County of Los Angeles – Department of Mental Health
Office of Administrative Operations – Quality, Outcomes, and Training Division

Summary Report: Annual Test Calls Study

Report Date: April 12, 2021
Study Period: March 1, 2020, to October 31, 2020

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ACCESS Center Overview

In Los Angeles (LA) County, the ACCESS Center operates the statewide toll-free telephone number (1-800-854-7771) for both emergency and non-emergency calls, 24 hours a day and seven days a week (24/7). ACCESS Center services include but are not limited to: the deployment of crisis evaluation teams, information and referrals for specialty mental health services (SMHS), after hours tracking of acute inpatient psychiatric beds availability, after-hours Department of Mental Health's (DMH) point of contact for Patient's Rights and special/critical incident reporting, and telephone interpreter services for language assistance in a preferred language. The ACCESS Center's 24/7 hotline often serves as a caller's first point of contact with DMH.

The ACCESS Center strives to meet LA County's residents' cultural and linguistic needs by providing language assistance services in threshold and non-threshold languages. Callers request information related to SMHS and other social needs. The ACCESS Center provides referrals to providers and services conveniently located and appropriate to their cultural and behavioral health needs. The ACCESS Center responds to various requests from culturally diverse callers with unique requirements for assistance.

In Calendar Year (CY) 2020, in response to the coronavirus (COVID-19) pandemic, DMH expanded the toll-free telephone number to include two other call lines for the LA community. One additional line is an emotional support line for any community member in need of resources and support in response to the pandemic. The other line is specifically for veterans or military family members. The addition of the two other call lines increased the overall volume of calls to the toll-free telephone number for CY 2020. However, the scope of this report will focus on the calls routed to the ACCESS Center.

ACCESS Center Call Volume and Responsiveness

DMH reviews aggregate data on the ACCESS Center's call volume and responsiveness annually (Appendix A: 'Calls Answered within 1-minute'). In CY 2020, the ACCESS Center received 170,513 calls. This represents a 19% increase from CY 2019 (N=143,258) and a 21% increase from CY 2018 (N=141,460; Figure 1).

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Figure 1: ACCESS Center Call Volume for Calendar Year 2018 through 2020
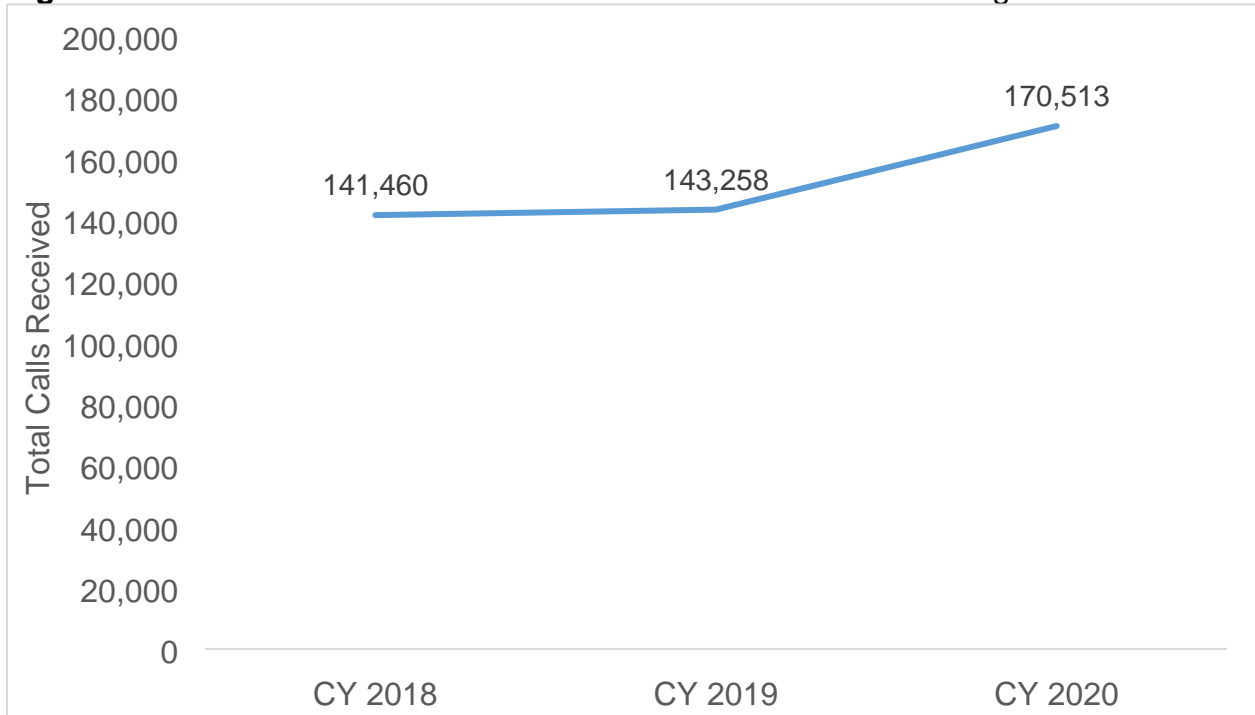
Data Source: ACCESS Center data reports, CY 2018 to CY 2020.

A larger number of calls received by ACCESS Center in CY 2020 were handled during after-hours (51.3%, N= 87,395) when compared with business-hours (48.7%, N=83,118; Figure 2).

Figure 2: Number of Business Hours versus After-Hours Calls Received by ACCESS Center in Calendar Year 2020
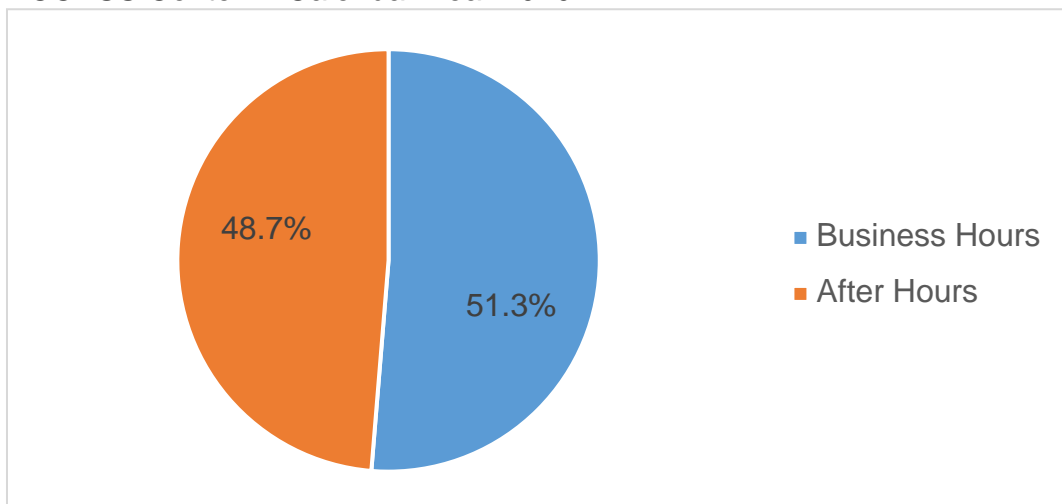
Note: Business-hours are 8:00 AM to 5:00 PM, Monday through Friday, excluding holidays. After-hours are outside of business-hours and include weekends and holidays. Data Source: Access
Center's Calls Answered within 1-minute report, CY 2020.

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ACCESS Center non-English Language Calls

The ACCESS Center tracks the number of calls received in non-English languages (Appendix B: 'Five-Year Trend in non-English Language Calls Received by ACCESS Center'). Over the past five years, the trend indicates that most non-English callers have requested interpreter services in Spanish, followed by Korean, Mandarin, Armenian, Farsi, and Cantonese.

In CY 2020, ACCESS Center staff provided language interpreter services in the Spanish language for 9,009 calls. TelephoneLanguage Interpreters from one of three current Vendors used by ACCESS interpreted an additional 896 Spanish language calls. Approximately 96.4% of the non-English calls received by ACCESS Center staff were in Spanish (N=9,905), followed by Korean (N=113) at 1.1%, and Mandarin (N=79) at 0.8%. One hundred seventy-two calls (N=172) in other languages were received in CY 2020 and accounted for 1.7% of all non-English calls.

Annual Test Calls Study

The DMH Test Calls Study is a collaborative effort between the ACCESS Center and the Quality Improvement (QI) unit, to identify areas of improvement related to cultural and linguistic responsiveness, customer service, referrals to SMHS, and appropriate documentation of call information and to implement QI strategies for improvement in the areas identified. ACCESS Center management and staff collaborate with the QI unit on this project and the annual summary report.

Purpose

The Test Calls Study aims to identify potential areas for quality improvement and strengths in the responsiveness of the ACCESS Center's 24/7 line to Medi-Cal beneficiaries. Moreover, the purpose of the Test Calls Study is to monitor:

- Responsiveness of the 24/7 ACCESS Center Toll-Free Line;
- Knowledge, helpfulness, and cultural sensitivity of the ACCESS Agent;
- Documentation of the call and Test Callers in the ACCESS Center Call Log;
- ACCESS Center's responsiveness for a call in a non-English language ;
- Information provided to Test Callers on how to use the beneficiary problem resolution and fair hearings processes; and
- Verify compliance with regulatory and/or contractual requirements (CCR, title 9, chapter 11, sections 1810.405(d) and 1810.410(e)(1)).

