

# Cape May County Department of Health

## Clinic Services Evaluation

### September 1 – November 30, 2009

#### Executive Summary

A survey was distributed to clients attending Health Department clinics between September 1 and November 30, 2009 to assess satisfaction with clinic services. Ninety-two surveys were completed during the three month period, representing 9.2% of clients from CEED, Child Health, Lipids, Family Planning, STD, and TB clinics. Only 1% of Family Planning and 2% of STD clinic respondents completed surveys, so these results are unreliable.

General Information: Survey respondents were primarily female (88%) and white (79%). Twenty-five percent of respondents identified themselves as Hispanic. In 2008, 75% of respondents were female, 85% were white, and 34% were Hispanic. The average age of respondents was 43 (ranging from 4 to 79), with the largest percentage (30%) between 45 and 54 years (compared with 27% between 8-24 years in 2008). The largest percentages of respondents live in Lower Township (29%), Middle Township (16%), Wildwood (16%), and Cape May (11%). Fifty-seven percent of respondents have a high school degree or lower (compared to 77% in 2008). The majority of respondents (69%) had a combined household income of less than \$20,000 (compared to 71% in 2008), and 90% had a combined household income of less than \$35,000.

Ten percent of respondents needed a translator (compared with 20% in 2008). Eighty-six percent of respondents came to the clinic by car, either their own (52%) or in someone else's (34%). Ninety-one percent of respondents said it was "very easy" or "easy" to get to the clinic. All respondents found it "very easy" or "easy" to make an appointment and 99% of respondents found the clinic hours convenient.

Sixty-seven percent of respondents have access to the internet at home or at work (compared to 45% in 2008). Respondents look to the Health Department, hospital/physicians, and the internet for health information.

Respondents chose a Health Department clinic because they don't have health insurance and because it is affordable. In the past year, respondents had most often used CEED services, child health clinic, and family planning.

When asked about health care services respondents would be interested in, most responses were for general/primary care services, eye care, family planning, and dental care.

Satisfaction with Clinic Visit: Eighty percent of respondents rated their waiting time as "very good" or "good", and waited on average 27 minutes. Over 97% of respondents rated the way the physician or nurse helped them with their problem, the level of respect and courtesy shown to them by all staff, the way the physician or nurse talked to them about their treatment or medication plan, and the opportunity to ask questions as "very good" or "good". Overall, 97% of respondents rated their clinic experience as "very good" (76%) or "good" (21%).

Health Education: Each clinic's respondents were asked two health education questions. All respondents in Lipids, Family Planning, and TB clinics and the majority of respondents in CEED and Child Health clinics responded with "very good" or "good." Some respondents in CEED and Child Health clinics responded with "average" and some in CEED responded with "poor" or "very poor." Health education questions were not answered by STD survey respondents.

## Introduction

A pilot study was conducted in May-June 2007 to evaluate health department clinic services. The findings from the pilot study were incorporated into final survey instruments. It was determined that data would be collected each year for a three-month period, with varying three months used. The clerks working the clinics distribute the questionnaires to the patients and ask them to complete Part I while they are waiting. Part I collects general information about the patient and their reasons for choosing care at the clinic. After the patient's visit with the physician/nurse, the nurse working the clinic asks the patient to complete Part II, which asks the patient to evaluate their visit. The questionnaires are collected in a confidential survey box. The data is entered by a clerk into an Access database and then is imported into SAS by the Epidemiologist for analysis.

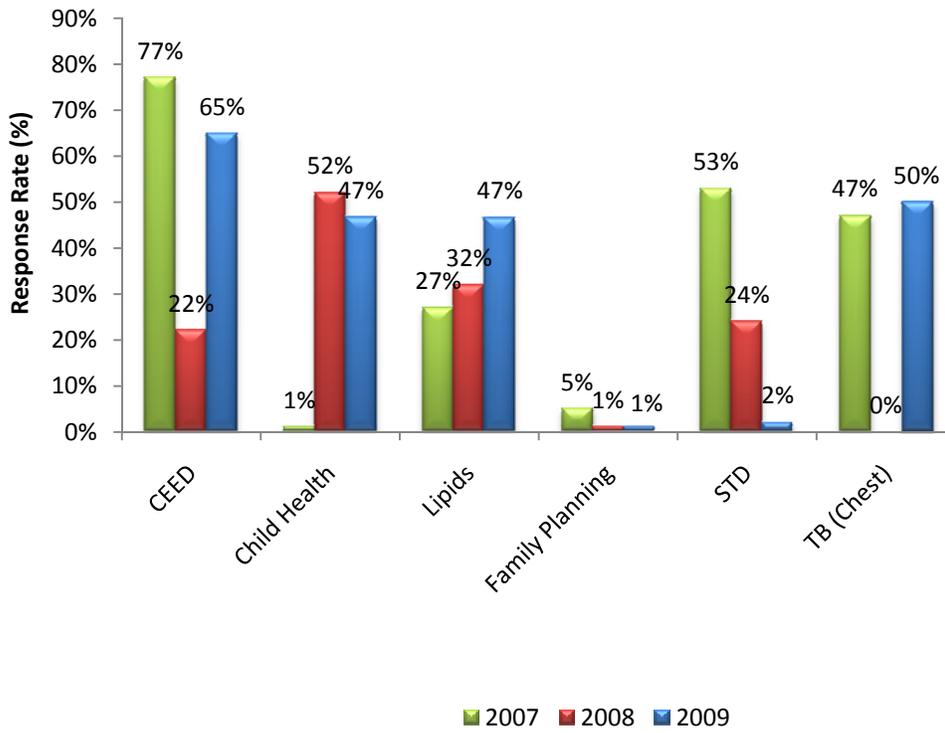
Data has been collected for August – October 2007, May 15 – August 15, 2008, and the current period September – November 2009.

Between September 1 and November 30, 2009 there were a total of 999 patient visits to health department clinics. A total of 92 surveys were completed, for an overall response rate of 9.2%. In 2008, 83 surveys were completed for a response rate of 7.8%. Table 1 shows the number of surveys completed by clinic. The response rate varied from 1.0% in Family Planning clinics to 64.9% in CEED clinics. Of the total number of surveys received, the largest percentages were from CEED (40.2%) and Child Health (30.4%). Data from Family Planning and STD clinics should be interpreted with caution, given the very low response rates.

<b>Clinic</b>	<b>Total # Patient Visits</b>	<b># Completed Surveys</b>	<b>Response Rate (%)</b>	<b>% Surveys by Clinic</b>
CEED	57	37	64.9%	40.2%
Child Health	60	28	46.7%	30.4%
Lipids	30	14	46.7%	15.2%
Family Planning	705	7	1.0%	7.6%
STD	141	3	2.1%	3.2%
TB (Chest Clinic)	6	3	50.0%	3.2%
<b>TOTAL</b>	<b>999</b>	<b>92</b>	<b>9.2%</b>	<b>100%</b>

The response rate by clinic differs by year. The response from Child Health clinic was very low in 2007, but has been consistently high for 2008 and 2009 (Figure 1). The CEED and Lipids clinics had good response rates in all years. Family Planning has been consistently low, virtually nonexistent, which is unfortunate, given the large patient volume. STD Clinic had a good response rate in 2007 and 2008, but was virtually nonexistent in 2009. The TB Clinic, although its patient volume is very low, has a good response rate in 2009.

**Figure 1: Survey Response Rate, by Clinic and Data Collection Yr**



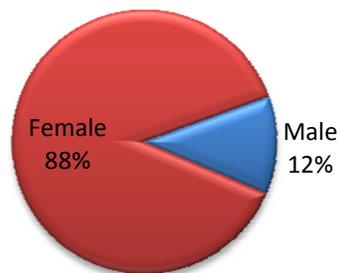
## PART I: CLIENT INFORMATION

### Demographics

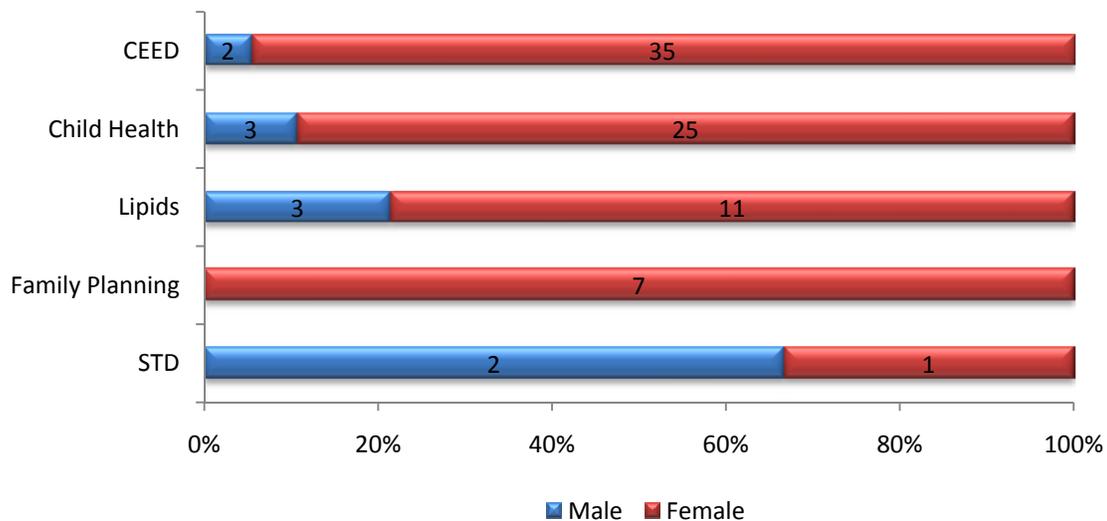
#### Gender

Eighty-eight percent of respondents were female, 12% male (Figure 2). Female patients were disproportionately represented at all clinics (STD data are not reliable, Figure 3) No males were seen in the Family Planning clinic.

**Figure 2: Clinic Respondents, by Gender**



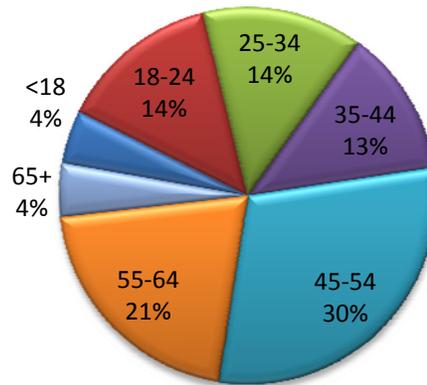
**Figure 3: Gender of Clinic Respondents, by Clinic**



#### Age

The age of respondents ranged from 4 to 79 years, with a mean age of 43 years across all clinics (5 surveys missing age). Three respondents listed age as <16 years; these respondents should have used the caretaker's age instead of the patient's. The largest percentage of respondents were between 45-54 years of age (30%) and 55-64 years (21%). Four percent of survey respondents were 65 years or older or less than 18 years (Figure 4).

**Figure 4: Clinic Respondents, by Age Group**

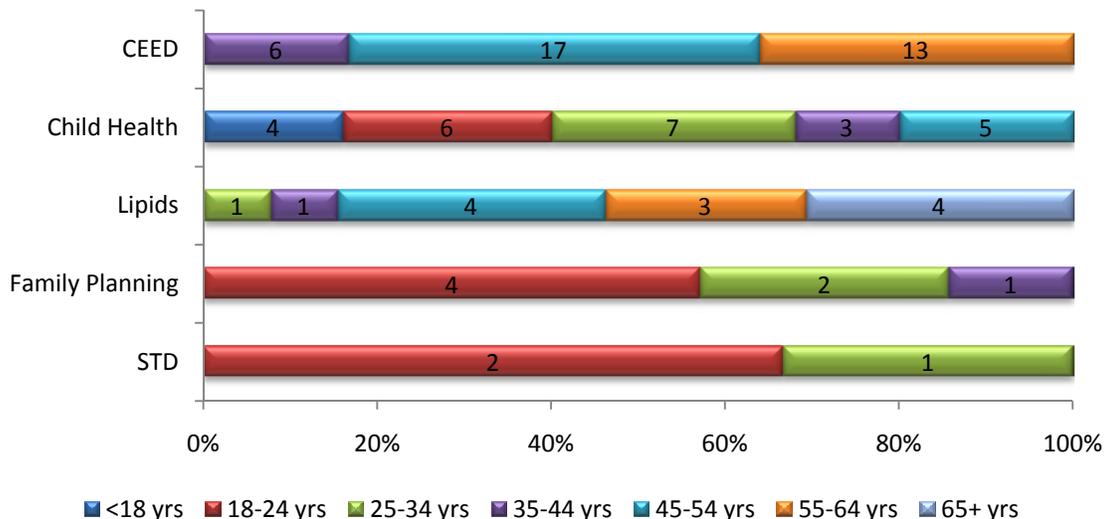


The mean age varied by clinic (Table 2), with younger respondents attending Child Health, Family Planning, and STD clinics and older respondents attending CEED, Lipids, and TB clinics. Figure 5 shows the distribution of age groups by clinic.

