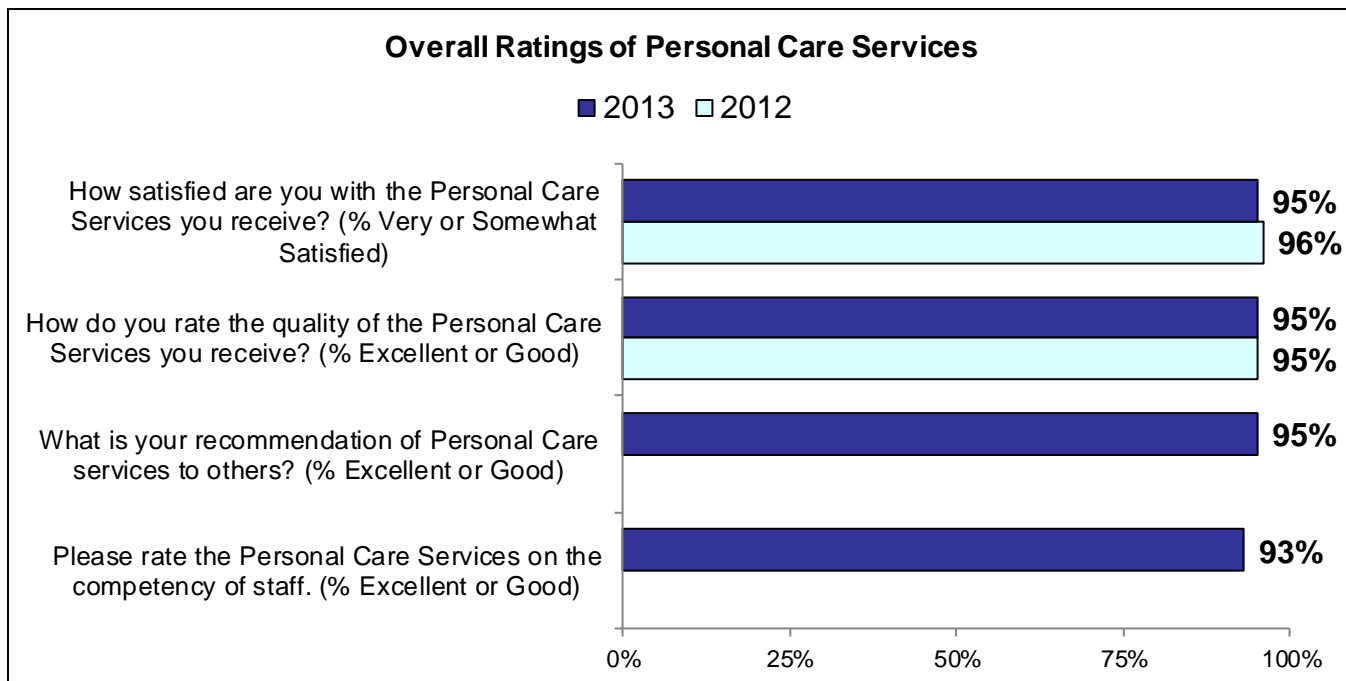


Figure 18. Experiences with Personal Care Services

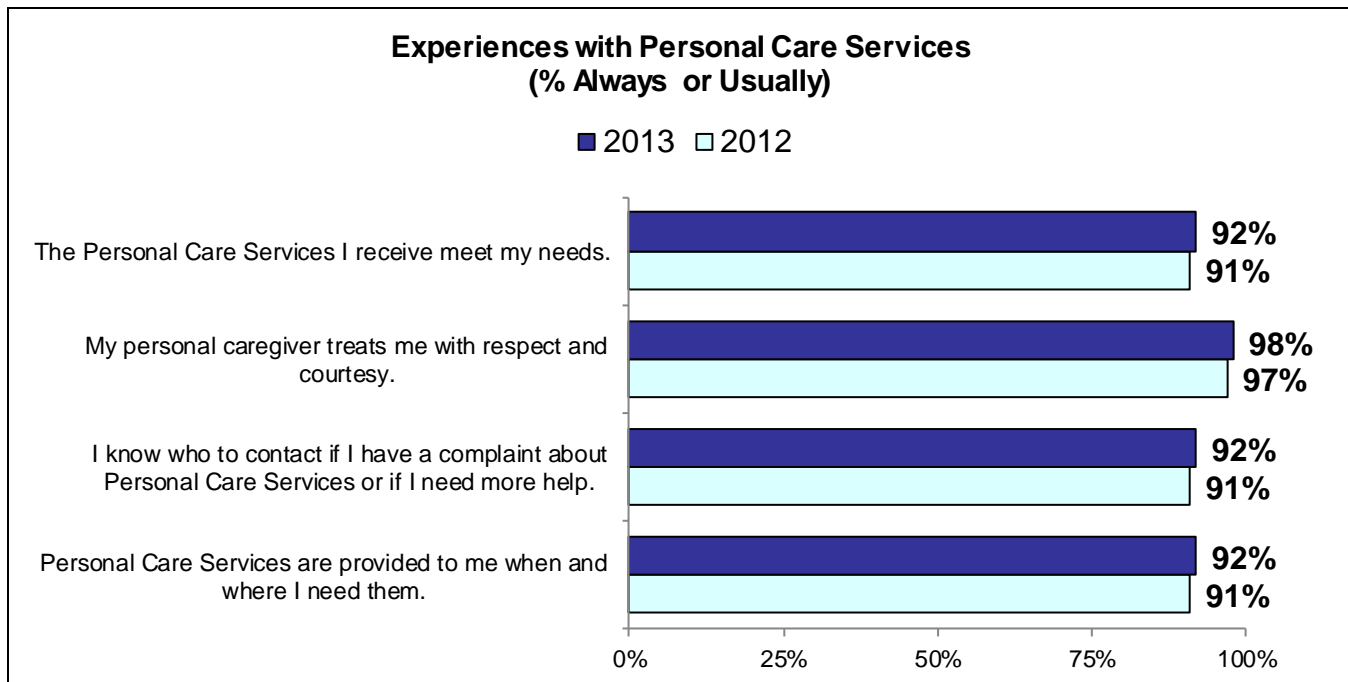
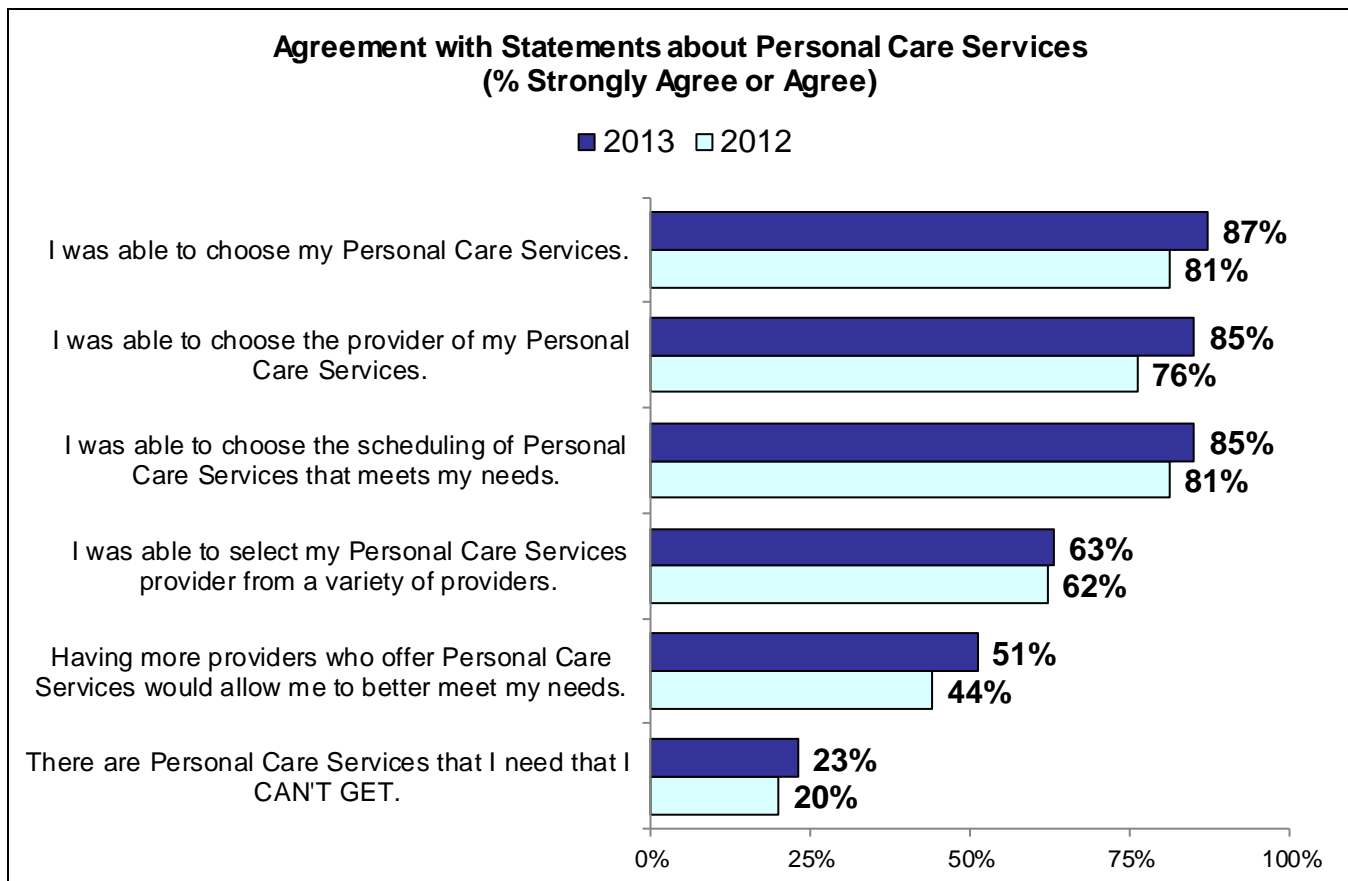


Figure 19. Agreement with Statements about Personal Care Services



9.1. PERSONAL CARE SERVICES BY SERVICE AND AGENCY

Tables 36 – 38 display the results of Personal Care Services questions by service and agency. We highlight the findings below.

Surrogate-Directed Personal Care Services: Consumers receiving Surrogate-Directed Personal Care Services are more likely to report the quality of services received from Personal Care Services, the recommendation of Personal Care Services to others, and the competency of Personal Care Services staff as excellent or good than those receiving other Personal Care Services. Consumers receiving Surrogate-Directed Personal Care Services are more likely to report that Personal Care Services always or usually meets their needs and that their personal caregiver always or usually treats them with courtesy and respect than other consumers. Those receiving Surrogate-Directed Personal Care Services are also more likely to report being able to choose their Personal Care Services, choose the provider of their Personal Care Services, choose the scheduling of Personal Care Services that meets their needs, and select their Personal Care provider from a variety of providers than other consumers. Finally, those receiving Surrogate-Directed Personal Care Services are less likely to feel there are services they cannot get than other recipients.

Agency-Directed Personal Care Services: Those receiving Agency-Directed Personal Care Services are less likely to report being able to choose their Personal Care Services, choose the provider of their Personal Care Services, and select their Personal Care provider from a variety of providers than other consumers.

Addison County Home Health Agency: Consumers receiving Personal Care Services from Addison County Home Health are more likely to report the competency of staff as excellent or good than those receiving services from other agencies. Consumers receiving Personal Care Services from Addison County Home Health are more likely to report that their personal caregiver always or usually treats them with courtesy and respect than consumers receiving Personal Care Services through other agencies.

Bayada Professional Nurse Service Inc.: Consumers receiving Personal Care Services from Bayada Professional Nurse Service Inc. are more likely to report that they were able to choose the provider of personal care services than consumers receiving Personal Care Services through other agencies.

Flexible Choices: Consumers in Flexible Choices are more likely than those receiving other Personal Care Services to report the recommendation of Personal Care Services and the competency of Personal Care Services staff as excellent or good. Consumers in Flexible Choices are also more likely than those receiving other Personal Care Services to report being able to choose the provider of their Personal Care Service, and being able to select their Personal Care Services provider.

Table 36. Overall Ratings of Personal Care Services by Service and Agency

	Satisfaction with Personal Care Services		Quality of Services Received from Personal Care Services		Recommendation of Personal Care Services to Others		Competency of Personal Care Services Staff	
	% Very or Somewhat Satisfied		% Excellent or Good		% Excellent or Good		% Excellent or Good	
	n	%	n	%	n	%	n	%
Total	698	95%	698	95%	698	95%	698	93%
Personal Care Services	653	95%	653	95%	653	95%	653	95%
<i>Consumer-Directed</i>	164	95%	164	92%	164	95%	164	89%
<i>Surrogate-Directed</i>	212	97%	212	98%↑	212	98%↑	212	98%↑
<i>Agency-Directed</i>	354	93%	354	94%	354	92%	354	91%
Addison County Home Health Agency	46	98%	46	98%	46	96%	46	98%↑
Bayada Professional Nurses Service Inc	84	91%	84	97%	84	91%	84	93%
Caledonia Home Health	17	100%	17	92%	17	95%	17	94%
Central VT Home Health Agency & Hospice	17	93%	17	91%	17	100%	17	85%
Franklin County Home Health & Hospice	30	93%	30	96%	30	96%	30	92%
Lamoille Home Health Agency & Hospice	12	100%	12	100%	12	100%	12	100%
Manchester Health Services, Inc.	6	100%	6	100%	6	100%	6	100%
Orleans-Essex VNA Association & Hospice	21	87%	21	94%	21	94%	21	89%
Rutland Area VNA Hospice	25	88%	25	89%	25	89%	25	83%
Visiting Nurse Alliance of VT & New Hampshire	24	100%	24	91%	24	91%	24	95%
VNA, Chitt & Grand Isle	60	93%	60	92%	60	87%	60	86%
VNA & Hospice of Southwestern Vermont	12	90%	12	82%	12	82%	12	75%
Flexible Choices	45	94%	45	96%	45	100%↑	45	100%↑

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 37. Experiences with Personal Care Services by Service and Agency

	Personal Care Services Meet My Needs		Personal Caregiver Treats Me With Courtesy & Respect		I Know Who To Contact if I have a Complaint or Need More Help		Personal Care Services Provided When & Where I Need Them	
	% Always or Usually		% Always or Usually		% Always or Usually		% Always or Usually	
	n	%	n	%	n	%	n	%
Total	698	92%	698	97%	698	92%	698	92%
Personal Care Services	653	92%	653	98%	653	92%	653	92%
<i>Consumer-Directed</i>	164	91%	164	97%	164	93%	164	91%
<i>Surrogate-Directed</i>	212	97% ↑	212	100% ↑	212	93%	212	95%
<i>Agency-Directed</i>	354	90%	354	97%	354	93%	354	91%
Addison County Home Health Agency	46	90%	46	100% ↑	46	93%	46	91%
Bayada Professional Nurses Service Inc	84	92%	84	95%	84	89%	84	94%
Caledonia Home Health	17	88%	17	95%	17	87%	17	87%
Central VT Home Health Agency & Hospice	17	100%	17	100%	17	85%	17	91%
Franklin County Home Health & Hospice	30	96%	30	96%	30	89%	30	96%
Lamoille Home Health Agency & Hospice	12	100%	12	100%	12	90%	12	90%
Manchester Health Services, Inc.	6	100%	6	100%	6	100%	6	100%
Orleans-Essex VNA Association & Hospice	21	94%	21	100%	21	94%	21	88%
Rutland Area VNA Hospice	25	83%	25	89%	25	94%	25	78%
Visiting Nurse Alliance of VT & New Hampshire	24	95%	24	96%	24	100%	24	100%
VNA, Chitt & Grand Isle	60	81%	60	96%	60	96%	60	85%
VNA & Hospice of Southwestern Vermont	12	90%	12	100%	12	100%	12	90%
Flexible Choices	45	86%	45	97%	45	94%	45	89%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 38a. Agreement with Statements about Personal Care Services by Service and Agency

	I was able to choose my Personal Care Services		I was able to choose the provider of my Personal Care Services		I was able to choose the scheduling of Personal Care Services that meets my needs	
	% Strongly Agree or Agree		% Strongly Agree or Agree		% Strongly Agree or Agree	
	n	%	n	%	n	%
Total	698	87%	698	85%	698	85%
Personal Care Services	653	87%	653	85%	653	85%
<i>Consumer-Directed</i>	164	90%	164	89%	164	89%
<i>Surrogate-Directed</i>	212	93% ↑	212	93% ↑	212	92% ↑
<i>Agency-Directed</i>	354	81% ↓	354	78% ↓	354	80%
Addison County Home Health Agency	46	70%	46	72%	46	81%
Bayada Professional Nurses Service Inc	84	88%	84	89% ↑	84	85%
Caledonia Home Health	17	91%	17	92%	17	84%
Central VT Home Health Agency & Hospice	17	70%	17	54%	17	70%
Franklin County Home Health & Hospice	30	83%	30	82%	30	76%
Lamoille Home Health Agency & Hospice	12	70%	12	69%	12	70%
Manchester Health Services, Inc.	6	100%	6	67%	6	67%
Orleans-Essex VNA Association & Hospice	21	65%	21	63%	21	86%
Rutland Area VNA Hospice	25	79%	25	73%	25	73%
Visiting Nurse Alliance of VT & New Hampshire	24	81%	24	83%	24	90%
VNA, Chitt & Grand Isle	60	83%	60	80%	60	77%
VNA & Hospice of Southwestern Vermont	12	81%	12	63%	12	81%
Flexible Choices	45	91%	45	93% ↑	45	84%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 38b. Agreement with Statements about Personal Care Services by Service and Agency

	I was able to select my Personal Care Services provider from a variety of providers		Having more providers who offer Personal Care Services would better meet my needs		There are Personal Care Services that I need that I CAN'T GET	
	% Strongly Agree or Agree		% Strongly Agree or Agree		% Strongly Agree or Agree	
	n	%	n	%	n	%
Total	698	65%	698	52%	698	24%
Personal Care Services	653	63%	653	51%	653	23%
<i>Consumer-Directed</i>	164	65%	164	49%	164	24%
<i>Surrogate-Directed</i>	212	73% ↑	212	49%	212	17% ↓
<i>Agency-Directed</i>	354	57% ↓	354	55%	354	27%
Addison County Home Health Agency	46	43%	46	47%	46	18%
Bayada Professional Nurses Service Inc	84	67%	84	57%	84	33%
Caledonia Home Health	17	64%	17	45%	17	31%
Central VT Home Health Agency & Hospice	17	48%	17	46%	17	23%
Franklin County Home Health & Hospice	30	65%	30	48%	30	22%
Lamoille Home Health Agency & Hospice	12	49%	12	42%	12	22%
Manchester Health Services, Inc.	6	67%	6	--	6	--
Orleans-Essex VNA Association & Hospice	21	53%	21	66%	21	36%
Rutland Area VNA Hospice	25	44%	25	53%	25	26%
Visiting Nurse Alliance of VT & New Hampshire	24	45%	24	70%	24	20%
VNA, Chitt & Grand Isle	60	55%	60	60%	60	32%
VNA & Hospice of Southwestern Vermont	12	72%	12	62%	12	29%
Flexible Choices	45	82% ↑	45	58%	45	39% ↑

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

9.2. PERSONAL CARE SERVICES BY COUNTY

Tables 39 – 42 display the results of Personal Care Services questions by county. We highlight the findings below.

Addison County: Consumers residing in Addison County report more satisfaction with Personal Care Services, better quality of services provided by Personal Care Services, higher staff competency, and have a personal caregiver that treats them with courtesy and respect compared to those in other counties. Residents of Addison County are less likely than those in other counties to feel there are Personal Care Services they cannot get.

Bennington County: Residents of Bennington County are more likely to agree that they were able to select their Personal Care Services provider from a variety of providers than those in other counties.

Caledonia County: Residents of Caledonia County are more likely than residents of other counties to rate their recommendation of Personal Care Services to others and the competency of Personal Care Services staff as excellent or good. Consumers in Caledonia County are less likely to report that there are Personal Care Services they need but cannot get than those in other counties.

Chittenden County: Residents of Chittenden County are more likely to know who to contact if they have a complaint or need more help, but less likely to report that personal care services meet their needs, compared to those in other counties.

Franklin County: Consumers residing in Franklin County are more likely than those in other counties to report that Personal Care Services always or usually meet their needs and provide services when and where they are needed.

Grand Isle County: Consumers residing in Grand Isle County are more likely than those in other counties to rate the quality of services received from Personal Care Services as excellent or good.

Lamoille County: Residents of Lamoille County are more likely to report that their caregiver always or usually treats them with courtesy and respect and less likely to agree that having more providers who offer Personal Care Services would better meet their needs than those in other counties.

Orange County: Consumers residing in Orange County are more likely than those in other counties to rate their recommendation of Personal Care Services to others as excellent or good and to report that Personal Care Services always or usually meets their needs.

Orleans County: Residents of Orleans County are more likely than those in other counties to report that their caregiver always or usually treats them with courtesy and respect, that Personal Care Services are provided when and where they are needed, and that they were able to choose the scheduling of Personal Care Services that meet their needs.

Windham County: Consumers residing in Windham County are more likely than those in other counties to rate the quality of services received from Personal Care Services as excellent or good and to report that their caregiver always or usually treats them with courtesy and respect. They are also more likely than those in other counties to agree that they were able to choose their Personal Care Services, the provider of their Personal Care Services, and the scheduling of Personal Care Services that meet their needs.

Windsor County: Consumers in Windsor County are less likely to agree that they were able to select

their Personal Care Services provider from a variety of providers and more likely to agree that having more providers who offer Personal Care Services would meet their needs.

Table 39. Overall Ratings of Personal Care Services by County

	Satisfaction with Personal Care Services		Quality of Services Received from Personal Care Services		Recommendation of Personal Care Services to Others		Competency of Personal Care Services Staff	
	% Very or Somewhat Satisfied		% Excellent or Good		% Excellent or Good		% Excellent or Good	
	n	%	n	%	n	%	n	%
Total	698	95%	698	95%	698	95%	698	93%
Addison*	72	98% ↑	72	98% ↑	72	97%	72	98% ↑
Bennington*	58	92%	58	90%	58	95%	58	89%
Caledonia*	55	98%	55	98%	55	99% ↑	55	99% ↑
Chittenden*	102	94%	102	91%	102	91%	102	90%
Essex*	9	100%	9	89%	9	100%	9	89%
Franklin*	43	95%	43	97%	43	97%	43	94%
Grand Isle*	12	92%	12	100% ↑	12	92%	12	100%
Lamoille*	33	89%	33	93%	33	93%	33	93%
Orange*	31	96%	31	97%	31	100% ↑	31	93%
Orleans*	73	96%	73	95%	73	95%	73	91%
Rutland	101	96%	101	98%	101	98%	101	93%
Washington*	32	85%	32	92%	32	92%	32	92%
Windham*	34	98%	34	100% ↑	34	94%	34	95%
Windsor*	43	95%	43	95%	43	93%	43	93%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 40. Experiences with Personal Care Services by County

	Personal Care Services Meet My Needs		Personal Caregiver Treats Me With Courtesy & Respect		I Know Who To Contact if I have a Complaint or Need More Help		Personal Care Services Provided When & Where I Need Them	
	% Always or Usually		% Always or Usually		% Always or Usually		% Always or Usually	
	n	%	n	%	n	%	n	%
Total	698	92%	698	97%	698	92%	698	92%
Addison*	72	92%	72	100%↑	72	91%	72	92%
Bennington*	58	90%	58	96%	58	94%	58	92%
Caledonia*	55	94%	55	99%	55	94%	55	89%
Chittenden*	102	84%↓	102	96%	102	97%↑	102	86%
Essex*	9	100%	9	100%	9	100%	9	91%
Franklin*	43	97%↑	43	97%	43	92%	43	97%↑
Grand Isle*	12	92%	12	100%	12	100%	12	91%
Lamoille*	33	89%	33	100%↑	33	81%	33	92%
Orange*	31	100%↑	31	97%	31	89%	31	96%
Orleans*	73	95%	73	100%↑	73	92%	73	98%↑
Rutland	101	95%	101	97%	101	87%	101	92%
Washington*	32	91%	32	96%	32	93%	32	88%
Windham*	34	95%	34	100%↑	34	93%	34	94%
Windsor*	43	92%	43	95%	43	89%	43	94%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 41a. Agreement with Statements about Personal Care Services by County

	I was able to choose my Personal Care Services		I was able to choose the provider of my Personal Care Services		I was able to choose the scheduling of Personal Care Services that meets my needs	
	% Strongly Agree or Agree		% Strongly Agree or Agree		% Strongly Agree or Agree	
	n	%	n	%	n	%
Total	698	87%	698	85%	698	85%
Addison*	72	81%	72	82%	72	86%
Bennington*	58	86%	58	82%	58	82%
Caledonia*	55	88%	55	90%	55	88%
Chittenden*	102	90%	102	86%	102	86%
Essex*	9	91%	9	91%	9	91%
Franklin*	43	87%	43	86%	43	82%
Grand Isle*	12	85%	12	84%	12	76%
Lamoille*	33	86%	33	85%	33	78%
Orange*	31	85%	31	85%	31	88%
Orleans*	73	85%	73	79%	73	94% ↑
Rutland	101	92%	101	90%	101	81%
Washington*	32	74%	32	69%	32	70%
Windham*	34	97% ↑	34	94% ↑	34	94% ↑
Windsor*	43	85%	43	90%	43	84%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 41b. Agreement with Statements about Personal Care Services by County

	I was able to select my Personal Care Services provider from a variety of providers		Having more providers who offer Personal Care Services would better meet my needs		There are Personal Care Services that I need that I CAN'T GET	
	% Strongly Agree or Agree		% Strongly Agree or Agree		% Strongly Agree or Agree	
	n	%	n	%	n	%
Total	698	65%	698	52%	698	24%
Addison*	72	57%	72	46%	72	14% ↓
Bennington*	58	77% ↑	58	55%	58	34%
Caledonia*	55	66%	55	62%	55	13% ↓
Chittenden*	102	68%	102	60%	102	25%
Essex*	9	81%	9	43%	9	11%
Franklin*	43	69%	43	46%	43	17%
Grand Isle*	12	84%	12	68%	12	18%
Lamoille*	33	52%	33	28% ↓	33	26%
Orange*	31	68%	31	56%	31	20%
Orleans*	73	71%	73	46%	73	28%
Rutland	101	60%	101	44%	101	20%
Washington*	32	59%	32	48%	32	24%
Windham*	34	55%	34	44%	34	39%
Windsor*	43	49% ↓	43	70% ↑	43	31%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

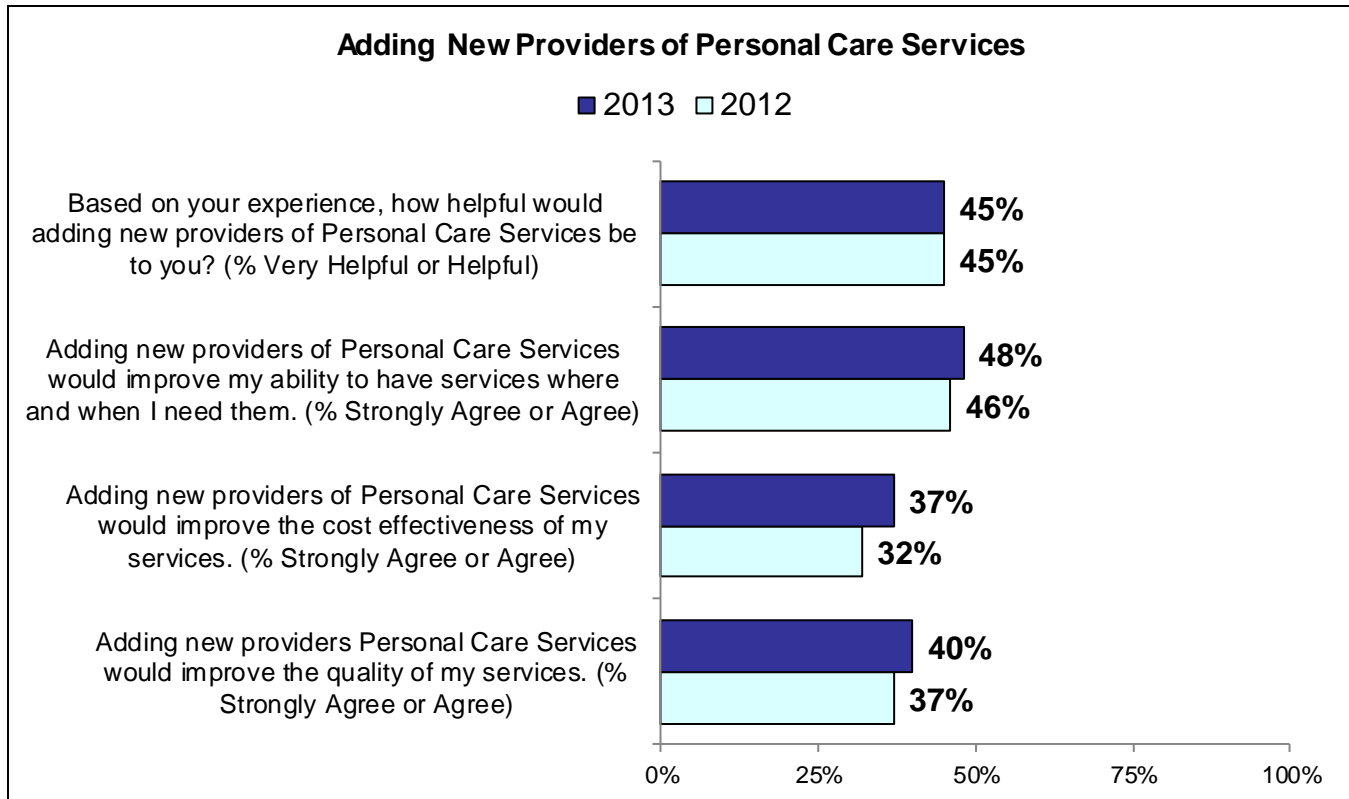
* Program did not meet 95/5 statistical criteria and should be interpreted with caution

9.3. ADDING NEW PROVIDERS OF PERSONAL CARE SERVICES

Four items ask questions about the possibility of adding new providers of personal care services. Almost half of the recipients of Personal Care Services believe that adding new providers would be useful to them. This is the same rating as given in 2012 (45%).

