

**COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH
PROGRAM SUPPORT BUREAU - QUALITY IMPROVEMENT DIVISION**

**SUMMARY REPORT OF TEST CALLS STUDY: MONITORING ACCESSIBILITY
TO THE 24/7 TOLL FREE ACCESS LINE
February 20, 2014**

GOAL

The goal of the Test Calls Study is to identify potential areas for quality improvement and strengths in the responsiveness of the LAC-DMH ACCESS Center 24-hour, 7 day a week Toll Free number to Medi-Cal beneficiaries/callers.

This report summarizes findings from the Quality Improvement Division (QID) Test Calls Study conducted during the period of June 2013 to September 2013, compares these findings with the findings of the Test Calls studies completed during the previous five years, and offers recommendations.

OVERVIEW

Often the ACCESS Center 24/7 Line may be a Medi-Cal beneficiary caller's first point of contact with the County of Los Angeles, Department of Mental Health. The ACCESS Center operates the 24 hour, 7 Day Statewide, Toll Free number, 1-800-854-7771, for both emergency and non-emergency calls. ACCESS Center staff triages requests for Psychiatric Mobile Response Team (PMRT) and information and referrals services. Staff provides direct language services by linking callers to the Language Assistance Line, as well as the Telecommunication Device for the Deaf (TDD). (See attachments: Language Interpreters Policy & Procedure 202.21 and Hearing Impaired Mental Health Access Policy & Procedure 202.17) Call logs are maintained for date, time, caller identification, types of requests, and referrals given. This process is in accordance with ACCESS protocols.

The ACCESS Center works with AVAZA for interpreter services. AVAZA, formerly under the name "OCI" has been a countywide contracted vendor for interpretation services since 2010. The ACCESS Center implemented telephone and call center technology upgrades in November 2012 and again in October 2013. The call volume for 2013 was 239,566 or approximately 20,000 calls per month.

Verizon became the new provider of telephone services for the ACCESS Center in November 2012. They introduced a new web based phone service called "web center". In October 2013 Verizon changed their system from web center to "Virtual Call Center" (VCC). Both changes required significant new training for the ACCESS Center call agents and imposed data gathering challenges as well.

METHODOLOGY

The purpose for this study is to monitor:

- Responsiveness of the 24/7 Toll-Free Line.
- Caller overall satisfaction with staff knowledge and helpfulness.
- Capability to respond to English and non-English calls.
- Caller satisfaction with the interpreter services provided.
- Whether staff members provide their first name to callers.
- Whether staff members assess if the call is a crisis or emergency.
- Specialty mental health service referrals or information provided by ACCESS Center staff as requested by test caller.
- ACCESS Center staff maintenance of a written log that contains the: name of the beneficiary (test caller), date of request for services, and initial disposition of the request.
- Whether staff members refer beneficiary complaints to the Patients' Rights Office.

A "Secret Shopper Test Call" approach was used for this study. Test Callers were provided with written Instructions for Test Calling the ACCESS Line (see Attachment #1). The guidelines outline the *Purpose of the Test Calls* and include the *Basic Principles of the Test Calls* (see Attachment #2). Test Callers, while using a fictitious name, could develop their own non-emergency script for specialty mental health services or choose from example scenarios provided (see Attachment #3). Test Callers were instructed not to call with an emergency or crisis scenario and were requested to keep the call short and succinct. Test Callers were asked not to make or accept assessment appointments and were able to identify themselves as a Medi-Cal beneficiary, if asked. Test Callers could ask to obtain a phone number and inform ACCESS staff that they will contact the clinic directly. Test callers could also identify themselves as residents of the County, if asked. The performance of the phone system and interactions with the Toll Free Line staff were rated using a *Worksheet for Test Callers to the ACCESS Line* (see Attachment #4).

ACCESS Center management and staff collaborate with the QI Division staff each year for this study and for the development of this report. For 2013, Service Area (SA) QI liaisons were asked to organize and to facilitate 10 after hours Test Calls to be placed from each SA. Five of the ten Test Calls were requested to be in English and five Test Calls were requested to be in a non-English language. One Test Call in each SA was requested to be a beneficiary complaint call. After hours was designated as before 8 AM or after 5 PM on weekdays or anytime on a weekend or holiday. In order to spread out the test calls each SA was assigned one specific week to place their calls. Significant differences found are noted in the findings that follow.

