



Client Satisfaction and Trust & Confidence in Peel

Research in Support of the Common Purpose Strategy

2009 Corporate Report

Table of contents

Executive Summary	3
1. Objectives and research method	6
2. Who are our clients?	11
3. The Client Satisfaction Index	18
4. Access matters	22
5. Drivers of satisfaction	25
6. The role of demographics in client satisfaction	33
7. The OW client service journey	36
8. Trust and confidence in Peel	38
9. Priorities for government	41
10. Highlights of results and forward momentum	45
Appendix: Explaining variance	47

Executive Summary

Objectives

The 2009 External Client Satisfaction and Trust/Confidence research builds on the 2008 project by adding three new services and increasing the sample size for several client groups.

The objectives of the 2009 research are as follows:

- 1 Validate the Region-wide Client Satisfaction Index and driver model
- 2 Compare 2008 and 2009 client satisfaction results for specific services
- 3 Compare 2009 confidence results for the Region with 2008 baseline
- 4 Validate clients' perceptions of ease of access and barriers to access
- 5 Provide a framework for clustering services by exploring the drivers in three service contexts:
 - transactional services with no staff contact
 - transactional services with staff contact
 - relational services
- 6 Conduct a detailed investigation of the OW client service journey
- 7 Provide basis to enable individual ward decks.

Reporting of results

This Corporate Report provides results at the regional level. ERIN Research has prepared detailed results in decks for the following individual departments and programs:

- Environment, Transportation and Planning Services
- Employee and Business Services
- Health Services other than Long Term Care
- Long Term Care
- Human Services other than Ontario Works
- Ontario Works

Separate, stand-alone reports have been prepared through a separate arrangement for:

- Paramedic Services and;
- Emergency Shelters and Transitional Housing.

Method

The total sample in 2009 consisted of 3,904 adult residents of Peel.

The 2009 research was designed to be consistent with the approach taken in 2008. It consists of two large telephone surveys: a) a random sample of 1,468 randomly selected residents of Peel, and b) a random selection of 1,587 current clients of the Health and Human Services departments. In addition there are pencil-and-paper surveys with smaller numbers of LTC residents and residents of Emergency Shelters and Transitional Housing. Two new paper surveys were added in 2009: A survey mailed to Peel residents who had used Paramedic Services in the past 12 months and a survey of clients of the Healthy Sexuality Clinics.

All 6 surveys contained parallel questions on overall satisfaction with service. Customized questions on specific services were developed in consultation with managers of the specific services.

In 2009, a new, detailed investigation of the Ontario Works (OW) process was undertaken. Questions specific to OW clients were added and the OW sample was increased to more than 600 respondents. A separate deck highlighting the innovative results of the OW clients' service journey has been prepared.

The response rates were excellent in all survey contexts.

Highlights of the results

- 1** Peel clients differ from the population at large in terms of gender, age, immigrant status, labour force participation, unemployment and income.
- 2** Client satisfaction with Peel services in 2009 is generally stable. Several services registered significant increases in satisfaction.
- 3** The drivers of satisfaction identified in 2008 are confirmed.
- 4** The driver analysis is extended to three distinct service contexts, namely, transactional services with no staff, transactional services with staff and relational services.
- 5** New insights into the OW service journey provide keys to improving all complex relational services.
- 6** Peel citizens express very high levels of trust and confidence in their regional government.
- 7** Service quality contributes strongly to trust/confidence in government.

Advancing the forward momentum

- 1 Peel's Common Purpose Strategy is working well. The discovery and use of an empirically founded set of client satisfaction drivers has fostered a cohesive and comprehensive approach to service across the organization.
- 2 Results of the 2009 client-focused research demonstrate that staff efforts are paying off with incremental positive changes in satisfaction.
- 3 This is a Peel employee story. The positive results for client satisfaction and confidence in Regional administration are a tribute to the staff. The delivery of consistently high quality service to Peel clients could not have been achieved without the focused effort and skilled work of Peel staff.
- 4 Peel should continue its excellent work:
 - Communicate results effectively to all staff/Council
 - Help specific services generate new solutions
 - Support specific service improvements
 - Focus on problem areas e.g. wait lists, web
 - Continue the regular measurement strategy using validated statistical method and complex sampling to monitor client satisfaction and confidence and to enable regular feedback to all staff.