Almost half of the consumers who receive Personal Care Services, agree that adding new providers would improve their ability to have services when and where they need them. This is similar to the 2012 rating of 46%. Slightly more respondents believe that adding providers would improve the costs effectiveness and quality of their services in 2013 than in 2012.

Figure 20. Adding New Providers of Personal Care Services



9.3.1. ADDING NEW PROVIDERS OF PERSONAL CARE SERVICES BY SERVICE AND AGENCY

Surrogate-Directed Personal Care Services: Consumers receiving Surrogate-Directed Personal Care Services are less likely than consumers receiving other services to believe that adding new providers would be helpful.

Agency-Directed Personal Care Services: Recipients of Agency-Directed Personal Care Services are more likely than those receiving other services to believe that adding new providers would be helpful.

Table 42. Adding New Providers of Personal Care Services by Service And Agency

	Helpfulness of Adding New Providers of Personal Care Services		Would Improve Ability to Have Services When/Where Needed		Would Improve Cost Effectiveness of Services		Would Improve Quality of Services	
	% Very Helpful or Helpful		% Always or Usually		% Always or Usually		% Always or Usually	
	n	%	n	%	n	%	n	%
Total	698	45%	698	49%	698	37%	698	39%
Personal Care Services	653	45%	653	48%	653	37%	653	39%
<i>Consumer-Directed</i>	164	42%	164	49%	164	35%	164	40%
<i>Surrogate-Directed</i>	212	37% ↓	212	43%	212	31%	212	34%
<i>Agency-Directed</i>	354	53% ↑	354	52%	354	41%	354	44%
Addison County Home Health Agency	46	33%	46	45%	46	41%	46	33%
Bayada Professional Nurses Service Inc	84	63%	84	60%	84	43%	84	54%
Caledonia Home Health	17	49%	17	41%	17	39%	17	29%
Central VT Home Health Agency & Hospice	17	75%	17	61%	17	55%	17	31%
Franklin County Home Health & Hospice	30	42%	30	41%	30	31%	30	44%
Lamoille Home Health Agency & Hospice	12	70%	12	53%	12	63%	12	53%
Manchester Health Services, Inc.	6	--	6	--	6	--	6	--
Orleans-Essex VNA Association & Hospice	21	47%	21	54%	21	47%	21	47%
Rutland Area VNA Hospice	25	47%	25	47%	25	26%	25	46%
Visiting Nurse Alliance of VT & New Hampshire	24	69%	24	60%	24	44%	24	45%
VNA, Chitt & Grand Isle	60	54%	60	53%	60	43%	60	41%
VNA & Hospice of Southwestern Vermont	12	47%	12	45%	12	47%	12	47%
Flexible Choices	45	52%	45	52%	45	44%	45	35%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

9.3.2. ADDING NEW PROVIDERS OF PERSONAL CARE SERVICES BY COUNTY

Addison County: Recipients of Personal Care Services residing in Addison County are less likely than those in other counties to believe that adding new providers of Personal Care Services would be helpful and would improve the quality of their services.

Windsor County: Residents of Windsor County are more likely to believe that adding new providers would improve the ability to have services when and where needed than those in other counties.

Table 43. Adding New Providers of Personal Care Services by County

	Helpfulness of Adding New Providers of Personal Care Services		Would Improve Ability to Have Services When/Where Needed		Would Improve Cost Effectiveness of Services		Would Improve Quality of Services	
	% Very Helpful or Helpful		% Always or Usually		% Always or Usually		% Always or Usually	
	n	%	n	%	n	%	n	%
Total	698	45%	698	49%	698	37%	698	39%
Addison*	72	30%↓	72	43%	72	37%	72	27%↓
Bennington*	58	48%	58	46%	58	39%	58	42%
Caledonia*	55	41%	55	38%	55	38%	55	44%
Chittenden*	102	51%	102	52%	102	41%	102	40%
Essex*	9	23%	9	59%	9	38%	9	34%
Franklin*	43	36%	43	38%	43	30%	43	37%
Grand Isle*	12	32%	12	31%	12	22%	12	32%
Lamoille*	33	43%	33	42%	33	37%	33	46%
Orange*	31	55%	31	45%	31	46%	31	38%
Orleans*	73	49%	73	47%	73	37%	73	38%
Rutland	101	44%	101	49%	101	33%	101	38%
Washington*	32	58%	32	49%	32	33%	32	29%
Windham*	34	50%	34	61%	34	43%	34	54%
Windsor*	43	52%	43	73%↑	43	36%	43	50%

↑ Statistically higher than the total at 95% Confidence Level

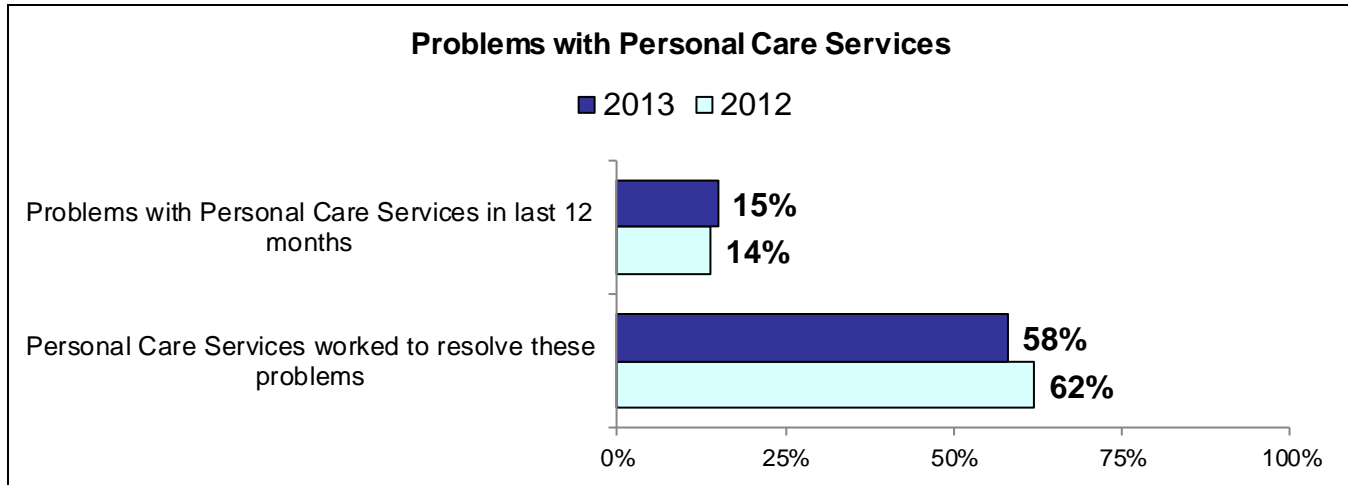
↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

9.4. PROBLEMS WITH PERSONAL CARE SERVICES

Fifteen percent of consumers receiving Personal Care Services report having a problem in 2013, similar to 2012 (14%). Over half of consumers (58%) report that Personal Care Services worked to resolve these problems, slightly less than the 62% obtained in 2012.

Figure 21. Problems with Personal Care Services



9.5. OPEN-ENDED COMMENTS

Of the consumers that report being dissatisfied with Personal Care Services, the most common reasons were needing more hours/care, scheduling problems, inconsistent providers, and needing more services and flexibility in services.

Table 44. Reasons for Dissatisfaction with Personal Care Services

Why are you dissatisfied with the Personal Care Services you receive?	
Number answering question (unweighted)	16
Caregivers unresponsive to needs - need caregivers who are responsive to needs	4%
Better screening of caregivers	9%
New caregivers need more training	13%
Understaffed, Hard to find available caregivers - More staff, Larger selection of caregivers	9%
Inconsistent care, scheduling, call outs, changing caregivers - consistent care, scheduling, show up, same caregivers	20%
Need more hours, more care	22%
Better pay for caregivers, More funding	4%
Provide more services, Flexibility in providing care, meeting needs	18%
Other	0%
Unsure	0%
Total	100%

Of the consumers receiving Personal Care Services who report needing services they cannot get, the most common services include needing more hours and help, needing transportation assistance, needing some type of therapy or exercise, and needing medical equipment.

Table 45. Needed Personal Care Services

What are these Personal Care Services you cannot get?	
Number answering question (unweighted)	137
Transportation assistance	11%
Assistance with bigger tasks and chores at home	6%
Assistance with bathing, grooming	5%
Provide clients with more information on all available services	1%
More choice and control of care	2%
More hours, more help (general)	18%
Assistance with grocery shopping, food, running errands	2%
Scheduling - consistency, subs, dependable, qualified staff	7%
Social hours, Recreational time, Talk	7%
Physical therapy, speech therapy, vocational rehab, exercise	10%
Glasses, Dentures, Medicine, Other Medical Equipment	10%
Wheelchair, Power chair, Lift/Ramp, Hospital Bed	6%
Evening/Nighttime care, Overnight care	7%
Other	9%
Don't Know	2%
Total	100%

Of the consumers receiving Personal Care Services who report having a problem, the most common problems include poor professional skills, workers not doing a good job, workers not showing up and not being reliable.

Table 46. Problems Experienced with Personal Care Services

What problems did you experience?	
Number answering question (unweighted)	137
Laziness; do not want or know how to work - Improve work ethic, do what is asked	3%
Need more help, more time	5%
Scheduling problems, switching employees - Improve scheduling, Send same caregivers	5%
Worker does not do good job, know how to clean - Do work correctly, allow staff to do more tasks; stay whole time	19%
Poor professional skills; rudeness, gossiping, cell phone use - Improve skills; be polite, do not gossip, talk on phone	20%
Improve training; work skills & professionalism	3%
Dependable, reliable; take good care of me; show up late	13%
They do not show up, do not call - Show up, call if you cannot make it	17%
Stolen/missing items	3%
Other	12%
Total	100%

Approximately 1 in 4 consumers receiving Personal Care Services believe that there was something DAIL could do to improve the Personal Care Services offered. Of those that report things that could be improved, the most common issues include needing more time and help, inconsistent care and scheduling, and caregivers needing more training.

Table 47. Improvement of Services Offered by Personal Care Services

Is there anything that could improve the Personal Care Services offered to you and others?	
Number answering question (unweighted)	561
Yes	24%
No	76%

Is there anything that could improve the Personal Care Services offered to you and others? (Specify)	
Number answering question (unweighted)	133
Personality, temperament conflicts with caregivers - Friendlier caregivers, have positive attitude	2%
Caregivers unresponsive to needs - Caregivers who are responsive to needs	4%
Better screening of caregivers	4%
New caregivers need more training	10%
Better oversight of caregivers going into private homes	2%
Need companionship	2%
Understaffed, Hard to find available caregivers - More staff, Larger selection of caregivers	8%
Inconsistent care, scheduling, call outs, changing caregivers - consistent care, scheduling, show up, same caregivers	15%
Poor communication from Management, caseworkers - Better communication from Management, caseworkers	5%
Need more hours, more care	20%
Better pay for caregivers, More funding	8%
Provide more services, Flexibility in providing care, meeting needs	8%
Other	3%
Nothing	7%
Unsure	1%
Total	100%

One in five respondents have additional comments about adding new providers. One in four of these individuals state that it was a good idea.

Table 48. Additional Comments about Adding New Providers

Do you have any other comments about adding new providers?	
Number answering question (unweighted)	536
Yes	20%
No	80%

Do you have any other comments about adding new providers? (Specify)	
Number answering question (unweighted)	109
Transportation assistance	2%
Happy with current provider	5%
Prefer a familiar caregiver, homemaker	1%
Not needed	3%
Need more qualified providers, better training	9%
It is a good idea, Many people need help	24%
Already short staffed, High turnover	1%
Would help with scheduling, Would allow caregiver more time with client, to get more help, reduce burden	12%
Would allow clients more choices, Bigger pool of workers	7%
Caregivers need better pay	5%
Trust issues, Need screening and background checks	3%
Consistency in provider, allow for same provider	2%
Overnight care, evening hours, weekend hours	4%
Other	21%
Unsure	2%
Total	100%

10. HOMEMAKER SERVICES

All long-term care consumers receiving Homemaker Services were asked 8 questions about their overall experiences with Homemaker Services. The results are displayed in Figures 22, 23, and 24.

Satisfaction with Homemaker Services

Nine in ten consumers report being very or somewhat satisfied with Homemaker Services in 2013, similar to the rating of 91% in 2012.

Quality of Services from Homemaker Services

Almost 9 in 10 consumers (88%) rate the quality of services they receive from Homemaker Services as “excellent” or “good” in 2013. This percent is unchanged from 2012.

Recommendation of Homemaker Services to Others

New in 2013. Consumers were also asked for their recommendation of Homemaker Services to others (Excellent, Good, Fair, Poor). Eighty-eight percent of consumers rate their Homemaker Services as “excellent” or “good”.

Rating of Homemaker Services on Staff Competency

New in 2013. Consumers were also asked to rate homemaker services on the competency of staff (Excellent, Good, Fair, Poor). Eight-nine percent of consumers rate staff competency as “excellent” or “good”.

Experiences with Homemaker Services

Four items asked consumers about their experiences with Homemaker Services, on a five-point scale of Always, Usually, Sometimes, Rarely, or Never.

In 2013, 83% of consumers rate Homemaker Services as always or usually meeting their needs, which is similar to the 2012 rating of 85%.

Almost all consumers receiving Homemaker Services (98%) said that their caregivers always or usually treat them with courtesy and respect, a slight increase from 2012 (95%).

2013 shows a similar rating as 2012 in knowing who to contact if they have a complaint about Homemaker Services or need help (88% compared to 86%).

In 2013, 87% of participants rate Homemaker Services as usually or always providing services to them when and where they need them. This is similar to the rating of 88% in 2012.

Agreement with Statements about Homemaker Services

Six items asked consumers their level of agreement with the statement on a five-point scale of Strongly Agree, Agree, Neither Agree nor Disagree, Disagree, or Strongly Disagree.

In 2013, 67% of consumers report being able to choose their Homemaker Services, a slight increase of 4% from 2012 (63%).

48% of consumers agree that they are able to choose the provider of their Homemaker Services,

similar to the rating of 46% given in 2012.

2013 shows a 6% increase in the rating of choosing the scheduling of Homemaker Services that met their needs, from 64% in 2012 to 70% in 2013.

In 2013, 32% report being able to choose the scheduling of Homemaker Services that meet their needs, which is unchanged from 2012.

43% agreed that having more providers who offer Homemaker Services would allow them to better meet their needs, a slight decrease from 2012 (46%).

In 2013, 24% of consumers report that there are Homemaker Services they need but cannot get, slightly higher than 2012 (20%).

Figure 22. Overall Ratings of Homemaker Services

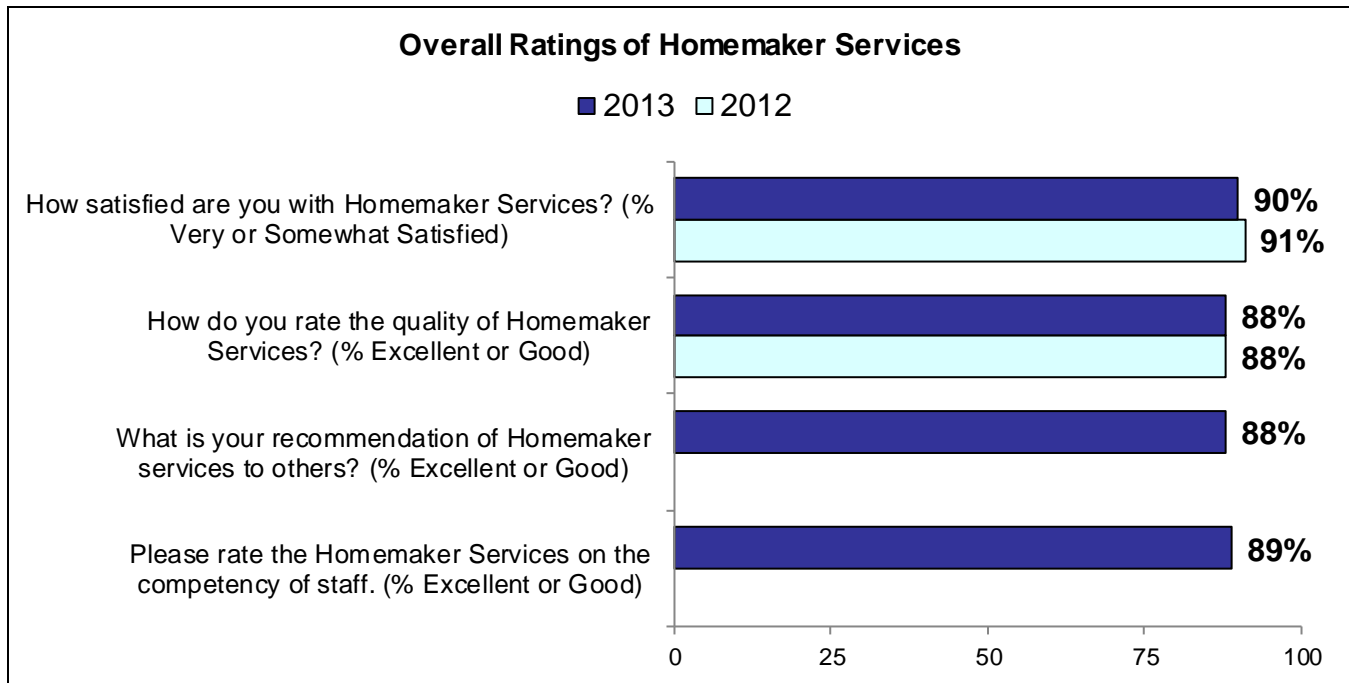


Figure 23. Experiences with Homemaker Services

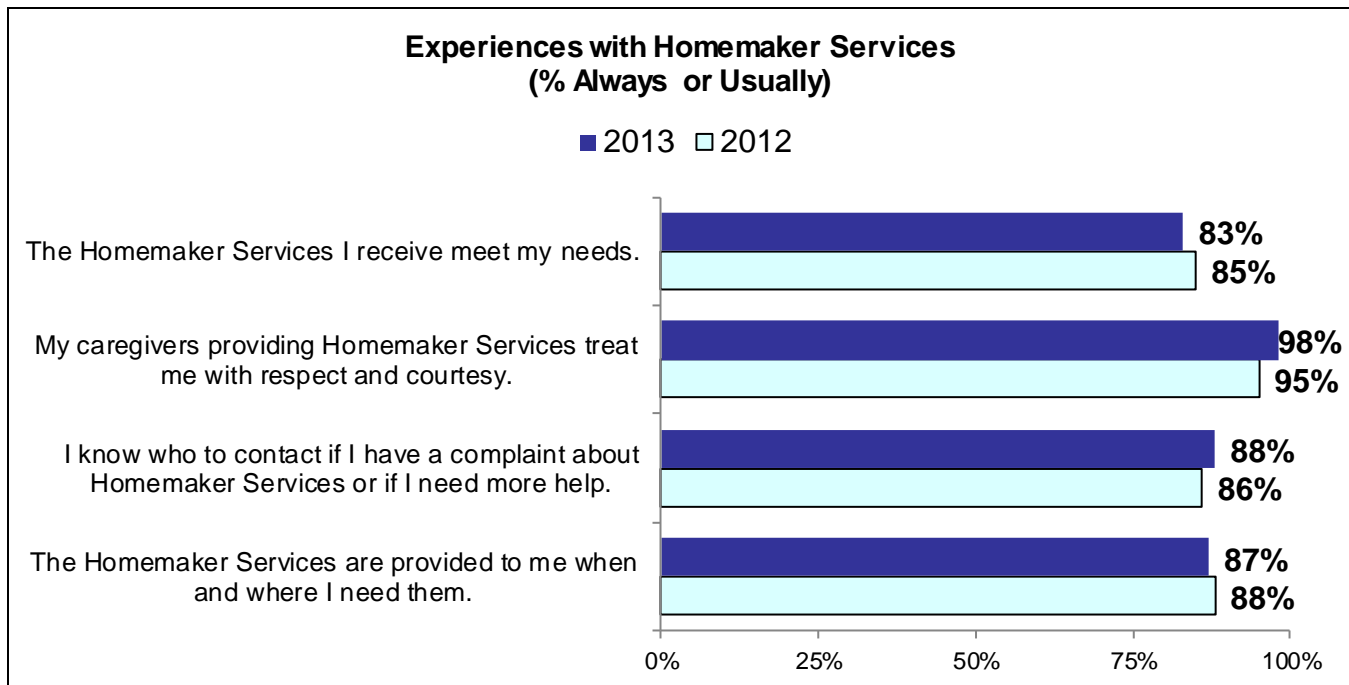
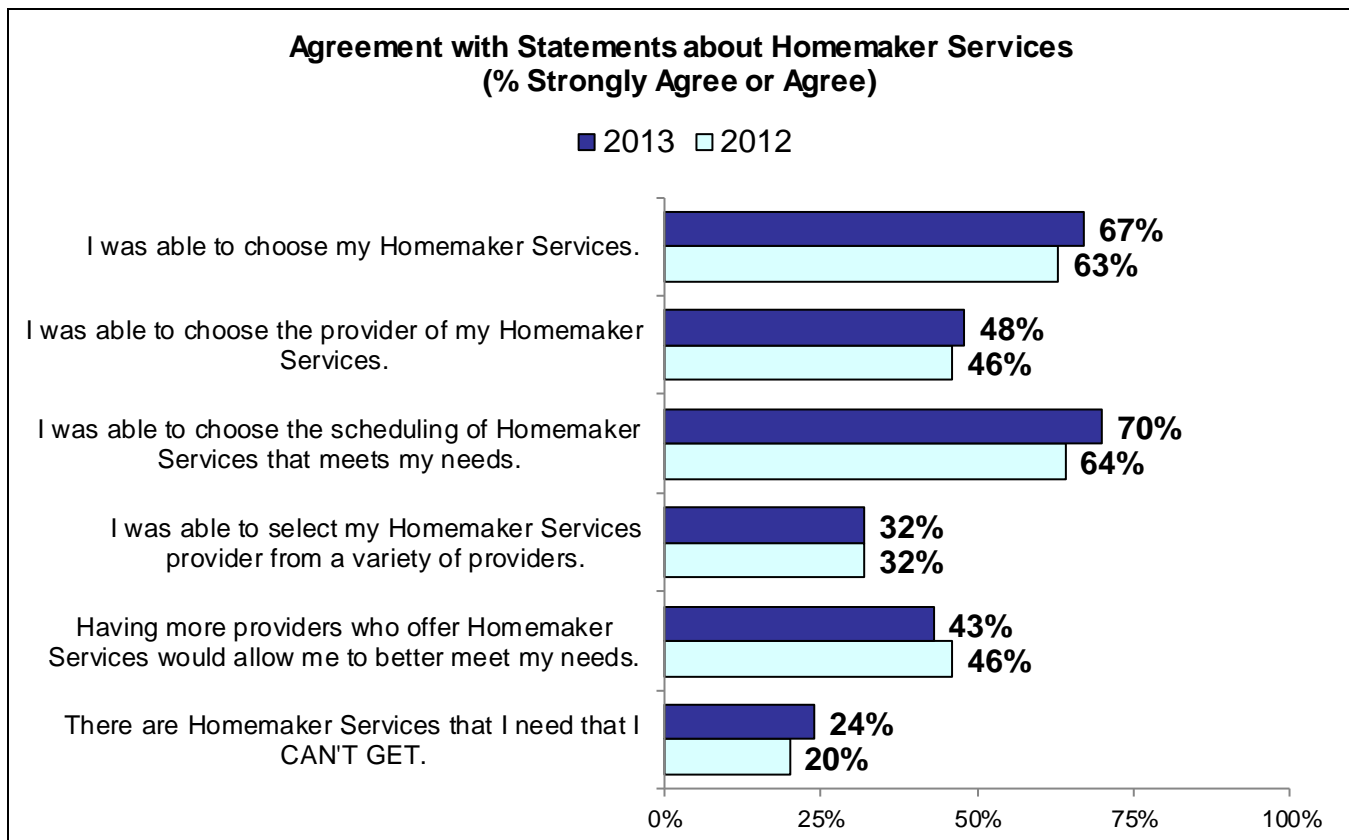


Figure 24. Agreement with Statements about Homemaker Services



10.1. HOME MAKER SERVICES BY COUNTY

Tables 49 – 51 display the results of Homemaker Services questions by county. We highlight findings below.

Caledonia County: Residents of Caledonia County are more likely than those in other counties to agree that their caregivers treat them with courtesy and respect and that Homemaker Services are provided when and where they need them.

Chittenden County: Consumers receiving Homemaker Services in Chittenden County are more likely than those in other counties to report that they are able to get Homemaker Services when and where they need them, are able to choose the provider of their Homemaker Services, and able to choose the scheduling of Homemaker Services that meet their needs.

Windham County: Consumers in Windham County are less likely to give an excellent or good recommendation of Homemaker Services to others compared to those in other counties.

Windsor County: Residents of Windsor County are less likely than those in other counties to agree that Homemaker Services are provided when and where they need them.