SUMMARY OF FINDINGS FOR 2013

1. A total of ninety-three (93) Test Calls were attempted by staff from the (8) Service Areas from June 2013 to September 2013 and of those, ninety-one (91) calls or 98%, were successfully completed. Two (2) calls, or 2%, were disconnected.
2. Of the Ninety-one (91) completed calls, eighty-six (86), or 95% of test callers responded to the question, "Call start time?" Nineteen (19) calls, or 22%, were completed during daytime hours (initiated between 8 AM and 5 PM on weekdays) and sixty-seven (67) calls, or 78%, were initiated after hours or on weekends.
3. Of the 91 completed test calls, 88 test callers responded to the question, "Did ACCESS agent provide his/her first name?" On seventy-two (72), or 82% of the calls the agent offered their first name. ACCESS Center staff are more likely to offer their name to English speaking callers (56% vs 44% non-English speaking callers).
4. Of the ninety-one (91) completed test calls, seventy-seven (77), or 85% of test callers responded to the question, "Did the ACCESS agent ask you for your name?" On fifty-nine (59), or 77% of those calls, ACCESS Center staff requested the beneficiary name. ACCESS Center call logs cannot be completed as required without documentation of the beneficiary's name.
5. Forty-seven (47) or 52% of the ninety-one (91) completed test calls were in English, forty-four (44), or 48% were in a non-English language. Test Calls were made in 11 different languages. Languages used in the 2013 Test Calls are shown in Table 2 below.
6. 100% of non-English callers (n = 44) were offered interpreter services.
7. Of the 28 non-English test callers who responded to the question on satisfaction, twenty (20), or 71% reported satisfaction with the interpreter service received. Eight (8) test callers or 29% reported they were not satisfied with interpreter services. The eight callers that were dissatisfied with the interpreter services spoke Cantonese, Farsi and 3 calls each in Spanish and Vietnamese.
8. Eighty-three (83), or 91% of test callers reported the reason for their call. Reasons given for the Test Calls consisted of: 8.4% were Beneficiary Complaint, 68.7% were for a Counseling Referral, 2.4% were for General Information, and 20.5% were for a Medication Request.
9. Seventy-nine (79) out of ninety-one (91), or 87% of test callers reported requesting a referral or other information. Seventy (70), or 89% of those requesting were given a referral to a specialty mental health service agency in their area of residence or other information requested by the test caller.

10. Eighty-three (83) test callers responded to the question, “Were you put on hold?” Forty-two (42), or 51% of those callers reported they were placed on hold.

11. The ACCESS Center staff asked test callers if there was a crisis or an emergency in sixty-five (65), or 75% of the eighty-seven (87) test callers that responded to this question. The instructions were to not use a crisis scenario.

12. Eighty-seven (87), or 96% of test callers responded to the question, “How satisfied were you with the knowledge and helpfulness of the ACCESS agent?” Thirty-seven (37), or 42% responded that they were very satisfied; twenty-six (26), or 30.0% responded that they were satisfied; eleven, (11), or 13% were somewhat satisfied; five (5), or 6% were not satisfied; and eight (8), or 9% were very dissatisfied.

13. Fifty-five (55), or 60%, of the ninety-one (91) completed test calls were logged by the ACCESS Center staff.

14. All Test Calls regarding a beneficiary complaint resulted in a referral to the Patients’ Rights Office with the exception of one disconnected call.

15. The ACCESS Center 24/7 line rings briefly before the caller hears a greeting that identifies the LACDMH ACCESS Center. They are given the option of hanging up and calling 911 if it is a life threatening emergency. The caller then is given a large number of language options to choose from. This then leads to a series of options depending on reason for the call, all in the language of their choice. Finally they hear a message reminding them that their call may be monitored or recorded for quality assurance. The length of time between in initial dial in and the call being received by a call agent will vary significantly based on the types and number of choices made by the caller. Thirty-five (35), or 49%, of the 72 test callers who answered the question reported a wait time of ten (10) minutes or less. The remaining 37 or 51% reported a wait times up to one (1) hour and thirty-nine (39) minutes. Two of the latter calls were held searching for interpreters once the call had been answered by ACCESS staff. The average call length, defined as length of time on the call from start to finish, was 15 minutes.