**Table 2: Mean Age of Survey Respondents by Clinic**

Clinic	Mean Age	Range
CEED	52	35 - 64 years
Child Health	29	4 – 48 years
Lipids	57	34 – 79 years
Family Planning	24	18 - 36 years
STD	25	23 - 27 years
TB	49	33 - 57 years

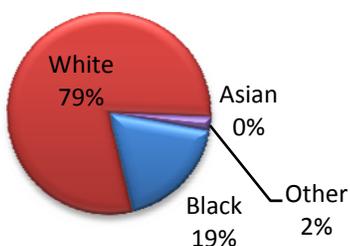
**Figure 5: Age Group of Clinic Respondents, by Clinic**



Race/Ethnicity

Respondents were asked to provide their race and ethnicity. Race/ethnicity categories were black/non-Hispanic, black/Hispanic, white/non-Hispanic, white/Hispanic, Asian, and Other. An “other specify” category was added to this year’s survey. From these responses, the data was segregated by race (Figure 6) and ethnicity (Figure 7). Overall, 79% of respondents are White, and 19% are Black. In 2008, 85% of respondents reported their race as white and 8% reported as black. Two persons specified their race as “African.” Twenty-five percent of respondents identify themselves as Hispanic (compared with 34% in 2008).

**Figure 6: Clinic Respondents, by Race**

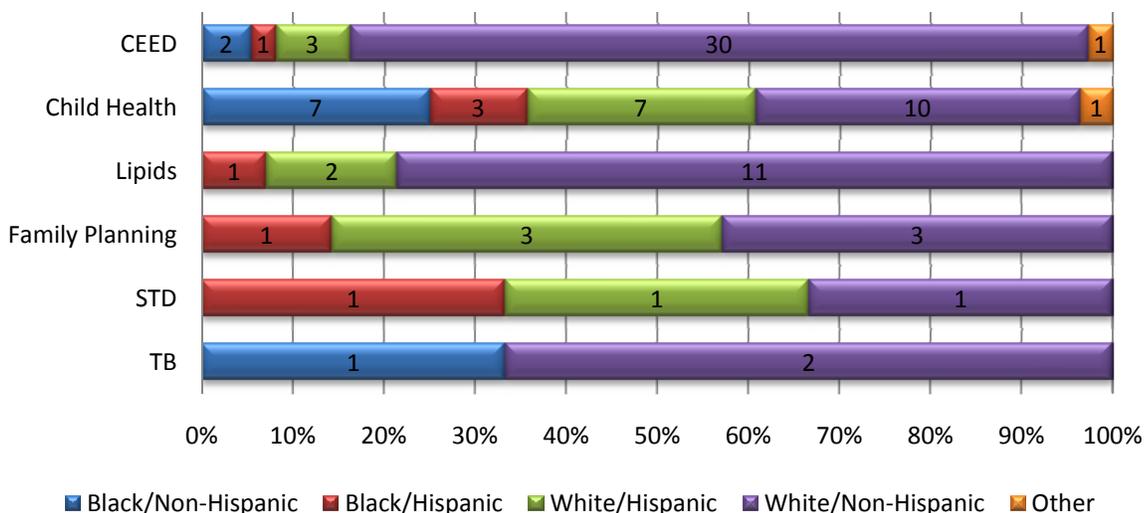


**Figure 7: Clinic Respondents, by Ethnicity**



The largest percentage of respondents was white/non-hispanic across all clinics. Larger percentages of black respondents were seen at the Child Health and TB clinics (STD data is unreliable). Larger percentages of Hispanic respondents were seen in Family Planning and Child Health clinics (Figure 8).

**Figure 8: Race/Ethnicity by Clinic**



Residency

Overall, the largest percentage of respondents was from Lower Township (29%), Middle Township (16%), Wildwood (16%), and Cape May (11%, Figure 9, 5 missing). Municipality was

fairly consistent with 2008. No patients reported living in Stone Harbor, Sea Isle City, or West Wildwood.

**Figure 9: Clinic Respondents, by Municipality**

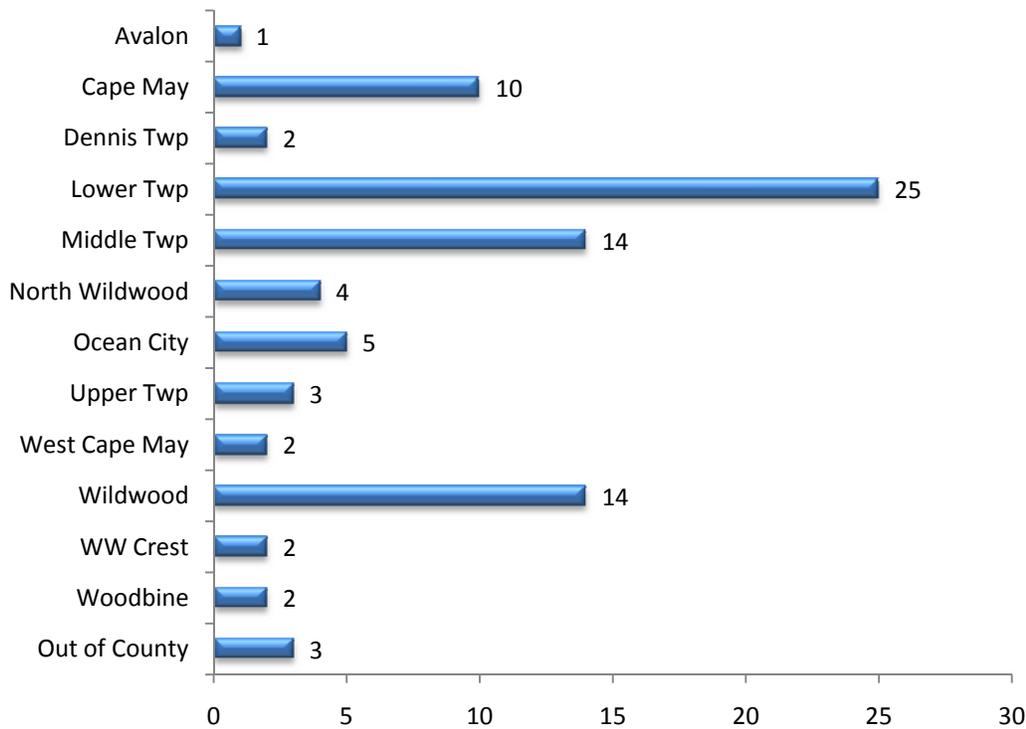
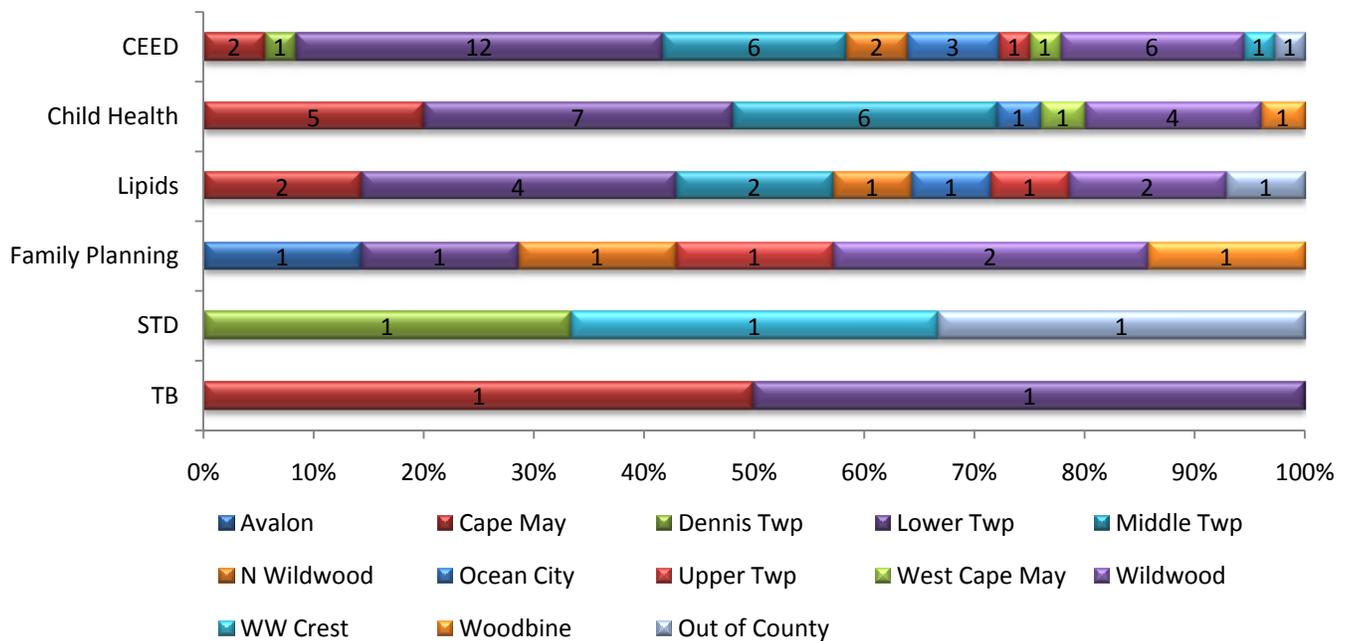


Figure 10 shows the distribution of municipal residence by clinic.

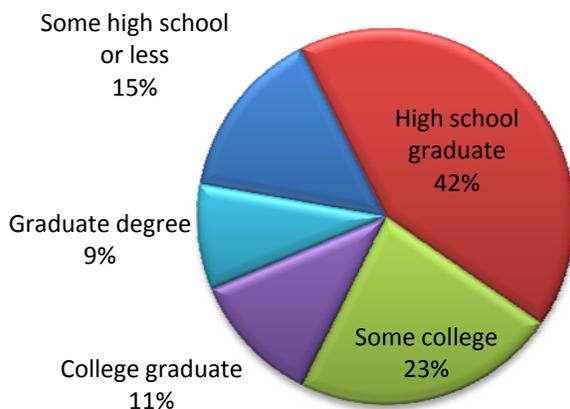
**Figure 10: Clinic Respondents, by Municipality and Clinic**



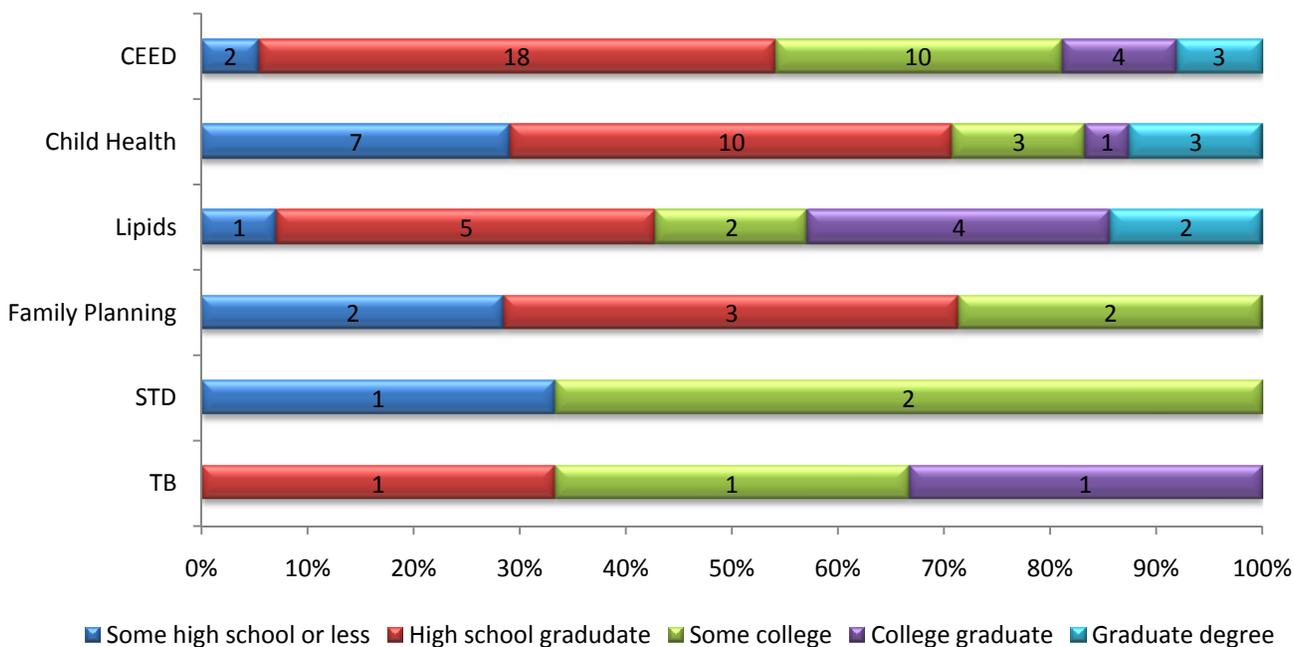
## Education

Most respondents had an educational attainment level, for all clinics combined, of a high school graduate (42%, Figure 11, 4 missing). Fifty-seven percent of respondents have a high school degree or lower. Eight respondents reported having a graduate school degree. Higher levels of education were reported by respondents attending the Lipids and TB clinics (Figure 12).