Table 49. Overall Ratings of Homemaker Services by County

	Satisfaction with Homemaker Services		Quality of Services Received from Homemaker Services		Recommendation of Homemaker Services to Others		Competency of Homemaker Services Staff	
	% Very or Somewhat Satisfied		% Excellent or Good		% Excellent or Good		% Excellent or Good	
	n	%	n	%	n	%	n	%
Total	428	90%	428	88%	428	88%	428	89%
Addison*	20	90%	20	90%	20	100%	20	95%
Bennington*	23	86%	23	86%	23	91%	23	91%
Caledonia*	49	95%	49	89%	49	88%	49	87%
Chittenden*	47	95%	47	95%	47	95%	47	89%
Essex*	12	90%	12	90%	12	80%	12	100%
Franklin*	14	84%	14	93%	14	93%	14	100%
Grand Isle*	1	100%	1	100%	1	100%	1	100%
Lamoille*	24	100%	24	89%	24	89%	24	89%
Orange*	23	85%	23	81%	23	76%	23	77%
Orleans*	30	93%	30	86%	30	89%	30	84%
Rutland	80	89%	80	88%	80	89%	80	89%
Washington*	30	88%	30	85%	30	89%	30	88%
Windham*	31	81%	31	85%	31	70% ↓	31	87%
Windsor*	44	92%	44	85%	44	86%	44	86%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 50. Experiences with Homemaker Services by County

	Homemaker Services Meet My Needs		Caregivers Treat Me With Courtesy & Respect		I Know Who To Contact if I have a Complaint or Need More Help		Homemaker Services Provided When & Where I Need Them	
	% Always or Usually		% Always or Usually		% Always or Usually		% Always or Usually	
	n	%	n	%	n	%	n	%
Total	428	83%	428	98%	428	88%	428	87%
Addison*	20	95%	20	100%	20	90%	20	100%
Bennington*	23	87%	23	100%	23	96%	23	90%
Caledonia*	49	84%	49	100%↑	49	91%	49	98%↑
Chittenden*	47	86%	47	97%	47	93%	47	95%↑
Essex*	12	90%	12	90%	12	92%	12	90%
Franklin*	14	86%	14	100%	14	93%	14	86%
Grand Isle*	1	100%	1	100%	1	100%	1	100%
Lamoille*	24	89%	24	100%	24	86%	24	91%
Orange*	23	80%	23	100%	23	96%	23	75%
Orleans*	30	86%	30	100%	30	100%	30	96%
Rutland	80	80%	80	97%	80	80%	80	86%
Washington*	30	74%	30	97%	30	82%	30	80%
Windham*	31	71%	31	93%	31	73%	31	71%
Windsor*	44	83%	44	97%	44	88%	44	72%↓

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 51a. Agreement with Statements about Homemaker Services by County

	I was able to choose my Homemaker Services		I was able to choose the provider of my Homemaker Services		I was able to choose the scheduling of Homemaker Services that meets my needs	
	% Strongly Agree or Agree		% Strongly Agree or Agree		% Strongly Agree or Agree	
	n	%	n	%	n	%
Total	428	67%	428	48%	428	70%
Addison*	20	95%	20	73%	20	94%
Bennington*	23	60%	23	46%	23	59%
Caledonia*	49	59%	49	46%	49	71%
Chittenden*	47	70%	47	67%↑	47	92%↑
Essex*	12	73%	12	28%	12	72%
Franklin*	14	71%	14	50%	14	93%
Grand Isle*	1	100%	1	100%	1	100%
Lamoille*	24	72%	24	48%	24	67%
Orange*	23	52%	23	46%	23	64%
Orleans*	30	66%	30	37%	30	69%
Rutland	80	62%	80	47%	80	66%
Washington*	30	68%	30	37%	30	67%
Windham*	31	65%	31	33%	31	54%
Windsor*	44	69%	44	54%	44	58%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 51b. Agreement with Statements about Homemaker Services by County

	I was able to select my Homemaker Services provider from a variety of providers		Having more providers who offer Homemaker Services would better meet my needs		There are Homemaker Services that I need that I CAN'T GET	
	% Strongly Agree or Agree		% Strongly Agree or Agree		% Strongly Agree or Agree	
	n	%	n	%	n	%
Total	428	32%	428	43%	428	24%
Addison*	20	46%	20	35%	20	17%
Bennington*	23	34%	23	64%	23	26%
Caledonia*	49	27%	49	41%	49	32%
Chittenden*	47	46%	47	37%	47	27%
Essex*	12	38%	12	58%	12	20%
Franklin*	14	34%	14	36%	14	14%
Grand Isle*	1	100%	1	--	1	--
Lamoille*	24	29%	24	33%	24	9%
Orange*	23	22%	23	39%	23	36%
Orleans*	30	25%	30	37%	30	19%
Rutland	80	31%	80	47%	80	16%
Washington*	30	16%	30	25%	30	24%
Windham*	31	28%	31	57%	31	40%
Windsor*	44	31%	44	49%	44	28%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

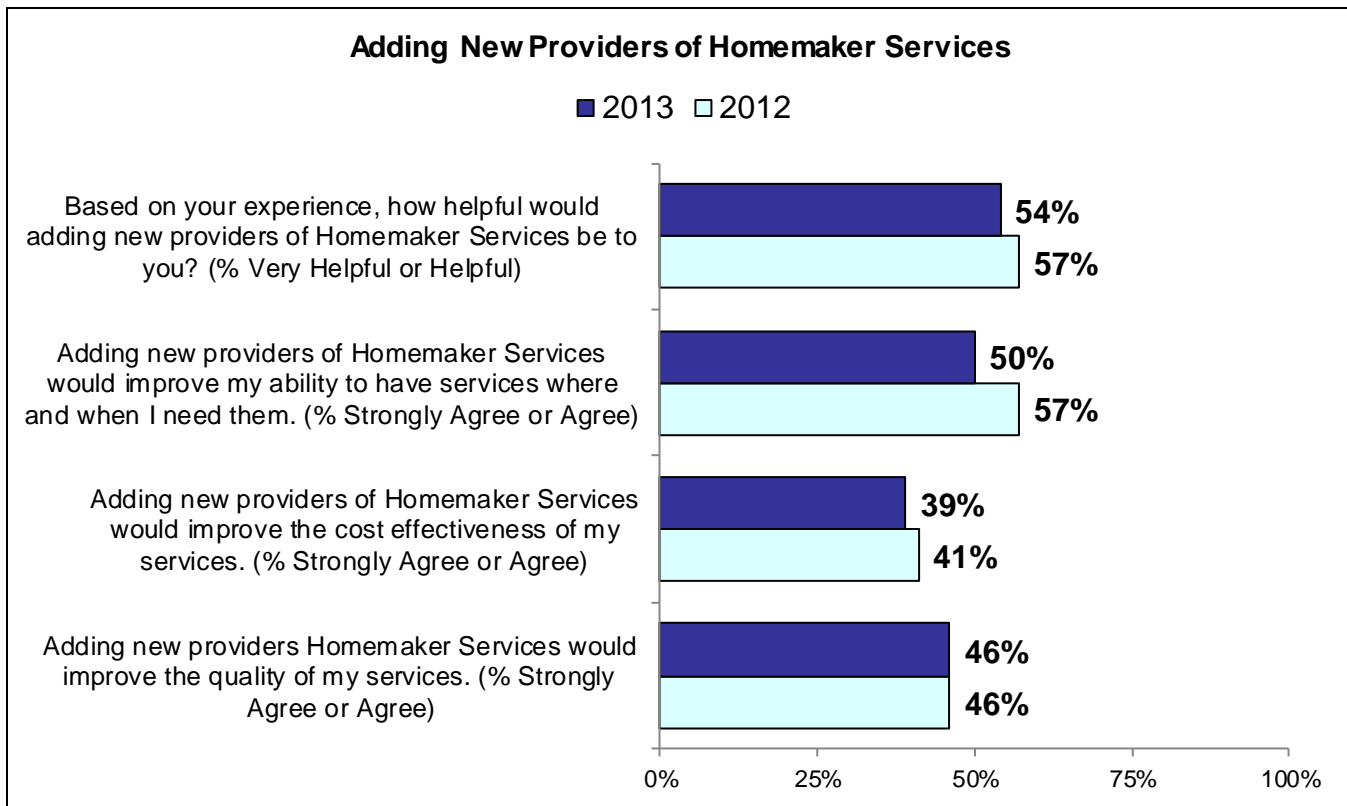
* Program did not meet 95/5 statistical criteria and should be interpreted with caution

10.2. ADDING NEW PROVIDERS OF HOME MAKER SERVICES

Four items ask questions about the possibility of adding new providers of Homemaker Services. Just over half of the recipients of Homemaker Services (54%) believe that adding new providers would be useful to them. This is slightly lower than the rating given in 2012 (57%).

Half of the consumers who receive Homemaker Services, agree that adding new providers would improve their ability to have services when and where they need them. This is 7% lower than the 2012 rating of 57%. Thirty-nine percent of respondents believe that adding providers would improve the cost effectiveness of their services and 46% believe that adding providers would improve the quality of their services in 2013.

Figure 25. Adding New Providers of Homemaker Services



10.2.1. ADDING NEW PROVIDERS OF HOME MAKER SERVICES BY COUNTY

Chittenden County: Recipients of Homemaker Services residing in Chittenden County are significantly less likely than those in other counties to believe that adding new providers of Homemaker Services would be helpful.

Windham County: Recipients of Homemaker Services residing in Windham County are significantly more likely than those in other counties to believe that adding new providers would be helpful and would improve the ability to have services when and where needed.

Windsor County: Recipients of Homemaker Services residing in Windsor County are significantly more likely than those in other counties to believe that adding new providers would improve the ability to have services when and where needed.

Table 52. Adding New Providers of Homemaker Services by County

	Helpfulness of Adding New Providers of Homemaker Services		Would Improve Ability to Have Services When/Where Needed		Would Improve Cost Effectiveness of Services		Would Improve Quality of Services	
	% Very Helpful or Helpful		% Always or Usually		% Always or Usually		% Always or Usually	
	n	%	n	%	n	%	n	%
Total	428	54%	428	50%	428	39%	428	46%
Addison*	20	35%	20	37%	20	38%	20	34%
Bennington*	23	81%	23	77%	23	57%	23	66%
Caledonia*	49	48%	49	40%	49	36%	49	45%
Chittenden*	47	38% ↓	47	37%	47	35%	47	42%
Essex*	12	65%	12	52%	12	43%	12	52%
Franklin*	14	59%	14	38%	14	29%	14	30%
Grand Isle*	1	--	1	--	1	--	1	--
Lamoille*	24	34%	24	30%	24	31%	24	40%
Orange*	23	68%	23	61%	23	51%	23	51%
Orleans*	30	46%	30	47%	30	31%	30	49%
Rutland	80	51%	80	49%	80	34%	80	42%
Washington*	30	64%	30	46%	30	26%	30	43%
Windham*	31	79% ↑	31	71% ↑	31	53%	31	50%
Windsor*	44	54%	44	66% ↑	44	49%	44	56%

↑ Statistically higher than the total at 95% Confidence Level

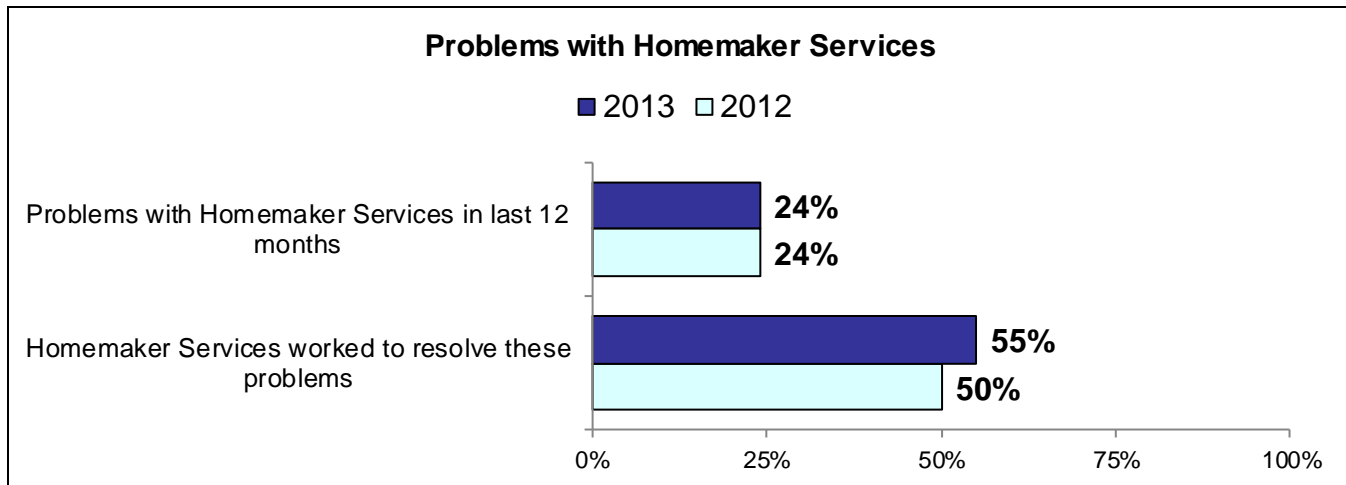
↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

10.3. PROBLEMS WITH HOME MAKER SERVICES

Almost 1 in 4 consumers receiving Homemaker Services report having a problem in 2013, the same as 2012. Over half of consumers report that Homemaker Services worked to resolve these problems, up 5% from 2012.

Figure 26. Problems with Homemaker Services



10.4. OPEN-ENDED COMMENTS

Of the consumers that report being dissatisfied with Homemaker Services, the most common reasons were workers not being able to do a good job, more hours/care, scheduling problems, and inconsistent providers.

Table 53. Reasons for Dissatisfaction with Homemaker Services

Why are you dissatisfied with Homemaker Services?	
(% among customers indicating they are very or somewhat dissatisfied)	
Number answering question (unweighted)	59
Need more help, more time	10%
Scheduling problems, switching employees - Improve scheduling, Send same caregivers	19%
Worker does not do good job, know how to clean - Do work correctly, allow staff to do more tasks; stay whole time	33%
Poor professional skills; rudeness, gossiping, cell phone use - Improve skills; be polite, do	6%
Improve communication; who is coming, and when	6%
They do not show up, do not call - Show up, call if you cannot make it	15%
Other	12%
Total	100%

Of the consumers receiving Homemaker Services who report needing services they cannot get, the most common services include needing assistance with bigger tasks and chores at home (including yardwork) and transportation.

Table 54. Needed Homemaker Services

What are these Homemaker Services you cannot get?	
Number answering question (unweighted)	91
Transportation assistance	18%
Assistance with bigger tasks and chores at home	30%
Assistance with bathing, grooming	6%
More choice and control of care	1%
More hours	8%
Assistance with grocery shopping, other shopping	5%
Assistance with meal preparation	6%
Assistance with overnight care	2%
Other	23%
Don't Know	4%
Total	100%

Of the consumers receiving Homemaker Services who report having a problem, the most common issues include scheduling problems, workers not doing a good job, and providers not showing up.

Table 55. Problems Experienced with Homemaker Services

What problems did you experience?	
Number answering question (unweighted)	91
Laziness; do not want or know how to work - Improve work ethic, do what is asked	4%
Need more help, more time	2%
Scheduling problems, switching employees - Improve scheduling, Send same caregivers	23%
Services have been cut back - Do not cut services	2%
Understaffed- Hire more staff	3%
Worker does not do good job, know how to clean - Do work correctly, allow staff to do more tasks; stay whole time	26%
Poor professional skills; rudeness, gossiping, cell phone use - Improve skills; be polite, do not gossip, talk on phone	6%
Improve training; work skills & professionalism	5%
Improve communication; who is coming, and when	6%
Dependable, reliable; take good care of me; show up late	5%
They do not show up, do not call - Show up, call if you cannot make it	12%
Stolen/missing items	1%
Other	6%
Total	100%

Forty percent of consumers receiving Homemaker Services believe that there was something DAIL could do to improve the Homemaker Services offered. Of those that report things that could be improved, the most common issues include needing more time and help, inconsistent care and scheduling, and caregivers not doing a good job.

Table 56. Improvement of Services Offered by Homemaker Services

Is there anything that could improve the Homemaker services offered to you and others?	
Number answering question (unweighted)	366
Yes	40%
No	60%

Is there anything that could improve the Homemaker services offered to you and others? (Specify)	
Number answering question (unweighted)	144
Laziness; do not want or know how to work - Improve work ethic, do what is asked	1%
Need more help, more time	17%
Scheduling problems, switching employees - Improve scheduling, Send same caregivers	18%
Understaffed- Hire more staff, better staff	9%
Worker does not do good job, know how to clean - Do work correctly, allow staff to do more tasks, need more cleaning	18%
Would like more time for running errands	2%
Poor professional skills; rudeness, gossiping, cell phone use - Improve skills; be polite, do not gossip, talk on phone	1%
Afraid to complain; fear repercussions - Listen to complaints, Address problems, more supervision	5%
Improve training; work skills & professionalism	9%
Improve communication; who is coming, and when	3%
Would like to go to store myself; choose stores	2%
Dependable, reliable; take good care of me; show up late	4%
They do not show up, do not call - Show up, call if you cannot make it	1%
Other	10%
Unsure	1%
Total	100%

Over one in four respondents have additional comments about adding new providers of Homemaker Services. One in four of these individuals state that it was a good idea, and almost one in five report that more qualified providers and better training are needed.

Table 57. Additional Comments about Adding New Providers

Do you have any other comments about adding new providers?	
Number answering question (unweighted)	346
Yes	26%
No	74%

Do you have any other comments about adding new providers? (Specify)	
Number answering question (unweighted)	89
Transportation assistance	1%
Happy with current provider	9%
Not needed	4%
Need more qualified providers, better training	19%
It is a good idea, Many people need help	25%
Would help with scheduling, Would allow caregiver more time with client, to get more help, reduce burden	15%
Would allow clients more choices, Bigger pool of workers	5%
Caregivers need better pay	3%
Trust issues, Need screening and background checks	2%
Consistency in provider, allow for same provider	3%
Other	9%
Unsure	5%
Total	100%

11. ADULT DAY SERVICES

All long-term care consumers in the Adult Day Center were asked 8 questions about their overall experiences with the Adult Day Center. The results are displayed in Figures 27 and 28.

Satisfaction with Adult Day Center

Ninety-four percent of consumers report being very or somewhat satisfied with the Adult Day Center they attend in 2013, similar to the rating of 95% in 2012.

Quality of Services from Adult Day Center

Ninety-four percent of consumers rate the quality of services they receive from the Adult Day Center they attend as excellent or good in 2013, a slight decrease from 2012 (97%).

Recommendation of Adult Day Center to Others

New in 2013. Consumers were also asked for their recommendation of the Adult Day Center they attend to others (Excellent, Good, Fair, Poor). Ninety-four percent of consumers rate the Adult Day Center they attend as “excellent” or “good”.

Rating of Adult Day Centers on Staff Competency

New in 2013. Consumers were also asked to rate the Adult Day Center they attend on the competency of staff (Excellent, Good, Fair, Poor). Ninety-four percent of consumers rate staff competency as “excellent” or “good”.

Experiences with Adult Day Center

Four items asked consumers about their experiences with the Adult Day Center they attend, on a five-point scale of Always, Usually, Sometimes, Rarely, or Never.

In 2013, 92% of consumers rate the Adult Day Center as always or usually meeting their needs, which is similar to the 2012 rating of 93%.

In both 2013 and 2012, 96% of Adult Day Center participants said that their caregivers always or usually treat them with courtesy and respect.

Ninety percent of consumers report knowing who to contact if they have a complaint about the Adult Day Center they attend or need help in 2013, similar to that of 2012 (88%).

In 2013, 93% of participants rate the Adult Day Center they attend as usually or always providing services to them when and where they need them. This is similar to the rating of 94% in 2012.

Figure 27. Overall Ratings of Adult Day Center

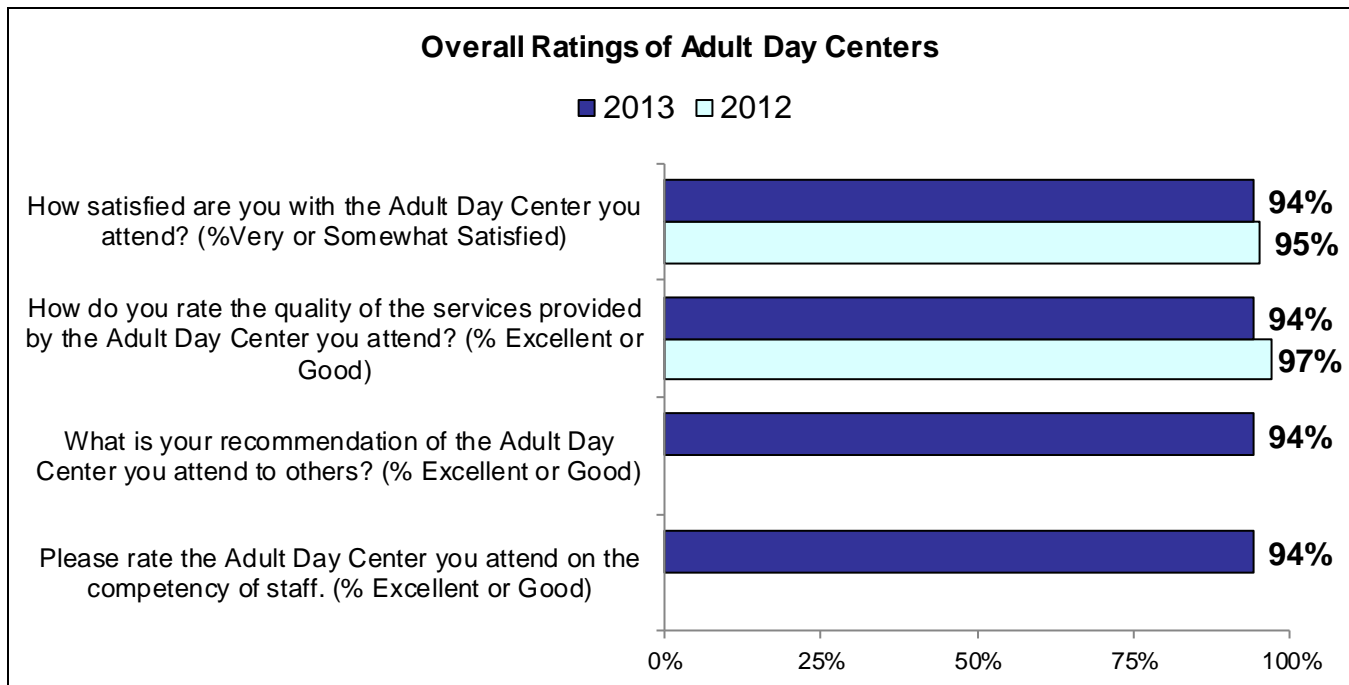
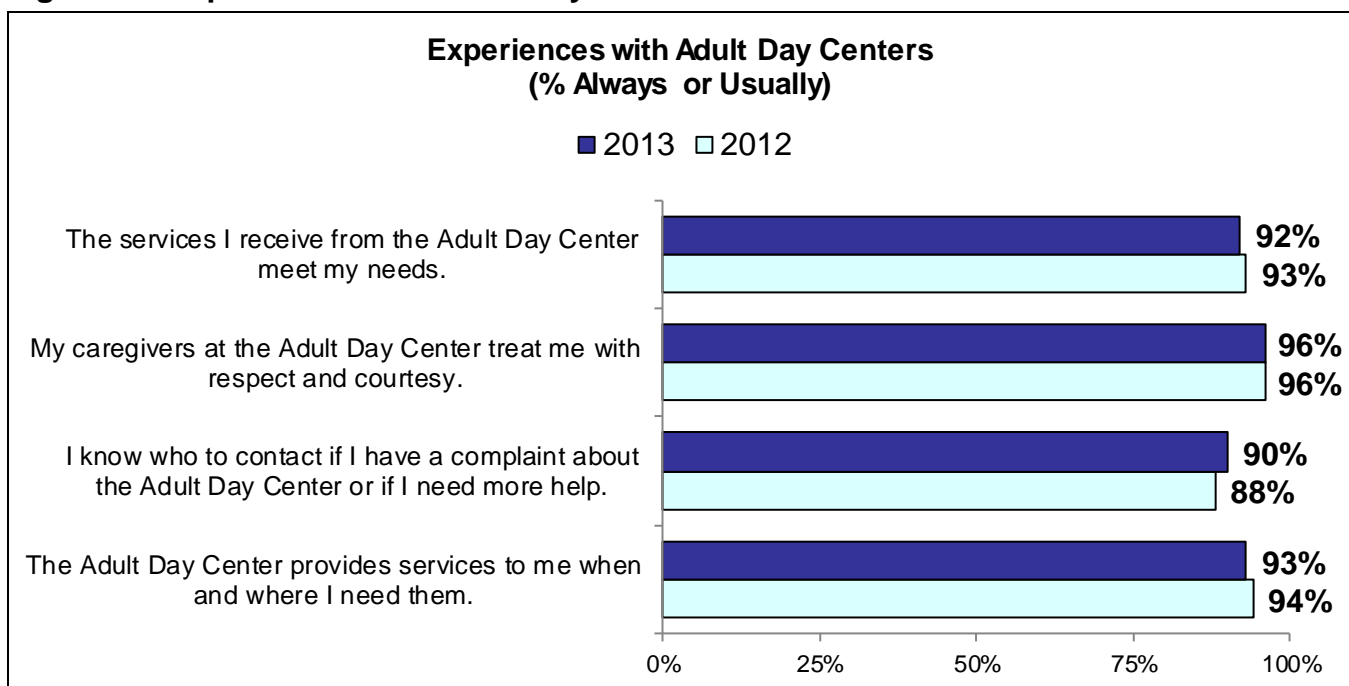


Figure 28. Experiences with Adult Day Center



11.1. ADULT DAY CENTERS BY COUNTY

There are no statistically significant differences of the ratings of Adult Day Centers by county.

Table 58. Overall Ratings of Adult Day Centers by County

	Satisfaction with Adult Day Center		Quality of Services Provided by Adult Day Center		Recommendation of Adult Day Center to Others		Competency of Adult Day Center Staff	
	% Very or Somewhat Satisfied		% Excellent or Good		% Excellent or Good		% Excellent or Good	
	n	%	n	%	n	%	n	%
Total	209	94%	209	94%	209	94%	209	94%
Addison*	20	100%	20	94%	20	100%	20	100%
Bennington*	24	87%	24	87%	24	91%	24	91%
Caledonia*	28	100%	28	100%	28	100%	28	96%
Chittenden*	21	95%	21	100%	21	95%	21	100%
Essex*	--	--	--	--	--	--	--	--
Franklin*	13	92%	13	100%	13	100%	13	100%
Grand Isle*	1	100%	1	100%	1	100%	1	100%
Lamoille*	8	100%	8	100%	8	100%	8	100%
Orange*	12	100%	12	89%	12	78%	12	88%
Orleans*	10	100%	10	100%	10	100%	10	100%
Rutland	29	85%	29	88%	29	84%	29	84%
Washington*	14	91%	14	91%	14	91%	14	100%
Windham*	12	100%	12	91%	12	100%	12	73%
Windsor*	17	95%	17	100%	17	100%	17	100%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 59. Experiences with Adult Day Centers by County

	Services Received from Adult Day Center Meet My Needs		Caregivers at Adult Day Center Treat Me With Courtesy & Respect		I Know Who To Contact if I have a Complaint or Need More Help		Adult Day Center Provides Services When & Where I Need Them	
	% Always or Usually		% Always or Usually		% Always or Usually		% Always or Usually	
	n	%	n	%	n	%	n	%
Total	209	92%	209	96%	209	90%	209	93%
Addison*	20	100%	20	100%	20	93%	20	100%
Bennington*	24	86%	24	95%	24	96%	24	87%
Caledonia*	28	92%	28	92%	28	81%	28	96%
Chittenden*	21	95%	21	100%	21	95%	21	100%
Essex*	--	--	--	--	--	--	--	--
Franklin*	13	92%	13	92%	13	92%	13	92%
Grand Isle*	1	100%	1	100%	1	100%	1	100%
Lamoille*	8	100%	8	100%	8	65%	8	100%
Orange*	12	89%	12	100%	12	89%	12	100%
Orleans*	10	100%	10	100%	10	78%	10	100%
Rutland	29	84%	29	93%	29	96%	29	84%
Washington*	14	100%	14	100%	14	90%	14	100%
Windham*	12	91%	12	100%	12	64%	12	73%
Windsor*	17	94%	17	93%	17	100%	17	95%

↑ Statistically higher than the total at 95% Confidence Level

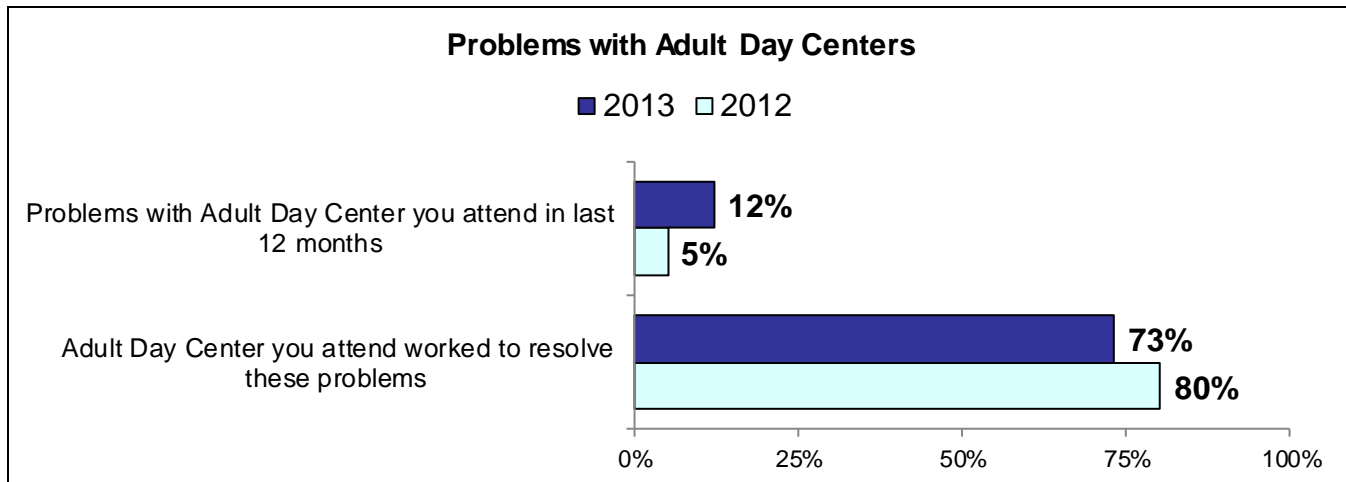
↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

11.2. PROBLEMS WITH ADULT DAY CENTERS

Twelve percent of consumers in Adult Day Centers report having a problem in 2013, an increase from just 5% in 2012. Almost 3 in 4 consumers report that the Adult Day Center they attend worked to resolve these problems, a decrease of 7% from 2012 (80%).