TRENDING OF ACCESS CENTER TEST CALLS

The number of completed test calls has increased from 10 in 2009 to 91 in 2013. Between 2009 and 2013 ACCESS Center staff provided their first name to the test caller at 89% in 2009, 36% in 2010, 62% in 2011, 67% in 2012, and 82% in 2013. Between 2009 and 2013 ACCESS Center staff requesting callers name increased from 33% in 2009, to 62% in 2010, 71% in 2011, 68% in 2012, and 77% in 2013. ACCESS Center staff asking if it is a crisis or emergency situation increased from 33% in 2009 to 75% in 2013. ACCESS Center staff provision of referrals was 89% in 2009, 100% in 2010, 87% in 2011, 81% in 2012 and 89% in 2013. Test caller satisfaction with ACCESS Center staff knowledge and helpfulness was 90% in 2009 and declined to 71% in 2010,

increased to 88% in 2011, declined to 84% in 2012 and increased to 85% in 2013. Test caller satisfaction with interpreter services increased from 63% in 2010 to 71% in 2013.

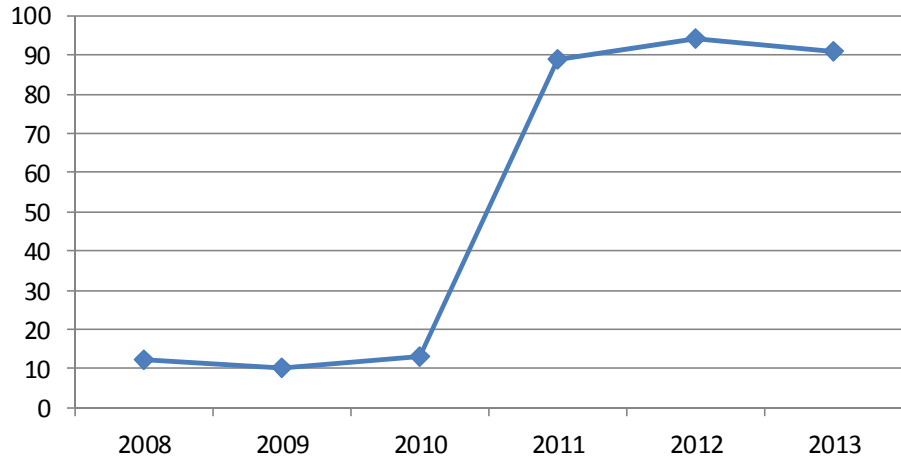
The number of completed Test Calls was lower by 2 than the previous year, but in all areas the findings show continued improvement in ACCESS Center responsiveness from 2012 to 2013.

In 2009 all Test Calls were in English, in 2010 six (6) Test Calls were made in English and seven (7) were in Spanish, in 2011 eighty-nine (89) Test Calls were conducted in 10 different languages, and in 2012 Test Calls were made in 17 languages. In 2013 Test Calls were made in 11 different languages.

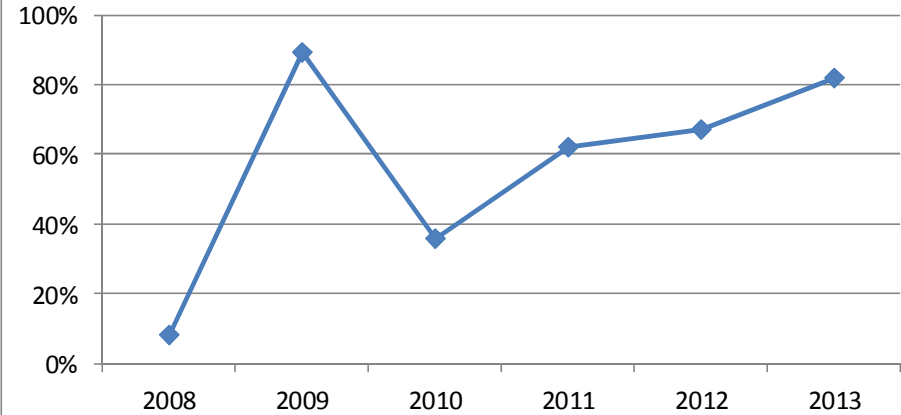
Table 1. Trending of ACCESS Center Test Calls