**Figure 11: Clinic Respondents, by Educational Level**



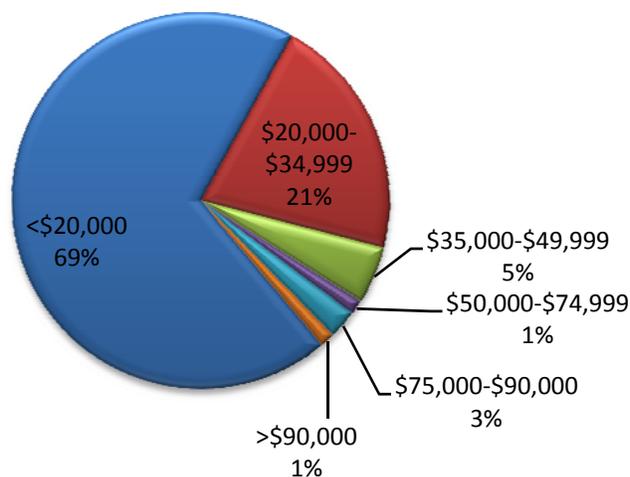
**Figure 12: Clinic Respondents, by Educational Level and Clinic**



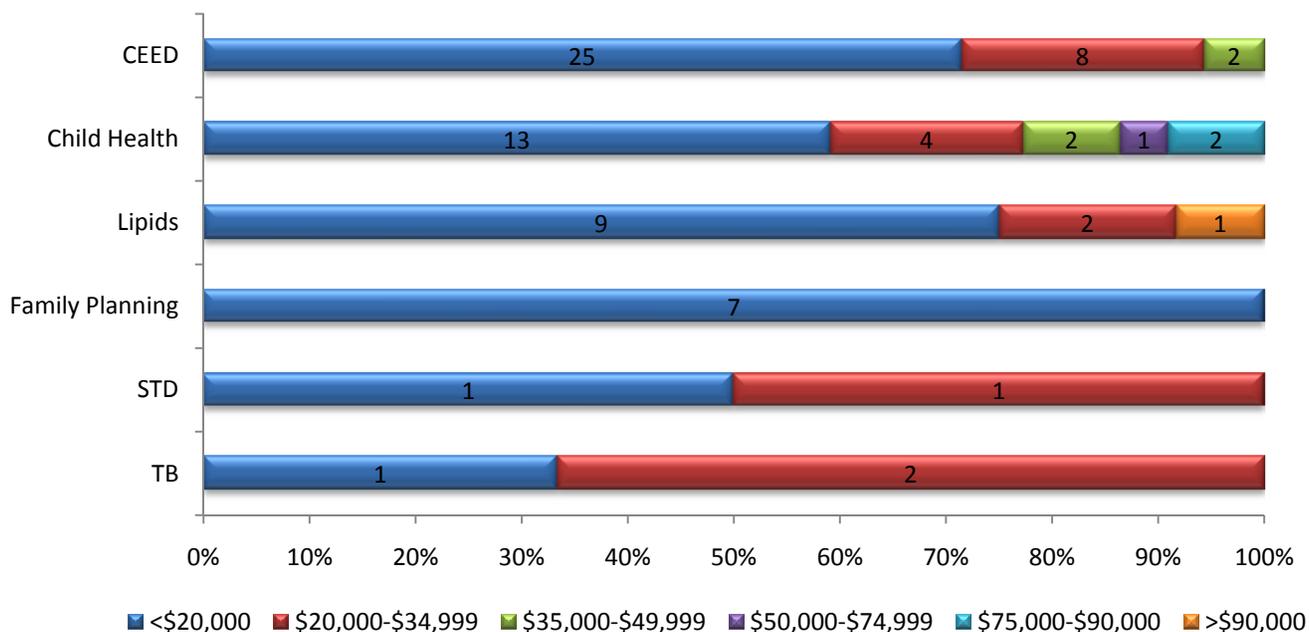
## Income

The majority of clinic respondents had a combined household income of under \$20,000 (69%), with 90% of respondents having a household income of less than \$35,000 (Figure 13, 11 missing). One respondent reported income of over \$90,000. Income levels were low across all clinics (Figure 14).

**Figure 13: Clinic Respondents, by Income Level**



**Figure 14: Clinic Respondents, by Income Level and Clinic**



## Access and Convenience of Care

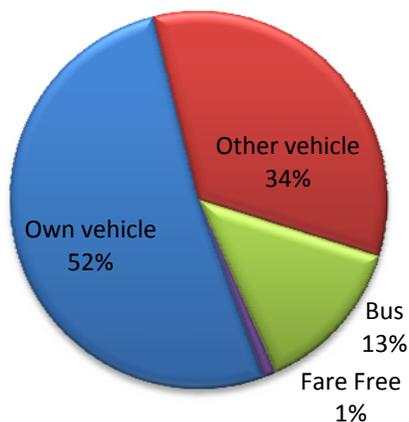
### Translation

Nine respondents (10%) reported needing a translator (5 missing). In 2008, 20% of respondents reported needing a translator. Six persons needing translation attended the Child Health clinic, and 1 each attended CEED, Family Planning, and TB clinics. When asked about native language, one person responded with Spanish and one person responded with English (7 did not specify language).

### Transportation

Eighty-six percent of respondents came by car to the clinic, with 52% using their own vehicle and 34% coming in someone else's vehicle (Figure 15, 1 missing). One person used fare free transportation. No respondents reported taking a taxi, walking, or riding a bicycle. Of the 12 respondents who took a bus, 6 persons attended Child Health, 3 persons attended CEED, and one person each attended Lipids, Family Planning and TB clinics.

**Figure 15: Clinic Respondents, by Transportation Source**



Persons were asked how easy it was to get to the Health Department clinic. Ninety-one percent of respondents said it was either "very easy" (55%) or "easy" (37%) for them to get to the clinic (Figure 16, 10 missing).

Seven (8%) respondents said it was "difficult" to get to the clinic (0 responses of "very difficult"). Of these, 5 persons attended Child Health clinic, 1 attended Family Planning, and 1 attended CEED. Three persons arrived in someone else's vehicle, 2 persons took the bus, 1 person took fare free transportation, and 1 persons listed other as a mode of transportation. When asked how it could be easier for them to get to a Health Department clinic, five persons mentioned having a car, one person mentioned more fare free and transit buses, and 1 person mentioned having a bus on Rt 47.

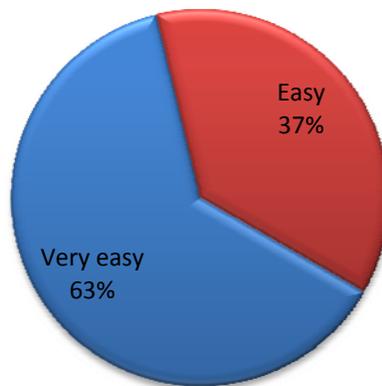
**Figure 16: Clinic Respondents, by Ease of Transport to Clinic**



Appointments

One hundred percent of respondents found it “very easy” (63%) or “easy” (37%) to obtain an appointment for the Health Department clinic (Figure 17, 3 missing). No respondents reported it was “difficult” or “very difficult” to get an appointment.

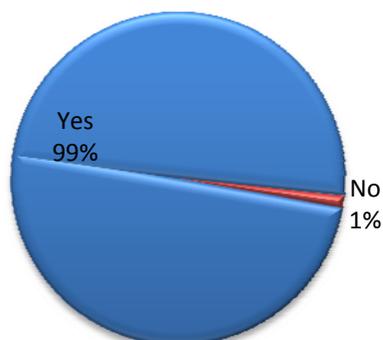
**Figure 17: Ease of Getting Appointment for Health Department Clinic**



Clinic Hours

Ninety-nine percent of respondents reported that the clinic hours were convenient for them (Figure 18, 3 missing). The one respondent who reported that the hours were not convenient attended STD clinic and reported that mornings Monday- Friday were preferred hours.

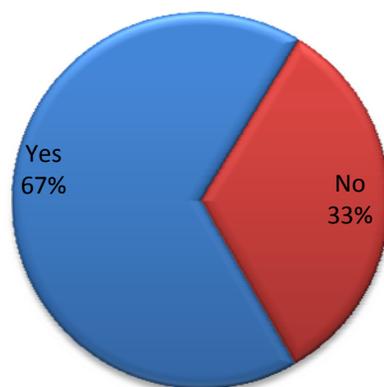
**Figure 18: Are Clinic Hours Convenient?**



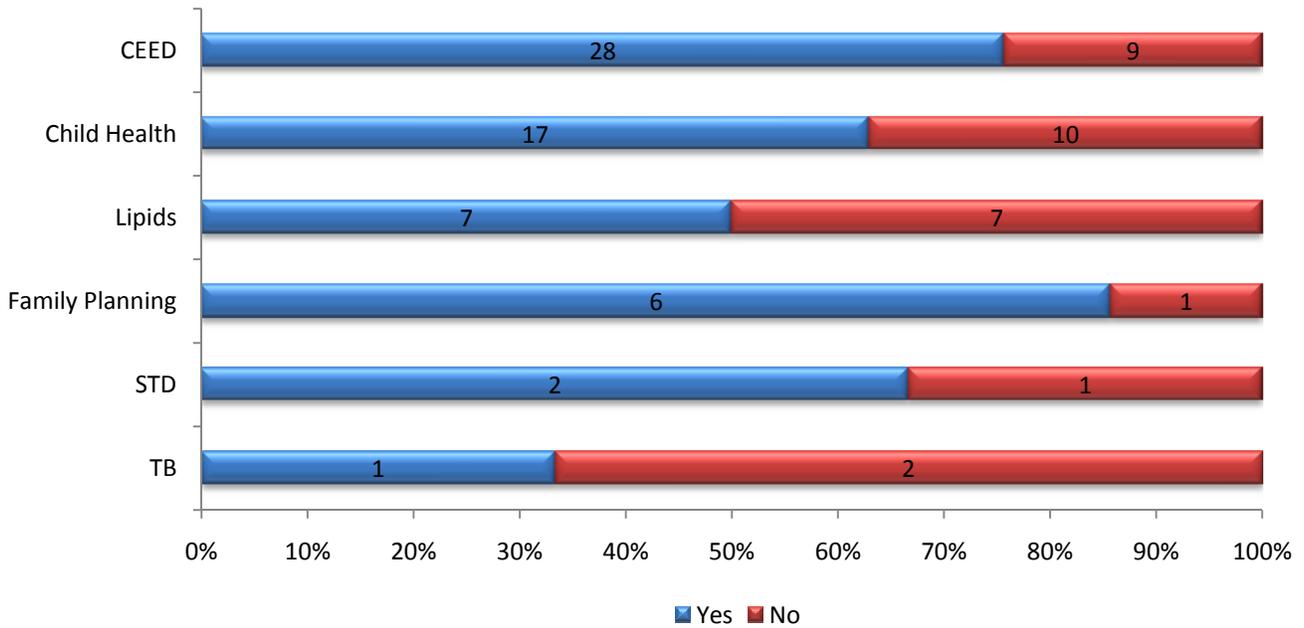
Information Sources

Sixty-seven percent of respondents have access to the internet at home or at work (Figure 19, 1 missing). In 2008 45% of respondents reported having access to the internet. At least 60% of respondents attending Family Planning, CEED, Child Health, and STD clinics have access to the internet (Figure 20). In 2008, only 1 person attending the CEED clinic reported having access to the internet.