Methodology

DMH utilizes a "Secret Shopper" approach for the Test Calls project. The consistent methodology allows for reliable conclusions. Test callers provide information on their experiences, the ACCESS Center Agent, and interpreter services if applicable, using a Test Calls Survey form (CY 2020; Appendix C: '24/7 ACCESS Line Test Calls Survey Form for Calendar Year 2020'). In addition to the survey form, QI provides Test Callers with set guidelines/instructions, scenarios (crisis, non-crisis, beneficiary problem/compliant), a call and data submission schedule, and the list of threshold languages by Service Area (SA). In CY 2020, the QI team worked with the Mental Health Promoters program to organize and facilitate eight Test Calls, one SA per month. Due to the COVID-19 pandemic, fewer calls could be completed for March 2020. The aim was to have four Test Calls in English and four in non-English languages (SA's threshold languages) for each month. Test calls occur during after-hours (before 8:00 AM or after 5:00 PM on weekdays or anytime during weekends or holidays) and business hours (8:00 AM - 5:00 PM on weekdays excluding holidays). In CY 2020, QI coordinated the annual Test Calls study between March 1, 2020, and October 31, 2020, which covered one SA during each of those months.

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Summary of Test Calls Study Findings for Calendar Year 2020

Completed Test Calls

The following report summarizes the CY 2020 Test Calls Study's findings. A summary of the completed test calls by SA and the reason for the call is presented in Table 1. Of the 60 Test Calls completed in CY 2020:

- Seventy percent (N=42) of the Test Callers cited "Mental Health Referral" as their reason for the call, followed by "Crisis" at 22% (N=13), and "Beneficiary Problem/Complaint" at 8% (N=5).
- About 53% (N=32) of the Test Calls occurred during business hours and the remaining 47% (N=28) occurred during after-hours.
- Test Callers completed 43% (N=26) of their calls in English and 43 % (N=26) in Spanish.
  - 13% of the calls in a non-English language other than Spanish were completed in Armenian (N=1), Cambodian/Khmer (N=1), Cantonese (N=1), Farsi (N=1), Korean (N=2), Tagalog (N=1), and Russian (N=1).

Table 1: Number of Completed Test Calls by Service Area, Month, and Reason for the Call or Type of Help Requested

SA	Month[1]	Reason/Type of Help Requested			SA Totals
		Mental Health Referral	Crisis	Beneficiary Problem/ Complaint	
SA 1	July & August	6	1	0	7
SA 2	August	6	2	1	9
SA 3	October	5	2	1	8
SA 4	September	5	2	1	8
SA 5	June	6	2	1	9
SA 6	May	6	2	0	8
SA 7	April	5	2	1	8
SA 8	March	3	0	0	3
Grand Total		42	13	5	**60**

Note: This table only includes Test Calls considered "completed" for the CY 2020 study. [1]Some SAs completed their Test Calls at the start of the following month. Data Source: Enterprise Feedback Management (EFM) system, CY 2020.

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Test Calls Data by Survey Item

DMH relies on the data gathered from the Test Calls Study Survey Form (Table 2) to identify the ACCESS Center's strengths and areas for improvement, namely:

- ACCESS Agent provided their first name;
- ACCESS Agent inquired about emergency or crisis;
- Use of interpreter services;
- Satisfaction with interpreter services;
- Reason for the call or type of help requested;
- Provided with a referral or other information;
- Provided guidance on accessing the beneficiary grievance form and contacting Patient's Rights Office;
- Knowledge, helpfulness, cultural sensitivity, and customer service of the ACCESS Agent;
- Wait time and satisfaction with wait time and
- ACCESS Agent logged the call.

For quality assurance purposes, ACCESS Center records all of their calls. To ensure accuracy and completeness of the study's data, ACCESS Center staff reviewed the recordings associated with each of the completed Test Calls when available. When discrepancies between the recordings and the survey data presented, the ACCESS Center prompted QI to update the report and survey data. QI reflected the revised data in the quarterly 24/7 ACCESS line reports submitted to the Department of Health Care Services (DHCS).

Most of the survey items that were expected to occur during test calls (i.e., providing agent name, asking if it is an emergency or crisis, documenting the call) occurred at a high frequency across test calls and satisfaction ratings were generally high. ACCESS Agents provided their first name on all calls (N=60, 100%). They also asked for the test caller's name (N=53, 88%), asked if it was an emergency or crisis (N=56, 93%), and documented (N=44, 80%) the majority of calls (beneficiary problem scenarios excluded per state criteria). For crisis and mental health referral calls, ACCESS Agents provided referrals (N=53, 96%) in most cases and, for beneficiary problem/complaint calls, they provided information on how to contact the Patient's Rights Office for all calls (N=5, 100%) and how to find the grievance form for most calls (N=4, 80%).

The majority of test callers were mostly or very satisfied with the ACCESS Agent's services and the wait time (Figure 3). Callers had the highest satisfaction ratings for the agent's helpfulness, followed by knowledge, customer service, and cultural sensitivity. Callers were the least satisfied with their wait times.

The most common wait time for test calls was over seven minutes (38%), followed by one to three minutes (28%) (Figure 4). About one-fifth of calls (20%) had wait times of four to seven minutes and a smaller percentage (13%) waited under one minute.

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Table 2: Test Calls Study Survey Data by Item and Percent (N=60)[1]

Survey Item	Percent (%)
ACCESS Agent provided their first name to the caller[2]	100%
ACCESS Agent requested the Test Caller's name[3]	88%
ACCESS Agent inquired if the call was for an emergency or crisis[4]	93%
Calls in a non-English language	57%
The caller reported satisfaction with interpreter's customer service	75%
The caller reported satisfaction with quality of interpretation	81%
The caller reported getting the needed help from the interpreter	81%
ACCESS Agent provided a referral	96%
ACCESS Agent provided guidance on the beneficiary grievance form	80%
ACCESS Agent provided guidance on contacting the Patient's Right Office	100%
Test Caller reported satisfaction with ACCESS Agent's knowledge	87%
Test Caller reported satisfaction with ACCESS Agent's helpfulness	89%
Test Caller reported satisfaction with ACCESS Agent's cultural sensitivity	83%
Test Caller reported satisfaction with ACCESS Agent's customer service	85%
Test Caller reported satisfaction with wait time	70%
The ACCESS Agent logged Test Call	80%

Note: Data above do not reflect the [1]three (3) calls QI and ACCESS Center excluded from the study because the calls could not be located or were routed to one of the additional call center lines. ACCESS Center staff verified survey responses by reviewing audio recordings of the Test Calls (when available). Percentages for Yes/No questions reflect the percent that responded "Yes". For questions with Likert scales, percentages reflect callers that reported being mostly and very satisfied.

Upon audio review, corrections were made to address discrepancies and corrected data was included in the quarterly Test Calls report to DHCS:

[2]Four (4) responses to the "ACCESS Agent provided their first name to the caller" item were changed from "No" to "Yes;"

[3]One (1) response to the "ACCESS Agent requested the Test Caller's name" item was changed from "No" to "Yes;" and

[4]Ten (10) responses to the "ACCESS Agent inquired if the call was for an emergency or crisis" item were changed from "No" to "Yes."

Data Source: EFM system, CY 2020.

Figure 3: Percent of Test Caller Satisfaction with ACCESS Center Services by Category

Category	Not at All Satisfied	A Little Bit Satisfied	Somewhat Satisfied	Mostly Satisfied	Very Satisfied
Helpfulness	7%	3%	2%	17%	72%
Knowledge	7%	3%	3%	25%	62%
Customer Service	7%	3%	5%	23%	62%
Cultural Sensitivity	7%	3%	5%	23%	60%
Wait Time	3%	5%	22%	30%	40%
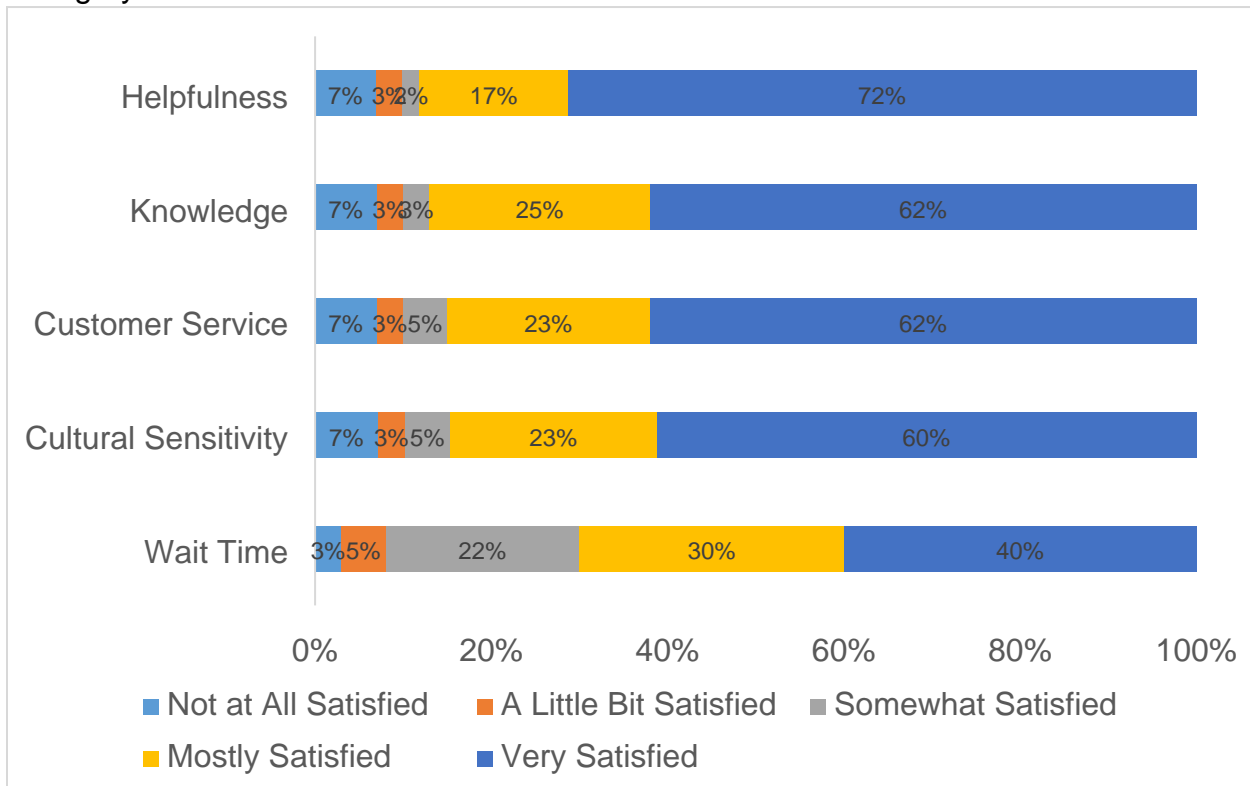
Data Source: EFM system, CY 2020.