	Calendar Year				
	2009	2010	2011	2012	2013
Number of Test Calls Completed	10	13	89	94	91
ACCESS Staff Provided First Name to Caller	89%	36%	62%	67%	82%
ACCESS Staff Requested Caller's Name	33%	62%	71%	68%	77%
ACCESS Staff Assessed Crisis or Emergency	33%	62%	46%	69%	75%
ACCESS Staff Provided Referral	89%	100%	87%	81%	89%
Report Satisfaction with ACCESS Services	90%	71%	88%	84%	85%
Report Satisfaction with Interpreter Services	NA	63%	70%	67%	71%
Call was Logged by ACCESS Staff	1%	54%	54%	52%	60%
Call Language	All English	Spanish & English	10 Languages	17 Languages	11 Languages

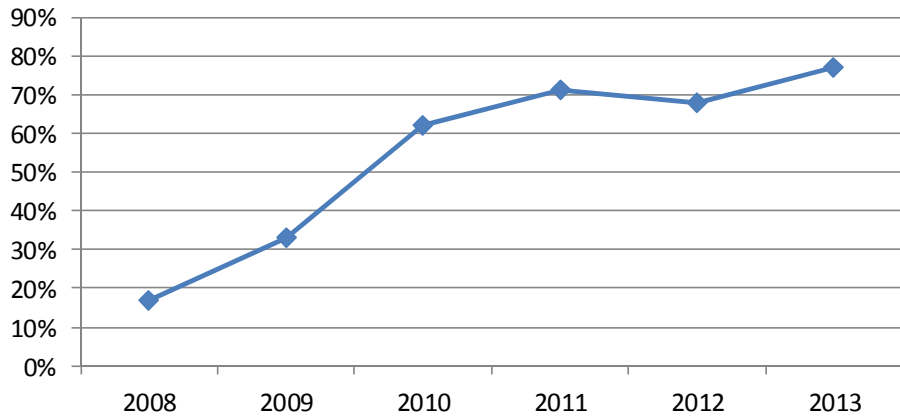
Number of Test Calls Completed



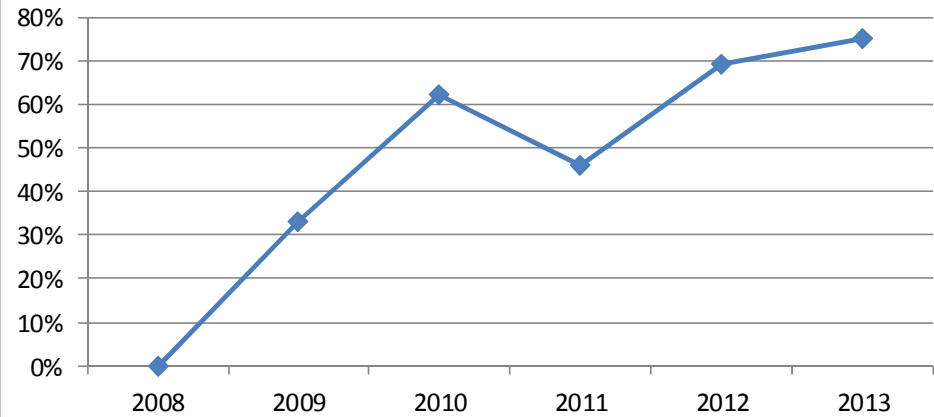
Percent ACCESS Staff Provided First Name to Caller



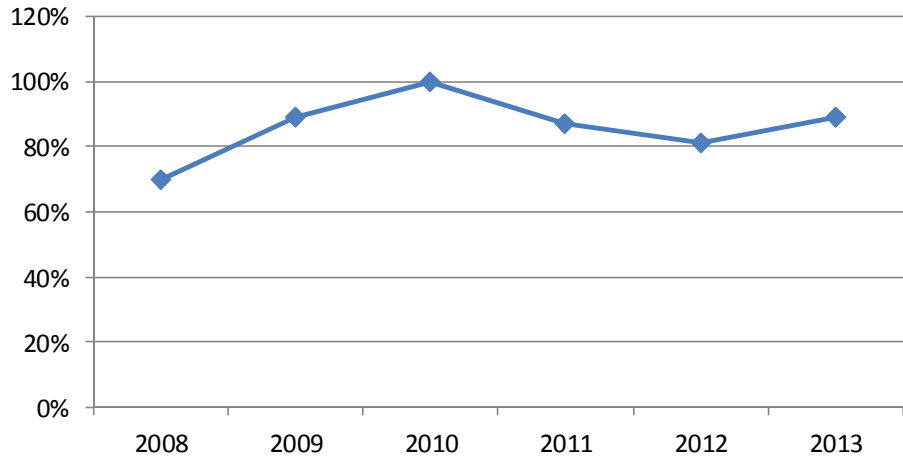
Percent ACCESS Staff Requested Caller's Name