Figure 29. Problems with Adult Day Centers



11.3. OPEN-ENDED COMMENTS

Reasons for dissatisfaction with Adult Day Centers include unprofessional staff, lack of activities, and not have services geared towards the blind.

Table 60. Reasons for Dissatisfaction with Adult Day Centers

Why are you dissatisfied with the Adult Day Center you attend?	
Number answering question (unweighted)	5
Interage is not orentated for blind people the why Pace was so I Quit. (sic)	
my husbend is incontenent and they leave him in his own urine most of the day, and they do not tranfer him and he sits all day. there is no excercise program available. they just get to sit. no and the food is lousy (sic)	
No interest (sic)	
Nothing for me to do it's boring. (sic)	
They are rude. (sic)	

Problems experienced with Adult Day Centers include transportation issues and other miscellaneous problems.

Table 61. Problems Experienced with Adult Day Centers

What problems did you experience?	
Number answering question (unweighted)	18
Transportation issues	56%
Other	44%
Total	100%

Twenty-nine percent of those attending Adult Day Centers report that there was something that could be done to improve services offered by the Adult Day Center they attend. Of those offering suggestions for improvement, the most common suggestions were offering a larger variety or activities, having expanded hours (including weekend hours), and having better food.

Table 62. Improvement of Services Offered by Adult Day Centers

Is there anything that could improve services offered to you and others by the Adult Day Center?	
Number answering question (unweighted)	169
Yes	29%
No	71%

Is there anything that could improve services offered to you and others by the Adult Day Center? (Specify)	
Number answering question (unweighted)	47
Lack of activities, need large variety of activities	16%
Need expanded hours, weekend hours	13%
Transportation assistance	7%
Would like more outings, outdoor activities	2%
Need more providers, volunteers	7%
Facility too small	6%
Providers/staff need to show respect, listen	6%
Need exercise activities/equipment/programs	8%
Needs better food	13%
Other	23%
Nothing	2%
Total	100%

12. TRAUMATIC BRAIN INJURY (TBI) PROGRAM

All long-term care consumers in the Traumatic Brain Injury Program were asked 8 questions about their overall experiences with the Traumatic Brain Injury Program. The results are displayed in Figures 30 and 31. Due to the low response rate obtained for Traumatic Brain Injury Program participants, findings should be interpreted with caution.

Satisfaction with Traumatic Brain Injury Program

85% of consumers report being very or somewhat satisfied with the Traumatic Brain Injury Program in 2013, a decrease from 2012 (92%).

Quality of Services from Traumatic Brain Injury Program

The majority of consumers rate the quality of services they receive from the Traumatic Brain Injury Program in 2013, the same as in 2012 (92%).

Recommendation of Traumatic Brain Injury Program to Others

New in 2013. Consumers were also asked for their recommendation of the Traumatic Brain Injury Program to others (Excellent, Good, Fair, Poor). Eighty-three percent of consumers rate their Traumatic Brain Injury Program as “excellent” or “good”.

Rating of TBI Program on Staff Competency

New in 2013. Consumers were also asked to rate TBI Program on the competency of staff (Excellent, Good, Fair, Poor). Ninety-two percent of consumers rate staff competency as “excellent” or “good”.

Experiences with Traumatic Brain Injury Program

Four items asked consumers about their experiences with the Traumatic Brain Injury Program, on a five-point scale of Always, Usually, Sometimes, Rarely, or Never.

In 2013, 92% of consumers rate the Traumatic Brain Injury Program as always or usually meeting their needs, which is an increase of 9% from the rating of 83% in 2012.

2013 shows an increase of 9% from 2012 in rating their caregiver as always or usually treating them with courtesy and respect (100% compared to 91%).

In both 2013 and 2012, 83% of Traumatic Brain Injury Program participants said that they knew who to contact if they have a complaint about the Traumatic Brain Injury Program or need help.

In 2013, 92% of participants rate the Traumatic Brain Injury Program as usually or always providing services to them when and where they need them. This is a decrease from the rating of 100% in 2012.

Figure 30. Overall Ratings of Traumatic Brain Injury Program

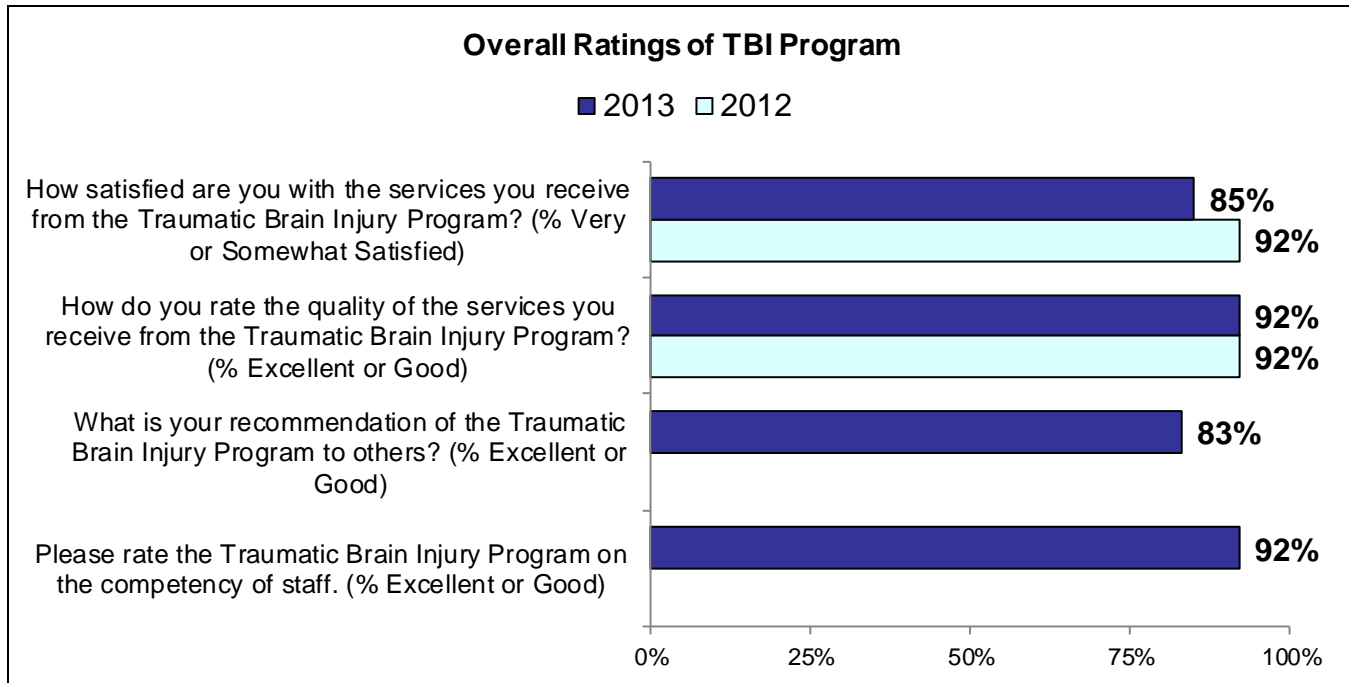
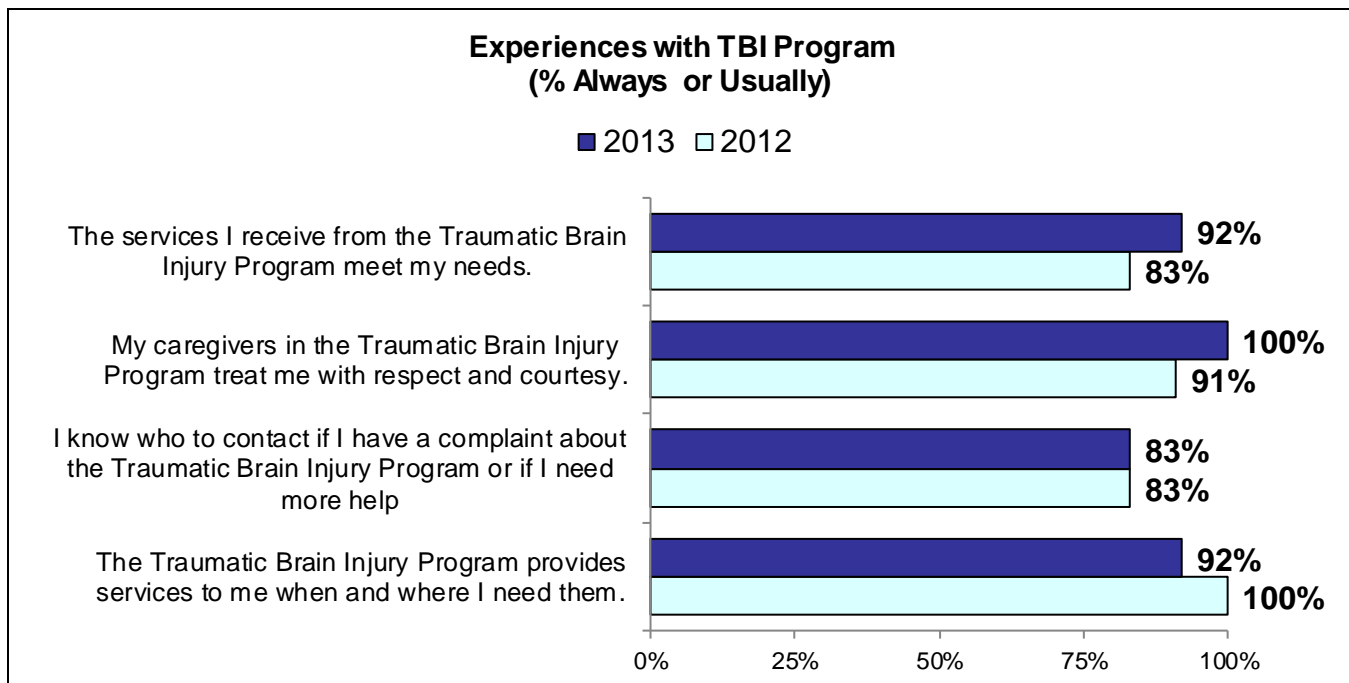


Figure 31. Experiences with Traumatic Brain Injury Program



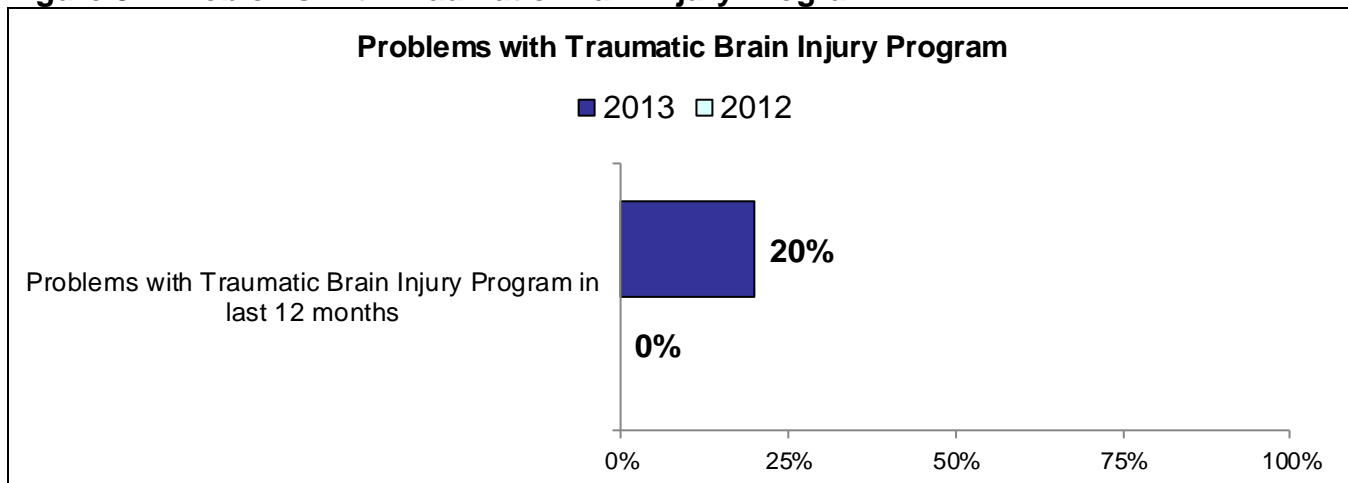
12.1. TRAUMATIC BRAIN INJURY PROGRAM PROGRAM BY COUNTY

Sample size is too low for the Traumatic Brain Injury Program to examine differences by county.

12.2. PROBLEMS WITH TRAUMATIC BRAIN INJURY PROGRAM

Two consumers in the Traumatic Brain Injury Program report having a problem in 2013, an increase from no problems reported in 2012. One of the two consumers that had a problem reported that the Traumatic Brain Injury Program worked to resolve these problems

Figure 32. Problems with Traumatic Brain Injury Program



Traumatic Brain Injury Program worked to resolve these problems	
Number answering question (unweighted)	2
Yes (number)	1
No (number)	1

12.3. OPEN-ENDED COMMENTS

The reason for dissatisfaction by the one dissatisfied Traumatic Brain Injury Program participant is shown below.

Table 63. Reasons for Dissatisfaction with Traumatic Brain Injury Program

Why are you dissatisfied with the services you receive from the Traumatic Brain Injury Program?	
Number answering question (unweighted)	1
Provider ncss really didn't provide adequate services. from cox management and services like life skills in community. (sic)	

The problems experienced by the two Traumatic Brain Injury Program participants reporting a problem are shown below.

Table 64. Problems Experienced with Traumatic Brain Injury Program

What problems did you experience?	
Number answering question (unweighted)	2
Lack of services- follow through ie adaptive driving program. told no funding. (sic)	
TBI waiver my services are excellent. The VNA should not be managing the TBI waiver! (sic)	

39% of consumers in the Traumatic Brain Injury Program believed there was something that could be done to improve services offered by the Traumatic Brain Injury Program. The suggestions are shown in Table 69 below.

Table 65. Improvement of Services Offered by Traumatic Brain Injury Program

Is there anything that could improve services offered to you and others by the Traumatic Brain Injury Program?	
Number answering question (unweighted)	10
Yes	39%
No	61%

Is there anything that could improve services offered to you and others by the Traumatic Brain Injury Program? (Specify)	
Number answering question (unweighted)	4
maybe provide aa and other programs for social interaction and addiction (sic)	
more one on one with all clients (sic)	
we here changed providers (to pride inc in same ut) (sic)	
my services have been excellent for the past 10 months because i changed my case manager from vna chittender county to choice suppor tin montpelier. the vna did not meet my needs and i was very dissatisfied with the program. (sic)	

13. HOME-DELIVERED MEALS PROGRAM

All long-term care consumers in the Home Delivered Meals Program were asked 19 questions about their overall experiences with the Home Delivered Meals Program. The results are displayed in Figures 33-37.

Satisfaction with Home Delivered Meals Program

84% of consumers report being very or somewhat satisfied with the Home Delivered Meals Program in 2013, a decrease from 2012 (89%).

Quality of Services from Home Delivered Meals Program

Almost nine in ten (89%) rate the quality of services they receive from the Home Delivered Meals Program as “excellent” or “good” in 2013, the same as in 2012.

Recommendation of Home Delivered Meals Program to Others

New in 2013. Consumers were also asked for their recommendation of the Home Delivered Meals Program to others (Excellent, Good, Fair, Poor). Eight-three percent of consumers rate their Home Delivered Meals Program as “excellent” or “good”.

Experiences with Home Delivered Meals Program

Nine items asked consumers about their experiences with the Home Delivered Meals Program, on a five-point scale of Always, Usually, Sometimes, Rarely, or Never.

For the most part, ratings of the Home Delivered Meals Program in 2013 are similar to those obtained in 2012. However, there was a decrease in the frequency with which meals met specific dietary requirements and the timeliness of deliveries from 2012 to 2013.

Proportion of Food Home Delivered Meals Represent

New in 2013. Over one in four participants state that the meals they received from the Home Delivered Meals Program represents half the food they eat in a day, and almost one in four report that the meals represent more than half the food they eat in a day.

Home Delivered Meals Program Helps To Meet Goals

New in 2013. Five questions ask consumers whether the services from Home Delivered Meals Program help them to: 1) eat healthier foods, 2) achieve or maintain a healthy weight; 3) improve their health; 4) feel better; and 5) continue to live at home. The majority of consumers in the Home Delivered Meals Program reported “yes” to these items. The most endorsed item was that the program allows them to live at home (91%).

Home Delivered Meals Program Helped Financially

In 2013, 87% of consumers rate the degree to which home delivered meals have helped them financially as “a lot” or “somewhat”, the same percentage as 2012.

Figure 33. Overall Ratings of Home Delivered Meals Program

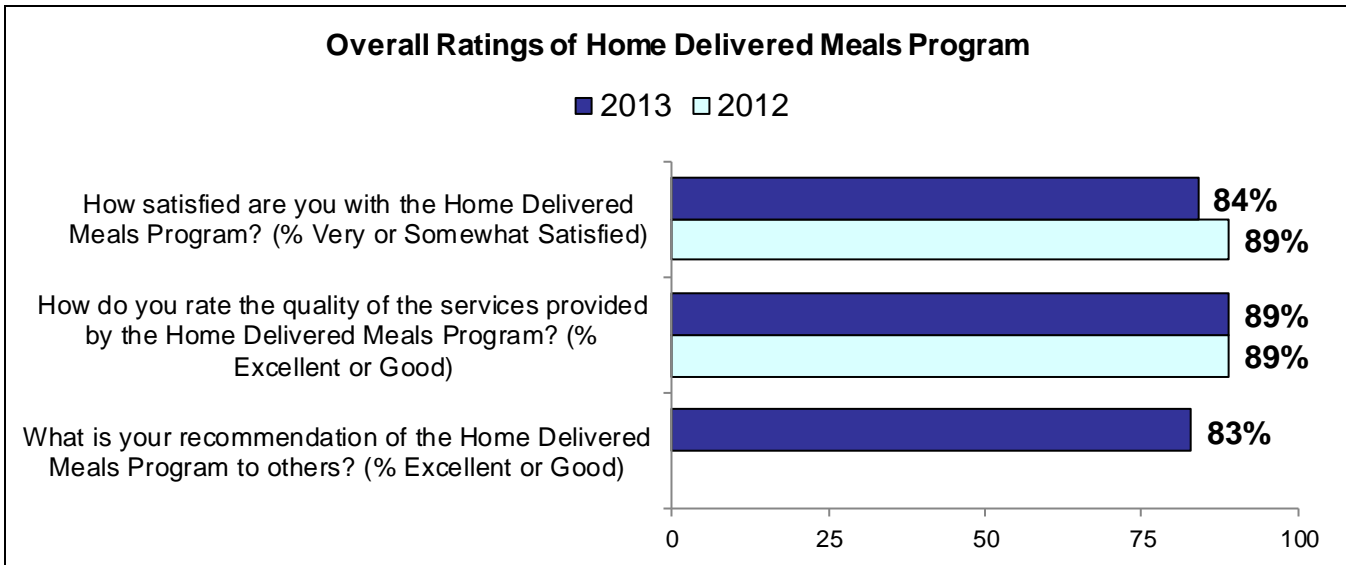


Figure 34. Experiences with Home Delivered Meals Program

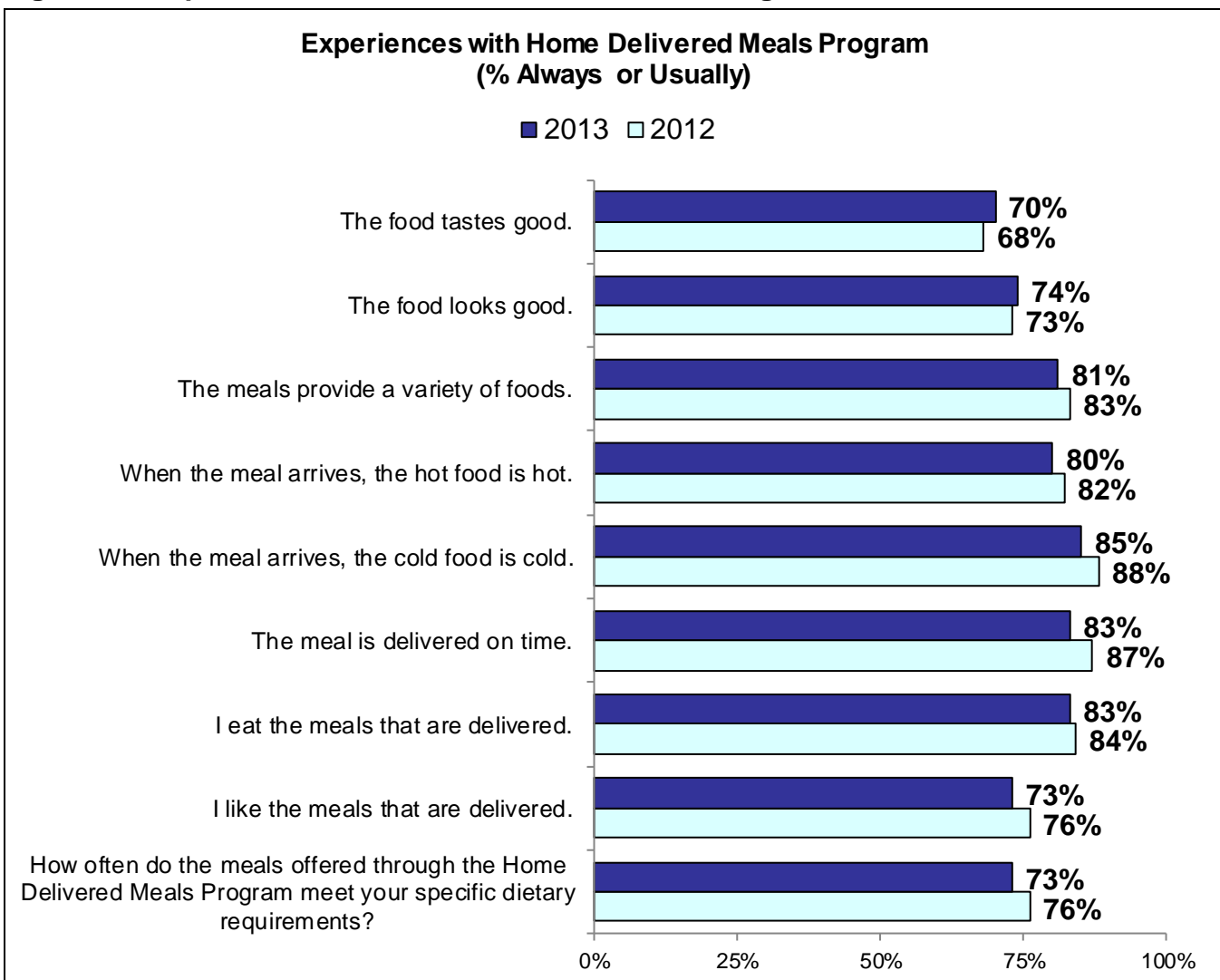


Figure 35. Proportion of Food Home Delivered Meals Represent

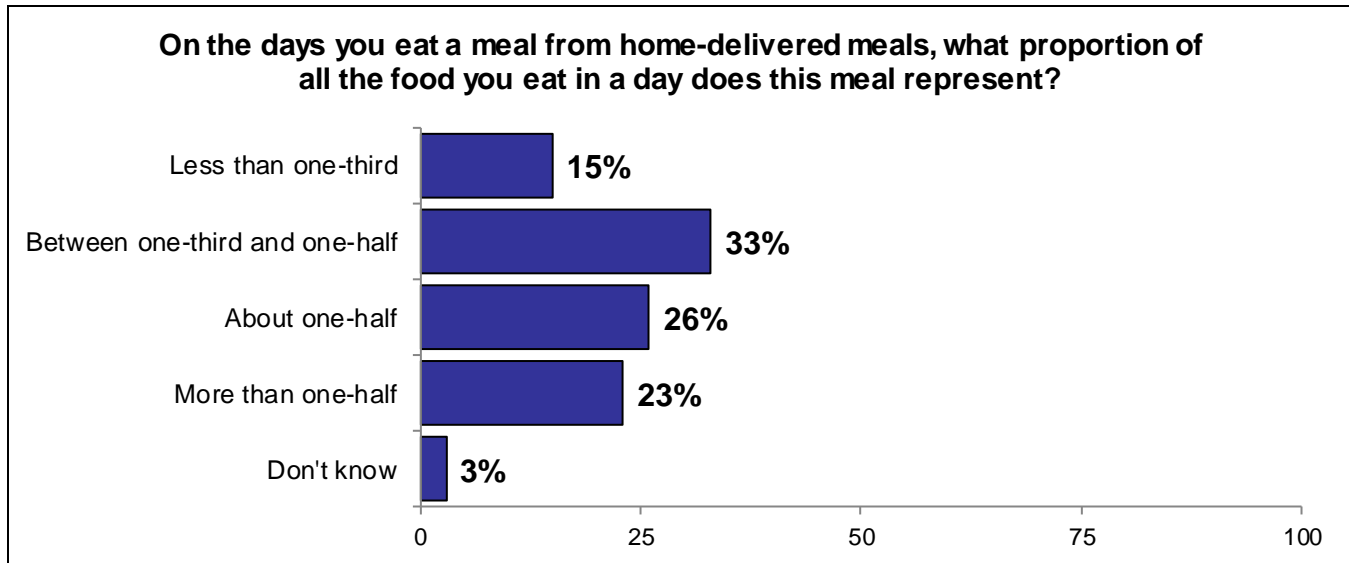


Figure 36. Home Delivered Meals Program Helps To Meet Goals

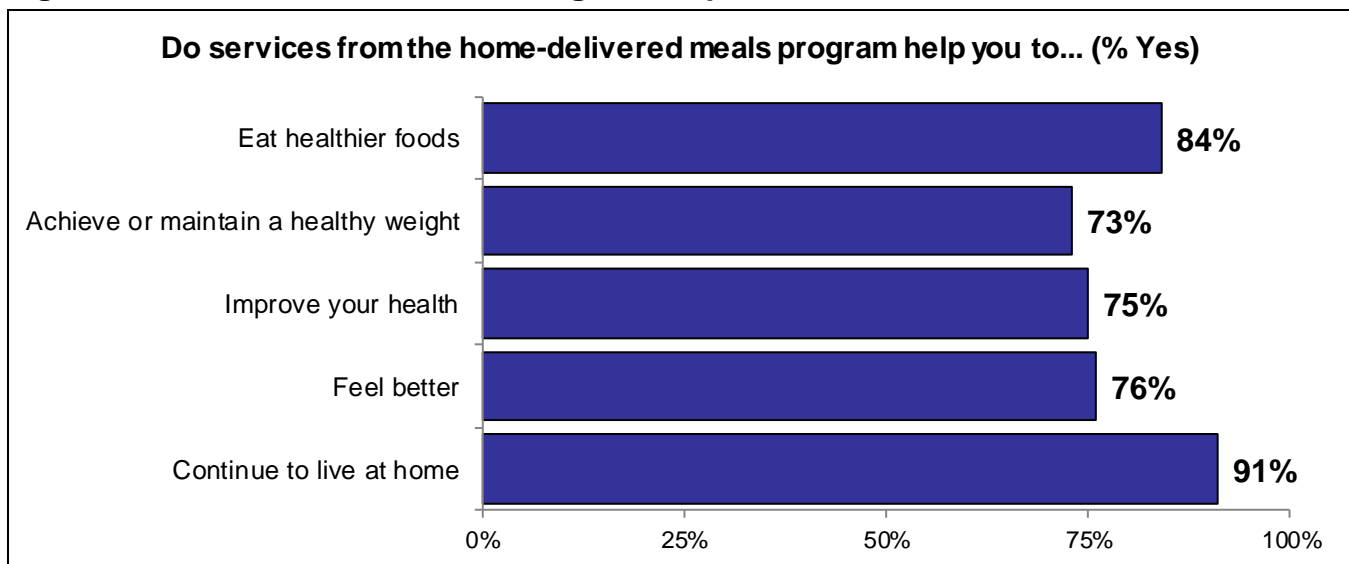
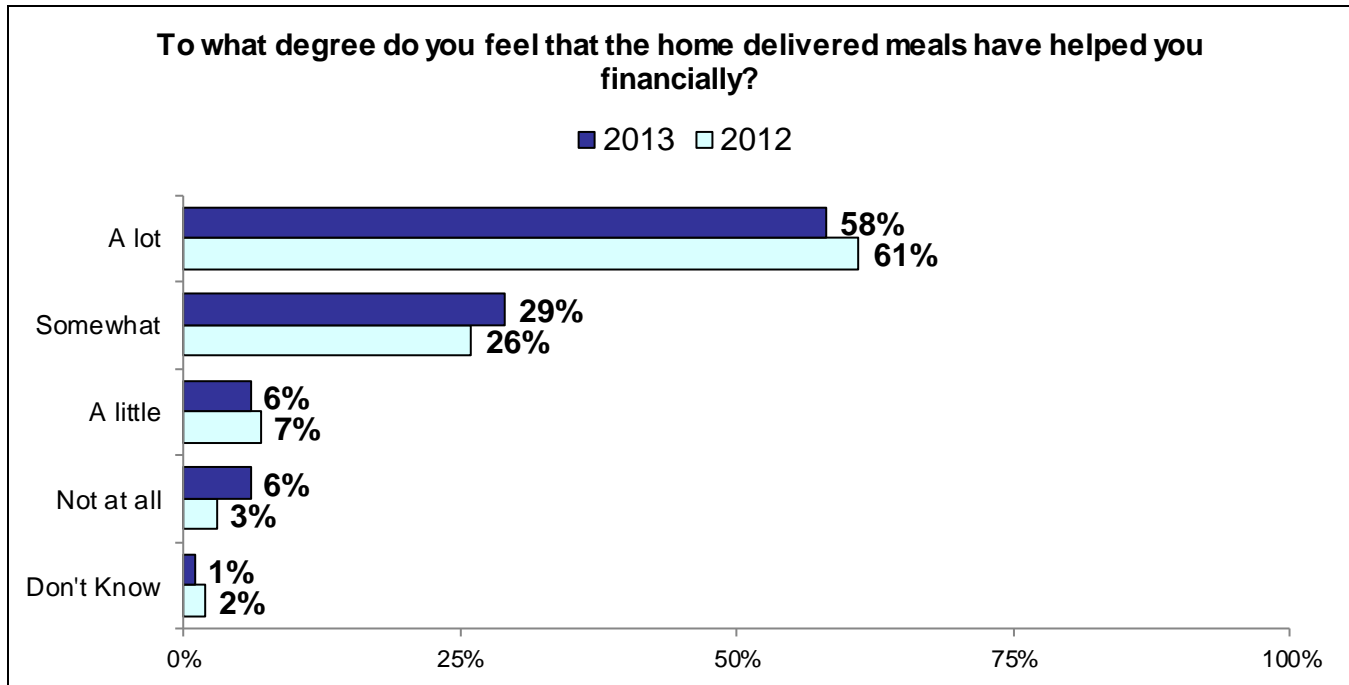


Figure 37. Home Delivered Meals Program Helped Financially



13.1. HOME-DELIVERED MEALS PROGRAM BY COUNTY

There are no statistically significant differences of the ratings of the Home Delivered Meals Program by county, as shown in Tables 66 – 70.