Figure 4. Calls by Wait Time

Wait Time	Percent
> 7 minutes	38.3%
1-3 minutes	28.3%
4-7 minutes	20.0%
< 1 minute	13.3%
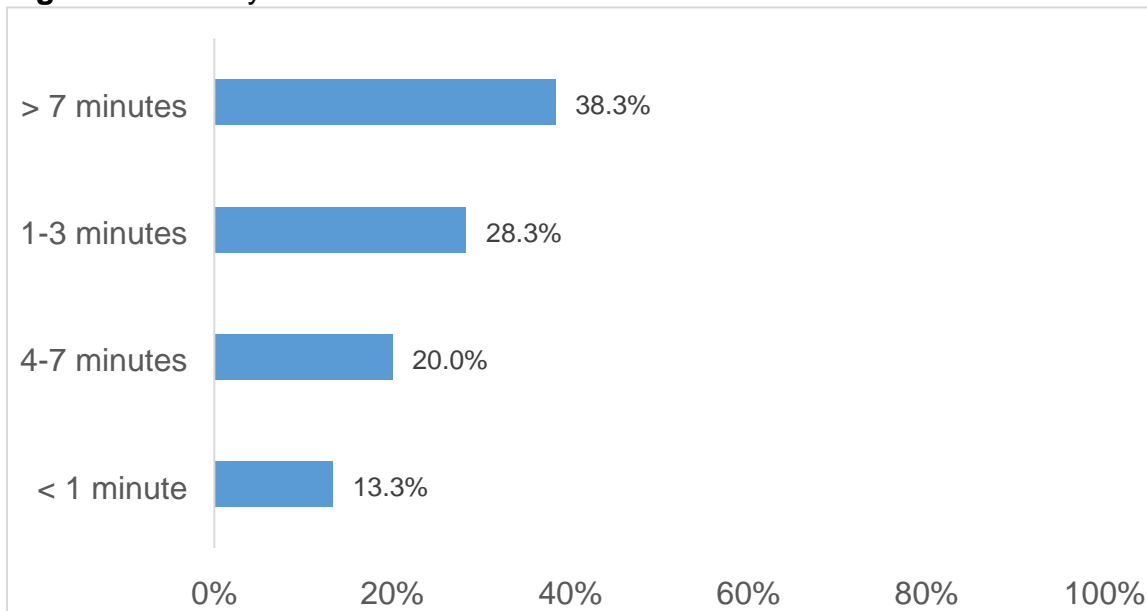
Data Source: EFM system, CY 2020.

Trending of ACCESS Center Test Calls Data

The QI unit evaluated the ACCESS Center's performance on the Test Calls survey items that received a "Yes" or "No" response over five years (Table 3). The percentage of ACCESS Center staff providing their first name to callers increased by 11 Percentage Points (PP) from 89% in CY 2016 to 100% in CY 2020 (Figure 5). The percentage of ACCESS Center staff requesting the caller's name increased by 25 PP from 63% in CY 2016 to 88% in CY 2020 (Figure 6). Satisfaction with interpreter services declined by 2 PP from 81% in CY 2016 to 79% in CY 2020 (Figure 7). The percentage of ACCESS Center staff providing referrals increased by 3 PP from 93% in CY 2016 to 96% in CY 2020 (Figure 8). The rate of ACCESS Center staff asking callers if the call was an emergency or a crisis increased by 11 PP from 82% in CY 2016 to 93% in CY 2020 (Figure 9). Satisfaction with the ACCESS Center staff's knowledge and helpfulness increased by 4 PP from 84% in CY 2016 to 88% in CY 2020 (Figure 10). The percentage of calls documented/logged by ACCESS Center staff increased by 36 PP from 44% in CY 2016 to 80% in CY 2020 (Figure 11).

Table 3: Five-Year Trend of ACCESS Center Test Calls Data by Item

Survey Item	2016	2017	2018	2019	2020
ACCESS Agent provided their first name to the caller	89%	78%	91%	91%	100%
ACCESS Agent requested the Test Caller's name	63%	71%	74%	78%	88%
The caller reported satisfaction with interpreter services[1]	81%	94%	91%	85%	79%
ACCESS Agent provided a referral	93%	93%	99%	96%	96%
ACCESS Agent inquired if the call was for an emergency or crisis	82%	82%	75%	89%	93%
Test Caller reported satisfaction with ACCESS Agent's knowledge and helpfulness[2]	84%	88%	86%	99%	88%
The ACCESS Agent logged Test Call	44%	57%	68%	64%	80%

Data Source: EFM system, CY 2016 to CY 2020. [1]In CY 2020, the survey form inquired about satisfaction according to the interpreter's customer service, quality of interpretation and that the caller got the help needed on a Likert scale rather than a Yes/No question. This number represents an average of those who reported being mostly or very satisfied on all three items. [2]In CY 2020, the knowledge and helpfulness of the ACCESS Agent were rated as two separate items on a Likert scale rather than a Yes/No question. The average of those calls who reported being mostly or very satisfied on both items is presented.

Figure 5: Five-Year Trend for the "Provided their First Name to the Caller" Item

Data Source: EFM system, CY 2016 to CY 2020.

Figure 6: Five-Year Trend for the "Requested the Test Caller's Name" Item
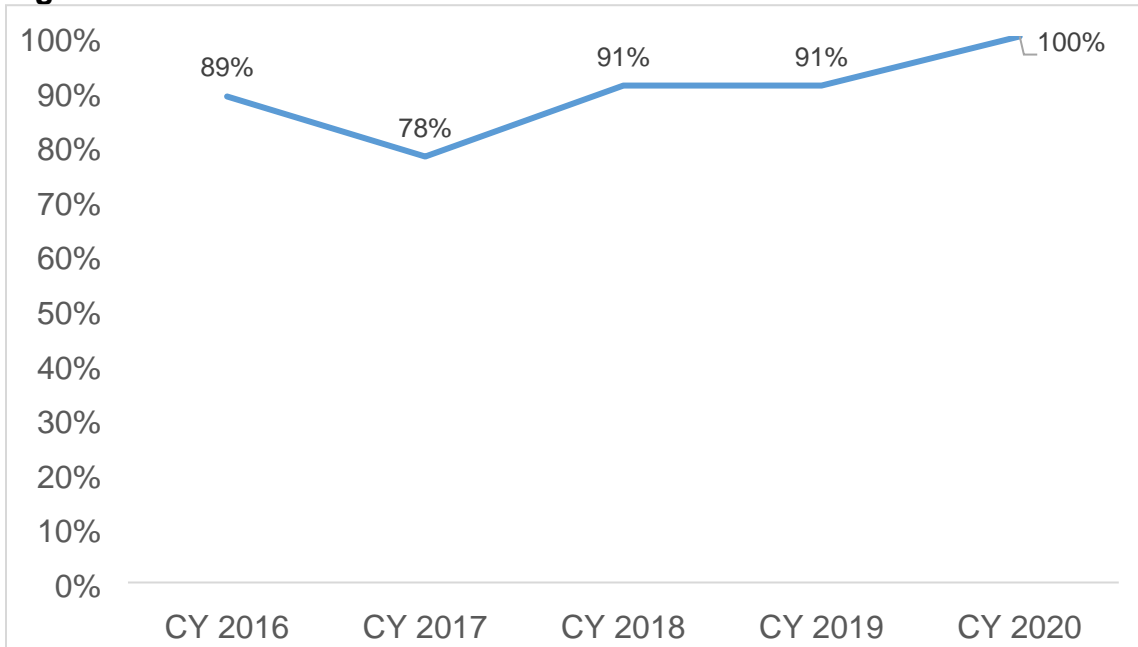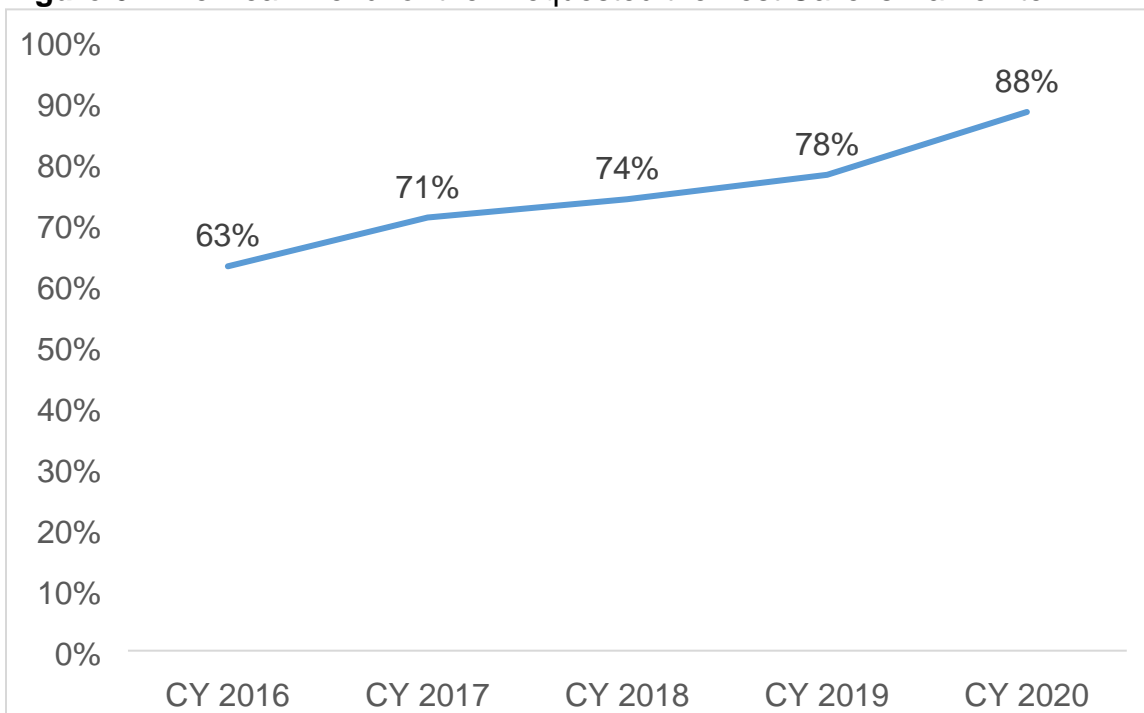

Data Source: EFM system, CY 2016 to CY 2020.