**Figure 19: Clinic Respondents, Internet Access**

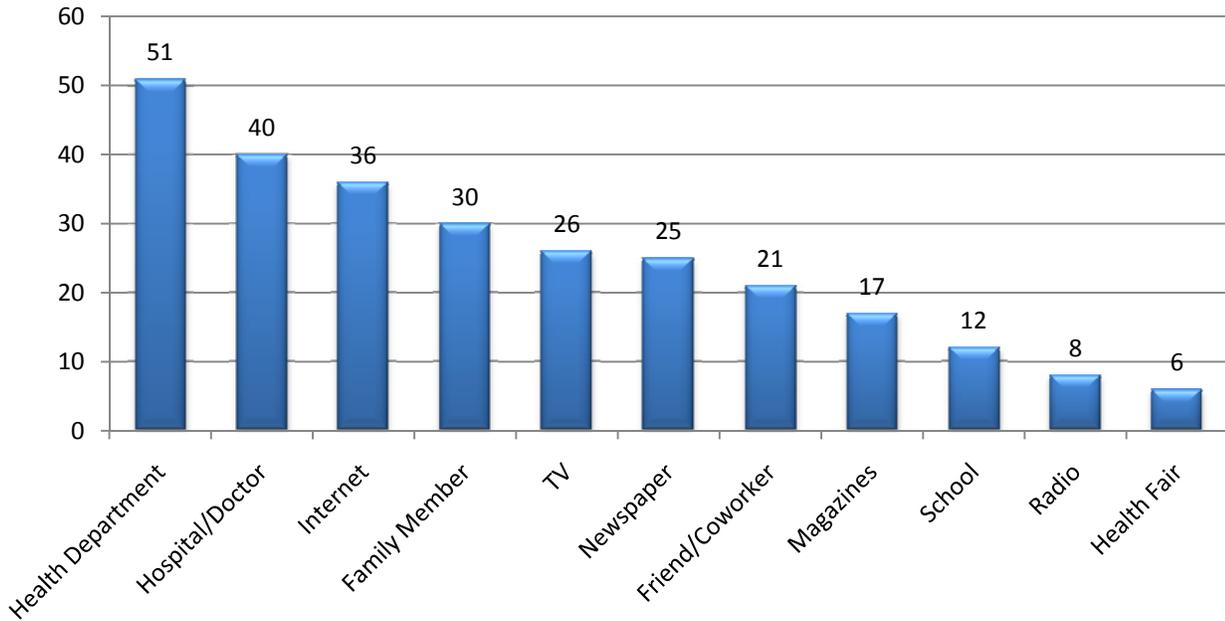


**Figure 20: Clinic Respondents, by Internet Access and Clinic**



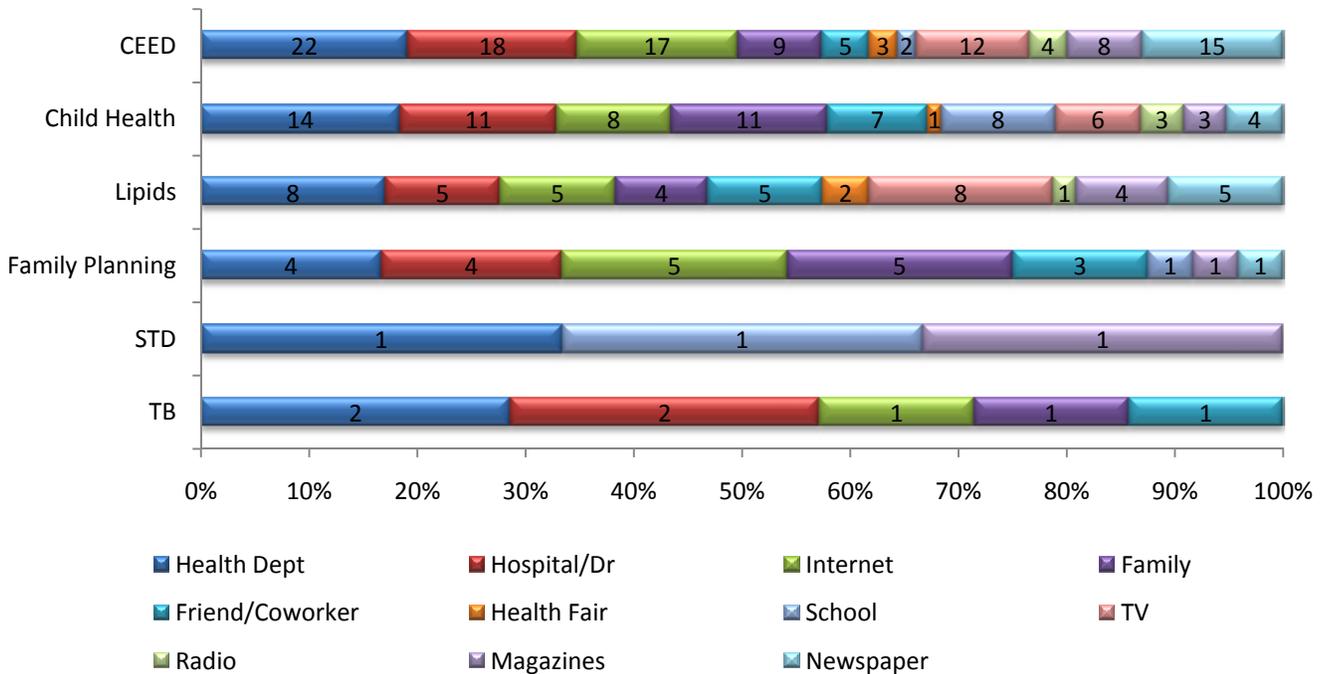
Respondents were asked where they look for health information. Fifty-one respondents said that they look for health information from the health department, followed by hospital/doctor (40), internet (36), and family members (30) (Figure 21).

**Figure 21: Sources of Health Information**



Health information source varied by clinic (Figure 22). The Health Department and hospital/physicians were valued sources in all clinics.

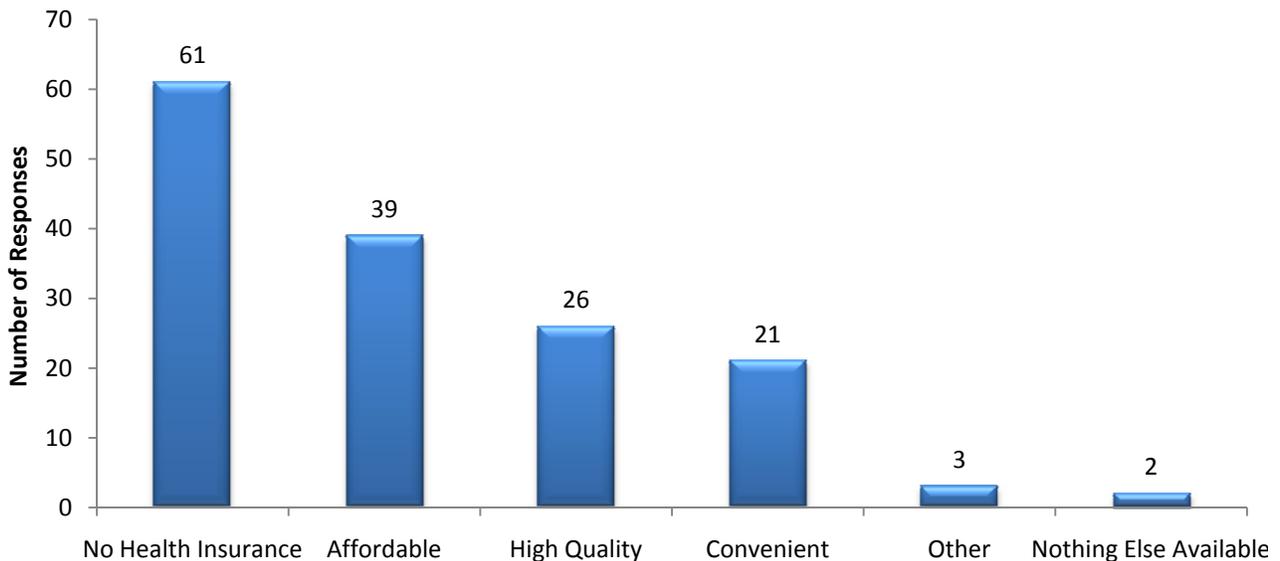
**Figure 22: Information Source by Clinic**



Utilization of Services

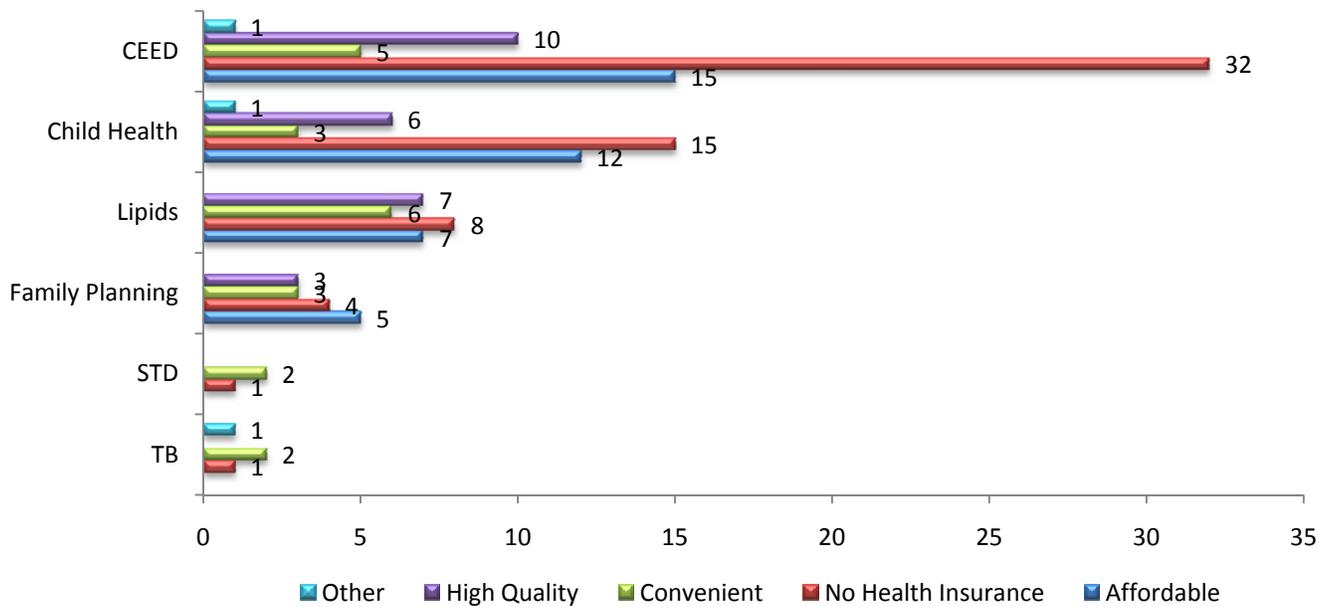
Respondents were asked why they chose a Health Department clinic (multiple responses were permitted). Respondents chose a Health Department clinic primary because they have no health insurance (61 responses) and because it was affordable (39 responses, Figure 23).