1. Objectives and research method

Background

The Regional Municipality of Peel is made up of three local municipalities: the City of Mississauga, City of Brampton and Town of Caledon. Peel serves more than 1.1 million residents who live within the Region's 1,254 square kilometers service area.

Peel has created the Common Purpose Strategy as a way of building a unified approach to service delivery. The Strategy links employee engagement, client satisfaction and trust and confidence in Peel. The underlying premise is that engaged employees are positioned to provide superior levels of service to citizens, and that this in turn produces high levels of trust and confidence in Peel regional government.

In 2008, Peel commissioned ERIN Research to conduct a comprehensive study of client satisfaction to give a region-wide perspective on clients' experiences with Peel services. The 2009 research builds on the 2008 project by adding three new services and increasing the sample size for several client groups.

Objectives

The 2009 objectives of the Client Satisfaction and Confidence in Peel are as follows:

- 1 Validate the Region-wide Client Satisfaction Index and driver model
- 2 Compare 2008 and 2009 client satisfaction results for specific services
- 3 Compare 2009 confidence results for the Region with 2008 baseline
- 4 Validate clients' perceptions of ease of access and barriers to access
- 5 Provide a framework for clustering services by exploring the drivers in three service contexts:
 - transactional services with no staff contact
 - transactional services with staff contact
 - relational services
- 6 Conduct a detailed investigation of the OW client service journey
- 7 Provide basis to enable individual ward decks.

Presentation of results

This Corporate Report provides results at the regional level. Detailed results are available in deck format for the following individual departments and programs:

- Environment, Transportation and Planning Services
- Employee and Business Services
- Public Health Services
- Long Term Care Services.
- Paramedic Services
- Human Services other than Ontario Works
- Ontario Works
- Emergency Shelters and Transitional Housing.

Research design

The 2009 research was designed to be consistent with the approach taken in 2008. The following components of the design are parallel to 2008:

- 1** A telephone survey of the general population, with respondents selected at random from a standard database of Canadian residents representing users of Environment, Transportation and Planning Services (ETPS);
- 2** Telephone surveys of Health and Human Services (HHS) clients, with respondents drawn from the current client population;
- 3** A pencil-and-paper survey of Long Term Care clients (LTC). Surveys were administered by staff of the Centres, who encouraged residents or family members to complete them;
- 4** A pencil-and-paper survey for residents of Emergency Shelters and Transitional Housing (ESTH). Peel staff visited the facilities and distributed surveys to residents, who completed them on the spot.

The following components were added in 2009:

- 5 A paper-and-pencil survey of Peel residents who had used Paramedic Services in the past 12 months. The survey was delivered by mail.
- 6 A paper-and-pencil survey of clients of the Healthy Sexuality Clinics. Surveys were administered by Peel staff.

All 6 surveys contained parallel questions on overall satisfaction with service. Customized questions on specific services were developed in consultation with managers of the specific services.

The survey of the general population focused on ETPS services. The Health and Human Services surveys contained additional questions on programs and services unique to Health and Human Services respectively.

In 2009, a new, detailed investigation of the Ontario Works (OW) process was undertaken. Questions specific to OW clients were added and the OW sample was increased to more than 600 respondents. A separate deck highlights the stages of the OW clients' service journey.

Sample and response rates

The total sample in 2009 was 3,904 respondents.

The purpose of a sample is to reflect the whole universe from which the sample is drawn. A public opinion poll of the general population simply selects people at random. But a random sample of the general population would not accurately reflect Peel's client base. It would include very few Peel Living residents or childcare recipients, for example and probably no Emergency Shelters and Transitional Housing residents. In general, clients of Health and Human services would not be well represented in a simple random selection from the population.

In Health Services and Human Services, clients were selected at random from those who had received the service within the past year. In 2008 and again in 2009, Peel's client base was defined by the proportion of the Peel Regional budget allocated to each service.

- Health Services account for 20 percent of the total budget of the services included in the research, and clients of Health Services therefore make up 20 percent of the sample;
- Human Services account for 36 percent of the total budget of the services included in the research, and clients of Health Services therefore make up 36 percent of the sample;
- ETPS Services account for 44 percent of the total budget of the services included in the research.

The allocation of clients in proportion to budget was also followed within both Health Services and Human Services. Services with larger budgets contributed more clients than those with smaller budgets.