Figure 7: Five-Year Trend for the "Reported Satisfaction with Interpreter Services" Item
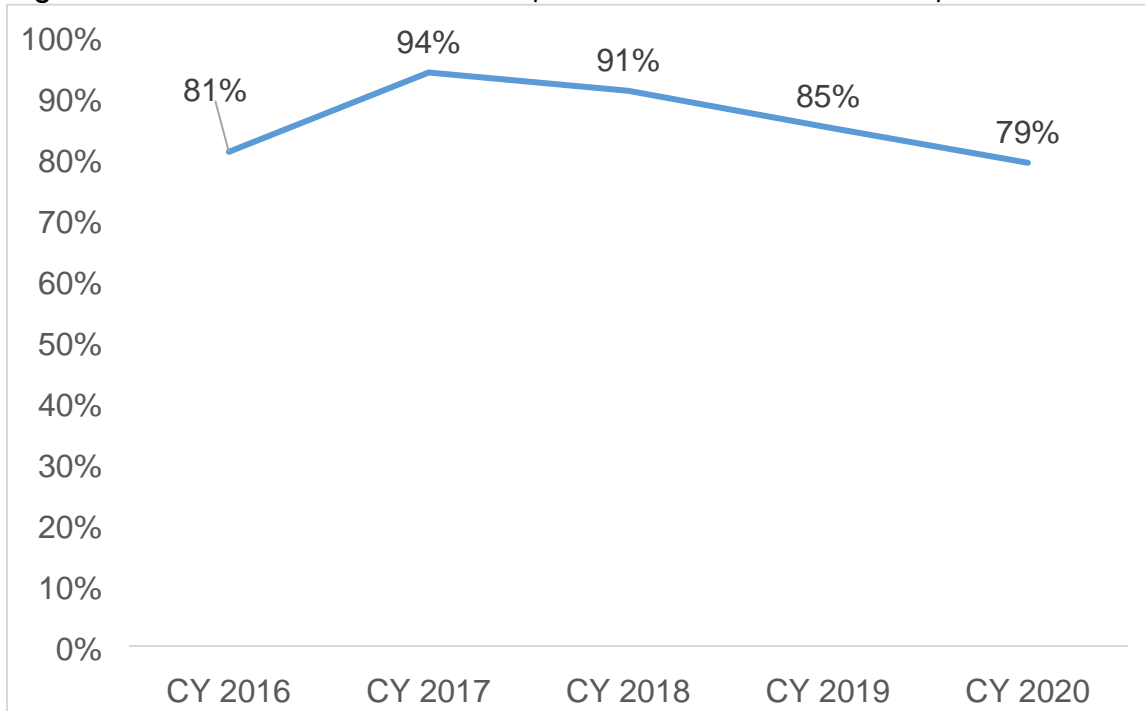
Data Source: EFM system, CY 2016 to CY 2020.

Figure 8: Five-Year Trend for the "Provided a Referral" Item
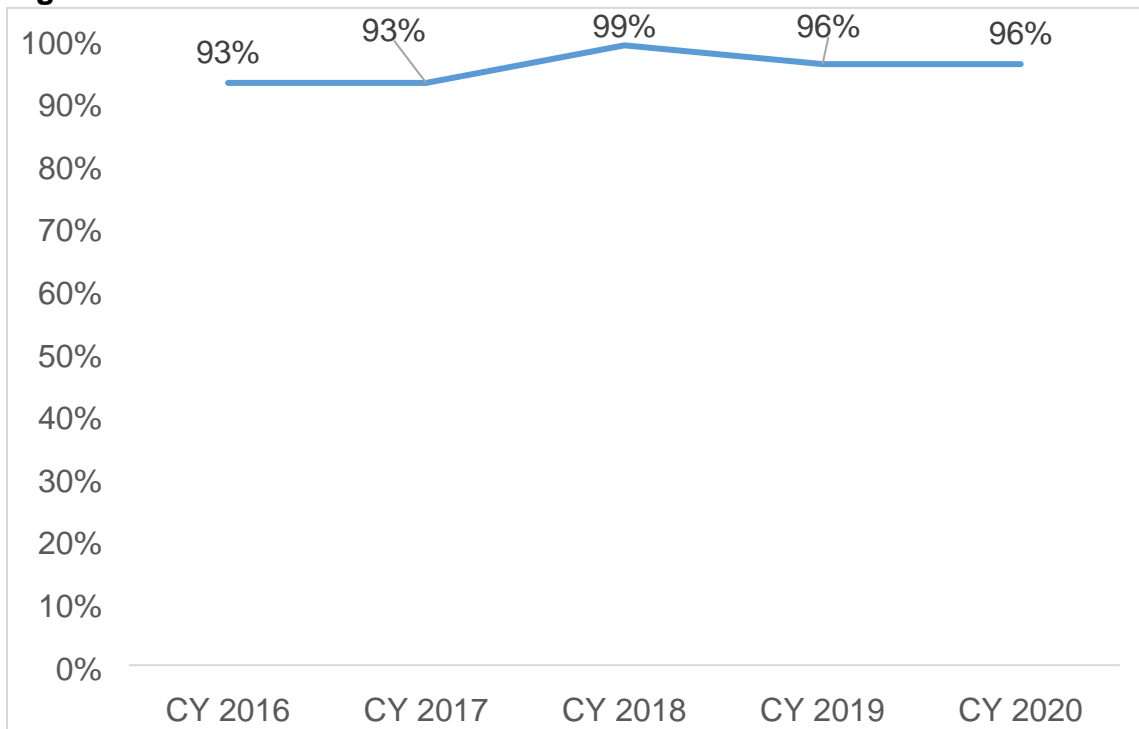
Data Source: EFM system, CY 2016 to CY 2020.

Figure 9: Five-Year Trend for the "Inquired if this was for an Emergency or Crisis" Item
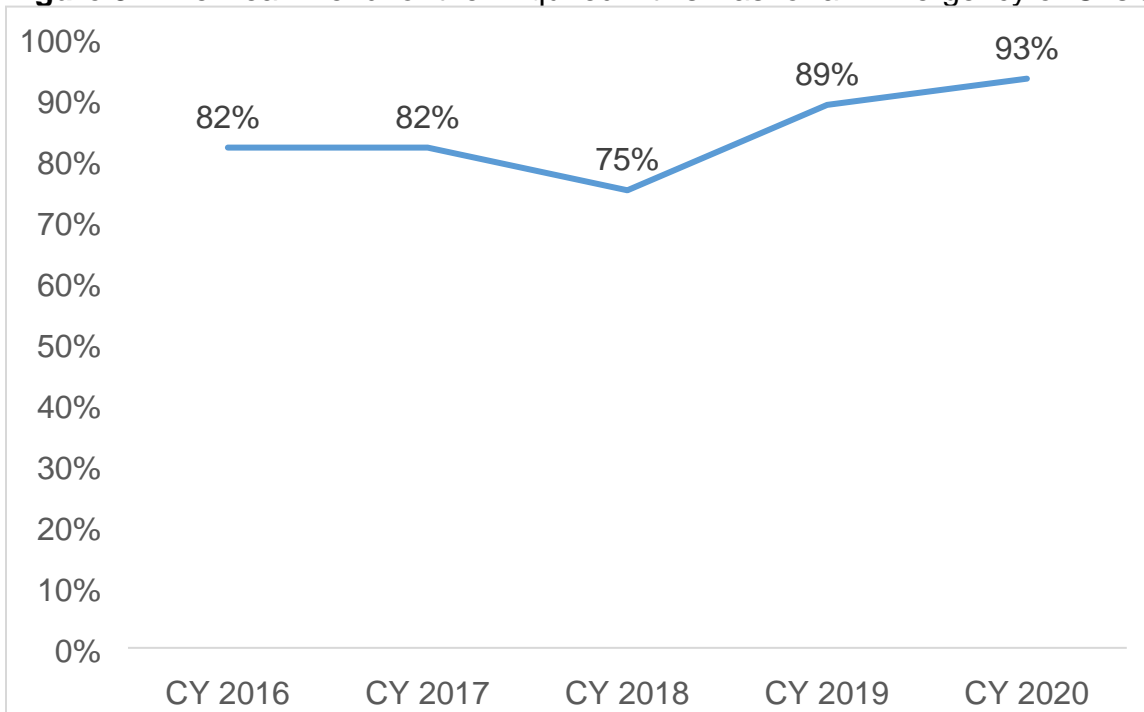
Data Source: EFM system, CY 2016 to CY 2020.