**Figure 23: Why Clients Choose Health Department Clinic Services**



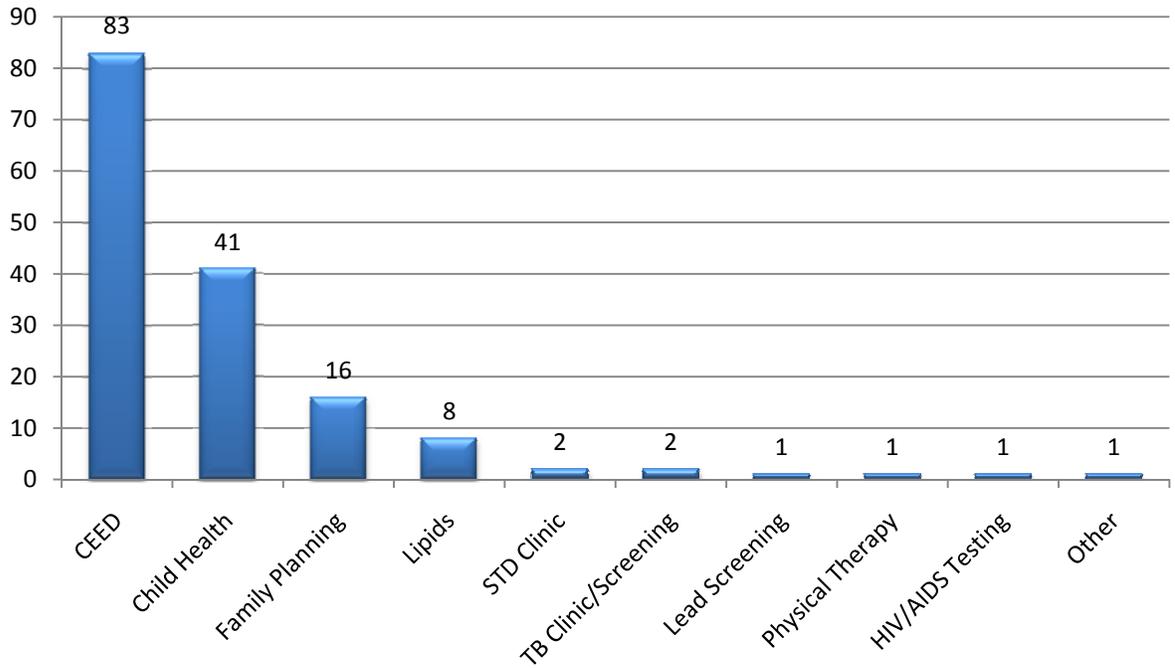
The lack of health insurance was mentioned most often by the respondents attending the CEED, Child Health, and Lipids clinics (Figure 24). Affordability was mentioned most often by respondents attending Family Planning. Convenience was mentioned most by respondents attending STD and TB clinics. One person who listed “Other” as a reason chose the Child Health clinic because s/he “likes it and the people”; one person attending CEED was referred by VIM.

**Figure 24: Reason for Choosing Health Department Clinic**

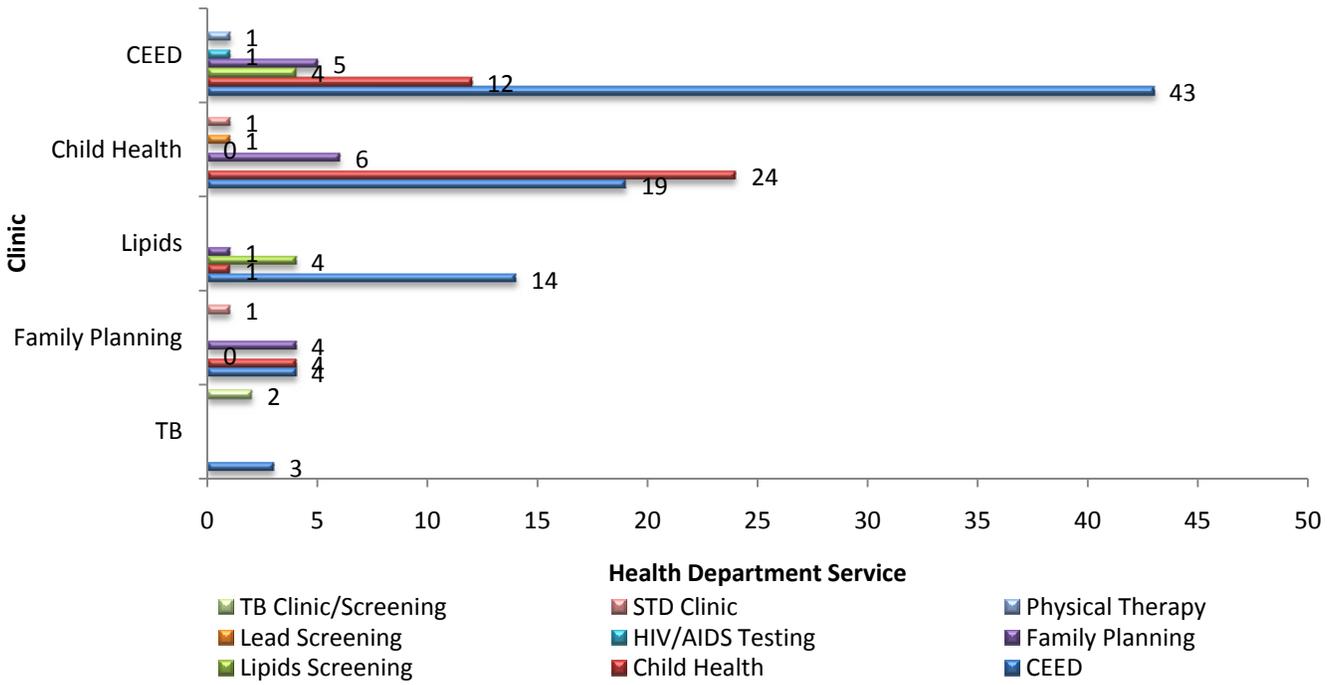


Respondents were asked what health department services they have used in the past year (Figure 25). Eighty-three respondents reported using the CEED clinic in the past year, 41 used child health, and 16 used family planning clinics. No respondents reported using home health services. Cancer screening services were used by respondents attending all other clinics, apart from STD (no responses received on other Health Department Services used). Child Health services were used by a fair number of CEED clinic respondents (Figure 26). One respondent reported having had a mammogram.

**Figure 25: Health Department Services Used in Past Year**



**Figure 26: Health Department Services Used, by Clinic Type**



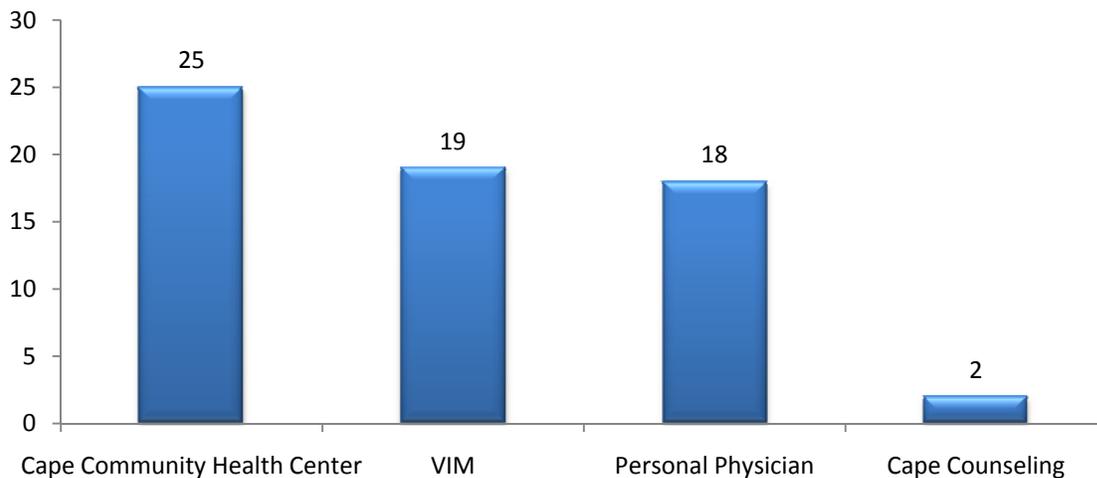
Respondents were asked an open question about what other health services would they use. Seven respondents requested general/primary care services, followed by eye care (3 responses), family planning (2), and dental care (2, Table 3).

Table 3: Desired Health Services	
Desired Service	# Responses
General/primary care	7
Eye care/optician	3
Family Planning	2
Dental Care	2
OB/GYN care	1
Home health care	1
Blood pressure/weight control	1
Managing stress	1
Managing diabetes	1
Mental health	1
Flu shots	1
Physical therapy	1
Full body MRI	1

Use of Other Healthcare Providers

When asked if respondents had seen other healthcare providers in the past year, 25 respondents had gone to Cape Community Health Center, 19 had used VIM services, and 18 had seen a personal physician (Figure 27). No respondents reported care from Cape Assist.

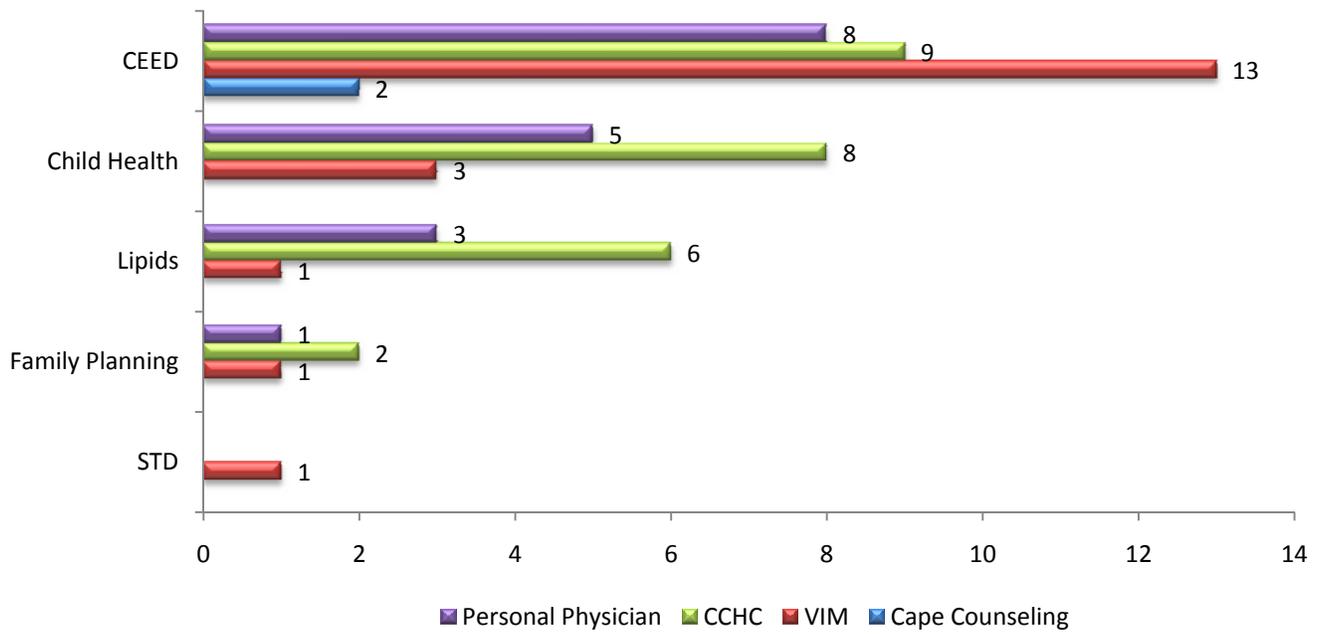
**Figure 27: Health Service Providers that Clinic Clients Have Seen in the Past Year**



Cape Community Health Center was frequented often by respondents attending all clinics except STD. Personal physicians were frequented often by respondents attending CEED, Child

Health, and Lipids clinics. VIM services were used often by respondents attending CEED clinics (Figure 28).