Table 66. Overall Ratings of Home Delivered Meals Program by County

	Satisfaction with Home Delivered Meals Program		Quality of Services Provided by Home Delivered Meals Program		Recommendation of Home Delivered Meals Program to Others	
	% Very or Somewhat Satisfied		% Excellent or Good		% Excellent or Good	
	n	%	n	%	n	%
Total	316	84%	316	89%	316	83%
Addison*	20	92%	20	96%	20	92%
Bennington*	25	87%	25	83%	25	84%
Caledonia*	27	92%	27	96%	27	92%
Chittenden*	29	73%	29	84%	29	78%
Essex*	5	100%	5	100%	5	100%
Franklin*	11	90%	11	90%	11	83%
Grand Isle*	1	100%	1	100%	1	100%
Lamoille*	15	94%	15	94%	15	79%
Orange*	25	77%	25	95%	25	78%
Orleans*	22	83%	22	79%	22	86%
Rutland	67	82%	67	91%	67	83%
Washington*	20	92%	20	93%	20	88%
Windham*	20	76%	20	89%	20	85%
Windsor*	29	83%	29	80%	29	73%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 67a. Experiences with Home Delivered Meals Program by County

	The food tastes good		The food looks good		The meals provide a variety of foods	
	% Always or Usually		% Always or Usually		% Always or Usually	
	n	%	n	%	n	%
Total	316	70%	316	74%	316	81%
Addison*	20	61%	20	70%	20	91%
Bennington*	25	62%	25	67%	25	100%
Caledonia*	27	82%	27	86%	27	83%
Chittenden*	29	63%	29	59%	29	76%
Essex*	5	81%	5	100%	5	100%
Franklin*	11	89%	11	80%	11	80%
Grand Isle*	1	100%	1	100%	1	100%
Lamoille*	15	72%	15	86%	15	94%
Orange*	25	59%	25	69%	25	70%
Orleans*	22	65%	22	71%	22	76%
Rutland	67	81% a	67	82%	67	80%
Washington*	20	73%	20	72%	20	71%
Windham*	20	55%	20	70%	20	79%
Windsor*	29	64%	29	77%	29	81%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 67b. Experiences with Home Delivered Meals Program by County

	When the meal arrives, the hot food is hot		When the meal arrives, the cold food is cold		The meal is delivered on time	
	% Always or Usually		% Always or Usually		% Always or Usually	
	n	%	n	%	n	%
Total	316	80%	316	85%	316	83%
Addison*	20	77%	20	85%	20	61%
Bennington*	25	76%	25	97%	25	88%
Caledonia*	27	86%	27	87%	27	84%
Chittenden*	29	81%	29	86%	29	83%
Essex*	5	100%	5	100%	5	100%
Franklin*	11	78%	11	78%	11	89%
Grand Isle*	1	100%	1	--	1	100%
Lamoille*	15	100%	15	93%	15	93%
Orange*	25	72%	25	73%	25	81%
Orleans*	22	68%	22	67%	22	72%
Rutland	67	92% A	67	87%	67	83%
Washington*	20	63%	20	81%	20	92%
Windham*	20	74%	20	95%	20	100%
Windsor*	29	78%	29	80%	29	75%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 67c. Experiences with Home Delivered Meals Program by County

	I eat the meals that are delivered		I like the meals that are delivered		The meals meet specific dietary requirements	
	% Always or Usually		% Always or Usually		% Always or Usually	
	n	%	n	%	n	%
Total	316	83%	316	73%	316	73%
Addison*	20	87%	20	76%	20	87%
Bennington*	25	75%	25	57%	25	76%
Caledonia*	27	97%	27	80%	27	69%
Chittenden*	29	80%	29	75%	29	69%
Essex*	5	81%	5	61%	5	100%
Franklin*	11	89%	11	89%	11	70%
Grand Isle*	1	100%	1	100%	1	100%
Lamoille*	15	79%	15	72%	15	81%
Orange*	25	83%	25	64%	25	60%
Orleans*	22	78%	22	65%	22	74%
Rutland	67	87%	67	81%	67	78%
Washington*	20	83%	20	83%	20	79%
Windham*	20	71%	20	65%	20	81%
Windsor*	29	88%	29	70%	29	51%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 68. Proportion of Food Home Delivered Meals Represent by County

On the days you eat a meal from home-delivered meals, what proportion of all the food you eat in a day does this meal represent?		Less than one-third	Between one-third and one-half	About one-half	More than one-half	Don't Know
	n	%	%	%	%	%
Total	308	15%	33%	26%	23%	3%
Addison*	20	20%	18%	36%	27%	--
Bennington*	25	18%	47%	8%	19%	8%
Caledonia*	27	6%	40%	42%	11%	--
Chittenden*	25	29%	26%	10%	24%	10%
Essex*	5	--	--	39%	61%	--
Franklin*	10	10%	60%	30%	--	--
Grand Isle*	1	--	100%	--	--	--
Lamoille*	15	21%	24%	36%	19%	--
Orange*	25	25%	23%	36%	16%	--
Orleans*	19	15%	55%	20%	10%	--
Rutland	67	14%	31%	25%	27%	4%
Washington*	20	18%	19%	22%	41%	--
Windham*	20	9%	36%	39%	16%	--
Windsor*	29	4%	34%	20%	34%	8%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 69. Home Delivered Meals Program Helps To Meet Goals by County

	Eat healthier foods		Achieve or maintain a healthy weight		Improve your health		Feel better		Continue to live at home	
	% Yes		% Yes		% Yes		% Yes		% Yes	
	n	%	n	%	n	%	n	%	n	%
Total	316	84%	316	73%	316	75%	316	76%	316	91%
Addison*	20	96%	20	81%	20	91%	20	96%	20	94%
Bennington*	25	85%	25	77%	25	77%	25	83%	25	100%
Caledonia*	27	79%	27	70%	27	82%	27	88%	27	94%
Chittenden*	29	71%	29	65%	29	70%	29	70%	29	88%
Essex*	5	100%	5	74%	5	100%	5	100%	5	100%
Franklin*	11	89%	11	90%	11	80%	11	64%	11	79%
Grand Isle*	1	100%	1	100%	1	100%	1	100%	1	100%
Lamoille*	15	86%	15	82%	15	87%	15	83%	15	92%
Orange*	25	79%	25	60%	25	52%	25	56%	25	95%
Orleans*	22	85%	22	85%	22	68%	22	73%	22	88%
Rutland	67	87%	67	71%	67	78%	67	80%	67	91%
Washington*	20	82%	20	69%	20	68%	20	63%	20	91%
Windham*	20	80%	20	69%	20	90%	20	80%	20	80%
Windsor*	29	90%	29	79%	29	61%	29	65%	29	91%

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 70. Home Delivered Meals Program Helped Financially by County

To what degree do you feel that the home delivered meals have helped you financially?		A lot	Some what	A little	Not at all	Don't Know
	n	%	%	%	%	%
Total	20	76%	15%	4%	4%	--
Addison*	25	63%	16%	9%	12%	--
Bennington*	27	46%	40%	8%	3%	3%
Caledonia*	27	37%	38%	12%	10%	4%
Chittenden*	5	100%	--	--	--	--
Essex*	10	70%	19%	--	--	11%
Franklin*	1	100%	--	--	--	--
Grand Isle*	15	62%	30%	--	7%	--
Lamoille*	25	55%	24%	8%	13%	--
Orange*	21	64%	30%	5%	--	--
Orleans*	67	55%	36%	5%	5%	--
Rutland	20	53%	33%	4%	10%	--
Washington*	20	44%	46%	10%	--	--
Windham*	29	78%	17%	--	5%	--
Windsor*	29	4%	34%	20%	34%	8%

↑ Statistically higher than the total at 95% Confidence Level

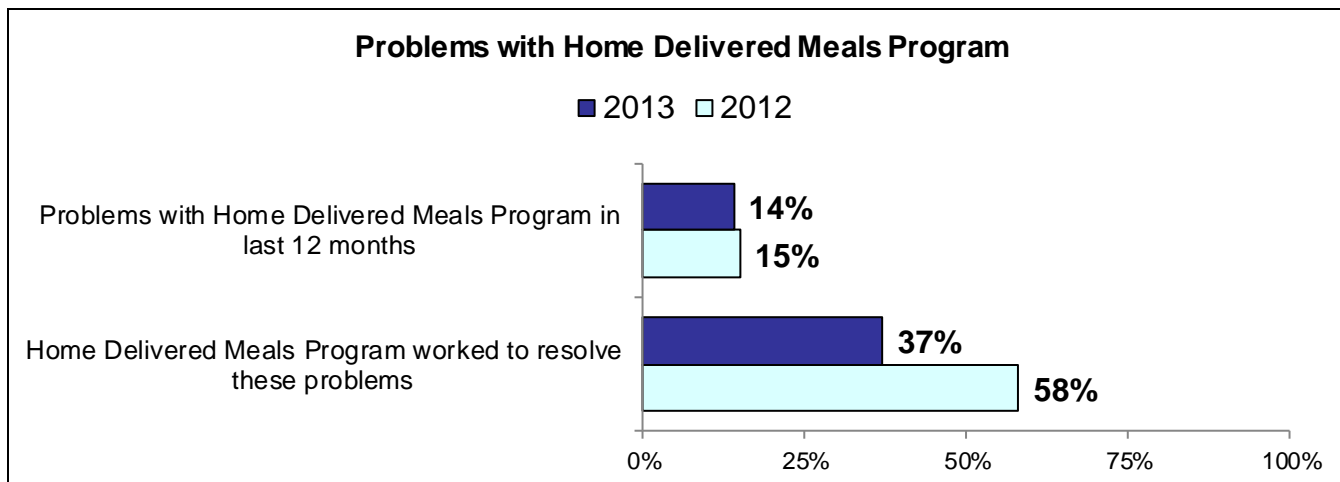
↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

13.2. PROBLEMS WITH HOME DELIVERED MEALS PROGRAM

Fourteen percent of consumers in the Home Delivered Meals Program report having a problem in 2013, similar to 15% in 2012. Over 1 in 3 consumers report that the Home Delivered Meals Program worked to resolve these problems, a large decrease of over half in 2012.

Figure 38. Overall Ratings of Home Delivered Meals Program



13.3. OPEN-ENDED COMMENTS

Of those dissatisfied with the Home Delivered Meals Program, a large percentage state that they are dissatisfied because the food is not appetizing.

Table 71. Reasons for Dissatisfaction with Home Delivered Meals Program

Why are you dissatisfied with the Home Delivered Meals Program?	
Number answering question (unweighted)	29
Deliveries more frequent	4%
Delivery problems - do not deliver, will not leave if no one is home, improve delivery, schedule, actually show up	12%
Food choices difficult for diabetic - white bread, starches problematic	5%
Food not appetizing - Improve food quality, Make more appetizing	46%
Food preparation issues - Improve food preparation, Cook food correctly	10%
Food seasoning issues - Season food properly	6%
Meeting dietary requirements - Understand clients dietary needs, Provide requested food	2%
Need more variety in food choices	5%
Veggies not soft enough for elder palates, abilities - Improve food palatability, Provide soft foods	1%
Quantity problem - small portions- Increase portion size	5%
Other	5%
Total	100%

Of those reporting a problem with the Home Delivered Meals Program, over 1 in 3 report delivery problems. Other reasons include food not being appetizing and food not meeting dietary requirements.

Table 72. Problems Experienced with Home Delivered Meals Program

What problems did you experience?	
Number answering question (unweighted)	29
Delivery problems - do not deliver, will not leave if no one is home, improve delivery, schedule, actually show up	36%
Food not appetizing - Improve food quality, Make more appetizing	13%
Food preparation issues - Improve food preparation, Cook food correctly	8%
Food seasoning issues - Season food properly	10%
Meeting dietary requirements - Understand clients dietary needs, Provide requested food	12%
Need more variety in food choices	4%
Quantity problem - small portions- Increase portion size	2%
Spoiled food is delivered, sour milk, stale or moldy bread - Do not deliver spoiled food, Check expiration dates	4%
Other	13%
Total	100%

Almost 1 in 3 consumers report there is something that could be done to improve services offered by the Home Delivered Meals Program. Almost 1 in 4 of these report needing more variety in the choice of food. Another common improvement suggestion is to make the food more appetizing.

Table 73. Improvement of Services Offered by Home Delivered Meals Program

Is there anything that could improve services offered to you and others by the Home Delivered Meals Program?	
Number answering question (unweighted)	304
Yes	31%
No	67%
Don't Know	2%

Is there anything that could improve services offered to you and others by the Home Delivered Meals Program? (Specify)	
Number answering question (unweighted)	93
Deliveries more frequent	2%
Delivery problems - do not deliver, will not leave if no one is home, improve delivery, schedule, actually show up	12%
Food not appetizing - Improve food quality, Make more appetizing	17%
Food preparation issues - Improve food preparation, Cook food correctly	8%
Food seasoning issues - Season food properly	3%
Meeting dietary requirements - Understand clients dietary needs, Provide requested food	6%
Need more variety in food choices	24%
Quantity problem - small portions- Increase portion size	8%
Spoiled food is delivered, sour milk, stale or moldy bread - Do not deliver spoiled food, Check expiration dates	1%
Other	18%
Total	100%

14. ADDITIONAL COMMENTS

At the end of the survey, consumers are asked if they had any comments they would like to make about the help they receive. One in four respondents said yes. Of those that had a comment, 41% made a general positive comment.

Table 74. Additional Comments

Do you have any comments you would like to make about the help you receive?	
Number answering question (unweighted)	1,266
Yes	25%
No	74%
Don't Know	1%

Do you have any comments you would like to make about the help you receive? (Specify)	
Number answering question (unweighted)	326
Specific caregiver is appreciated	8%
Help I need has been well received	2%
Positive comment in general	41%
Services are appreciated	13%
Would be unable to remain in my home without help received	6%
Programs need more funding, keep them going	1%
Negative comment in general	6%
Would like more communication from case manager, organization	1%
Would like more hours, more care	4%
Hard to find quality caregivers, Short staffed	1%
Caregivers need higher wages, insurance	1%
Caregivers need more training, Need to do the work correctly	2%
Meals on Wheels food is not good, not appetizing	4%
Need consistent scheduling, Caregivers need to show up	1%
Other	8%
Nothing	1%
Total	100%

15. COMPARISON TO STATEWIDE MEASURES

The Vermont Behavioral Risk Factor Surveillance Survey (BRFSS) is administered annually to the general Vermont population. In this section, we compare responses on the few questions of the 2013 Vermont Long-Term Care Consumer Survey that were also asked of the general Vermont population. Two questions were asked in the most recent BRFSS survey (2012), and one was asked last in 2010.

Not surprisingly, the percentage of respondents who reported being in poor or fair general health is much higher in the LTC population than the general population. Probably as a result of poor health and an inability to get around as much as they used to, a higher percentage of LTC consumers report being dissatisfied or very dissatisfied with their life. There is no difference in the ability to get emotional and social support between the LTC population and general population.

Table 75. Comparison to Statewide Measures

	2013 LTC Consumer Survey	2012 Statewide BRFSS Survey
Rating of General Health (% Fair or Poor)	51%	12%
How Often Get Needed Social and Emotional Support (% Rarely or Never)	10%	10%
	2013 LTC Consumer Survey	2010 Statewide BRFSS Survey
Satisfaction with Life (% Very Dissatisfied or Dissatisfied)	12%	5%

F. Multivariate Analyses of 2013 Key Indicators

1. QUALITY OF LIFE AND SATISFACTION INDICES

This section summarizes results of analyses conducted on items addressing service satisfaction and quality of life. Service satisfaction and Quality of Life (QoL) measures are examined with respect to DAIL consumers' demographic characteristics (gender, age, and county of residence) as well as level of need (moderate, high, highest) and program participation (CFC Case Management, Personal Care Services, Flexible Choices, Homemaker Services, Adult Day Center, Attendant Services Program, Traumatic Brain Injury Program).

Given the large number of individual questions addressing service satisfaction and QoL, these were combined into composite measures consistent with those used in previous years. Twenty-seven individual questions were collapsed into four composite measures including a Service and Staff Satisfaction Composite, an Interpersonal QoL Composite, a Safety and Mobility QoL Composite, and a General Health QoL Composite. The table below displays the individual items which comprise each composite measure. Composite scores were calculated by averaging scores across all items making up the composite. In addition to these four composite measures, three overall measures of social support, life satisfaction, and recommendation of Choices for Care are examined. Significant differences are assessed by comparing 95% and 90% Confidence Intervals. Across all four composite measures and three overall measures examined in this section, higher scores indicate more positive feelings.

The items comprising the composites were the same as used in 2012. However, we added a question to two composites. The overall rating of the value of services received were added to the Service and Staff Satisfaction composite, and how often consumers felt sad or blue in the past week was added to the General Health QoL composite. Results of a principal components analyses showed that these items loaded onto the existing factor well. Table 83 displays the items comprising the composite measures as well as the three overall measures.

Table 76. Items Included in Composite Measures

Service and Staff Satisfaction Composite Measure (4-point scale)
How would you rate the amount of choice and control you had when you planned the services or care you would receive?
How would you rate the overall quality of the help you receive?
How would you rate the timeliness of your services?
How would you rate when you receive your services or care?
How would you rate the communication between you and the people who help you?
How would you rate the reliability of the people who help you?
How would you rate the degree to which the services meet your daily needs such as bathing, dressing, meals, and housekeeping?
How would you rate how well problems or concerns you have with your care are taken care of?
How would you rate the courtesy of those who help you?
How would you rate how well people listen to your needs and preferences?
NEW. Overall, how do you rate the value of the services you receive?
Interpersonal QoL Composite (3-point scale)
I am satisfied with how I spend my free time. (How well does this statement describe your life?)
I am satisfied with the amount of contact I have with my family and friends. (How well does this statement describe your life?)
I have someone I can count on in an emergency. (How well does this statement describe your life?)
I feel satisfied with my social life. (How well does this statement describe your life?)
I feel valued and respected. (How well does this statement describe your life?)
I really feel a part of my community. (How well does this statement describe your life?)
I have someone I can count on to listen to me when I need to talk. (How well does this statement describe your life?)
I have someone to do something enjoyable with. (How well does this statement describe your life?)
During my leisure time, I almost always have something to do. (How well does this statement describe your life?)

Safety and Mobility QoL Composite (3-point scale)

I feel safe in the home where I live. (How well does this statement describe your life?)

I feel safe out in my community. (How well does this statement describe your life?)

I can get to where I need or want to go. (How well does this statement describe your life?)

I can get around inside my home as much as I need to. (How well does this statement describe your life?)

General Health QoL Composite (5-point scale)

In general, compared to other people your age, would you say your health is...?

Compared to one year ago, how would you rate your health in general now?

NEW. During the past week, how often would you say you felt sad or blue?

Individual Overall Items

How often do you get the social and emotional support you need? (5-point scale)

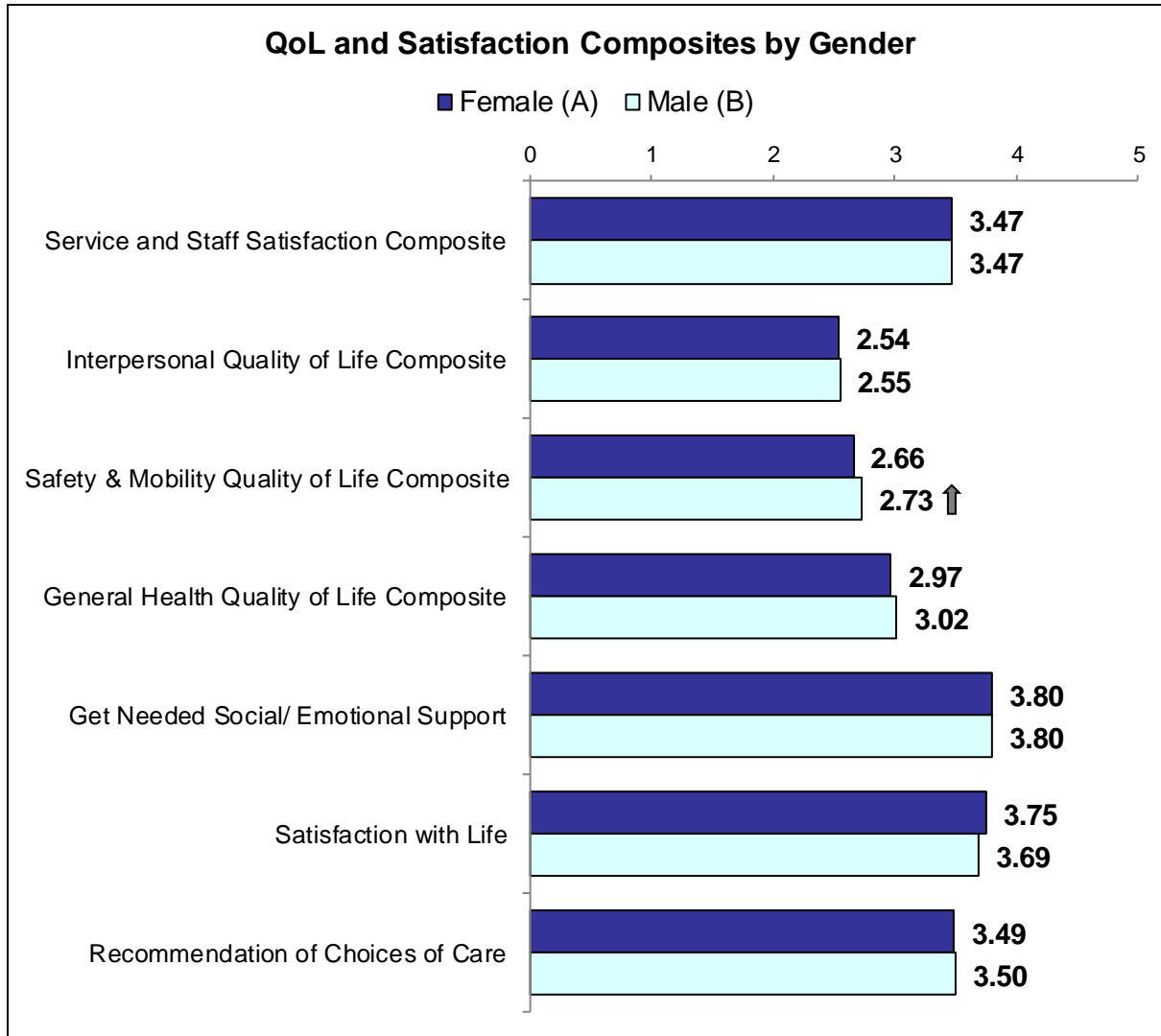
In general, how satisfied are you with your life? (4-point scale)

NEW. What is your recommendation of Choices of Care to others? (4-point scale)

1.1. QUALITY OF LIFE AND SATISFACTION INDICES BY GENDER

Men score higher on the Safety and Mobility QoL composite than women.

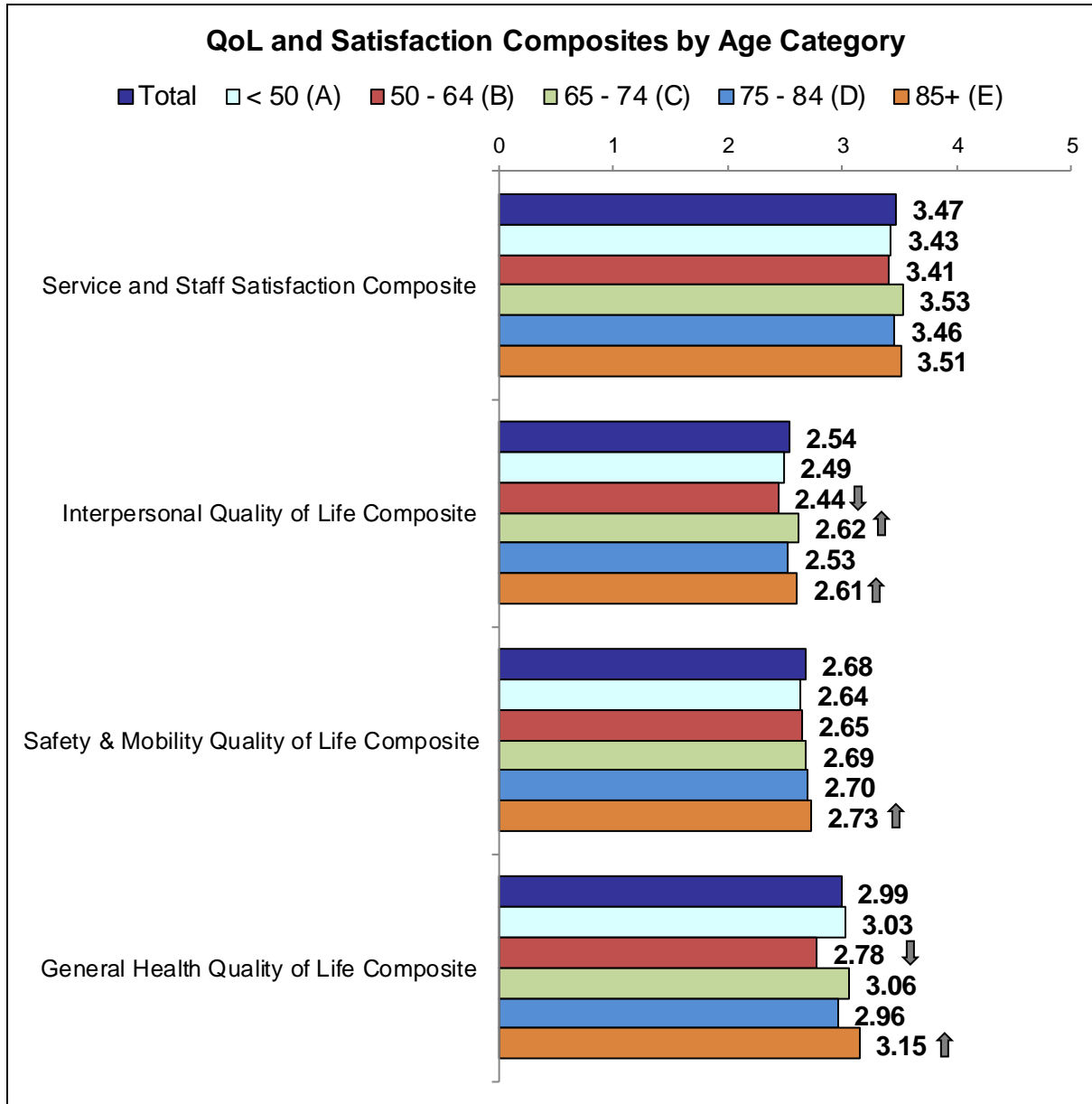
Figure 39. Quality of Life and Satisfaction Composites by Gender



1.2. QUALITY OF LIFE AND SATISFACTION INDICES BY AGE

Consumers in the 50 – 64 year old age group scored lower on several quality of life measures compared to all other age groups (Interpersonal QoL Composite, General Health QoL Composite, Satisfaction with Life). Additionally, older participants (age 65+) tend to score higher on the quality of life measures compared to those younger (<64).