Figure 10: Five-Year Trend for the "Reported Satisfaction with ACCESS Agent's Knowledge and Helpfulness" Item
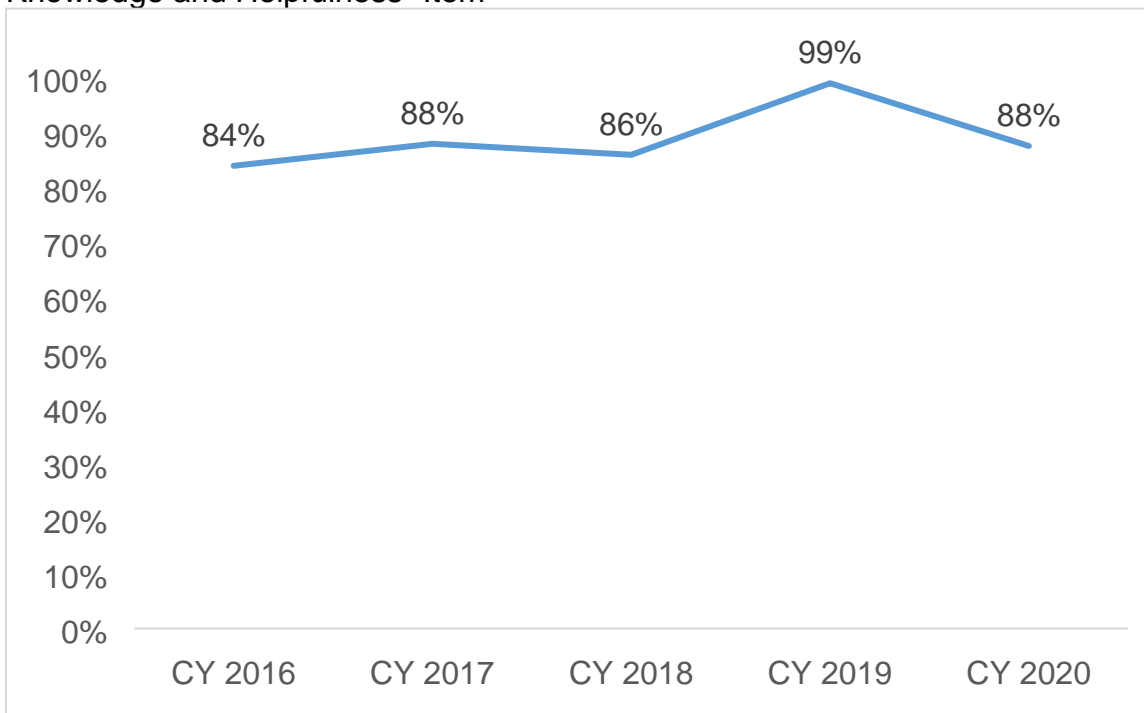
Data Source: EFM system, CY 2016 to CY 2020

Figure 11: Five-Year Trend in Test Calls Logged by ACCESS Center Staff
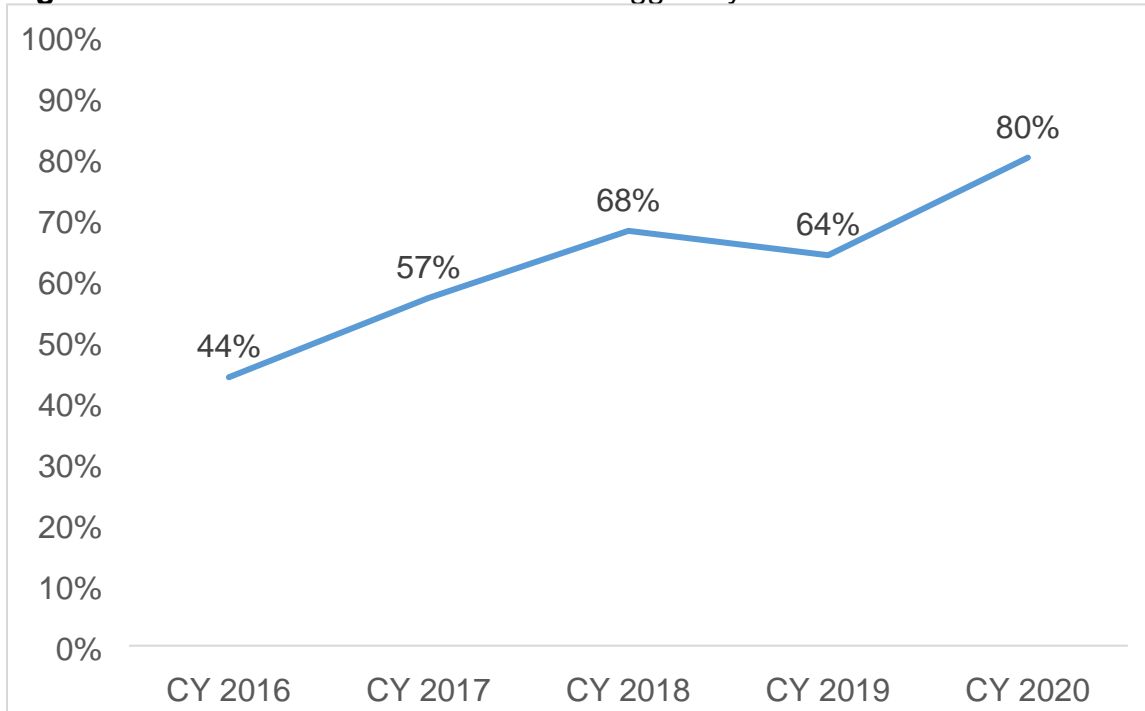
Data Source: EFM system, CY 2016 to CY 2020.

Summary

Six survey items demonstrated improvement in performance from CY 2019 to CY 2020. Two survey items demonstrated a decline in performance between CY 2019 and CY 2020. The percentage of ACCESS Center staff providing a referral stayed the same at 96% in CY 2019 and CY 2020. The rating for the knowledge and helpfulness of the ACCESS Center staff fell from 99% in CY 2019 to 89% in CY 2020. The satisfaction with interpreter services declined from 85% in CY 2019 to 79% in CY 2020.

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Availability of ACCESS Center Services in non-English Languages

A total of 34 (56.7%) test calls were completed in a non-English Language. ACCESS Center staff provided language assistance for 61.8% of the non-English calls exclusively in the Spanish language (N=21). The remaining 38.2% were a mixture of Spanish (N=5) and other non-English languages (N=8) and utilized a Language Interpreter Service Vendor. Figure 12 shows the breakdown of test calls by language.

Figure 12: Completed Test Calls by Language
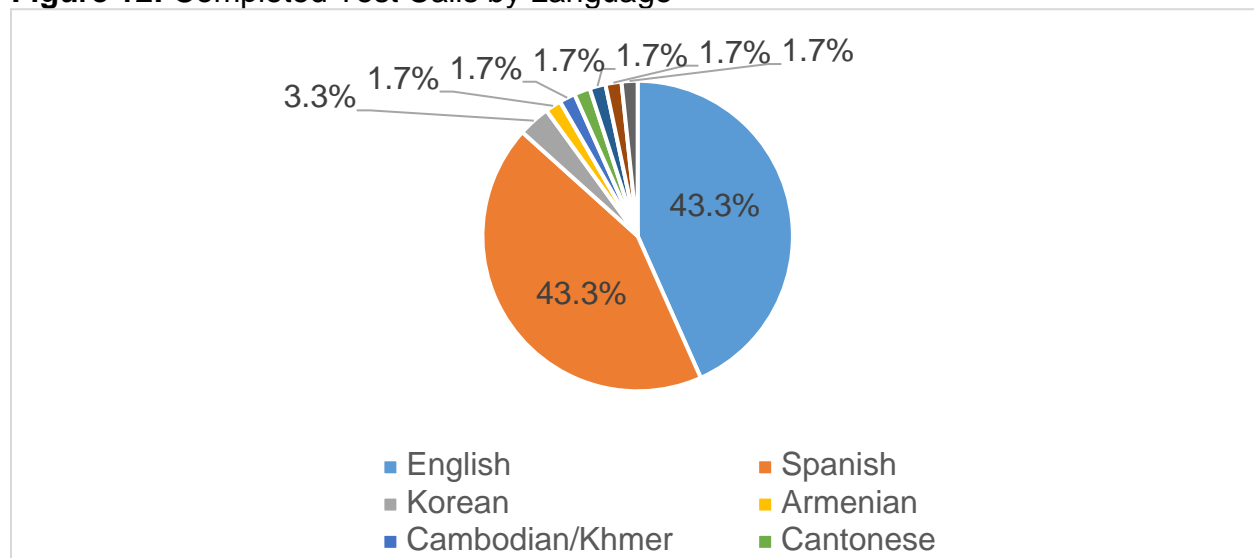
Data Source: EFM system, CY 2020.

Satisfaction with Interpreter Services

Seventy-one percent (N=24) of the test callers completing calls in non-English languages endorsed being mostly or very satisfied with the customer service of their language interpreter services on their survey form and 79% (N=27) endorsed being mostly or very satisfied with the quality of interpretation. Seventy-six percent (N=26) of callers felt mostly or very satisfied that they received the help they needed from the interpreter (Table 4). The satisfaction with the quality of interpreter services by the ACCESS Agent was much higher (85%) than what was observed for the telephone interpreter (69%) used in test calls. The percentages for each item by interpreter type are in Figures 13 and 14.

Table 4: Percent of Callers Mostly and Very Satisfied with ACCESS Center Services or Language Interpreter Service Vendors among non-English Callers

Satisfaction Item	ACCESS Agent (N=21)		Language Interpreter Service Vendor (N=13)	
	Number	Percent	Number	Percent
Customer service	15	72%	9	70%
Quality of interpretation	19	85%	8	69%
I got the help I needed	16	76%	10	77%

Data Source: EFM system, CY 2020. Note: Two callers were missing responses on all ratings for ACCESS Agents.