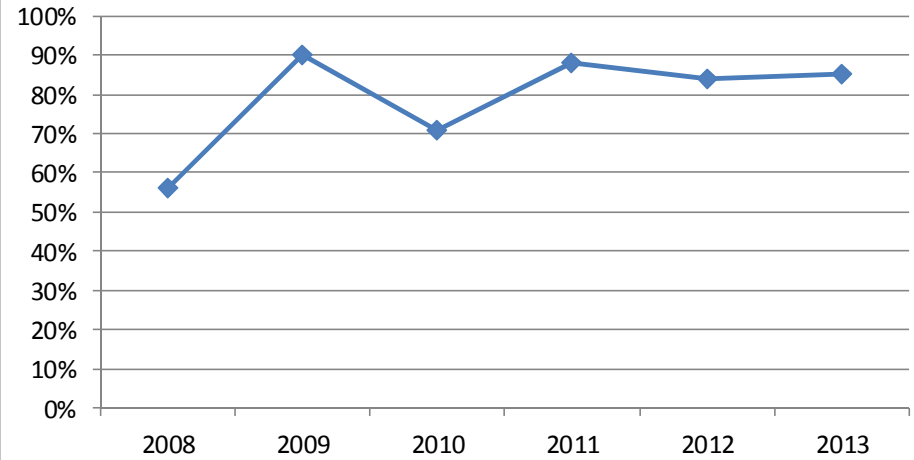
Percent ACCESS Staff Assessed Crisis or Emergency