**Figure 28: Other Healthcare Providers Used, by Clinic**

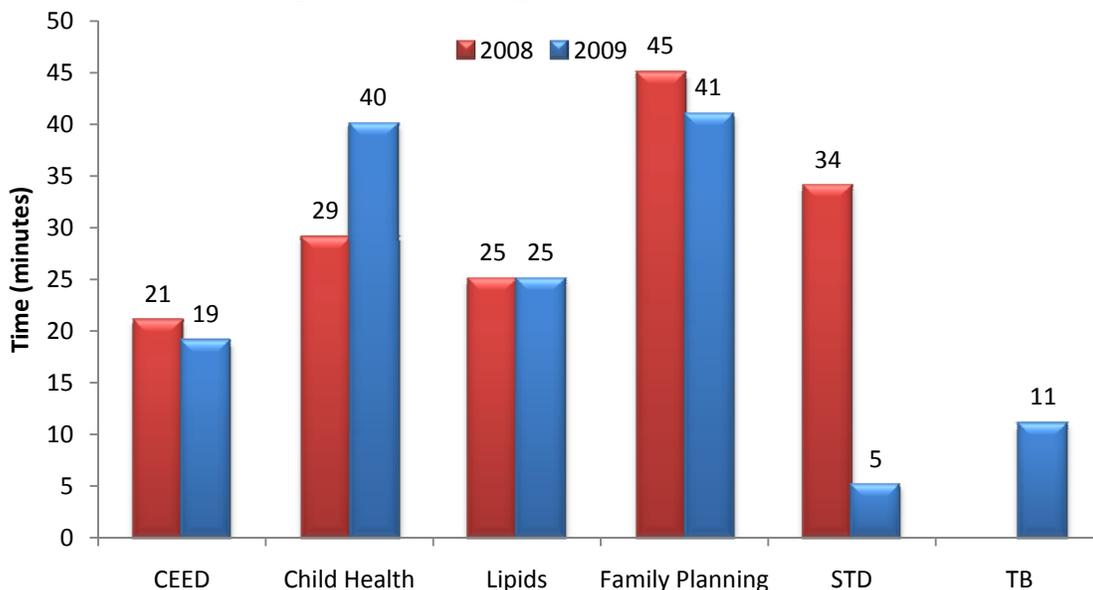


## Part 2: Client Satisfaction with Health Department Clinic Services

### Waiting Time

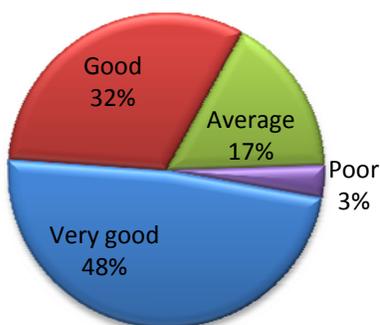
The average wait time to be seen in a clinic was 27 minutes with a range from 0 min to 2 hours. The longest average wait times were for the Family Planning clinic (41 minutes) and the Child Health clinic (40 minutes); the shortest wait times were for the STD clinic (5 minutes) and the TB clinic (11 minutes, Figure 29, 16 missing). Twelve respondents waited an hour or more (2 attended CEED, 7 attended Child Health, 2 attended Lipids, and 1 attended Family Planning).

**Figure 29: Average Wait Time By Clinic**



Eighty percent of respondents rated their waiting time as very good (48%) or good (32%, Figure 30, 1 missing). Three respondents rated the waiting time as poor (1 attended CEED, 2 attended Child Health). Of these three, one respondent waited 30 minutes, 1 waited 45 minutes, and 1 waited 2 hours. No one responded that the waiting time was very poor.

**Figure 30: Client Perception of Waiting Time**



## Health Education

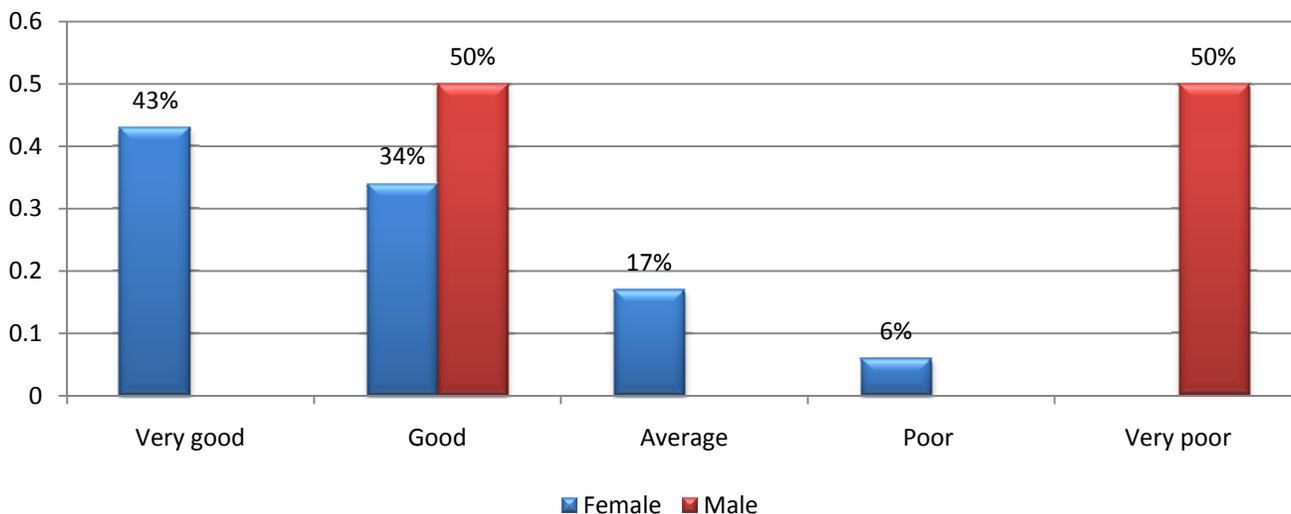
Each clinic’s respondents were asked two specific questions regarding health education messages/materials that were provided. None of the 3 STD clinic respondents answered the two health education questions (Table 4).

**Table 4: Summary of Health Education Questions, by Clinic**

Clinic/Question	Very Good or Good	Average	Poor or Very Poor
CEED: breast self-exam	76%	16%	8%
CEED: knowledge of colon cancer	59%	32%	8%
Child Health: understanding risks of vaccination	92%	8%	
Child Health: recognition of developmental milestones	89%	11%	
Lipids: variety/quality educational material	100%		
Lipids: knowledge of cholesterol	100%		
Family Planning: knowledge of birth control method	86%	14%	
Family Planning: knowledge of STDs	100%		
TB: amount information on TB	100%		
TB: knowledge of TB	100%		

**CEED Clinic:** Respondents were asked to rate their knowledge of how to perform a breast self-exam. Overall, 76% of respondents rated their knowledge as “very good” (41%) or “good” (35%). Seventy-seven percent of women rated their knowledge as very good (43%) or good (34%, Figure 31). Seventeen percent rated their knowledge as “average” and 6% as “poor.” None rated their knowledge as “very poor.” Of the two male respondents, one rated their knowledge as “good”, while the other one rated it as “very poor.”

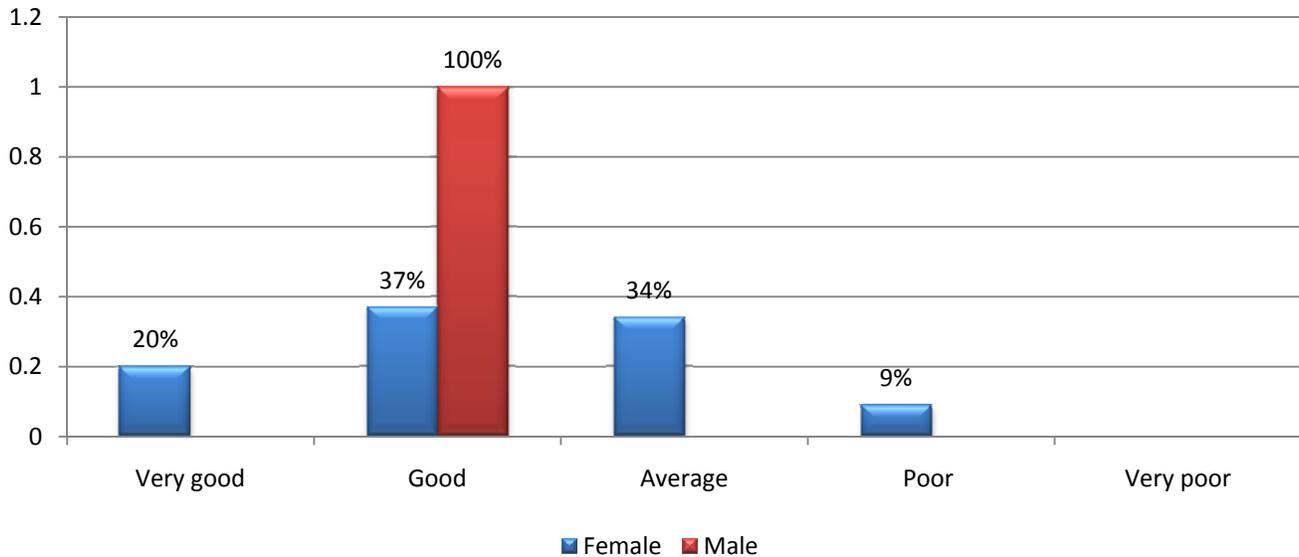
**Figure 31: CEED - Knowledge of Performing Breast Self-Exam, by Gender**



CEED Respondents were also asked to rate their level of knowledge about colon cancer. Overall, 59% of respondents rated their knowledge as “very good” (19%) or “good” (40%). Both male respondents rated their knowledge as “good” (Figure 32). Fifty-seven percent of women

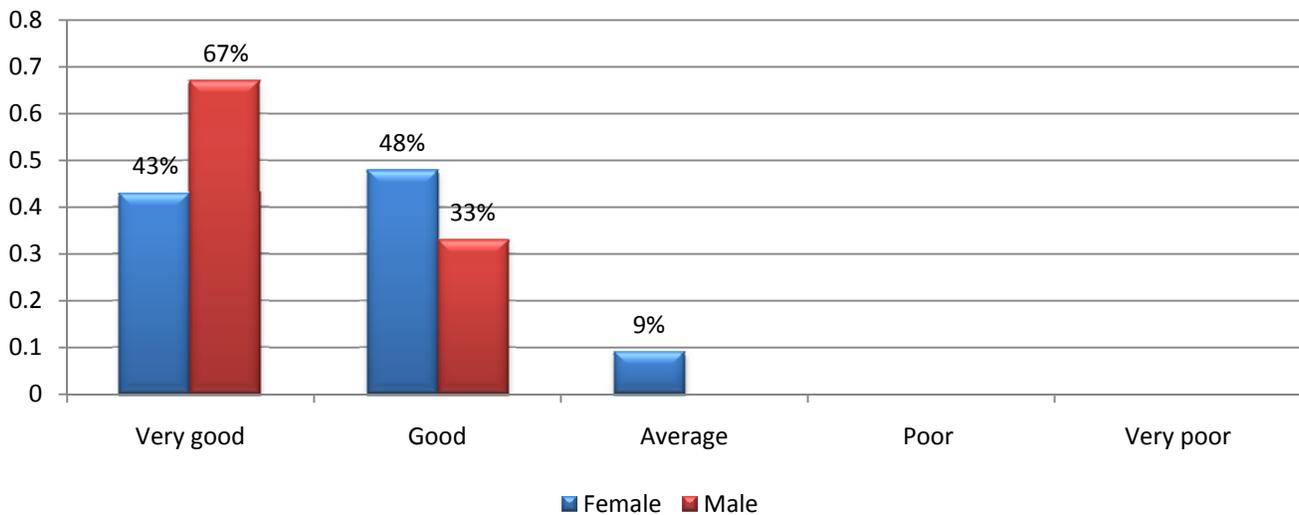
rated their knowledge as “very good” or “good.” Thirty-four percent of women rated their knowledge as “average” and 9% as “poor.”

**Figure 32: CEED - Knowledge about Colon Cancer by Gender**



**Child Health Clinic:** Child Health Clinic respondents were asked to rate their understanding of the risks and benefits of childhood vaccination. Overall, 92% of respondents rated their understanding as “very good” (46%) or “good” (46%). All men and 91% of women rated their understanding as “very good” or “good” (Figure 33).