Figure 13: Percent of Test Caller Satisfaction by Item for interpreter services by ACCESS Agents
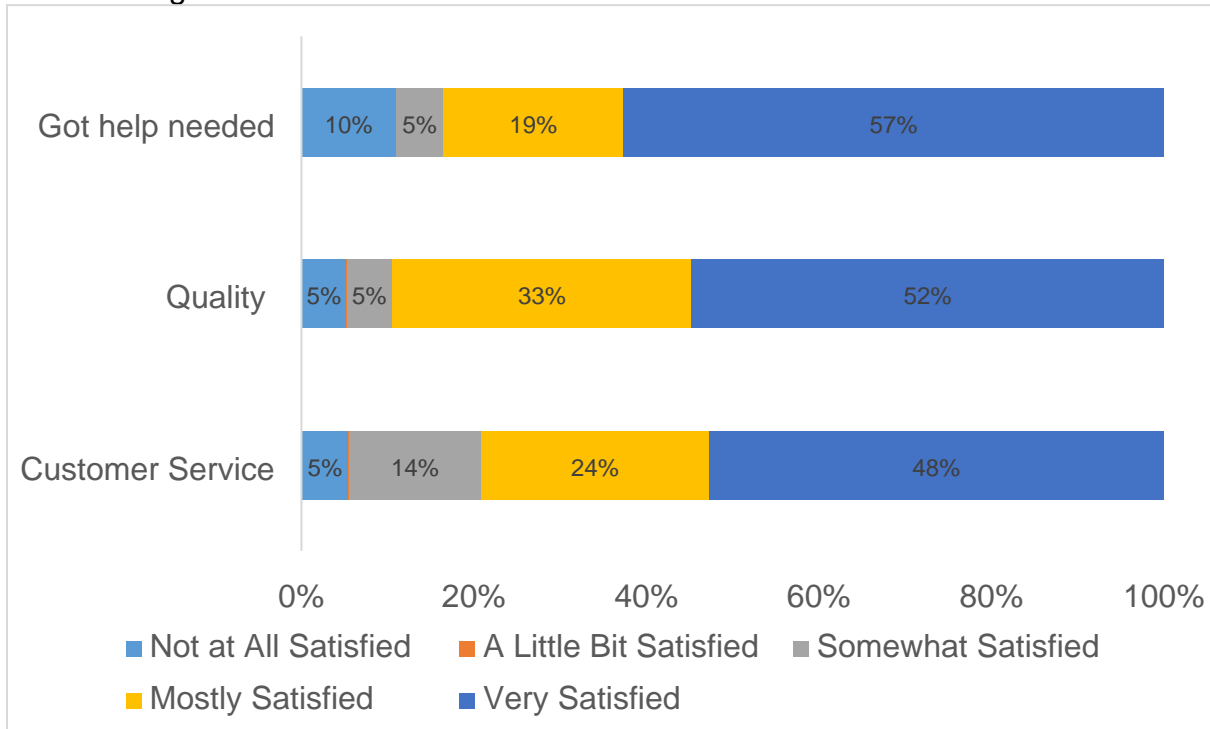
Data Source: EFM system, CY 2020.

Figure 14: Percent of Test Caller Satisfaction by Item for interpreter services by the Telephone Interpreter Line

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Data Source: EFM system, CY 2020.

Implications and Recommendations/Proposed Actions

The QI unit shared the study's findings, including trends data, with the ACCESS Center's Test Calls team.

- ACCESS Center management noted that improvement in two areas related to referrals and documentation per the CY 2020 test call findings resulted from process improvement strategies implemented in the past year in these two areas. ACCESS Center established an internal Quality Improvement Committee (QIC) in 2019. The QIC developed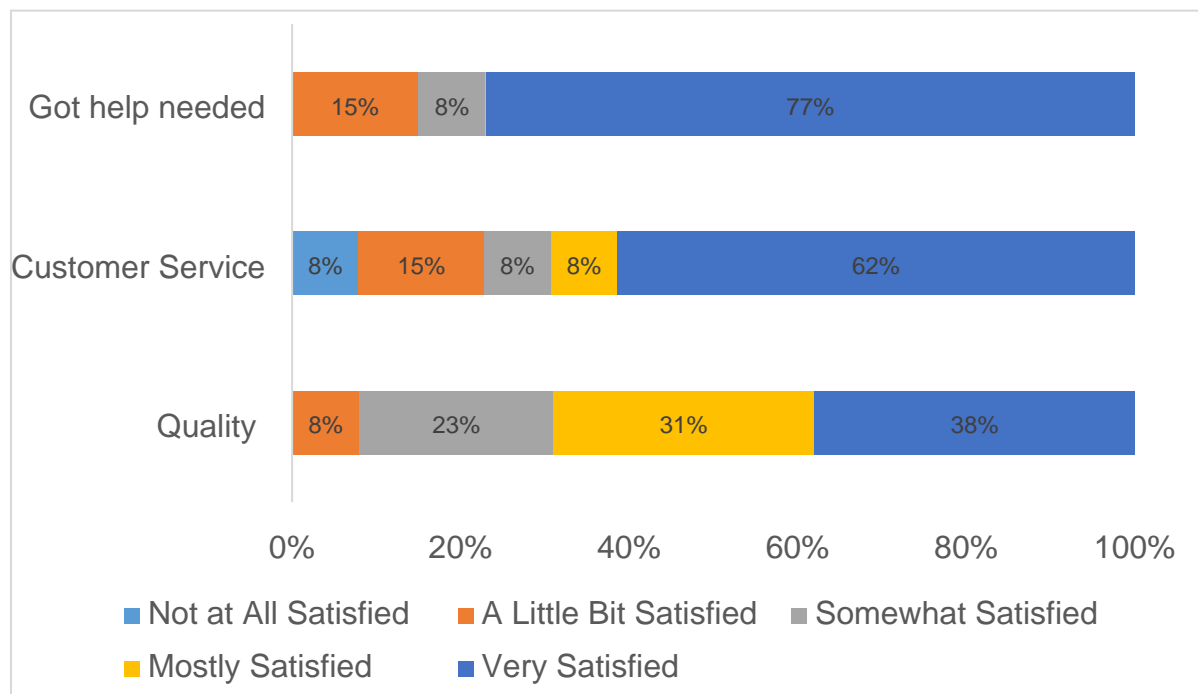 guidelines to monitor Test Calls and Quality Assurance (QA) reviews, including follow-up improvement activities for supervisors implementing coaching packages to their staff. In CY 2020, ACCESS Center implemented standardized coaching packages for supervisors to review with staff to address specific improvement areas and this strategy contributed to the improvement noted. In addition, ACCESS Center disseminated Test Calls Bulletins to all ACCESS Center staff. The Program Manager sent four bulletins to all ACCESS Center staff to highlight the State mandates and regulations related to Test Calls. The bulletins included documentation results by month to give the big picture of the Test Calls Study's documentation trends. The bulletin elevated the Test Calls Study's importance and compliance with the State mandate and attention to the study's findings for the month and the year. While individual staff received coaching packages from their respective supervisor when documentation was an area for improvement on a specific Test Call, the Test Calls Study Bulletin gave the big picture to staff and the importance of continuous quality improvement in this area.

The CY 2020 findings indicated two areas for improvement. One was in the area of knowledge and helpfulness of the Agent and the other in the area of satisfaction with

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interpreter services provided by the telephone interpreter line. As a result of these findings, the ACCESS Center identified the following process improvement strategies:

- ACCESS Center management will implement staff training, supervisory oversight, and continuous monitoring to ensure quality services in the area of interpreter services provided by the telephone interpreter line and the knowledge and helpfulness of the Agent
- ACCESS Center will continue to implement the QIC guidelines that require coaching packages to be given to agents by supervisors when areas for improvement are identified on test calls and QA reviews. ACCESS Center Program Manager will continue to send the test calls bulletin to all ACCESS Center staff to highlight the State mandates and regulations related to Test Calls. The bulletin will elevate the Test Calls Study's importance and compliance with the State mandate and attention to the study's findings for the month and the year. While individual staff receive coaching packages from their respective supervisor when documentation is an area for improvement on a specific Test Call, the Test Calls Study Bulletin gives the big picture to staff and the importance of continuous quality improvement in this area.
- ACCESS Center management will update the current QA protocols to ensure all areas for the call processing and documentation reflect current protocols and guidelines and train all staff on the updated protocols. The goal of the refresher training to familiarize staff with areas that they may not have been familiar with as a result of not processing calls related to those areas and to improve knowledge in all subject matter areas that ACCESS currently receives calls for.
- Any instances of dissatisfaction with the Language Interpreter Service Vendor will be brought to the Internal Services Department (ISD) contact for immediate attention for follow-up with the vendor. The procedures to complete a complaint form will be updated and reviewed with ACCESS Agents for timely resolution of the complaints and quality monitoring by the vendor. ACCESS management will maintain a log of the problem resolution received from ISD on the complaints notified by the ACCESS Center.

To improve the efficiency of the study and the accuracy in the responses:

- ACCESS Center and the QI unit will continue to work collaboratively to update the study's methodology and supporting materials for CY 2021 based on a review of errors noted by Test Callers on the Test Call Survey form 2020.
- QI and ACCESS will work collaboratively to revise the CY 2021 Test Call Survey form, including removing items as applicable and improving how items are organized. Refer to Appendix E for *Guidelines/Instructions to Reinforce for Test Callers in CY 2021.*
- ACCESS Center staff will work collaboratively with the Chief Information Office Bureau (CIOB) staff providing support and QI to review the Test Calls information for accuracy and completeness.