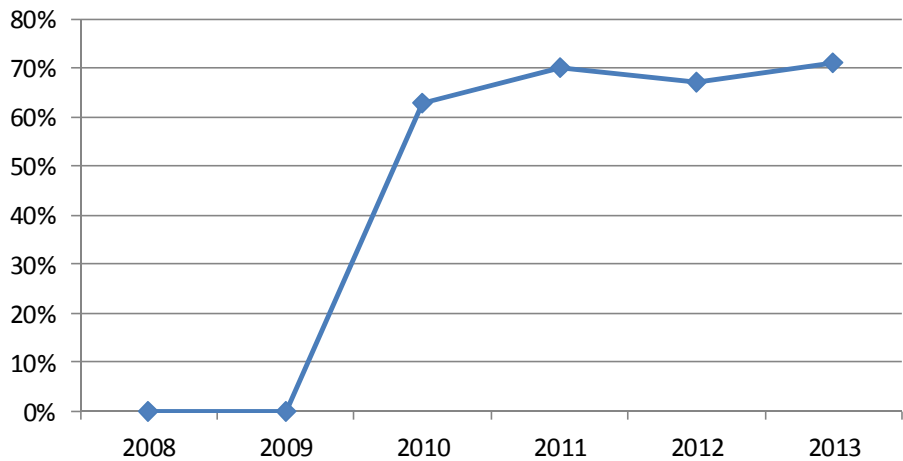
ACCESS Staff Provided Referral



Report Satisfaction with ACCESS Services



Report Satisfaction with Interpreter Services



Number of Calls Logged by ACCESS Staff

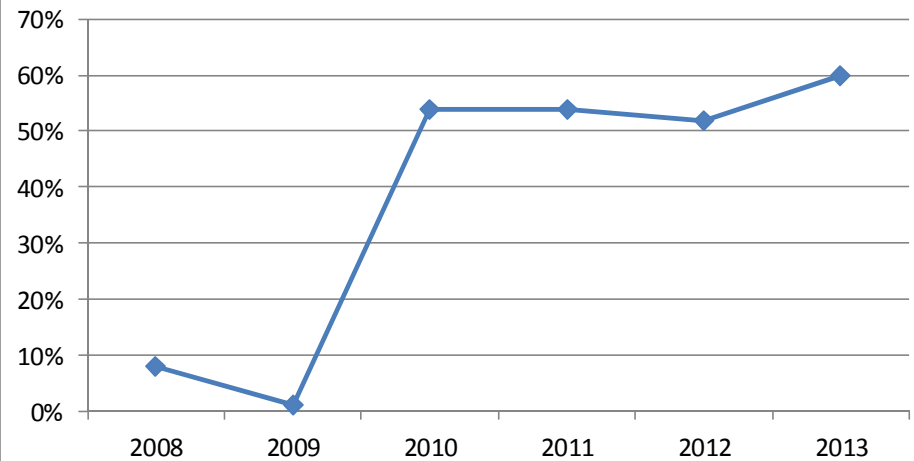


Table 1. Test Calls Conducted in 2013 by Service Area (SA) and Language

SERVICE AREA									
Language	1	2	3	4	5	6	7	8	Total
Armenian			1				1		2
Cambodian/Khmer				1					1
Cantonese	1			1		2			4
English	8	4	6		5	7	11	6	47
Farsi	1					1			2
Korean				2		1			3
Lao				1					1
Mandarin		1	1				1		3
Russian		1							1
Spanish	5	2	1		7	5	4		24
Vietnamese			1			1		1	3
Total	15	8	9	4	12	17	17	7	91

Table 2 shows the distribution of test calls conducted by Service Area and language.

RECOMMENDATIONS RESULTING FROM QI DIVISION AND ACCESS CENTER COLLABORATION:

1. The findings indicate areas for ACCESS Center staff improvement when interpreters are required.

- Protocols are to be established for evaluating the quality of interpreter services being provided.

QI Report with test caller feedback was shared with ACCESS Center Staff. ACCESS management has developed a training curriculum for the staff to be trained on customer service and tips for the use of interpreter services including an interpreter pre-session script (see attachments 5 and 6). This training has been piloted in April 2013 and ongoing training of new hires

since this date has been conducted with plans of continued roll out to all staff. The goal is improve the quality of services overall and also specific to the use of telephone interpreter services.

- QI Report with test caller feedback to be presented to AVAZA as quality concerns regarding interpreter sensitivity in providing mental health services.

2. Internal Services Department (ISD) currently monitors the AVAZA contract. It is recommended that QID, Administrative Services Bureau (ASB), and ACCESS Center review the current findings of the Test Calls Study and develop protocols to address quality concerns related to interpreter services provided by AVAZA.

3. The 2013 Annual QI Test Calls Summary Report will be widely shared in SA QIC Meetings.

4. It is recommended that further emphasis on the importance of making calls in off-peak hours be stressed in future test calls studies. The volume of calls and the documentation related to those calls handled by the ACCESS agents can be lengthy and time-consuming. It is important to recognize this and not take time or resources from genuine callers.

5. It is recommended that in future test calls studies that the request be made for volunteers to conduct test calls in a broader range of threshold languages.

LIMITATIONS

1. Although Test Calls were requested for after hours, nineteen (19) calls, or 22% of the ninety-one (91) completed calls, were made during day time hours.

2. Instructions requested 50% of the Test Calls be conducted in English and 50% be conducted in a non-English language. Results reveal 47 calls, or 52% were completed in English.

3. Not all Service Areas (SAs) completed the ten (10) requested Test Calls and some SAs completed more than the ten (10) requested Test Calls.

4. Some Test Call items were missing complete responses. Some test callers did not provide a name even though instructed to do so or did not provide the name of the beneficiary resulting in calls that could not be logged.

2014 plan for monitoring the responsiveness of the 24/7 Toll-free Number:

- Each of the eight (8) Service Areas will be asked to make ten (10) Test Calls on a volunteer basis to the ACCESS Center with 50% of calls in

English and 50% in a non-English language. Non-English calls will be requested in all of the threshold languages.

- All test calls will be requested to be placed during afterhours and/or weekends during a two month period July-August 2014.
 - Results of the SA Test Calls will be due by December 2014.
 - Test callers are to follow the QI Division instructions provided.
 - Test callers must provide a first and last name for logging purposes.
 - Test callers must provide the name of the beneficiary for tracking purposes.
 - Efforts will be made to avoid making test calls between 9 am and 3 pm and between 4 pm and 7 pm during the ACCESS Center's busiest times.
 - Test callers will be asked to note the referral provided during the call.

- Each Service Area QI liaison will coordinate these efforts with identified QI Division staff.