Table 1. Interviews and response rates

Survey mode	Number completed	Response rate
Telephone interviews		
General population	1,468	38%
Public Health Services	495	51%
Human Services other than OW	430	64%
Ontario Works	662	65%
Subtotal	3,055	
Paper surveys		
Paramedics	300	23%
Long Term Care	325	50%
Healthy Sexuality Clinics	100	na
Emergency Shelters and Transitional Housing	126	na
Subtotal	851	
Total	3,906	

ETPS services differ from Health and Human Services in that they are available to all citizens equally. It is therefore appropriate to use a random sample of the population to provide information about these services.

The four telephone surveys have a large core of common questions plus additional service-specific questions. They were conducted by ERIN Research between April 13 and June 9 2009.

The pencil-and-paper surveys have some questions in common, but most items are framed around specific aspects of the service. The Long Term Care (LTC) survey was administered by LTC staff. In some instances residents completed the survey independently; in most cases, family members were involved. The ESTH and Healthy Sexuality surveys were given to groups of clients of these services at the sites in question. The Paramedics survey was mailed to Peel residents who had used this service in the past year. The pencil-and-paper surveys were also administered between April and June 2009.

The standard margin of error for a sample of 3,055 is $\pm 1.8\%$. For the general population sample of 1,468 it is $\pm 2.6\%$.

Weighting of responses

The actual number of respondents differed from the ideal number as defined by proportion of budget for two reasons:

- For some services with relatively small budgets, selecting on the basis of budget would yield too few respondents to provide reportable results.
- For OW clients, a larger than usual sample was required for a detailed analysis of the key touch-points experienced by clients using the OW service.

The actual number of respondents was therefore weighted to bring the group into alignment with the proportions as defined by budget. The weighted sample is used throughout the Corporate report. In other contexts – e.g. when looking at individual services – unweighted numbers are used.

Reporting of results

The majority of survey questions used 5-point response scales, where, for example, 1 indicates “Strongly disagree” and 5 indicates “Strongly agree”. When reporting results, it is often useful to give the average response, and readers tend to find the 5-point format difficult in this context.

The more intuitive 10-point format is used to report average scores. This 10-point scale corresponds to the 5-point scale used to answer the survey in the following manner:

	Strongly disagree										Strongly agree
<i>“Staff were knowledgeable and competent”</i>	1		2		3		4		5		
	0	1	2	3	4	5	6	7	8	9	10

2. Who are our clients?

Introduction

As in 2008, the 2009 survey includes residents of Peel age 18 years and over. In this population, services divide into two groups:

- Services that all Peel residents use such as water, roads and waste disposal. These includes all the services of the ETPS division with the exception of TransHelp, as well as several EBS services – the Contact Centre, the website and the Heritage Complex.
- Services that are used by segments of the population with specific needs. These include most of the programs offered by the Health Services and Human Services.

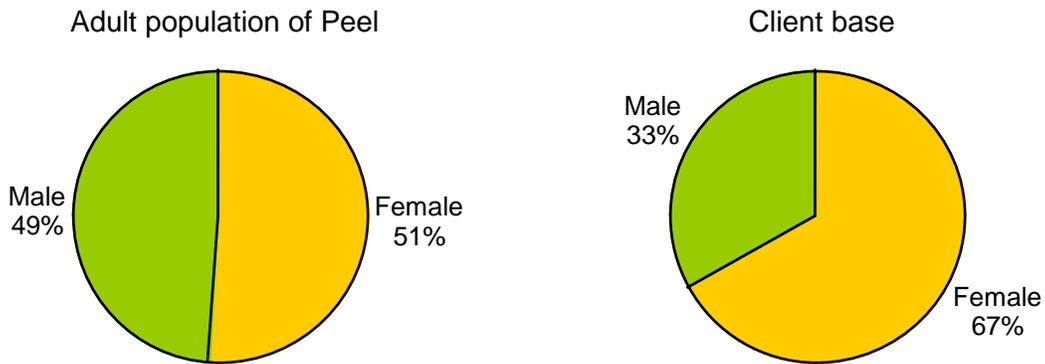
The Common Purpose Strategy requires a system that balances all these programs to give a realistic overall corporate perspective on client satisfaction. A rational method of representing these many programs is on the basis of budget, as this reflects the resources that Peel Region applies to each. The Corporate results presented in this report weight the contribution of each program in proportion to its budget.

Defining Peel's clients on the basis of where the budget goes leads to an interesting perspective on demographics.

