Aim Statement: We will increase client survey participation to 30% by the end of 2017 in order to better identify opportunities for improvement.

PLAN: Area to work on: Improving survey response rate by increasing opportunities for clients to take the survey, and by making the survey shorter and easier to complete.

Describe the change being tested: A shorter, more specific survey will be tested in the immunization clinic. Offering the survey electronically on tablets will make it convenient for clients to complete the survey without adding to paper clutter. This option will also make it easy for the health department to track the survey completion rate.

What question does this test seek to answer? Will more clients complete the survey if we are more intentional about offering the survey, and the survey is offered in a convenient electronic format?

What do you predict or expect the result will be? Survey response rate will increase from almost zero to at least 20%.

What measure will you use to learn if this test is successful or has promise? The percentage of the surveys offered which are actually completed will be measured to gauge the success of the test.

Plan for change or test: From May 1 to June 23, 2017 a client experience survey will be offered to clinic patients using Survey Monkey on a tablet. During the same time period, a paper survey will be offered to environmental health clients, along with a postage paid return envelope. Environmental health survey data will be entered into Survey Monkey manually for reporting purposes.

Data collection plan: Clinic survey data will be continuously collected automatically by Survey Monkey. Environmental health data will be collected on an ongoing basis as completed surveys are received in the mail. A final report of all data will be provided to the QI team and staff after the conclusion of the test.

DO: Report what happened when you carried out the test. Describe observations, findings, problems encountered, special circumstances. The clinic portion of the survey went smoothly, with no problems noted. Clients were not always monitored closely after being provided the tablet to complete the survey. If some clients neither accepted nor declined the survey, the response rate may be artificially high. One minor problem experienced in the Environmental Health Division was the difficulty of getting into the habit of distributing the surveys on a regular basis.

STUDY: Compare your results to your predictions. What did you learn? Any surprises? Response rates significantly exceeded the prediction of at least 20% in both surveys tested. We learned that we can achieve useful survey response rates when we have a detailed plan and we are intentional about offering the survey to clients. We were surprised at the high response rate experienced with the clinic survey.

ACT: What will you do next? Adopt, adapt or abandon the change? We plan to adopt the electronic survey method for the clinic and general health department surveys, and the paper survey method for the environmental health survey. The surveys will be implemented department-wide in the fall of 2017 as part of the strategic planning process. We will recommend that the surveys be revised by each division in an effort to obtain more useful information to identify successes and opportunities for improvement within the health department.