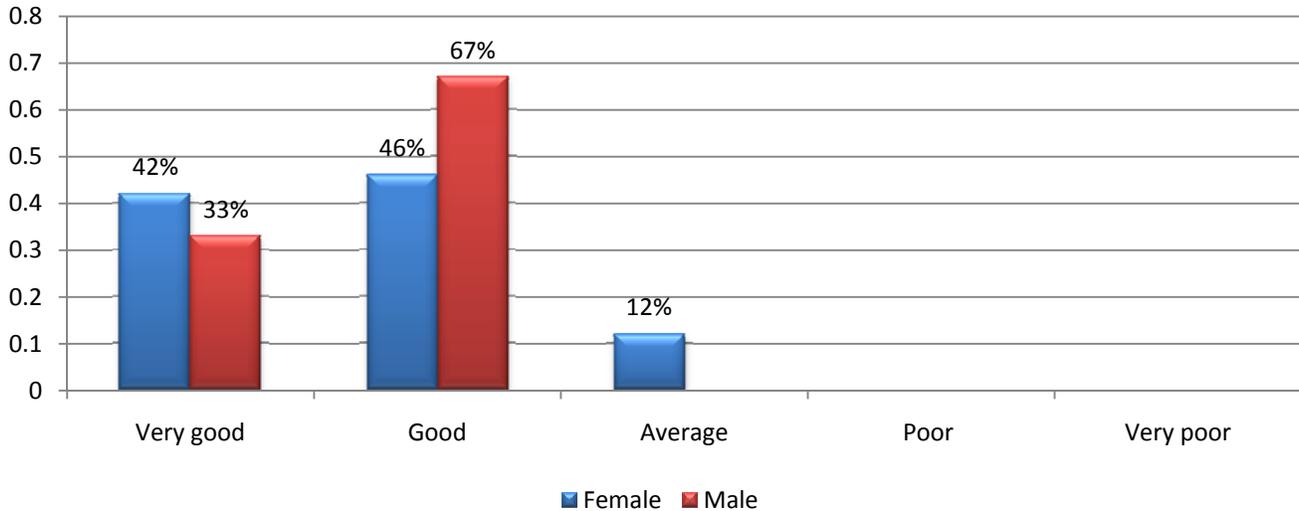
**Figure 33: Child Health - Understanding Risks/Benefits of Vaccination, by Gender**



Child Health clinic respondents were also asked how they would rate their ability to recognize key developmental milestones and to know when additional care is needed. Overall, 89% of

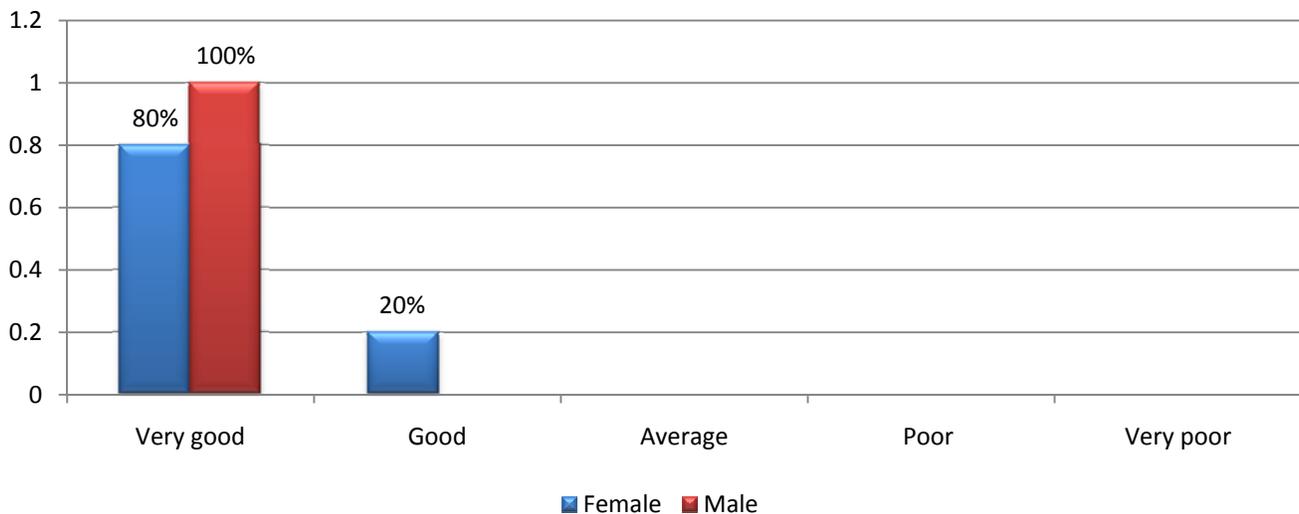
respondents rated their ability as “very good” (41%) or “good” (48%). All men and 88% of women rated their ability as “very good” or “good (Figure 34).”

**Figure 34: Child Health - Ability to Recognize Key Developmental Milestones, by Gender**



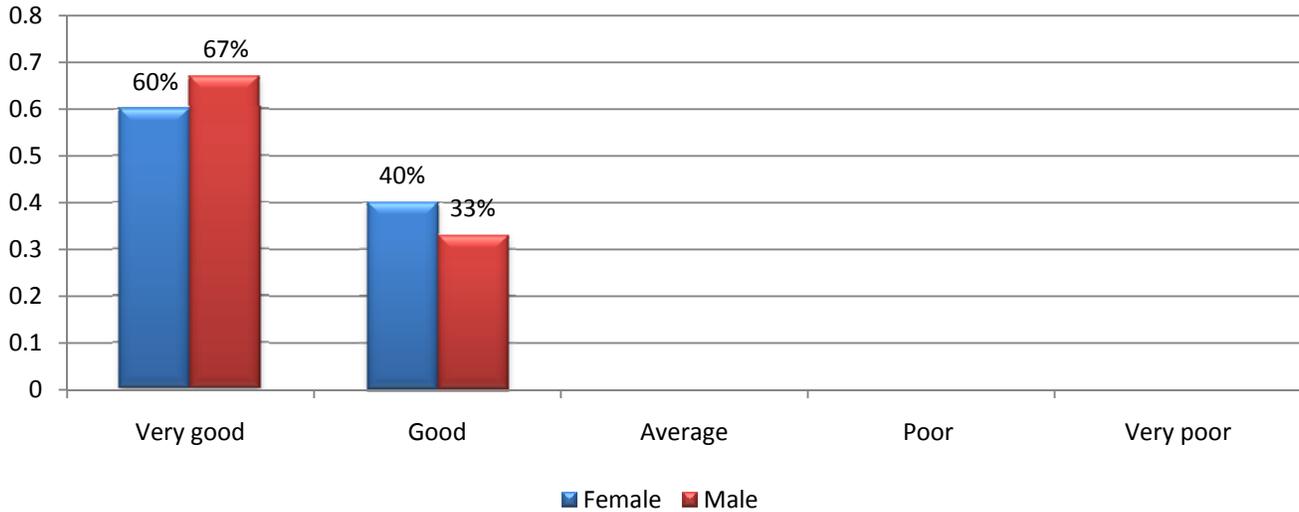
**Lipids Clinic:** Lipids clinic respondents were asked to rate the variety and quality of educational materials they were given. Overall, all respondents rated the materials as “very good” (83%) or “good” (17%). (Figure 35).

**Figure 35: Lipids - Variety and Quality of Educational Materials, by Gender**



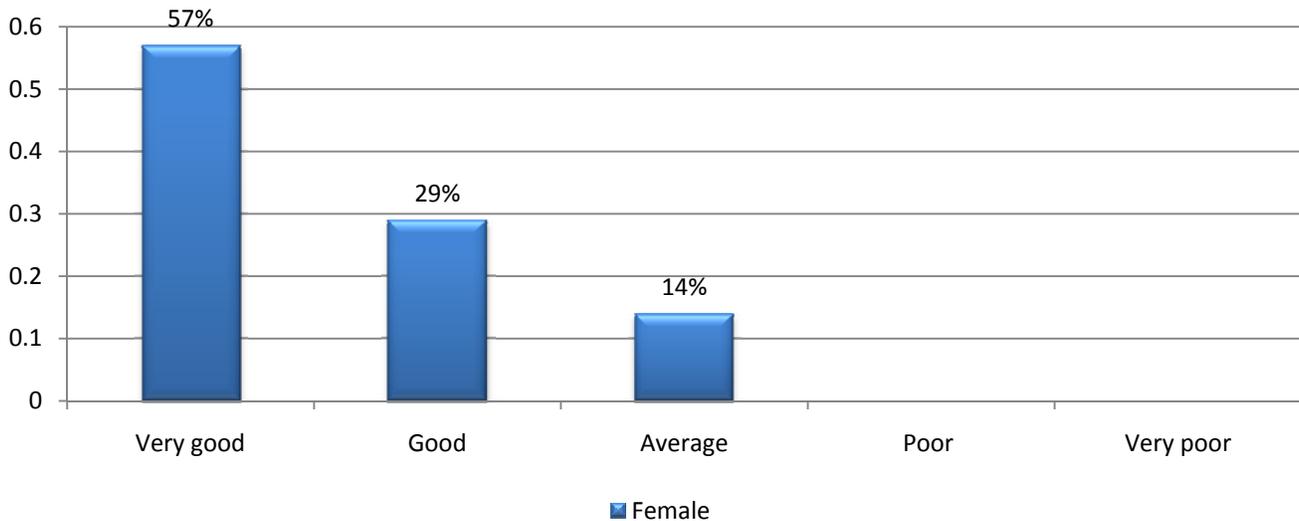
Lipids clinic respondents were also asked to rate their knowledge of cholesterol and how to improve levels. All rated their knowledge as “very good” or “good” (Figure 36).

**Figure 36: Lipids - Knowledge about Cholesterol and How to Improve Levels, by Gender**



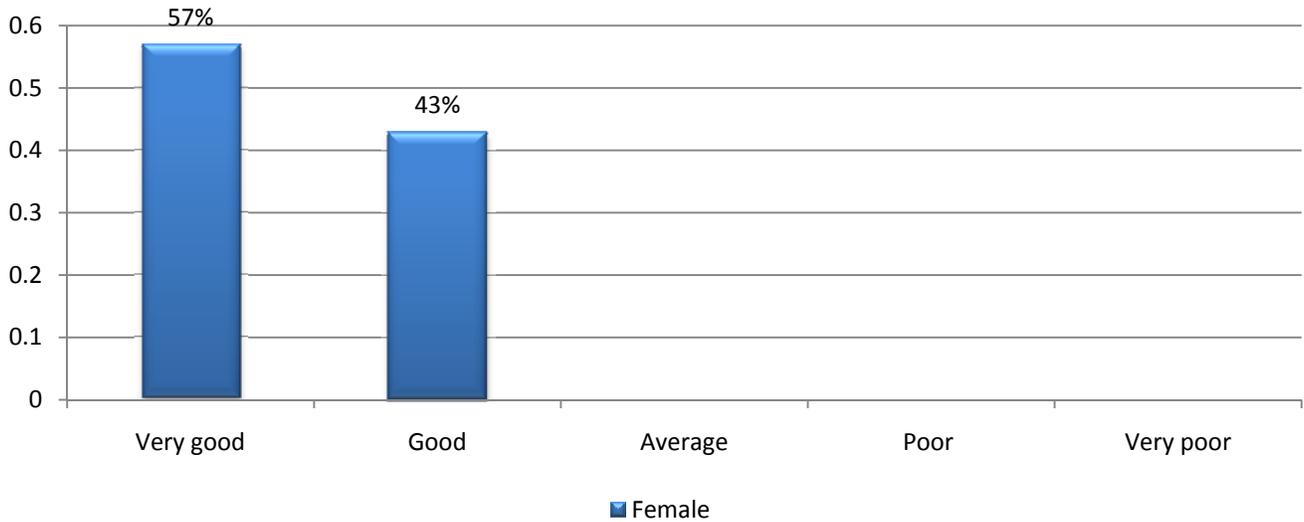
**Family Planning:** Family planning clinic respondents were asked to rate their knowledge of the birth control method they were provided. All respondents were women. Eighty-five percent rated their knowledge as “very good” or “good” (Figure 37).