Figure 40a. Quality of Life and Satisfaction Composites by Age

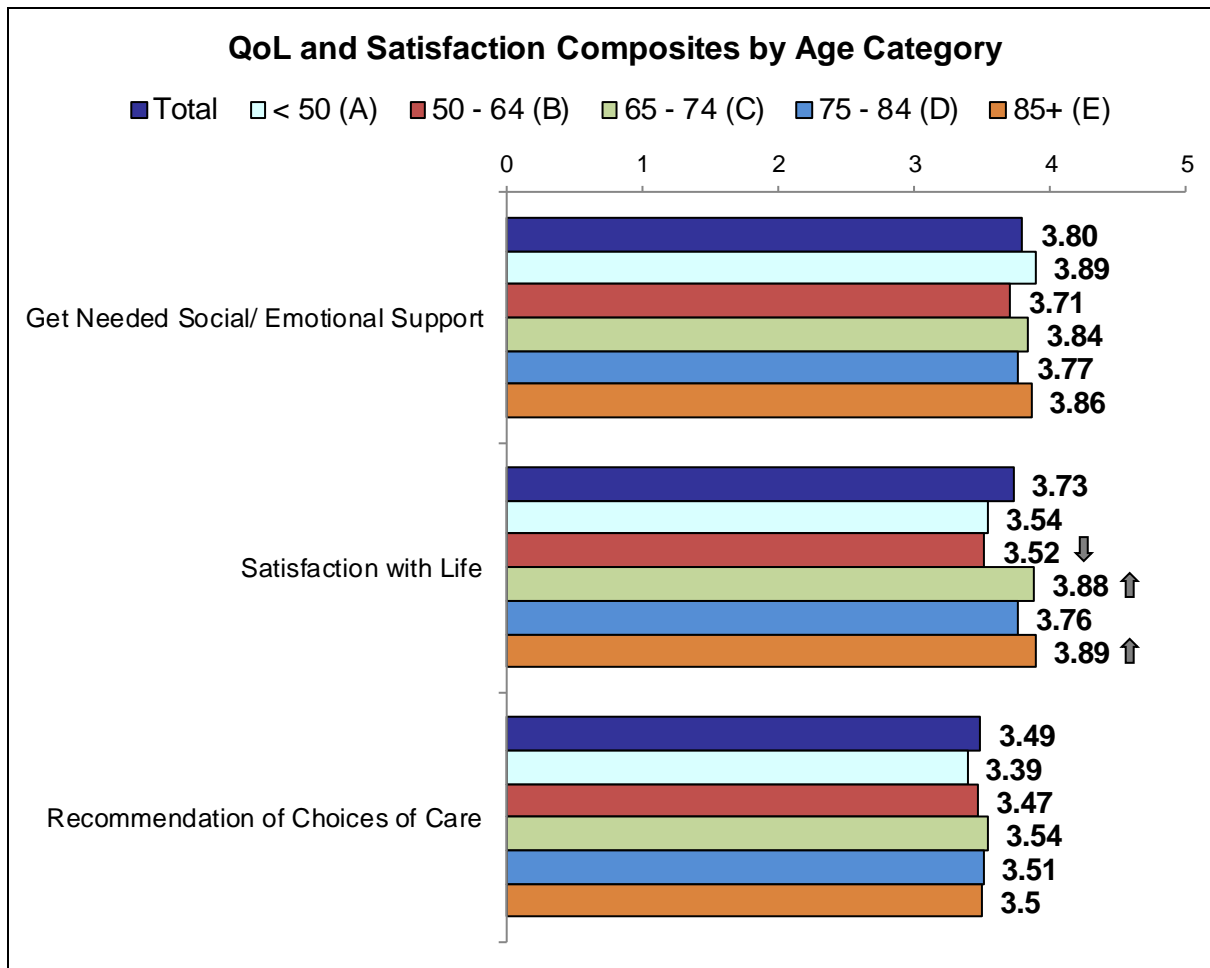


↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Figure 40b. Quality of Life and Satisfaction Composites by Age



↑ Statistically higher than the total at 95% Confidence Level

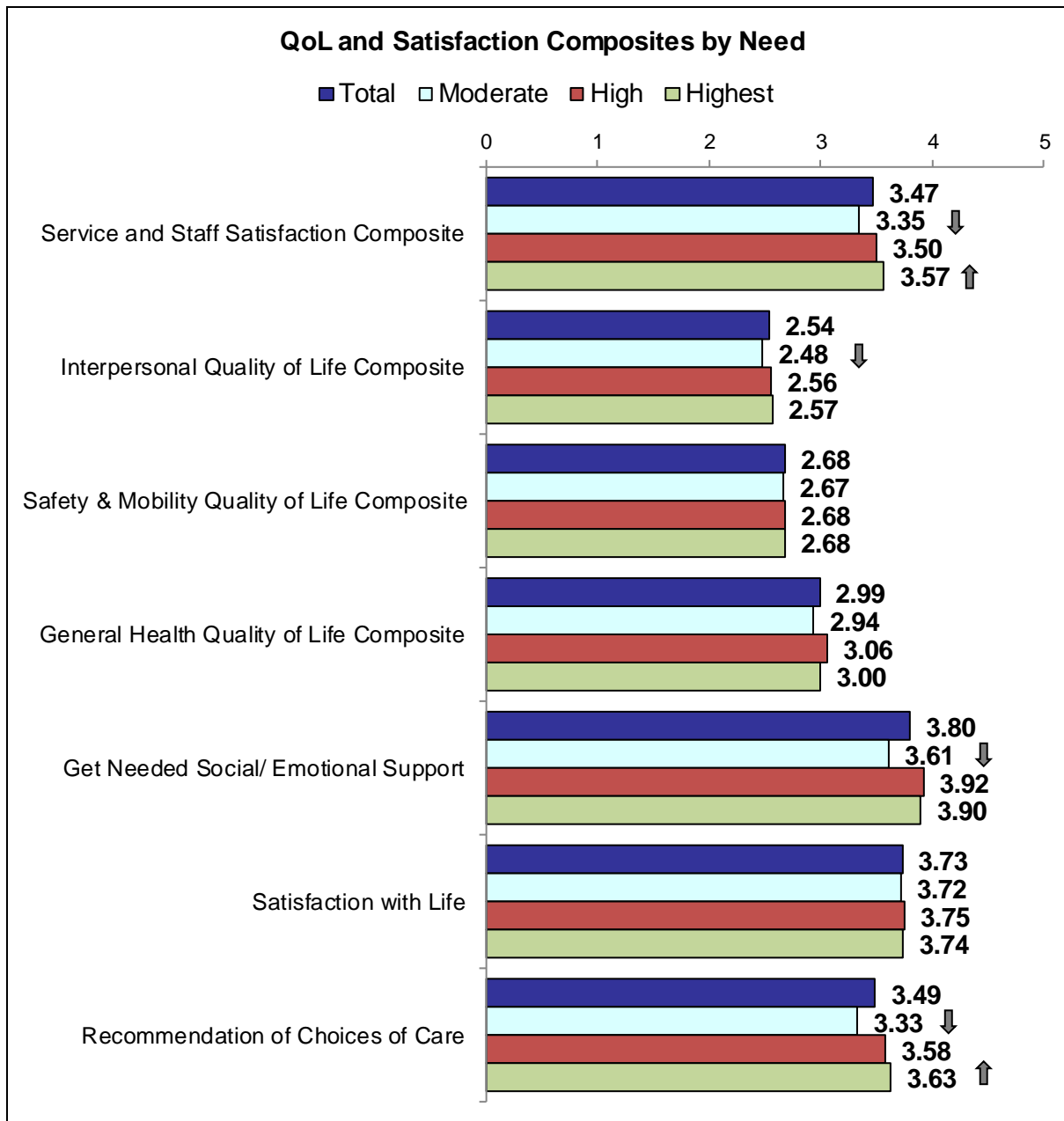
↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

1.3. QUALITY OF LIFE AND SATISFACTION INDICES BY LEVEL OF NEED

Consumers with moderate level of need tend to have lower scores on the quality of life measures compared to those with higher needs, and those with the highest level of need report higher scores on the quality of life measures compared to those with lower needs.

Figure 41. Quality of Life and Satisfaction Composites by Level of Need



↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

1.4. QUALITY OF LIFE AND SATISFACTION INDICES BY PROGRAM

Personal Care Services: Consumers receiving Personal Care Services score higher on the Service and Staff Satisfaction Composite, Getting Needed Social and Emotional Support, and the Recommendation of Choices of Care to others compared to those in other programs.

Consumer-Directed Personal Care Services: Consumers receiving Consumer-Directed Personal Care Services score higher on the Service and Staff Satisfaction Composite and the Recommendation of Choices of Care to others compared to those in other programs. On the other hand, consumers receiving Consumer-Directed Personal Care Services score lower in the General Health Quality of Life composite than those in other programs.

Surrogate-Directed Personal Care Services: Consumers receiving Surrogate-Directed Personal Care Services score higher on all quality of life measures compared to those in other programs.

Agency-Directed Personal Care Services: Consumers receiving Agency-Directed Personal Care Services score lower on Satisfaction with Life compared to those in other programs.

Flexible Choices: Consumers in Flexible Choices score higher on the recommendation of Choices of Care to others than those in other programs.

Adult Day Services: Consumers attending Adult Day Centers score higher on the Interpersonal Quality of Life composite, the General Health Quality of Life composite, and Getting Needed Social and Emotional Support than those in other programs.

Homemaker Services: Consumers enrolled in Homemaker Services have lower scores on the Service and Staff Satisfaction composite, the Interpersonal Quality of Life composite, Getting Needed Social and Emotional Support, and Satisfaction with Life compared to those in other programs.

Attendant Services Program: Those in the Attendant Services Program score higher on the Service and Staff Satisfaction Composite, the Interpersonal Quality of Life Composite Getting Needed Social and Emotional Support, and Recommendation of Choices of Care.

Table 77a. Quality of Life and Satisfaction Composites by Program

	Service and Staff Satisfaction Composite	Interpersonal Quality of Life Composite	Safety & Mobility Quality of Life Composite	General Health Quality of Life Composite
Total	3.47	2.54	2.68	2.99
CFC Case Mgmt	3.46	2.53	2.68	2.99
Personal Care Services	3.55 ↑	2.57	2.68	3.02
<i>Consumer-Directed</i>	3.57 ↑	2.55	2.63	2.84 ↓
<i>Surrogate-Directed</i>	3.69 ↑	2.69 ↑	2.76 ↑	3.22 ↑
<i>Agency-Directed</i>	3.43	2.52	2.66	2.97
Flexible Choices*	3.60	2.63	2.71	2.98
Adult Day Services	3.51	2.62 ↑	2.70	3.19 ↑
Homemaker Services	3.35 ↓	2.48 ↓	2.67	2.92
Attendant Services Program*	3.66 ↑	2.67 ↑	2.75	2.94
Traumatic Brain Injury Program*	3.36	2.54	2.78	3.27

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 77b. Quality of Life and Satisfaction Composites by Program

	Get Needed Social/ Emotional Support	Satisfaction with Life	Recommendation of Choices of Care
Total	3.80	3.73	3.49
CFC Case Mgmt	3.77	3.73	3.49
Personal Care Services	3.92 ↑	3.75	3.61 ↑
<i>Consumer-Directed</i>	3.86	3.68	3.63 ↑
<i>Surrogate-Directed</i>	4.18 ↑	3.98 ↑	3.75 ↑
<i>Agency-Directed</i>	3.79	3.60 ↓	3.50
Flexible Choices*	4.09	3.79	3.64 ↑
Adult Day Services	3.98 ↑	3.85	3.57
Homemaker Services	3.60 ↓	3.73	3.31 ↓
Attendant Services *	4.11 ↑	3.87	3.67 ↑
Traumatic Brain Injury Program*	3.89	3.23	3.14

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

1.5. QUALITY OF LIFE AND SATISFACTION INDICES BY COUNTY

Addison County: Consumers residing in Addison County score higher on the Service and Staff Satisfaction Composite, the Interpersonal Quality of Life composite, the Safety & Mobility Quality of Life Composite, Getting Needed Social and Emotional Support, Satisfaction with Life, and Recommendation of Choices of Care to others compared to those in other counties.

Bennington County: Residents of Bennington County score higher than consumers in other counties on the Recommendation of Choices of Care to others.

Washington County: Residents of Washington County score lower on the Safety & Mobility Quality of Life Composite than those in other counties.

Windsor County: Consumers in Windsor County score lower on the Service & Staff Satisfaction Composite than those in other counties.

Table 78a. Quality of Life and Satisfaction Composites by County

	Service and Staff Satisfaction Composite	Interpersonal Quality of Life Composite	Safety & Mobility Quality of Life Composite	General Health Quality of Life Composite
Total	3.47	2.54	2.68	2.99
Addison*	3.62 ↑	2.62 ↑	2.76 ↑	3.14
Bennington*	3.54	2.61	2.73	2.98
Caledonia*	3.49	2.59	2.71	3.14
Chittenden*	3.45	2.54	2.67	2.96
Essex*	3.37	2.51	2.75	2.84
Franklin*	3.57	2.52	2.68	2.98
Grand Isle*	3.63	2.49	2.76	2.65
Lamoille*	3.51	2.60	2.66	3.22
Orange*	3.33	2.40	2.68	2.92
Orleans*	3.50	2.55	2.74	2.97
Rutland	3.43	2.53	2.66	2.94
Washington*	3.50	2.49	2.56 ↓	2.95
Windham*	3.44	2.48	2.66	2.91
Windsor*	3.31 ↓	2.52	2.68	2.98

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

Table 78b. Quality of Life and Satisfaction Composites by County

	Get Needed Social/ Emotional Support	Satisfaction with Life	Recommend Choices of Care
Total	3.80	3.73	3.49
Addison*	4.07 ↑	3.91 ↑	3.67 ↑
Bennington*	3.92	3.77	3.63 ↑
Caledonia*	3.68	3.85	3.51
Chittenden*	3.83	3.63	3.48
Essex*	3.53	3.61	3.31
Franklin*	3.87	3.94	3.52
Grand Isle*	3.11	3.41	3.78
Lamoille*	3.79	3.87	3.52
Orange*	3.69	3.54	3.30
Orleans*	3.73	3.77	3.58
Rutland	3.75	3.74	3.47
Washington*	3.78	3.62	3.46
Windham*	3.79	3.66	3.43
Windsor*	3.84	3.68	3.34

↑ Statistically higher than the total at 95% Confidence Level

↓ Statistically lower than the total at 95% Confidence Level

* Program did not meet 95/5 statistical criteria and should be interpreted with caution

2. CORRELATIONS BETWEEN QUALITY OF LIFE MEASURES

A correlation analysis was run on the quality of life measures. All of the measures have a statistically significant level of inter-correlation between them. The most highly correlated measure is the Service and Staff Satisfaction composite and the Recommendation of Choices of Care question. This is not surprising given that if consumers are satisfied with the services they receive and the staff providing these services, they would be more likely to give a higher recommendation of the Choices for Care Program to others.

The least correlated items are the General Health scale with both the Recommendation of Choices of Care and the Service and Staff Satisfaction composite. This means that while there is still a small relationship between a consumer's health status with their recommendation of the Choices of Care program and the perceived level of services they receive, it is relatively low compared to the other quality of life measures. In other words, a person's health status does not appear greatly impacted by the quality of service that they receive or the recommendation they would give of Choices of Care.

Table 79. Quality of Life and Satisfaction Composites Correlation Matrix

	Service and Staff Satisfaction Composite	Interpersonal Composite	Safety & Mobility Composite	General Health Composite	Get Needed Social/ Emotional Support	Satisfaction with Life
Service and Staff Satisfaction Composite	-					
Interpersonal Composite	.391**	-				
Safety & Mobility Composite	.331**	.557**	-			
General Health Composite	.185**	.429**	.351**	-		
Get Needed Social/ Emotional Support	.367**	.535**	.331**	.255**	-	
Satisfaction with Life	.322**	.639**	.391**	.468**	.449**	-
Recommendation of Choices of Care	.741**	.315**	.263**	.120**	.332**	.269**

** correlation is significant at the 0.01 level (2-tailed)

G. Quality Improvement Analysis and Recommendations

Attributable Effects Analysis

Attributable Effects Analysis is an analytic tool that is designed to yield actionable information about key drivers that is more robust than normal correlation or regression analysis. Attributable Effects is a probability-based analysis that partitions the impact of each possible driver into two components: loss and potential. Briefly, potential estimates the degree to which improvement in a particular driver (say, the amount of choice and control you had when you planned the services you would receive) would increase consumers' overall rating of the value of the services received (outcome). Loss estimates the degree to which a decrease in the driver would reduce the overall rating among affected patients.

The power of Attributable Effects is that it focuses on differences in outcomes between those who are satisfied with care and those who are not. This analysis is performed one question at a time and provides direction on where to focus quality improvement (QI) efforts. It identifies attributes of care that can have an impact on overall satisfaction in both directions: potential improvement areas as well as where current efforts must be maintained so that scores do not decline.

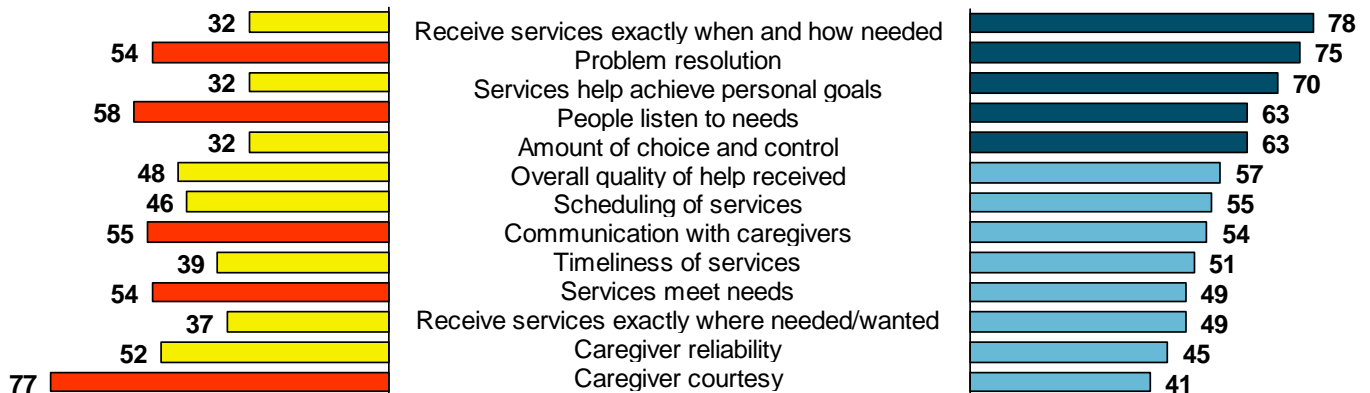
Loss: The loss score represents the proportion of patients who are currently satisfied with the outcome, but would cease to be satisfied if a positive experience with the attribute were to completely disappear. A positive experience is defined when the driver event “always” occurs or is considered “very good” or “excellent.” An attribute that has a relatively high loss score is referred to as a maintenance driver. For instance, in the data shown in the chart on the following page, 77% of patients who currently rate the overall value of the services they receive as “Excellent” would cease to be satisfied if they no longer believed that the courtesy of the people that help them was “Excellent”.

Potential: Another important feature of the Attributable Effects analysis is that it provides information about both the drivers of existing satisfaction and the drivers that have potential to bring about increases in satisfaction. Potential scores represent the proportion of affected patients who are not currently satisfied with their care but who would become satisfied if the driver were improved such that everyone was having a positive experience. For instance, in the chart on the following page, 78% of consumers who do not currently rate the overall value of the services they receive as “Excellent” would become satisfied if they all felt that they could get the services they need and want when and how they need them.

Applicable Population: In interpreting the results, it is important to consider that some questions are not asked and/or answered by all respondents because they are not applicable to the individual patient's experience.

1. OVERALL CHOICES FOR CARE PROGRAM

1.1. OVERALL VALUE OF SERVICES RECEIVED



Potential

The three features with highest potential to improve rating of the overall value of services received include:

- Ensuring that consumers receive services when and how they are needed (78%)
- Effectively resolving problems (75%)
- Ensuring that services provided help consumers achieve their personal goals (70%)

This indicates that one can effectively improve consumers' rating of the overall value of services received.

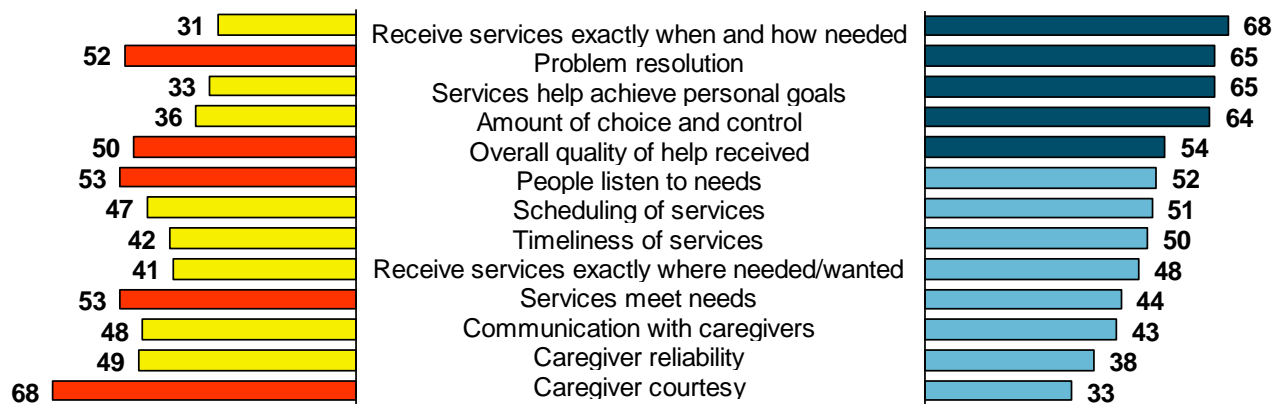
Maintenance

The three features with highest importance for maintaining rating of the overall value or services received include:

- Having courteous caregivers (77%)
- Having people that listen to consumers' needs and preferences (58%)
- Ensuring good communication between consumers and the people that help them (55%)

This indicates that one should focus on maintaining current levels of satisfaction with these attributes, because a decline would likely have a negative effect on rating of the overall value of services received.

1.2. RECOMMENDATION OF CHOICES OF CARE



Potential

The three features with highest potential to improve the recommendation of Choices of Care to others include:

- Ensuring that consumers receive services when and how they are needed (68%)
- Effectively resolving problems (65%)
- Ensuring that services provided help consumers achieve their personal goals (65%)

This indicates that one can effectively improve consumers' recommendation of Choices of Care to others.

Maintenance

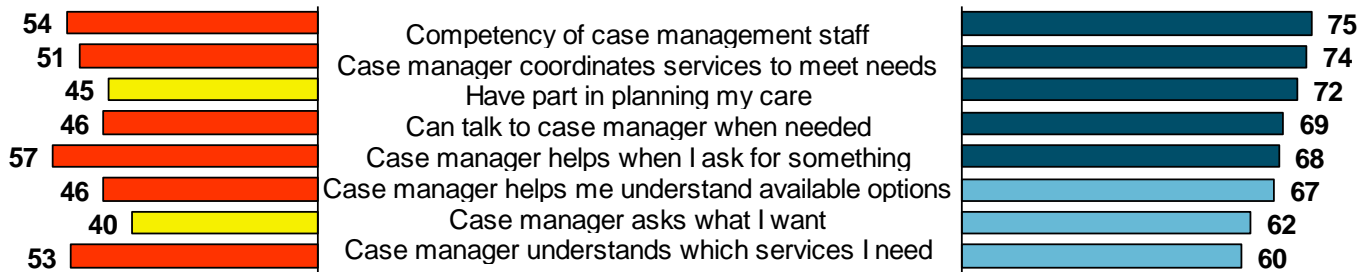
The three features with highest importance for maintaining the recommendation of Choices of Care to others include:

- Having courteous caregivers (68%)
- Having people that listen to consumers' needs and preferences (53%)
- Ensuring that services provided help meet consumers' needs (53%)

This indicates that one should focus on maintaining current levels of satisfaction with these attributes, because a decline would likely have a negative effect on the recommendation of Choices of Care to others.

2. CASE MANAGEMENT SERVICES

2.1. SATISFACTION WITH CASE MANAGER



Potential

The three features with highest potential to improve the satisfaction with case managers include:

- Ensuring the competency of case management staff (75%)
- Ensuring that case managers coordinate services that meet consumers' needs (74%)
- Ensuring that consumers have a part in planning their care (72%)

This indicates that one can effectively improve consumers' satisfaction with their case managers.

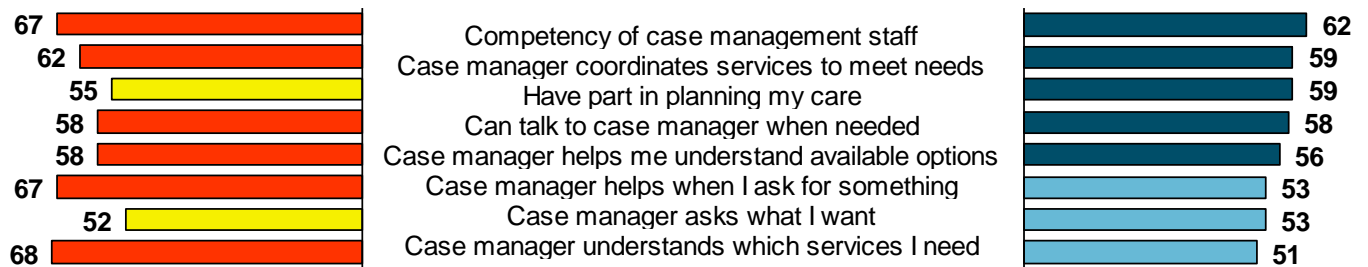
Maintenance

The three features with highest importance for maintaining the satisfaction with case managers:

- Having case managers that help consumers when they ask for something (57%)
- Ensuring the competency of case management staff (54%)
- Having case managers that understand the services consumers need (53%)

This indicates that one should focus on maintaining current levels of satisfaction with these attributes, because a decline would likely have a negative effect on the satisfaction with case managers.

2.2. RECOMMENDATION OF CASE MANAGER



Potential

The three features with highest potential to improve the recommendation of case managers include:

- Ensuring the competency of case management staff (62%)
- Ensuring that case managers coordinate services that meet consumers' needs (59%)
- Ensuring that consumers have a part in planning their care (59%)

This indicates that one can effectively improve consumers' recommendation of case managers.

Maintenance

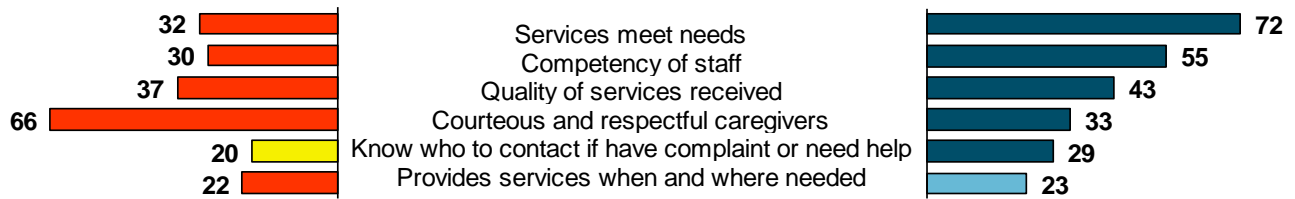
The three features with highest importance for maintaining the recommendation of case managers include:

- Having case managers that understand the services consumers need (68%)
- Ensuring the competency of case management staff (67%)
- Having case managers that help consumers when they ask for something (67%)

This indicates that one should focus on maintaining current levels of satisfaction with these attributes, because a decline would likely have a negative effect on the recommendation of case managers.