Study Limitations

- ACCESS Center introduced audio recording reviews in April 2019. These reviews were facilitated by ACCESS Center staff due to their proximity and familiarity with the audio logs. Outside access to audio logs is not permitted. Due to this limitation, audio reviews could not be performed by a party outside of ACCESS Center. This internal process should be taken into consideration in the review of the Test Calls results.
- Based on the audio recording reviews' findings, ACCESS Center prompted Test Callers to address errors specific to (1) the date and time of the call, (2) the ACCESS Agent announcing their name, (3) asking the caller for their name and for whom services were requested, (4) interpreter services offered and type of interpreter service, and (5) inquiring if this was a crisis or emergency. Corrections were made to address all errors except for items related to satisfaction ratings, which were the subjective ratings of the callers. The number and percentage of the type of revisions are presented below in Table 5.

Table 5. Number and Percent of Revised Responses by Survey Item

Call Feature or Survey Item	N	%
Time of Day (e.g., Business Hours, After Hours)	3	5
Language	2	3
Type (e.g., Referral, Crisis, Beneficiary Problem)	1	2
Date of Call	3	5
Call Start & End Time	7	12
Did ACCESS Agent Provide Their First Name?	4	7
Name of ACCESS Agent	11	18
Did the ACCESS Agent Ask for the Name of the Person for Whom Services Were Requested?	1	2
Did the ACCESS Agent inquire if the situation is an emergency or crisis?	10	17
Were Interpreter Services provided?	10	17
Who provided your Interpreter Services?" (i.e., ACCESS Agent or Interpreter Line)	7	12

- The QI Unit welcomed volunteer Test Callers regardless of their familiarity with the 24/7 ACCESS Center hotline or Test Calls' Study. For CY 2020, the QI Unit collaborated with the Mental Health Promoters program to facilitate the calls. Given their proximity to the community, the Promoters were well-suited to make the test calls and provide feedback on the process. However, the technical nature of the survey form at times presented a challenge in terms of thoroughness and accuracy. Despite the QI Unit's efforts to facilitate training the Promoters in each SA and offer technical support, managing the varying levels of understanding continued to be challenging and resulted in re-occurring errors (i.e., incorrect date/time, inaccuracies in the ACCESS Agent's name, incomplete names for the person requesting services, missing responses, wrong selection on who interpreted – Agent versus interpreter line or inconsistent responses to the customer service items).

Plans for Monitoring ACCESS Center Responsiveness in CY 2021

- QI will instruct each SA to complete five Test Calls during their assigned study period according to the following:
  - Time of Day
    - Number shifts by month (Table 6)
  - Language
    - At least two in English and the remaining in SA threshold languages (Table 7)
  - Type of Call
    - One crisis scenario call during business hours and one crisis scenario during after hours
    - One beneficiary problem resolution/complaint call
    - Two mental health referral calls

Table 6: Service Area Test Calls' Schedule for CY 2021

SA	Assigned Study Period	# Business Hours Calls	# After Hours Calls
SA 1	March 2021	3	2
SA 2	April 2021	2	3
SA 3	May 2021	3	2
SA 4	June 2021	2	3
SA 5	July 2021	3	2
SA 6	August 2021	2	3
SA 7	September 2021	3	2
SA 8	October 2021	2	3

Table 7: Threshold Languages by Service Area

SA	Threshold Language(s)
SA 1	Spanish
SA 2	Armenian, Farsi, Korean, Russian, Spanish, Tagalog, and Vietnamese
SA 3	Cantonese, Korean, Mandarin, Spanish, and Vietnamese
SA 4	Armenian, Korean, Russian, Spanish, and Tagalog
SA 5	Farsi and Spanish
SA 6	Spanish
SA 7	Korean and Spanish
SA 8	Cambodian, Korean, Spanish, and Vietnamese

Appendices

Appendix A: Calls Answered Within 1 Minute by Number and Percent for Calendar Year 2020

Month	Shift*	Total Calls By Shift	Total Calls	Calls Answered Within 1 Minute by Shift	Total Calls < 1 min	% of Calls Answered Within 1 Minute	Overall %
January	Business Hours	6,026		5,637		94%	
	After Hours	6,787	12,813	6,046	11,683	89%	91%
February	Business Hours	5,805		5,366		92%	
	After Hours	6,859	12,664	5,827	11,193	85%	88%
March	Business Hours	6,198		5,837		94%	
	After Hours	7,718	13,916	6,258	12,095	81%	87%
April[1]	Business Hours	6,238		6,165		99%	
	After Hours	6,619	12,857	5,584	11,749	84%	91%
May	Business Hours	5,971		5,933		99%	
	After Hours	8,025	13,996	6,863	12,796	86%	91%
June	Business Hours	7,068		6,965		99%	
	After Hours	7,475	14,543	5,992	12,957	80%	89%
July	Business Hours	6,713		6,647		99%	
	After Hours	7,789	14,502	6,677	13,324	86%	92%
August	Business Hours	7,845		7,699		98%	
	After Hours	7,320	15,165	6,703	14,402	92%	95%
September	Business Hours	8,377		8,272		99%	
	After Hours	7,634	16,011	6,906	15,178	90%	95%
October	Business Hours	8,668		8,397		97%	
	After Hours	7,978	16,646	6,850	15,247	86%	92%
November	Business Hours	6,565		6,393		97%	
	After Hours	6,990	13,555	6,236	12,629	89%	93%
December	Business Hours	7,644		7,301		96%	
	After Hours	6,201	13,845	5,374	12,675	87%	92%
Total	Business Hours	83,118		80,612		97%	
	After Hours	87,395		75,316		86%	
Overall			170,513		155,928		91%

Notes: *Shift includes Business Hours and After Hours. Business Hours are 8am - 5:00pm Monday through Friday excluding holidays. For this CY report, After Hours are defined as 12:00am to 7:59am and 5:01pm to 11:59pm, All day on weekends and holidays.

[1.] Virtual Contact Center (VCC) maintenance/issues: 4/16 (5:30 am to 11:30 am) Approximately 290 calls were lost due to an interruption in VCC service during Business Hours

Appendix B: Non-English Language Calls Received by ACCESS Center: Five-Year Trend

Language	CY 2016	2017	2018	2019	2020
Albanian	0	0	0	1	0
Amharic	0	1	0	2	0
Arabic	16	8	18	21	6
Armenian	130	128	65	32	32
Bahasa	1	0	0	0	0
Bengali	1	0	2	5	0
Burmese	0	0	2	2	0
Cambodian	7	10	26	19	6
Cantonese	40	46	73	59	35
Farsi	56	178	59	40	41
French	2	1	1	1	1
German	0	0	0	0	1
Hindi	0	0	1	1	2
Hmong	0	0	0	1	0
Italian	0	0	0	0	1
Japanese	4	2	6	6	3
Khmer	1	0	0	0	1
Korean	116	140	224	149	113
Luganda	0	0	1	0	0
Mandarin	86	82	166	126	79
Persian	1	5	4	3	0
Polish	1	0	1	0	0
Portuguese	1	1	1	1	1
Punjabi	0	2	1	1	0
Romanian	1	0	0	0	0
Russian	16	37	13	25	17
Serbian	2	0	0	0	0
Sinhala	0	0	0	0	1
Slovak	1	0	0	0	0
*Spanish (LISMA)	1,474	2,303	1,370	1,373	896
**Spanish ACCESS Center	6,040	6,150	6,612	6,398	9,009
Spanish Subtotal	7,514	8,453	7,982	7,771	9,905
Tagalog	10	9	16	10	7
Thai	0	7	0	5	2
Urdu	0	0	1	1	0
Vietnamese	28	195	34	26	16
Total	8,035	9,305	8,697	8,308	10,270

Note: * Effective 10/13/2016 at 12:01 AM, the new Language Interpretation Services Master Agreement (LISMA) is provided
by the following: Language Line Services Inc, TransPerfect Translations International, Inc, and Worldwide Interpreters, Inc. **ACCESS Center Spanish speaking employee assisted with interpreter services. Data Source: Virtual Contact Center (VCC) effective 11/29/2013; DMH ACCESS Center, CY 2016 to CY 2020.

Appendix C: 24/7 ACCESS Line Test Calls Survey Form for Calendar Year 2020

LOS ANGELES COUNTY
**DEPARTMENT OF
MENTAL HEALTH**
hope. recovery. wellbeing.

OFFICE OF ADMINISTRATIVE OPERATIONS – QUALITY, OUTCOMES, AND TRAINING DIVISION

TEST CALLS SURVEY FORM – Calendar Year 2020

24/7 ACCESS CENTER HOTLINE: (800) 854-7771

Please Complete One Survey Form per Test Call and Keep Call Under 10 Minutes

Date of Call: ___ ___ / ___ ___ / 2 0 2 0   Call start time: Hr: ___ ___   Min: ___ ___   ☐ AM ☐ PM

Call end time: Hr: ___ ___   Min: ___ ___   ☐ AM ☐ PM

1) Did the ACCESS Agent provide their name? ☐ YES   ☐ NO

   a. If not provided, test caller <u>must</u> ask for the first name of the ACCESS Agent.

   First name of the ACCESS Agent: _____

2) Did the ACCESS Agent ask for the name of the person for whom services were requested?

   ☐ YES   ☐ NO

   a. **NAME of the person for whom you are requesting services in the Test Call:**

   First: _____   Last: _____   ☐ Self   ☐ Other

3) Did the ACCESS Agent inquire if the situation is an emergency or crisis?   ☐ YES   ☐ NO

4) LANGUAGE you USED in the Test Call:

   ☐ English   ☐ Spanish   ☐ Other: _____

   a. Were Interpreter Services provided? ☐ YES   ☐ NO

     If **YES**, answer questions 4b & 4c. If **NO**, skip to question 5.

   b. Who provided your Interpreter Services (<u>please check one from the following</u>)?