**Figure 37: Family Planning - Knowledge of Provided Birth Control Method**



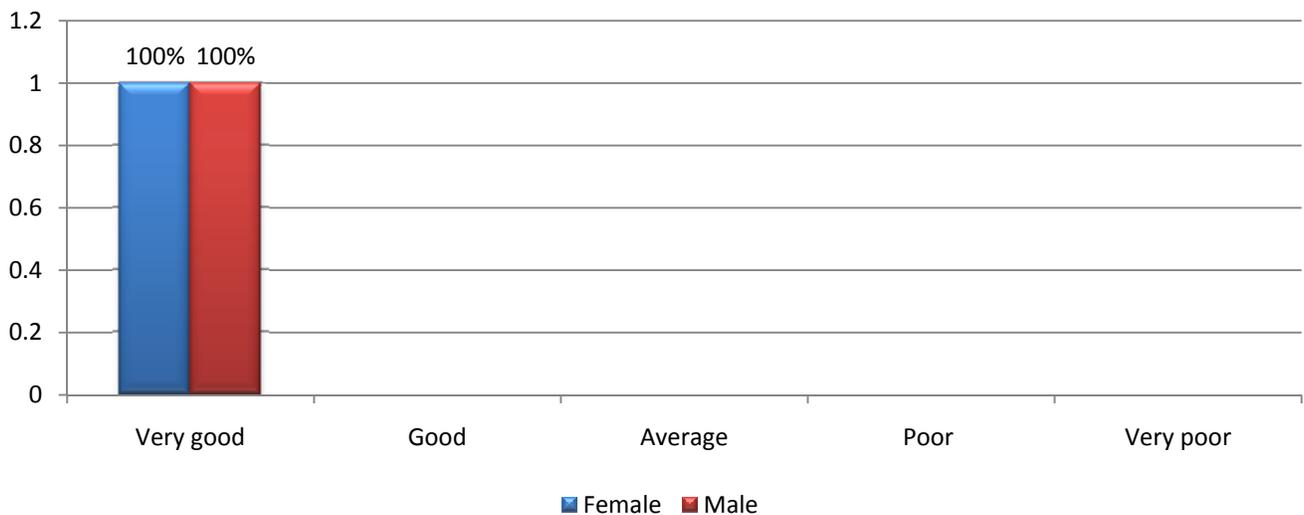
Family Planning respondents were also asked to rate their knowledge of sexually-transmitted diseases. All respondents rated their knowledge as “very good” or “good” (Figure 38).

**Figure 38: Family Planning - Knowledge of Sexually-Transmitted Diseases**



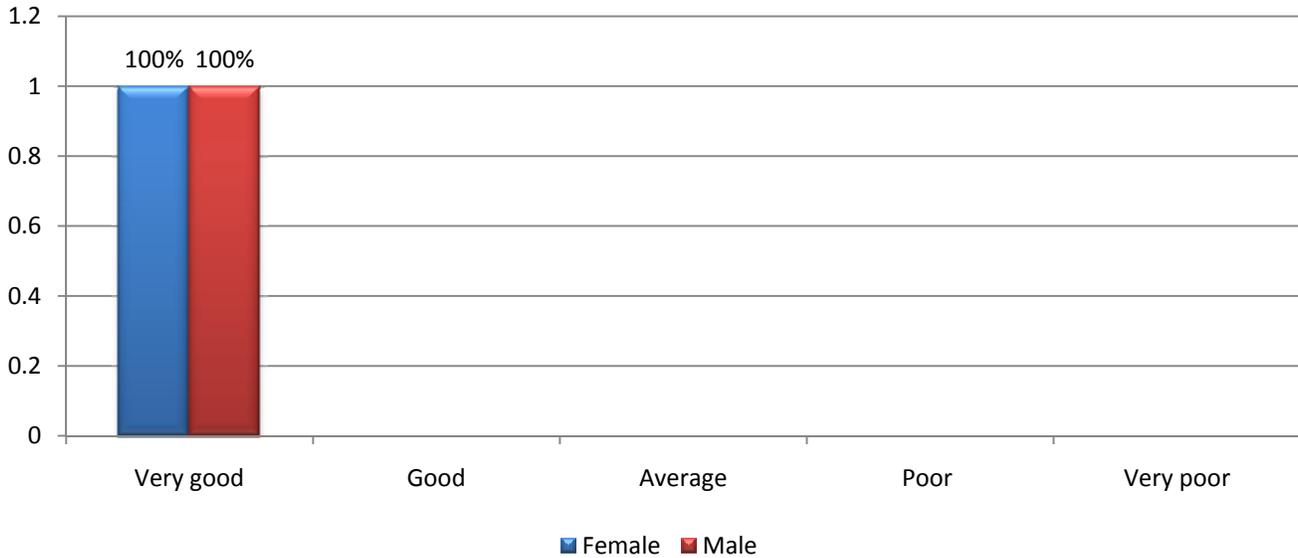
*TB Clinic:* TB clinic respondents were asked to consider the amount of information provided on the treatment of tuberculosis. All 3 respondents rated the amount of information as “very good” (Figure 39).

**Figure 39: TB - Amount of Information on Treatment of Tuberculosis, by Gender**



TB clinic respondents were also asked to rate their knowledge of tuberculosis. All 3 respondents rated their knowledge as “very good” (Figure 40).

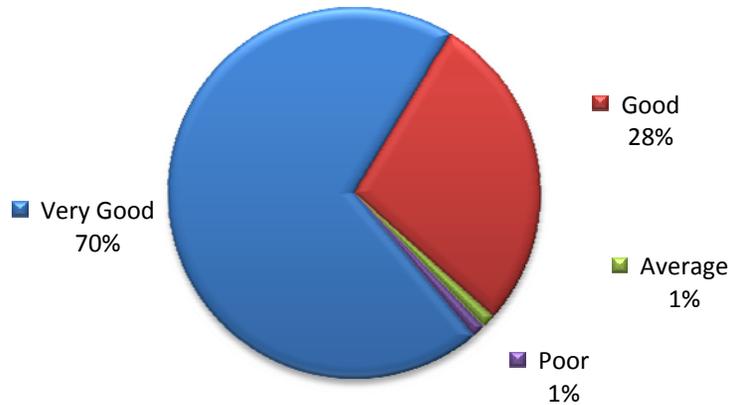
**Figure 40: TB - Knowledge of Tuberculosis, by Gender**



Satisfaction with Physician/Nurse Assistance

The following survey questions asked respondents to rate the service they received as very good, good, average, poor, or very poor. Ninety-eight percent of respondents said that the way the doctor or nurse helped them with their health problem was “very good” (70%) or “good” (28%, Figure 41, 6 missing). One respondent (CEED clinic) rated the assistance as “poor.”

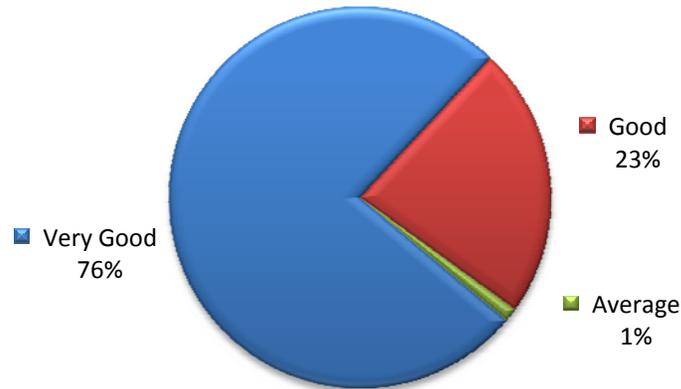
**Figure 41: The Way that the Doctor or Nurse Helped with Your Health Problem Today**



Satisfaction with Staff Treatment

Ninety-nine percent of respondents said that the respect and courtesy shown to them by all staff members was “very good” (76%) or “good” (23%, Figure 42, 5 missing). No respondents rated respect and courtesy as “poor” or “very poor.”

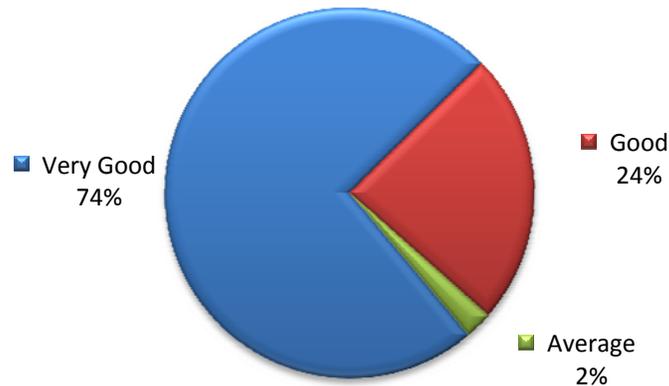
**Figure 42 The Respect and Courtesy Shown to You by All Staff Members**



Satisfaction with Communication

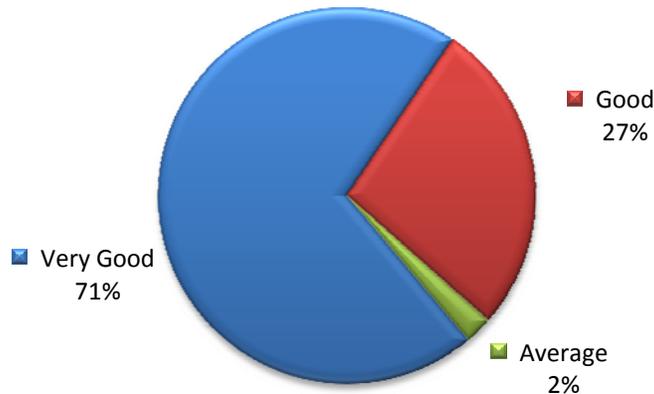
Ninety-eight percent of respondents said that the way the Physician or Nurse spoke to them about the treatment or medication plan was “very good” (74%) or “good” (24%, Figure 43, 8 missing). No respondents marked “poor” or “very poor”.

**Figure 43: The Way That the Doctor or Nurse Talked to You About Your Treatment of Medication Plan**



Ninety-eight percent of respondents rated the opportunity to ask all of their questions as “very good” (71%) or “good” (27%, Figure 44, 7 missing). No respondents marked “poor” or “very poor.”

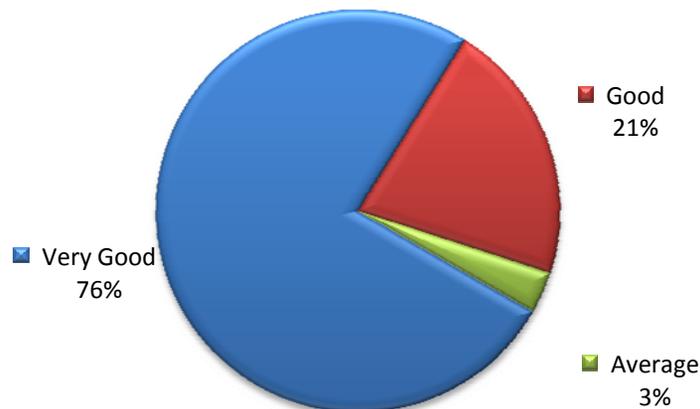
**Figure 44: The Opportunity to Ask all of the Questions You Wanted to Ask**



Overall Satisfaction

Ninety-seven percent rated their clinic experience as “very good” (76%) or “good” (21%, Figure 45, 2 missing). Three respondents marked “average.”

**Figure 45: Overall Rating of Health Department Clinic Experience**



**Suggestions for Improvement of Clinic Services**

Respondents were asked how the clinic services could be improved. Suggestions included:

- Organize the pamphlet area.
- Add on general physician facilities.
- Improve waiting time, have patients control their children.
- Turn clinic into one-stop center for persons of all ages.

There were several unsolicited positive comments about the clinics and included:

- All nurses are very kind and understanding. Great group of women! (2)
- Everyone here is always helpful. We have come here for 3 years. They really go the extra mile. (3)
- Maria has been very helpful with appointment, and is very nice. (9)
- I have been coming here since 2003 and I am comfortable here.
- I had a very pleasant visit at the health clinic. The doctor was very nice, the nurse talked to me great and Maria is wonderful.
- I think you guys are awesome and I wouldn't improve a thing. I'm so happy there is a clinic close by that helps people if they are in financial situations.
- I was scared and you made me feel good being here. Thank you.
- Informative – not rushed – a nice day.
- Keep up the good work. It's great to come to a place where everyone seems to care.
- Not a thing. If I get health insurance or make money I would still like to come here, because of the service you receive here.
- Everyone was very professional and helpful.

One person asked for assistance with VIM.