3. ATTENDANT SERVICES PROGRAM

3.1. SATISFACTION WITH ATTENDANT SERVICES PROGRAM



Potential

The three features with highest potential to improve the satisfaction with the Attendant Services Program include:

- Ensuring that consumers receive services that meet their needs (72%)
- Ensuring the competency of Attendant Service Program staff (55%)
- Ensuring the quality of services received (43%)

This indicates that one can effectively improve consumers' satisfaction with the Attendant Services Program.

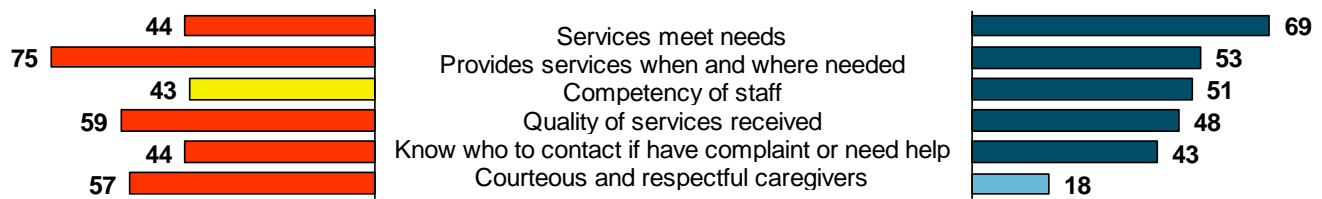
Maintenance

The three features with highest importance for maintaining the satisfaction of the Attendant Services Program include:

- Having courteous and respectful caregivers (66%)
- Ensuring the quality of services received (37%)
- Ensuring that services provided help meet consumers' needs (32%)

This indicates that one should focus on maintaining current levels of satisfaction with these attributes, because a decline would likely have a negative effect on the satisfaction with the Attendant Services Program.

3.2. RECOMMENDATION OF ATTENDANT SERVICES PROGRAM



Potential

The three features with highest potential to improve the recommendation of the Attendant Services Program include:

- Ensuring that consumers receive services that meet their needs (69%)
- Ensuring that services are provided when and where they are needed (53%)
- Ensuring the competence of Attendant Service Program staff (51%)

This indicates that one can effectively improve consumers' recommendation of the Attendant Services Program.

Maintenance

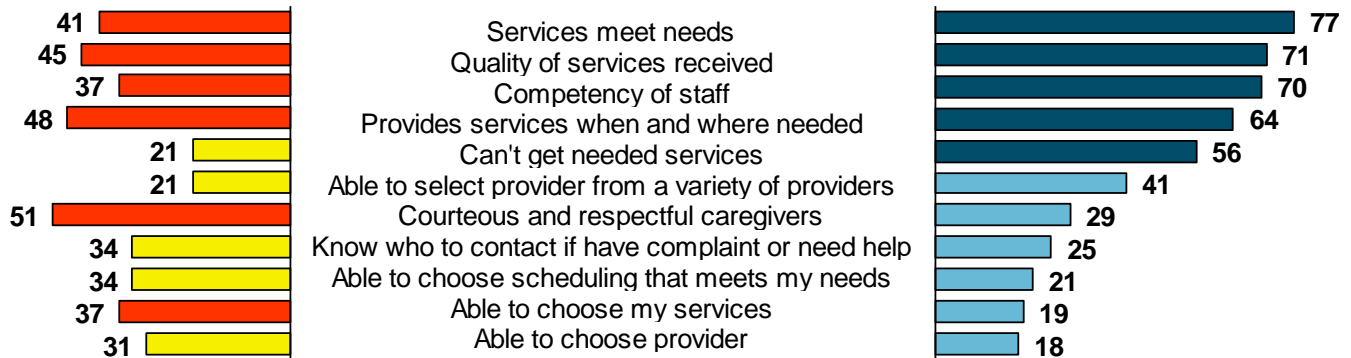
The three features with highest importance for maintaining the recommendation of the Attendant Services Program to others include:

- Ensuring that services are provided when and where they are needed (75%)
- Ensuring the quality of services received (59%)
- Having courteous and respectful caregivers (57%)

This indicates that one should focus on maintaining current levels of satisfaction with these attributes, because a decline would likely have a negative effect on the recommendation of the Attendant Services Program.

4. PERSONAL CARE SERVICES

4.1. SATISFACTION WITH PERSONAL CARE SERVICES



Potential

The three features with highest potential to improve the satisfaction with Personal Care Services include:

- Ensuring that consumers receive services that meet their needs (77%)
- Ensuring the quality of services received (71%)
- Ensuring the competency of Personal Care Services staff (70%)

This indicates that one can effectively improve consumers' satisfaction with Personal Care Services.

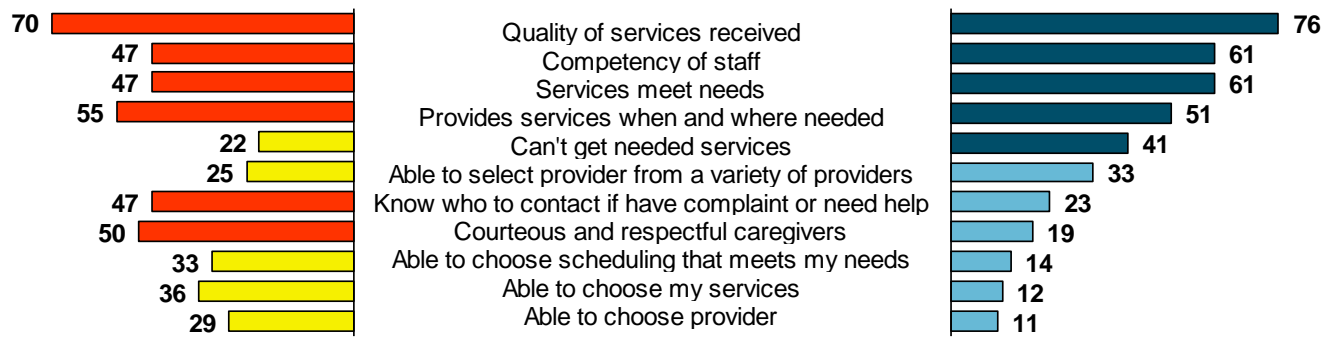
Maintenance

The three features with highest importance for maintaining the satisfaction of Personal Care Services include:

- Having courteous and respectful caregivers (51%)
- Ensuring that services are provided when and where they are needed (48%)
- Ensuring the quality of services received (45%)

This indicates that one should focus on maintaining current levels of satisfaction with these attributes, because a decline would likely have a negative effect on the satisfaction with Personal Care Services.

4.2. RECOMMENDATION OF PERSONAL CARE SERVICES



Potential

The three features with highest potential to improve the recommendation of Personal Care Services include:

- Ensuring the quality of services received (76%)
- Ensuring the competency of Personal Care Services staff (61%)
- Ensuring that consumers receive services that meet their needs (61%)

This indicates that one can effectively improve consumers' recommendation of Personal Care Services.

Maintenance

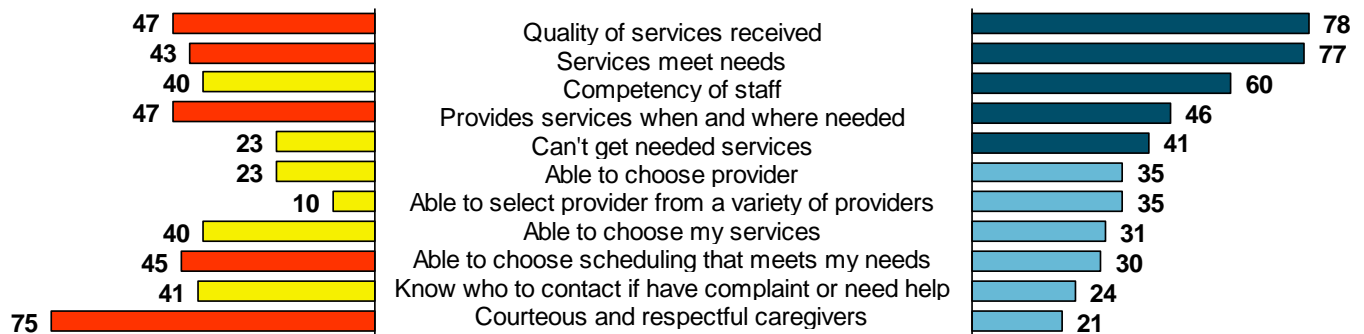
The three features with highest importance for maintaining the recommendation of Personal Care Services to others include:

- Ensuring the quality of services received (70%)
- Ensuring that services are provided when and where they are needed (55%)
- Having courteous and respectful caregivers (50%)

This indicates that one should focus on maintaining current levels of satisfaction with these attributes, because a decline would likely have a negative effect on the recommendation of Personal Care Services.

5. HOMEMAKER SERVICES

5.1. SATISFACTION WITH HOMEMAKER SERVICES



Potential

The three features with highest potential to improve the satisfaction with Homemaker Services include:

- Ensuring the quality of services received (78%)
- Ensuring that consumers receive services that meet their needs (77%)
- Ensuring the competency of Homemaker Services staff (60%)

This indicates that one can effectively improve consumers' satisfaction with Homemaker Services.

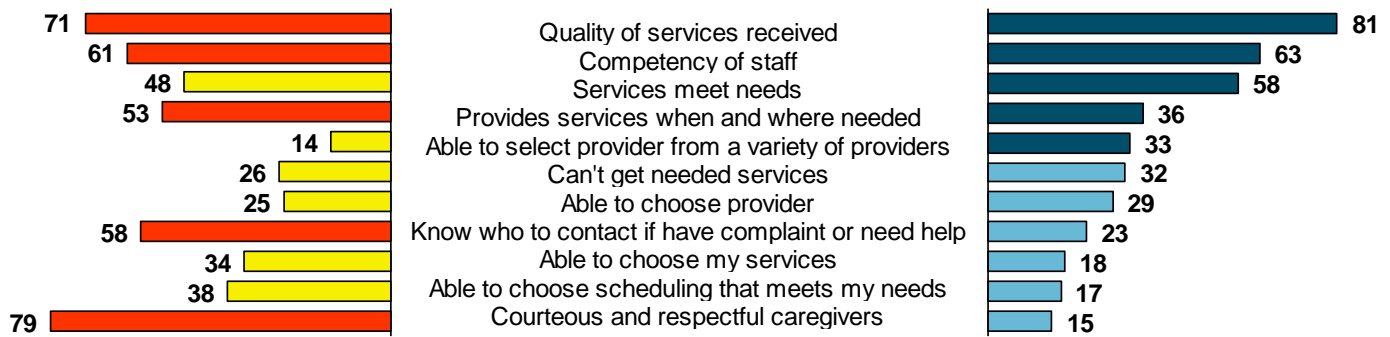
Maintenance

The three features with highest importance for maintaining the satisfaction of Homemaker Services include:

- Having courteous and respectful caregivers (75%)
- Ensuring the quality of services received (47%)
- Ensuring that services are provided when and where they are needed (47%)

This indicates that one should focus on maintaining current levels of satisfaction with these attributes, because a decline would likely have a negative effect on the satisfaction with Homemaker Services.

5.2. RECOMMENDATION OF HOME MAKER SERVICES



Potential

The three features with highest potential to improve the recommendation of Homemaker Services include:

- Ensuring the quality of services received (81%)
- Ensuring the competency of Personal Care Services staff (63%)
- Ensuring that consumers receive services that meet their needs (58%)

This indicates that one can effectively improve consumers' recommendation of Homemaker Services.

Maintenance

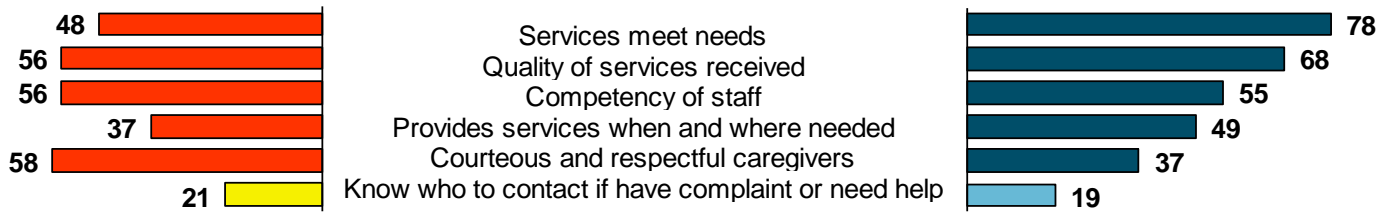
The three features with highest importance for maintaining the recommendation of Homemaker Services to others include:

- Having courteous and respectful caregivers (79%)
- Ensuring the quality of services received (71%)
- Ensuring the competency of Personal Care Services staff (61%)

This indicates that one should focus on maintaining current levels of satisfaction with these attributes, because a decline would likely have a negative effect on the recommendation of Homemaker Services.

6. ADULT DAY CENTERS

6.1. SATISFACTION WITH ADULT DAY CENTERS



Potential

The three features with highest potential to improve the satisfaction with the Attendant Services Program include:

- Ensuring that consumers receive services that meet their needs (78%)
- Ensuring the quality of services received (68%)
- Ensuring the competency of Adult Day Center staff (55%)

This indicates that one can effectively improve consumers' satisfaction with Adult Day Centers.

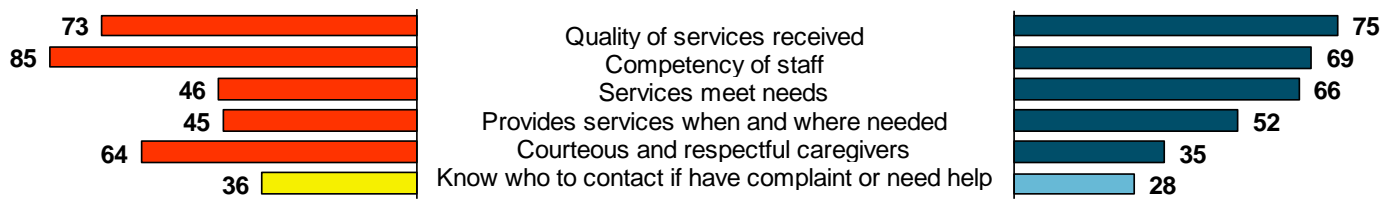
Maintenance

The three features with highest importance for maintaining the satisfaction of Adult Day Centers include:

- Having courteous and respectful caregivers (58%)
- Ensuring the quality of services received (56%)
- Ensuring the competency of Adult Day Center staff (56%)

This indicates that one should focus on maintaining current levels of satisfaction with these attributes, because a decline would likely have a negative effect on the satisfaction with Adult Day Centers.

6.2. RECOMMENDATION OF ADULT DAY CENTERS



Potential

The three features with highest potential to improve the recommendation of Adult Day Centers include:

- Ensuring the quality of services received (75%)
- Ensuring the competency of Adult Day Center staff (69%)
- Ensuring that consumers receive services that meet their needs (66%)

This indicates that one can effectively improve consumers' recommendation of Adult Day Centers.

Maintenance

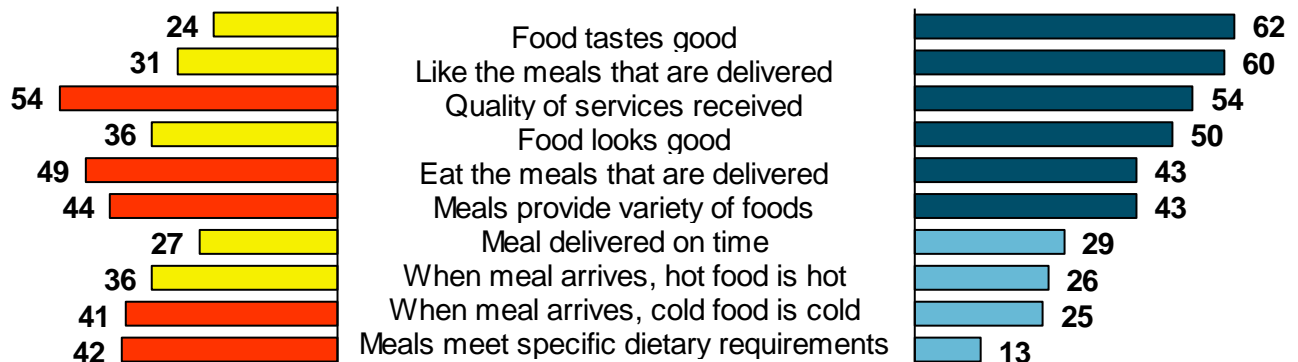
The three features with highest importance for maintaining the recommendation of Adult Day Centers to others include:

- Ensuring the competency of Adult Day Center staff (85%)
- Ensuring the quality of services received (73%)
- Having courteous and respectful caregivers (64%)

This indicates that one should focus on maintaining current levels of satisfaction with these attributes, because a decline would likely have a negative effect on the recommendation of Adult Day Centers.

7. HOME DELIVERED MEALS PROGRAM

7.1. SATISFACTION WITH HOME DELIVERED MEALS PROGRAM



Potential

The three features with highest potential to improve the satisfaction with the Home Delivered Meals Program include:

- Making sure the food tastes good (62%)
- Making sure consumers like the meals that are delivered (60%)
- Ensuring the quality of services received (54%)

This indicates that one can effectively improve consumers' satisfaction with the Home Delivered Meals Program.

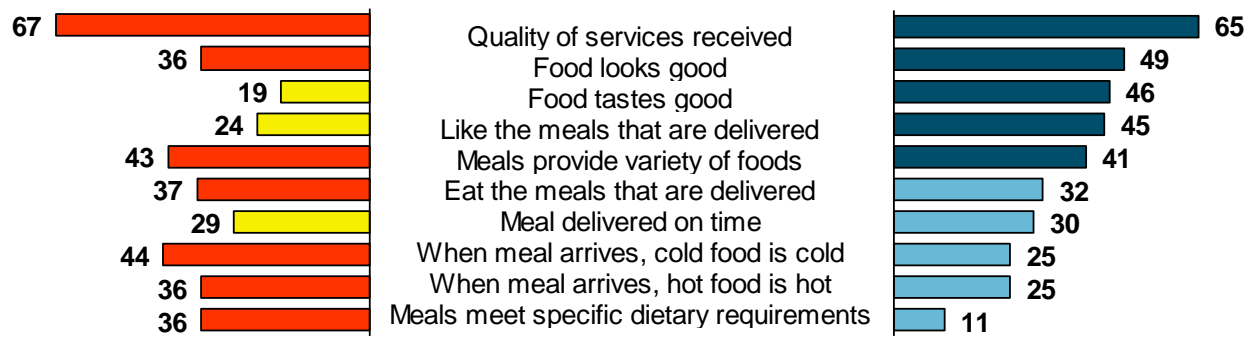
Maintenance

The three features with highest importance for maintaining the satisfaction of the Home Delivered Meals Program include:

- Ensuring the quality of services received (54%)
- Ensuring the meals that are delivered are eaten (49%)
- Ensuring that the meals provide a variety of foods (44%)

This indicates that one should focus on maintaining current levels of satisfaction with these attributes, because a decline would likely have a negative effect on the satisfaction with the Home Delivered Meals Program.

7.2. RECOMMENDATION OF HOME DELIVERED MEALS PROGRAM



Potential

The three features with highest potential to improve the recommendation of the Home Delivered Meals Program include:

- Ensuring the quality of services received (65%)
- Making sure the food looks good (49%)
- Making sure the food tastes good (46%)

This indicates that one can effectively improve consumers' recommendation of the Home Delivered Meals Program.

Maintenance

The three features with highest importance for maintaining the recommendation of the Home Delivered Meals Program to others include:

- Ensuring the quality of services received (67%)
- Ensuring that cold food is cold when delivered (44%)
- Ensuring that the meals provide a variety of foods (43%)

This indicates that one should focus on maintaining current levels of satisfaction with these attributes, because a decline would likely have a negative effect on the recommendation of the Home Delivered Meals Program.

H. Appendix 1: Survey Methodology

1. SURVEY

The 2013 survey included a total of 174 questions with the following sections:

- Information and Awareness of LTC Programs
- General Ratings of Services
- Improvement in Quality of Life
- Quality of Life Measures
- Health Status
- Case Management
- State Sponsored Programs
 - Attendant Services Program
 - Homemaker Services
 - Personal Care Services
 - Adult Day Centers
 - Traumatic Brain Injury Program
 - Home Delivered Meals Program
- Additional Comments
- Help Completing Survey

A total of 25 questions were added to the survey this year. Eight questions were added to obtain consumers' opinion on their recommendation of services/programs to others, and six questions were added to obtain consumer's opinion on the competency of staff for the various services/programs. In addition, five quality of life questions and six home-delivered meals program questions were added to the survey instrument. A copy of the survey is included in Appendix 2.

2. SURVEY POPULATION AND SAMPLE

The Vermont LTC survey population consists of all consumers using one or more of the following DAIL-funded services: Choices for Care home and community based services, Adult Day services, Homemaker services, the Attendant Services Program, and the Traumatic Brain Injury Program.

Thoroughbred worked with DAIL to develop a sampling plan that meets statistical confidence levels of 5% standard error with a 95% confidence interval for each program/service. We anticipated obtaining approximately 1,000 completes among the various programs/services. For the 2013 data collection, we created 17 sample strata. Sixteen of these strata included a census of all consumers, and one stratum included a random sample of consumers. We drew the random sample of this stratum (CFC Case Management, Homemaker Services) assuming a 35% response rate (due to past response rates). All out-of-state consumers were excluded from sampling. The table below shows the sample for the 2013 survey administration cycle.

Table 1: Sampling Plan for 2013 Survey

Sampling Strata	Total Consumers Within Strata	Sample Pull
CFC Case Management	31	31
CFC Case Management, Personal Care Services		
Consumer-Directed	229	229
Surrogate-Directed	288	288
Agency-Directed	425	425
Agency-Directed, Consumer-Directed	49	49
Agency-Directed, Surrogate-Directed	58	58
CFC Case Management, Personal Care Services, Adult Day Centers		
Consumer-Directed	15	15
Surrogate-Directed	97	97
Agency-Directed	139	139
Multiple Personal Care Services (Agency + 1 other)	27	27
CFC Case Management, Homemaker Services	964	786
CFC Case Management, Adult Day Centers	112	112
CFC Case Management, Homemaker Services, Adult Day Centers	53	53
Flexible Choices	107	107
Attendant Services Program	111	111
Traumatic Brain Injury Program	49	49
Other Multiple Services	10	10
Total	2,769	2,586

3. DATA COLLECTION

A mixed mode data collection methodology was used for the 2013 survey. First, all sampled beneficiaries were mailed a survey packet, consisting of a 16-page mail survey, a cover letter, and business reply envelope (BRE). Four weeks after mailing the survey packet, the telephone non-response phase began. Consumers who had not responded to the mail survey were contacted by telephone. A total of 6 attempts were made on the sample. Telephone data collection remained open a total of three weeks.

Table 2: 2013 Survey Fielding Timeline

Date	Milestone
September 23	Mail cover letter and survey
October 16	Telephone numbers updated with telephone appending software
October 16	Questionnaire programmed for CATI
October 21	Begin telephone interviewing
During fielding	Weekly disposition reports provided
November 11	Data collection closed

4. RESPONSE RATES

A total of 1,268 surveys were completed by consumers by mail (630) and telephone (638), for a total response rate of 58.54%. Response rates were calculated using the AAPOR Response Rate 1 formula. Table 3 summarizes the response rates and sampling errors by program.

Table 3. Response Rate and Sampling Errors by Survey Population

Program	Number of Consumers	Completed Surveys	Response Rate	Precision @ 95% Confidence
CFC Case Management	2,319	1,149	58.71%*	1.86%
Personal Care Services	1,336	653	58.62%*	2.47%
<i>Consumer-Directed</i>	<i>301</i>	<i>164</i>	<i>64.31%*</i>	<i>4.58%</i>
<i>Surrogate-Directed</i>	<i>466</i>	<i>212</i>	<i>54.50%*</i>	<i>4.55%</i>
<i>Agency-Directed</i>	<i>705</i>	<i>354</i>	<i>60.20%*</i>	<i>3.29%</i>
Flexible Choices	108	45	47.87%	10.60%
Adult Day Centers	446	209	56.18%*	4.49%
Homemaker Services	848	428	59.03%*	3.03%
Attendant Services Program	111	64	68.82%	6.88%
Traumatic Brain Injury Program	49	11	47.83%	21.82%
Total	2,586	1,268	58.54%*	1.77%

*Response rate meets 5% margin of error at 95% Confidence Interval threshold

5. SAMPLE CHARACTERISTICS

Table 4 provides the breakout of completes by country, age category, and gender. All reported percentages include design effect adjustments.

Table 4. Sample Characteristics

County	N	%
Addison	101	7.5%
Bennington	90	8.0%
Caledonia	116	7.6%
Chittenden	166	16.5%
Essex	21	1.8%
Franklin	63	5.5%
Grand Isle	15	0.9%
Lamoille	61	3.9%
Orange	66	4.7%
Orleans	110	7.5%
Rutland	204	15.5%
Washington	78	6.5%
Windham	72	5.9%
Windsor	105	8.2%
Age Category	N	%
< 50	132	11.5%
50 – 64	276	22.8%
65 – 74	304	23.1%
75 – 84	305	22.3%
85+	250	20.3%
Gender	N	%
Female	896	68.2%
Male	372	31.8%

6. DATA WEIGHTING

The data has been weighted to adjust for non-response and also to match the consumer profile based on long-term care program, county of residence, age, and gender. The weighting procedures involved three phases: Sample weighting adjustments, non-response weighting adjustments, and post stratification weighting adjustments.

An initial sample weight was assigned to each record in the sample file. This base weight was equal to the inverse of the probability of selecting a consumer within each of the sampling strata. For most of the sampling strata this sample weight was equal to 1.00 because a census was pulled. Non-response weighting adjustments were then made based on response rates within each of the sampling strata. This adjustment produced the overall design weight for each record in the consumer survey data set.

6.1. POST STRATIFICATION WEIGHTING

Among consumers, post stratification weighting is designed to standardize the weights so they sum to the actual number of consumers based on the program or programs through which they receive services as well as demographic characteristics (county of residence, age, gender).

Demographic data on population counts was developed from the lists of consumers provided by DAIL. The lists were compiled and duplicate records eliminated so that the population reflected is based on the number of consumers in long term care programs². Table 3 summarizes the demographic variables and categories along with the program through which the consumer was receiving services:

The initial post stratification weighting applied to the data set was determined by the program through which the consumer was receiving services. This initial post stratification weight adjusted the survey data to match the population counts by program enrollment. An adjustment factor was calculated within each program strata cell:

$$\text{Adj(AS)} = \text{AS}(\text{program enrollment} - \text{actual}) / \text{AS}(\text{program enrollment} - \text{survey})$$

Where:

- Adj(AS) was the program enrollment weighting adjustment
- AS (program enrollment – actual) was the actual number enrolled in the program (or receiving services through more than one program)
- AS (program enrollment – survey) was the weighted survey counts within the specific sampling strata.

² In many cases a consumer was receiving services through more than one program. To avoid double-counting these respondents during weighting, the consumer lists were compiled so that each consumer had only one record prior to developing population counts based on their characteristics. This compiled list of consumers was partitioned into groups that were equivalent to the sampling strata used during data collection to allow for post-stratification adjustments to account for those receiving services through more than one program.