     ☐ ACCESS Agent   ☐ Interpreter Line

   c. Please rate your level of satisfaction with the following:

	Not at all satisfied	A little bit satisfied	Somewhat satisfied	Mostly satisfied	Very satisfied
i. Customer Service	☐	☐	☐	☐	☐
ii. Quality of interpretation (e.g., accuracy, proficiency)	☐	☐	☐	☐	☐
iii. I got the help I needed	☐	☐	☐	☐	☐

5) Reason for the call or type of help requested? **Check one option.**

　　　　　□ Mental Health Referral (if checked, answer question 5a)
　　　　　□ Crisis Scenario (if checked, answer question 5a)
　　　　　□ Complaint/Beneficiary Problem (if checked, answer question 5b)

　　a. If you selected Mental Health Referral or Crisis Scenario, did you receive a referral or other information?　　□ YES　　□ NO　　□ NOT APPLICABLE

　　If YES, list here: _____
　　　　　　　　　　(Clinic Name and Phone Number)

　　b. If you selected Complaint/Beneficiary Problem, did the ACCESS Agent inform you how to:
　　　　i. Access the beneficiary grievance form?　□ YES　　□ NO　　□ NOT APPLICABLE
　　　　ii. Contact the Patient's Rights Office?　□ YES　　□ NO　　□ NOT APPLICABLE

6) Please rate your level of satisfaction with each the following items:

	Not at all satisfied	A little bit satisfied	Somewhat satisfied	Mostly Satisfied	Very satisfied
a. Knowledge of the ACCESS Agent	□	□	□	□	□
b. Helpfulness of the ACCESS Agent	□	□	□	□	□
c. Cultural sensitivity of the ACCESS Agent	□	□	□	□	□
d. Agent's customer service	□	□	□	□	□
e. Wait time	□	□	□	□	□
a. Please specify time	< 1 min □	1-3 mins □	4-7mins □	> 7 mins □	

7) Please indicate any additional information that would be helpful in improving the services provided through the ACCESS Center or for the Interpreter Line:

　　┌───┐
　　│   │
　　│   │
　　│   │
　　└───┘

REMINDER: Please ask the ACCESS Agent to spell their name for accuracy.
Thank you for your participation. Please double check that your form is filled in completely before submitting it to your SA QIC Chair/Co-Chair.

For QI Use ONLY: Was the call logged by the ACCESS Center Agent? Yes □ No □

Appendix D: Guidelines/Instructions to Reinforce for Test Callers in CY 2021

The Quality Improvement (QI) Unit updated the CY 2021 Test Calls' Study materials and training with the following revisions:
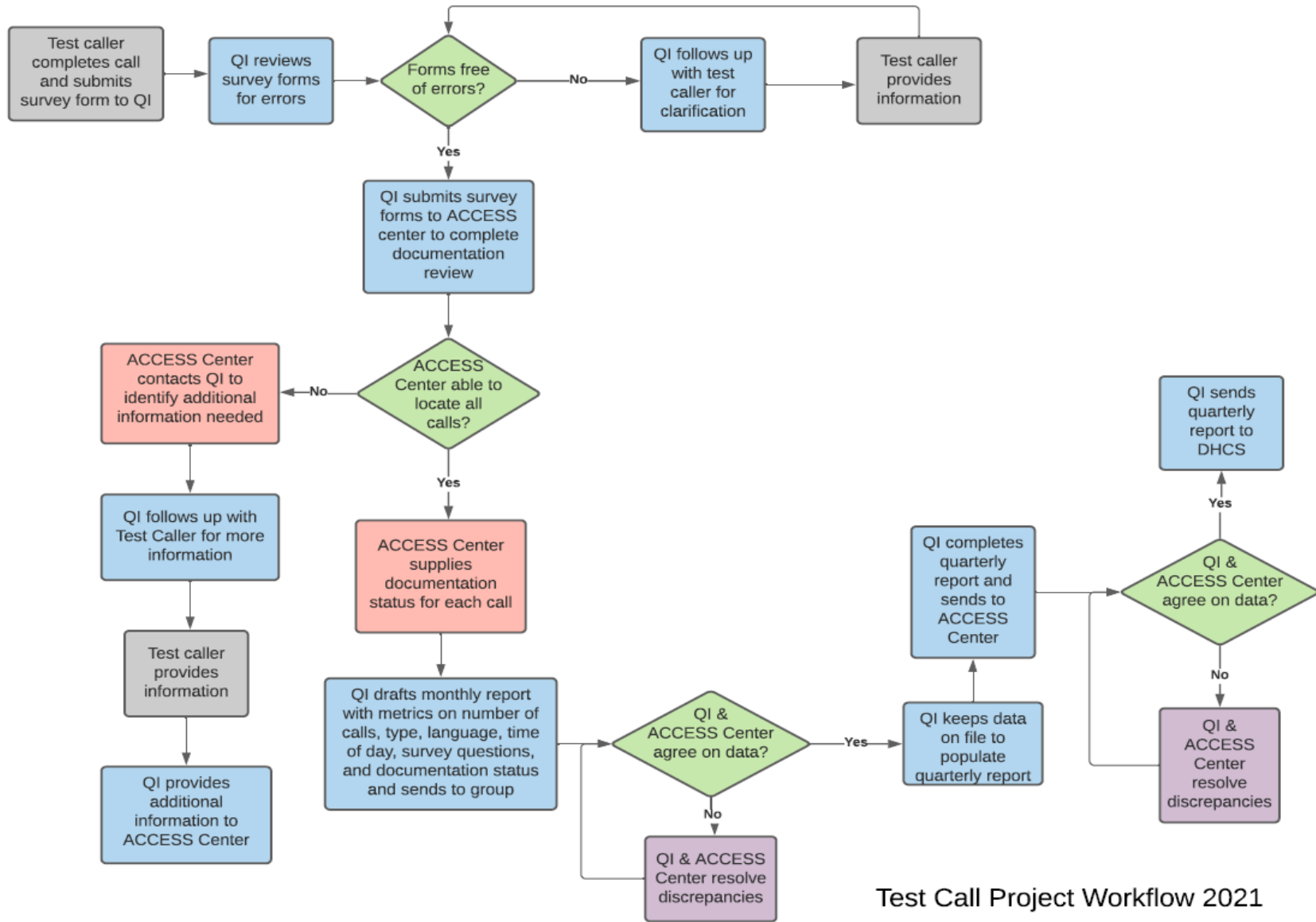
<u>**Survey Form**</u>
- Added section for the QI unit to pre-populate call information at the top of the form
- Created one-page English and Non-English versions of the form
- Due to frequent errors and to streamline the completion of the survey form, the following survey items from the CY 2020 version were removed:
    - "Did ACCESS Agent Provide Their First Name?"
        - Revision: This item no longer requires a yes/no response. Test Caller only needs to provide the name of ACCESS Agent to assist the ACCESS Center in locating the call
    - "Did the ACCESS Agent Ask for the Name of the Person for Whom Services Were Requested?"
    - First and Last Name of Individual for Whom Services Were Requested
    - Self or Other Status of Individual for Whom Services Were Requested
    - "Did the ACCESS Agent Inquire if the Situation is an Emergency or Crisis?"
    - "Were Interpreter Services Provided?"
        - Revision: Test Caller only needs to indicate if the ACCESS Agent or Interpreter Line provided services on the Non-English version
    - Satisfaction Items Regarding Interpreter
    - Satisfaction Items Regarding ACCESS Agent
    - Open-Ended Comment box
        - Test Callers are encouraged to provide additional feedback to QI when submitting the form

<u>**Procedures and Training**</u>
- In addition to assigning each call according to the three variables (time of day, language, type of call), QI will provide callers with the following information:
    - Date to make the call
    - Time to make the call
    - Fictitious name to use for the call (emphasizing uncommon names)
    - Location for fictitious consumers (address or cross streets)
    - Fictitious Medi-Cal number
    - Fictitious Social Security number (SSN)
    - Specific scenario to use for the call
- Test Callers will submit their survey forms after they complete calls rather than holding onto forms until the end of the month (see Test Call Study Workflow 2021 below)
- The QI unit will send out monthly data reports to the ACCESS Center to track completed test calls
- The Mental Health Promoters program will continue to assist the QI unit with calls and additional language capacity may be supplied by central or SA-specific staff members

Last Revised Date, 06-02-21

- Ensure callers are aware of expanded call lines so that they are directed to the correct line (Option #1)
- The CY 2021 version of the Test Calls survey form should be on-hand for the call. Note the correct date and start and stop times on the form.
- Do not identify yourself as a Test Caller or refer to a "Service Area."
- Do not request or accept an electronic referral to the clinic or tie up the line by placing the ACCESS Agent on hold. Keep the call to less than 10 minutes.
- Notify QI as soon as possible if you experience any issues with language interpreter services.

Test Call Study Workflow CY 2021

Test caller completes call and submits survey form to QI → QI reviews survey forms for errors → Forms free of errors?

Forms free of errors? — No → QI follows up with test caller for clarification → Test caller provides information

Forms free of errors? — Yes → QI submits survey forms to ACCESS center to complete documentation review → ACCESS Center able to locate all calls?

ACCESS Center able to locate all calls? — No → ACCESS Center contacts QI to identify additional information needed → QI follows up with Test Caller for more information → Test caller provides information → QI provides additional information to ACCESS Center

ACCESS Center able to locate all calls? — Yes → ACCESS Center supplies documentation status for each call → QI drafts monthly report with metrics on number of calls, type, language, time of day, survey questions, and documentation status and sends to group → QI & ACCESS Center agree on data?

QI & ACCESS Center agree on data? — No → QI & ACCESS Center resolve discrepancies

QI & ACCESS Center agree on data? — Yes → QI keeps data on file to populate quarterly report → QI completes quarterly report and sends to ACCESS Center → QI & ACCESS Center agree on data?

QI & ACCESS Center agree on data? — Yes → QI sends quarterly report to DHCS

QI & ACCESS Center agree on data? — No → QI & ACCESS Center resolve discrepancies

Test Call Project Workflow 2021

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