Table 5. Variables Used in Weighting Consumer Survey Data

Sampling Strata (Program)	
	CFC Case Management
	CFC Case Management, Personal Care Services
	Consumer-Directed
	Surrogate-Directed
	Agency-Directed
	Agency-Directed, Consumer-Directed
	Agency-Directed, Surrogate-Directed
	CFC Case Management, Personal Care Services, Adult Day Centers
	Consumer-Directed
	Surrogate-Directed
	Agency-Directed
	Multiple Personal Care Services (Agency + 1 other)
	CFC Case Management, Homemaker Services
	CFC Case Management, Adult Day Centers
	CFC Case Management, Homemaker Services, Adult Day Centers
	Flexible Choices
	Attendant Services Program
	Traumatic Brain Injury Program
	Other Multiple Services

County	
	Addison
	Bennington
	Caledonia
	Chittenden
	Essex
	Franklin
	Lamoille
	Grand Isle
	Orange
	Orleans
	Rutland
	Washington
	Windham
	Windsor

Age	< 50
	50 - 64
	65 - 74
	75 - 84
	85+

Gender	Female
	Male

Adjustments were made to this initial weight to adjust for the actual number of consumers by age and gender and then adjusted by county of residence (two separate weighting adjustments). Since the application of any weighting adjustment to the initial weight may cause the program survey counts to vary, a process called raking was utilized. That is, once the age/gender and county weighting adjustments were applied, the survey counts of consumers by program did not match the actual count of consumers. The raking process alternates making weighting adjustments by variables for which there are only marginal counts. Thus, the initial weight was adjusted by age/gender and in a separate adjustment by county of residence. Then, this new weight was adjusted by program strata so it again matched the profile of consumers by program. This weight was then adjusted to match the age/gender and then the counts by county of residence. The post stratification weighting process was repeated until the weighting adjustments converged and the weighted counts matched the profile by program or programs through which the consumer receives services, age, gender, and county of residence.

6.2. POPULATION SIZE REFLECTED IN THE FINAL DATA SET

The weighted data set is designed to provide data that can be generalized to all consumers receiving services through the Department and to allow statements to be made about all consumers as well as for various sub-populations with a known standard error and confidence. The population size reflected in the final data set is the approximate number of consumers receiving services through the Department, or 2,764 consumers.

I. Appendix 2: Survey Instrument

Vermont Department of Disabilities, Aging, and Independent Living Long-Term Care Services and Programs Customer Survey

You can be assured that your responses to this survey will be confidential. Your responses will never be shared with your caregivers or local agencies. Your responses will have no effect on your eligibility for services or the services that you receive. You may notice a number on the cover of this survey. This number is ONLY used to let us know if you returned the survey so we don't have to send you reminders. For specific information about this study, please call Thoroughbred Research Group at our Toll Free Number, 1-866-714-9948.

Information and Awareness of LTC Programs

1. How did you first learn about the long-term care services you receive?
Mark one or more.
 - Vermont 211
 - Area Agency on Aging
 - Home Health Agency
 - Vermont Center for Independent Living
 - Brain Injury Association
 - Designated Agency
 - Green Mountain Self Advocates
 - Vermont Family Network
 - Doctor or nurse, at office of Health Care Provider
 - Hospital
 - Person – Friend/Family/Word of Mouth/Other Children
 - Health Fair/Community Event
 - Community Groups/Advocacy Groups/Church
 - Department for Children and Families
 - Department of Disabilities, Aging and Independent Living
 - Division for the Blind and Visually Impaired
 - Division of Vocational Rehabilitation
 - Agency of Human Services
 - TV/Radio/Newspaper Advertisement
 - Website for Department of Disabilities, Aging and Independent Living
 - Website - Other
→ Please Specify: _____
 - Other → Please Specify: _____
 2. Did someone talk with you about ways of getting the help you needed with daily activities?
 - Yes, Please Specify: _____
 - No
 3. How satisfied were you with the information you were given?
 - Very Satisfied → Go to Question 4
 - Somewhat Satisfied → Go to Question 4
 - Neither Satisfied nor Dissatisfied
→ Go to Question 4
 - Somewhat Dissatisfied
 - Very Dissatisfied
 - 3a. Why are you dissatisfied with the information you were given?

- Please let me know how familiar you are with the following:
- 4a. The Long-Term Care Ombudsman program, which protects the health, welfare and rights of people who live in long-term care facilities in Vermont.
 - Very Familiar
 - Somewhat Familiar
 - Not Very Familiar
 - Not at all Familiar
 - 4b. The Adult Protective Services program, which protects adults from abuse, neglect and exploitation?
 - Very Familiar
 - Somewhat Familiar
 - Not Very Familiar
 - Not at all Familiar

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1

General Ratings of Services Provided by DAIL

For these next few questions, please think about ALL of the services you receive and ALL programs in which you participated in the past 12 months. For example, if you participated in more than one program, try to think about your experiences with all of the programs as a group.

Please give each statement a letter grade using a letter grade scale where A means Excellent, B means Good, C means Fair, and D means Poor.

- 5a. The amount of choice and control you had when you planned the services or care you would receive.
- A means Excellent
 - B means Good
 - C means Fair
 - D means Poor
- 5b. The overall quality of the help you receive.
- A means Excellent
 - B means Good
 - C means Fair
 - D means Poor
- 5c. The timeliness of your services. For example, did your services start when you needed them?
- A means Excellent
 - B means Good
 - C means Fair
 - D means Poor
- 5d. When you receive your services or care. For example, do they fit with your schedule?
- A means Excellent
 - B means Good
 - C means Fair
 - D means Poor
- 5e. The communication between you and the people who help you.
- A means Excellent
 - B means Good
 - C means Fair
 - D means Poor
- 5f. The reliability of the people who help you. For example, do they show up when they are supposed to be there?
- A means Excellent
 - B means Good
 - C means Fair
 - D means Poor
- 5g. The degree to which the services meet your daily needs such as bathing, dressing, meals, and housekeeping.
- A means Excellent
 - B means Good
 - C means Fair
 - D means Poor
- 5h. How well problems or concerns you have with your care are taken care of.
- A means Excellent
 - B means Good
 - C means Fair
 - D means Poor
- 5i. The courtesy of those who help you.
- A means Excellent
 - B means Good
 - C means Fair
 - D means Poor
- 5j. How well people listen to your needs and preferences.
- A means Excellent
 - B means Good
 - C means Fair
 - D means Poor
6. Overall, how do you rate the value of the services you receive? Would you rate the value as...?
- Excellent
 - Good
 - Fair
 - Poor

7. What is your recommendation of Choices of Care to others?

- Excellent
- Good
- Fair
- Poor

Next, please tell me how strongly you agree or disagree with the following statements.

8a. I receive all the services I need and want exactly when and how I need and want the services.

- Strongly Agree
- Agree
- Neither Agree nor Disagree
- Disagree
- Strongly Disagree

8b. My services help me to achieve my personal goals.

- Strongly Agree
- Agree
- Neither Agree nor Disagree
- Disagree
- Strongly Disagree

8c. My current residence is the setting in which I choose to receive services.

- Strongly Agree
- Agree
- Neither Agree nor Disagree
- Disagree
- Strongly Disagree

8d. I receive services exactly where I need and want services.

- Strongly Agree
- Agree
- Neither Agree nor Disagree
- Disagree
- Strongly Disagree

9. Is there anything that could improve the services offered to you and others?

- Yes → Please specify what could be improved:

- No

10. If you had complete choice, control and flexibility, would your service plan look different?

- Yes → Please specify how your service plan would look different:

- No

Improvement In Quality of Life

11. Has the help you received made your life...?

- Much Better
- Somewhat Better
- About the Same
- Somewhat Worse
- Much Worse

12. How easy would it be for you to stay in your home if you didn't receive services?

- Very Easy
- Easy
- About the Same
- Difficult
- Very Difficult

13. Please tell me how strongly you agree or disagree with the following statement. My services help me to maintain or improve my health.

- Strongly Agree
- Agree
- Neither Agree nor Disagree
- Disagree
- Strongly Disagree

Quality of Life Measures

14. The next questions refer to how you feel about your life now. Please indicate how well the statements describe your life.

	Yes	Somewhat	No
a. I feel safe in the home where I live.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. I feel safe out in my community.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. I can get to where I need or want to go.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. I can get around inside my home as much as I need to.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. I am satisfied with how I spend my free time.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. I am satisfied with the amount of contact I have with my family and friends.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. I have someone I can count on in an emergency.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h. I feel satisfied with my social life.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i. I feel valued and respected.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
j. I really feel a part of my community.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
k. I have someone I can count on to listen to me when I need to talk.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
l. I have someone to do something enjoyable with.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
m. In my leisure time, I usually don't like what I am doing, but I don't know what else to do.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
n. During my leisure time, I almost always have something to do.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

15. Please think about all the help you received during the last week around the house like cooking and cleaning. Do you need more help with things around the house than you are receiving?

- Yes
- No

16. During the last week, did any family member or friends help you with things around the house?

- Yes
- No

17. Are there people who are not paid who help you to stay at home and to get around in the community?

- Yes
- No → Go to Question 18

17a. How often do you see that person during a week?

- Less than one time a week
- One time a week
- More than one time a week

18. During the past week, how often would you say you felt sad or blue?

- Always
- Usually
- Sometimes
- Rarely
- Never

The next two questions are about emotional support and your satisfaction with life.

19. How often do you get the social and emotional support you need? (Please include support from any source).

- Always
- Usually
- Sometimes
- Rarely
- Never

20. In general, how satisfied are you with your life?

- Very Satisfied
- Satisfied
- Neither Satisfied nor Dissatisfied
- Dissatisfied
- Very Dissatisfied

Health Status

21. In general, compared to other people your age, would you say your health is...?
- Excellent
 - Very Good
 - Good
 - Fair
 - Poor
22. Compared to one year ago, how would you rate your health in general now?
- Much Better Now than One Year Ago
 - Somewhat Better Now than One Year Ago
 - About the Same
 - Somewhat Worse Now than One Year Ago
 - Much Worse Now than One Year Ago
23. Based on his or her knowledge of my health needs, my case manager helps me understand the different service options that would be good for me.
- Always
 - Usually
 - Sometimes
 - Rarely
 - Never
 - Not applicable/No Case Manager

Case Management

24. These next few questions are about your case management. First, who is your case manager?
- _____
- I do not have a case manager
→ Go to State-Sponsored Programs, page 6
25. How satisfied are you with your case manager?
- Very Satisfied → Go to Question 26
 - Somewhat Satisfied → Go to Question 26
 - Neither Satisfied nor Dissatisfied
→ Go to Question 26
 - Dissatisfied
 - Very Dissatisfied

- 25a. Why are you dissatisfied with your case manager?
- _____
- _____

26. What is your recommendation of your case manager to others?
- Excellent
 - Good
 - Fair
 - Poor

Please rate each statement about your experiences with your case manager.

- 27a. I feel I have a part in planning my care with my case manager.
- Always
 - Usually
 - Sometimes
 - Rarely
 - Never
- 27b. My case manager coordinates my services to meet my needs
- Always
 - Usually
 - Sometimes
 - Rarely
 - Never
- 27c. My case manager understands which services I need to stay in my current living situation.
- Always
 - Usually
 - Sometimes
 - Rarely
 - Never
- 27d. I can talk to my case manager when I need to.
- Always
 - Usually
 - Sometimes
 - Rarely
 - Never

27e. My case manager helps me when I ask for something.

- Always
- Usually
- Sometimes
- Rarely
- Never

27f. My case manager asks me what I want.

- Always
- Usually
- Sometimes
- Rarely
- Never

27g. My case manager helps me understand the different service options that are available.

- Always
- Usually
- Sometimes
- Rarely
- Never

28. Please rate case management services on the competency of staff.

- Excellent
- Good
- Fair
- Poor

STATE SPONSORED PROGRAMS

For the next few questions, please think SPECIFICALLY about the services you receive from each one of the state-sponsored programs in which you participate.

Attendant Services Program

The following series of questions are about your experiences with the Attendant Services Program. The Attendant Services Program provides assistance with personal care for adults with disabilities. Participants hire, train, and supervise their attendants.

29. Are you currently receiving or have you received services through the Attendant Services Program in the past?

- Yes
- No → Go to Homemaker Services, page 7

30. How satisfied are you with the services you receive from the Attendant Services Program?

- Very Satisfied → Go to Question 31
- Somewhat Satisfied → Go to Question 31
- Neither Satisfied nor Dissatisfied → Go to Question 31
- Dissatisfied
- Very Dissatisfied

30a. Why are you dissatisfied with the services you receive from the Attendant Services Program?

31. How do you rate the quality of the services you receive from the Attendant Services Program?

- Excellent
- Good
- Fair
- Poor

32. What is your recommendation of the services you receive from the Attendant Services Program to others?

- Excellent
- Good
- Fair
- Poor

Please rate each statement about using the Attendant Services Program.

33a. The services I receive from the Attendant Services Program meet my needs.

- Always
- Usually
- Sometimes
- Rarely
- Never

33b. My caregivers in the Attendant Services Program treat me with respect and courtesy.

- Always
- Usually
- Sometimes
- Rarely
- Never

33c. I know who to contact if I have a complaint about the Attendant Services Program or if I need more help.

- Always
- Usually
- Sometimes
- Rarely
- Never

33d. The Attendant Services Program provides services to me when and where I need them.

- Always
- Usually
- Sometimes
- Rarely
- Never

34. Please rate the Attendance Services Program on the competency of staff.

- Excellent
- Good
- Fair
- Poor

35. Have you experienced any problems with the Attendant Services Program during the past 12 months?

- Yes
- No → Go to Question 36

35a. What problems did you experience?

35b. Did the Attendant Services Program work to resolve these problems?

- Yes
- No

36. Is there anything that could improve services offered to you and others by the Attendant Services Program?

- Yes → Please specify what could be improved:

- No

Homemaker Services

The following series of questions are about your experiences with Homemaker Services. Homemaker services provide help at home with activities such as cleaning, laundry, shopping, respite care, and limited personal care.

37. Are you currently receiving or have you received services through Homemaker Services in the past?

- Yes
- No → Go to Personal Care Services, page 9

38. How satisfied are you with Homemaker Services?

- Very Satisfied → Go to Question 39
- Somewhat Satisfied → Go to Question 39
- Neither Satisfied nor Dissatisfied → Go to Question 39
- Dissatisfied
- Very Dissatisfied

38a. Why are you dissatisfied with Homemaker Services?

39. How do you rate the quality of Homemaker Services?

- Excellent
- Good
- Fair
- Poor

40. What is your recommendation of Homemaker Services to others?

- Excellent
- Good
- Fair
- Poor

Please rate each statement about Homemaker Services.

41a. The Homemaker Services I receive meet my needs.

- Always
- Usually
- Sometimes
- Rarely
- Never

41b. My caregivers providing Homemaker Services treat me with respect and courtesy.

- Always
- Usually
- Sometimes
- Rarely
- Never

41c. I know who to contact if I have a complaint about Homemaker Services or if I need more help.

- Always
- Usually
- Sometimes
- Rarely
- Never

41d. The Homemaker Services are provided to me when and where I need them.

- Always
- Usually
- Sometimes
- Rarely
- Never

Please tell me how strongly you agree or disagree with the following statements.

42a. I was able to choose my Homemaker Services.

- Strongly Agree
- Agree
- Neither Agree nor Disagree
- Disagree
- Strongly Disagree

42b. I was able to choose the provider of my Homemaker Services.

- Strongly Agree
- Agree
- Neither Agree nor Disagree
- Disagree
- Strongly Disagree

42c. I was able to choose the scheduling of Homemaker Services that meets my needs.

- Strongly Agree
- Agree
- Neither Agree nor Disagree
- Disagree
- Strongly Disagree

42d. I was able to select my Homemaker Services provider from a variety of providers.

- Strongly Agree
- Agree
- Neither Agree nor Disagree
- Disagree
- Strongly Disagree

42e. Having more providers who offer Homemaker Services would allow me to better meet my needs.

- Strongly Agree
- Agree
- Neither Agree nor Disagree
- Disagree
- Strongly Disagree

42f. There are Homemaker Services that I need that I CAN'T GET.

- Strongly Agree
- Agree
- Neither Agree nor Disagree
→ Go to Question 43
- Disagree → Go to Question 43
- Strongly Disagree → Go to Question 43

42f1. What are these Homemaker Services you cannot get?

43. Please rate the Homemaker Services on the competency of staff.

- Excellent
- Good
- Fair
- Poor

44. Have you experienced any problems with Homemaker Services during the past 12 months?

- Yes
- No → Go to Question 45

44a. What problems did you experience?

44b. Did Homemaker Services work to resolve these problems?

- Yes
- No

45. Is there anything that could improve the Homemaker Services offered to you and others?

- Yes → Please specify what could be improved:

- No

46. Vermont is looking at possibly adding new providers of Homemaker Services. Based on your experience, how helpful would adding new providers of Homemaker Services be to you?

- 1 Not at all Helpful
- 2
- 3
- 4
- 5 Very Helpful

How strongly do you agree or disagree with the following statements?

47a. Adding new providers of Homemaker Services would improve my ability to have services where and when I need them.

- Strongly Agree
- Agree
- Neither Agree nor Disagree
- Disagree
- Strongly Disagree

47b. Adding new providers of Homemaker Services would improve the cost effectiveness of my services.

- Strongly Agree
- Agree
- Neither Agree nor Disagree
- Disagree
- Strongly Disagree

47c. Adding new providers of Homemaker Services would improve the quality of my services.

- Strongly Agree
- Agree
- Neither Agree nor Disagree
- Disagree
- Strongly Disagree

47d. Do you have any other comments about adding new providers?

- Yes → Please specify:

- No

Personal Care Services

The following series of questions are about your experiences with Choices for Care Personal Care Services. These services provide assistance with personal care for seniors and adults with disabilities.

48. Are you currently receiving or have you received Personal Care Services in the past?

- Yes
- No → Go to Adult Day Centers, page 12

49. How satisfied are you with the Personal Care Services you receive?

- Very Satisfied → Go to Question 50
- Somewhat Satisfied → Go to Question 50
- Neither Satisfied nor Dissatisfied → Go to Question 50
- Dissatisfied
- Very Dissatisfied

49a. Why are you dissatisfied with the Personal Care services you receive?

50. How do you rate the quality of the Personal Care Services you receive?

- Excellent
- Good
- Fair
- Poor

51. What is your recommendation of Personal Care services to others?

- Excellent
- Good
- Fair
- Poor

Please rate each statement about the Personal Care Services you receive.

52a. The Personal Care Services I receive meet my needs.

- Always
- Usually
- Sometimes
- Rarely
- Never

52b. My personal caregiver treats me with respect and courtesy.

- Always
- Usually
- Sometimes
- Rarely
- Never

52c. I know who to contact if I have a complaint about Personal Care Services or if I need more help.

- Always
- Usually
- Sometimes
- Rarely
- Never

52d. Personal Care Services are provided to me when and where I need them.

- Always
- Usually
- Sometimes
- Rarely
- Never

Please tell me how strongly you agree or disagree with the following statements.

53a. I was able to choose my Personal Care Services.

- Strongly Agree
- Agree
- Neither Agree nor Disagree
- Disagree
- Strongly Disagree

53b. I was able to choose the provider of my Personal Care Services.

- Strongly Agree
- Agree
- Neither Agree nor Disagree
- Disagree
- Strongly Disagree

53c. I was able to choose the scheduling of Personal Care Services that meets my needs.

- Strongly Agree
- Agree
- Neither Agree nor Disagree
- Disagree
- Strongly Disagree

53d. I was able to select my Personal Care Services provider from a variety of providers.

- Strongly Agree
- Agree
- Neither Agree nor Disagree
- Disagree
- Strongly Disagree

53e. Having more providers who offer Personal Care Services would allow me to better meet my needs.

- Strongly Agree
- Agree
- Neither Agree nor Disagree
- Disagree
- Strongly Disagree

53f. There are Personal Care Services that I need that I CAN'T GET.

- Strongly Agree
- Agree
- Neither Agree nor Disagree
→ Go to Question 54
- Disagree → Go to Question 54
- Strongly Disagree → Go to Question 54

53f1. What are these Personal Care Services you cannot get?

54. Please rate the Personal Care Services on the competency of staff.

- Excellent
- Good
- Fair
- Poor

55. Have you experienced any problems with Personal Care Services during the past 12 months?

- Yes
- No → Go to Question 56

55a. What problems did you experience?

55b. Did Personal Care Services work to resolve these problems?

- Yes
- No

56. Is there anything that could improve the Personal Care Services offered to you and others?

- Yes → Please specify what could be improved:

- No

57. Vermont is looking at possibly adding new providers of Personal Care Services. Based on your experience, how helpful would adding new providers of Personal Care Services be to you?

- 1 Not at all Helpful
- 2
- 3
- 4
- 5 Very Helpful

How strongly do you agree or disagree with the following statements?

58a. Adding new providers of Personal Care Services would improve my ability to have services where and when I need them.

- Strongly Agree
- Agree
- Neither Agree nor Disagree
- Disagree
- Strongly Disagree

58b. Adding new providers of Personal Care Services would improve the cost effectiveness of my services.

- Strongly Agree
- Agree
- Neither Agree nor Disagree
- Disagree
- Strongly Disagree

- 58c. Adding new providers Personal Care Services would improve the quality of my services.
- Strongly Agree
 - Agree
 - Neither Agree nor Disagree
 - Disagree
 - Strongly Disagree

59. Do you have any other comments about adding new providers?
- Yes → Please specify:

 - No _____

Adult Day Centers

The following series of questions are about your experiences with Adult Day Centers. Adult Day Centers provide social interaction, meals, personal care, and health services.

60. Are you currently attending or have you attended an Adult Day Center in the past?
- Yes
 - No → Go to Traumatic Brain Injury Program, page 13
61. How satisfied are you with the Adult Day Center you attend?
- Very Satisfied → Go to Question 62
 - Somewhat Satisfied → Go to Question 62
 - Neither Satisfied nor Dissatisfied → Go to Question 62
 - Dissatisfied
 - Very Dissatisfied
- 61a. Why are you dissatisfied with the Adult Day Center you attend?
- _____
- _____
62. How do you rate the quality of the services provided by the Adult Day Center you attend?
- Excellent
 - Good
 - Fair
 - Poor

63. What is your recommendation of the Adult Day Center you attend to others?
- Excellent
 - Good
 - Fair
 - Poor

Please rate each statement about the Adult Day Center you attend.

- 64a. The services I receive from the Adult Day Center meet my needs.
- Always
 - Usually
 - Sometimes
 - Rarely
 - Never
- 64b. My caregivers at the Adult Day Center treat me with respect and courtesy.
- Always
 - Usually
 - Sometimes
 - Rarely
 - Never
- 64c. I know who to contact if I have a complaint about the Adult Day Center or if I need more help.
- Always
 - Usually
 - Sometimes
 - Rarely
 - Never
- 64d. The Adult Day Center provides services to me when and where I need them.
- Always
 - Usually
 - Sometimes
 - Rarely
 - Never

65. Please rate the Adult Day Center you attend on the competency of staff.
- Excellent
 - Good
 - Fair
 - Poor
66. During the past 12 months, have you experienced any problems with the Adult Day Center you attend?
- Yes
 - No → Go to Question 67
- 66a. What problems did you experience?
- _____
- _____
- 66b. Did the Adult Day Center work to resolve these problems?
- Yes
 - No
67. Is there anything that could improve services offered to you and others by the Adult Day Center?
- Yes → Please specify what could be improved:

 - No

69. How satisfied are you with the services you receive from the Traumatic Brain Injury Program?
- Very Satisfied → Go to Question 70
 - Somewhat Satisfied → Go to Question 70
 - Neither Satisfied nor Dissatisfied → Go to Question 70
 - Dissatisfied
 - Very Dissatisfied
- 69a. Why are you dissatisfied with the services you receive from the Traumatic Brain Injury Program?
- _____
- _____
70. How do you rate the quality of the services you receive from the Traumatic Brain Injury Program?
- Excellent
 - Good
 - Fair
 - Poor
71. What is your recommendation of the Traumatic Brain Injury Program to others?
- Excellent
 - Good
 - Fair
 - Poor

Traumatic Brain Injury Program

The following series of questions are about your experiences with the Traumatic Brain Injury Program. The Traumatic Brain Injury Program helps Vermonters, with moderate to severe traumatic brain injuries, move from hospitals and facilities to community-based settings. This is a rehabilitation-based, choice-driven program, intended to support individuals to achieve their optimum independence and help them return to work.

68. Are you currently receiving or have you received services through the Traumatic Brain Injury Program?
- Yes
 - No → Go to Home Delivered Meals Program, page 14

Please rate each statement about using the Traumatic Brain Injury Program.

- 72a. The services I receive from the Traumatic Brain Injury Program meet my needs.
- Always
 - Usually
 - Sometimes
 - Rarely
 - Never
- 72b. My caregivers in the Traumatic Brain Injury Program treat me with respect and courtesy.
- Always
 - Usually
 - Sometimes
 - Rarely
 - Never

72c. I know who to contact if I have a complaint about the Traumatic Brain Injury Program or if I need more help.

- Always
- Usually
- Sometimes
- Rarely
- Never

72d. The Traumatic Brain Injury Program provides services to me when and where I need them.

- Always
- Usually
- Sometimes
- Rarely
- Never

73. Please rate the Traumatic Brain Injury Program on the competency of staff.

- Excellent
- Good
- Fair
- Poor

74. Have you experienced any problems with the Traumatic Brain Injury Program during the past 12 months?

- Yes
- No → Go to Question 75

74a. What problems did you experience?

74b. Did the Traumatic Brain Injury Program work to resolve these problems?

- Yes
- No

75. Is there anything that could improve services offered to you and others by the Traumatic Brain Injury Program?

- Yes → Please specify what could be improved:

- No

Home Delivered Meals Program

The following series of questions are about your experience with the Home Delivered Meals Program, or Meals on Wheels. The Home Delivered Meals Program provides nourishing meals to seniors in their homes who are unable to attend a community meal site.

76. Do you currently receive meals through the Home Delivered Meals Program?

- Yes
- No → Go to Question 88

77. How satisfied are you with the Home Delivered Meals Program?

- Very Satisfied → Go to Question 78
- Somewhat Satisfied → Go to Question 78
- Neither Satisfied nor Dissatisfied → Go to Question 78
- Dissatisfied
- Very Dissatisfied

77a. Why are you dissatisfied with the Home Delivered Meals Program?

78. How do you rate the quality of the services provided by the Home Delivered Meals Program?

- Excellent
- Good
- Fair
- Poor

79. What is your recommendation of the Home Delivered Meals Program to others?

- Excellent
- Good
- Fair
- Poor

Please rate each statement about the Home Delivered Meals Program.

80a. The food tastes good.

- Always
- Usually
- Sometimes
- Rarely
- Never

80b. The food looks good.

- Always
- Usually
- Sometimes
- Rarely
- Never

80c. The meals provide a variety of foods.

- Always
- Usually
- Sometimes
- Rarely
- Never

80d. When the meal arrives, the hot food is hot.

- Always
- Usually
- Sometimes
- Rarely
- Never

80e. When the meal arrives, the cold food is cold.

- Always
- Usually
- Sometimes
- Rarely
- Never

80f. The meal is delivered on time.

- Always
- Usually
- Sometimes
- Rarely
- Never

80g. I eat the meals that are delivered.

- Always
- Usually
- Sometimes
- Rarely
- Never

80h. I like the meals that are delivered.

- Always
- Usually
- Sometimes
- Rarely
- Never

81. Have you experienced any problems with the Home Delivered Meals Program during the past 12 months?

- Yes
- No → Go to Question 82

81a. What problems did you experience?

81b. Did the Home Delivered Meals Program work to resolve these problems?

- Yes
- No

82. Is there anything that could improve services offered to you and others by the Home Delivered Meals Program?

- Yes → Please specify what could be improved:

- No

83. Think about the amount of food you eat from home-delivered meals. On the days you eat a meal from home-delivered meals, what proportion of all the food you eat in a day does this meal represent?

- Less than one-third
- Between one-third and one-half
- About one-half
- More than one-half

Do services from the home-delivered meals program help you to...

84a. Eat healthier foods

- Yes
- No

84b. Achieve or maintain a healthy weight

- Yes
- No

84c. Improve your health

- Yes
- No

84d. Feel better

- Yes
- No

84e. Continue to live at home

- Yes
- No

85. Special dietary requirements are recommendations made by a health care provider (such as low sodium, low fat, high protein, or low sugar). How often do the meals offered through the Home Delivered Meals Program meet your specific dietary requirements?

- Always
- Usually
- Sometimes
- Rarely
- Never

86. To what degree do you feel that the home delivered meals have helped you financially?

- A lot
- Somewhat
- A little
- Not at all

Additional Comments

87. Do you have any comments you would like to make about the help you receive?

- Yes → Please specify: _____

- No

Help Completing Survey

88. Did someone help you complete this survey?

- Yes
- No → Thank you, please return the completed survey in the postage-paid envelope

88a. How did that person help you?

Mark one or more.

- Read the questions to me
- Wrote down the answers I gave
- Answered the questions for me
- Translated the questions into my language
- Helped in some other way

88b. Is the person who helped you a paid caregiver for you?

- Yes
- No

88c. What is the relationship of the person who helped with the questionnaire to the person receiving services?

- Spouse
- Immediate family (parent, child, or sibling)
- Extended family (such as cousin, aunt, uncle, grandchild)
- Unrelated/Other