Gender

As Figure 1 shows, “Peel’s clients” are 67% female and 33% male, whereas the adult population of Peel (like Canada as a whole) is split close to 50:50. This reflects the larger proportions of female clients in many Health Services and Human Services including LTC, Paramedic Services, Prenatal and Neonatal Services, and others.

Figure 1. Gender

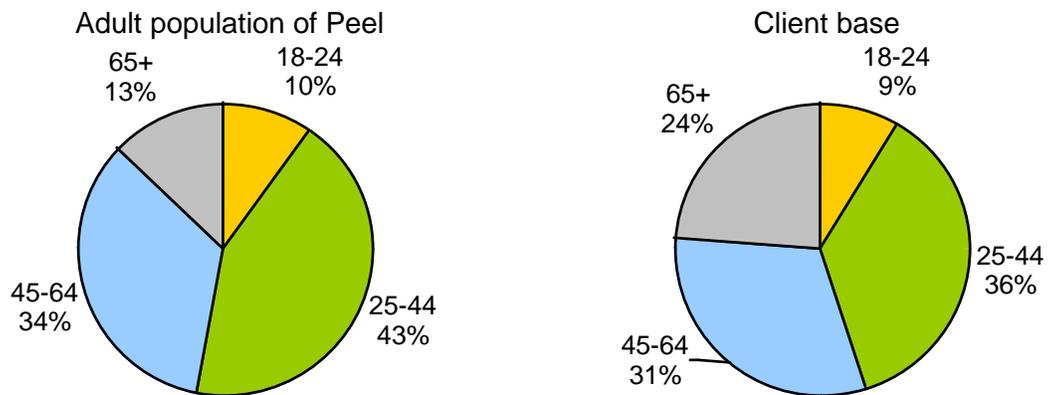


Adult population figures are from the 2006 Census.

Age

Peel's client base diverges from the population as a whole on several other indicators. Nearly one-quarter of the client base are age 65+, compared to 13% of Peel's population (Figure 2).

Figure 2. Age



Adult population figures are from the 2006 Census.

Peel's immigrant population

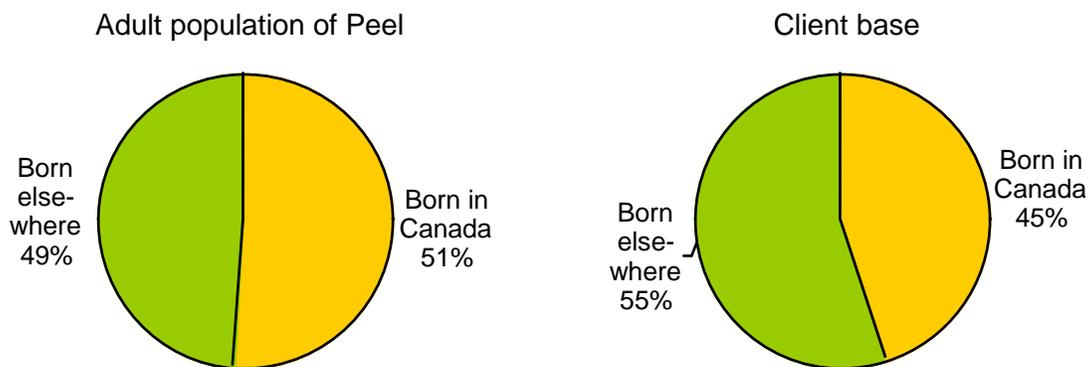
The 2006 Census shows that from 2001 to 2006, Peel's population increased 17 percent, from 988,948 in 2001 to 1,159,405 in 2006. Population growth in Peel is primarily fuelled by immigration, with the number of immigrants growing at 32 percent from 2001 to 2006 compared to a five percent growth in the non-immigrant population. Immigrants comprised 49 percent of Peel's population in 2006, up from 43 percent in 2001.

Given that Peel is one of the fastest growing municipalities in Canada and that its immigrant population grew faster than its non-immigrant population, it is interesting to observe that amongst the clients of Peel there is a higher proportion of immigrants than in the general adult Peel population.

From 2001 to 2006, growth in the visible minority population was triple the rate of total population growth. During the same period, Peel's total population increased by 170,457 people while its visible minority population grew by nearly 197,560 people.¹

The proportion of immigrants in the client base, at 55%, is slightly higher than in the population, 49% (Figure 3).

Figure 3. Among Peel clients, the proportion of immigrants is higher than in the general population



Adult population figures are from the 2006 Census.

¹ Peel Census Highlight Report #2, 2008

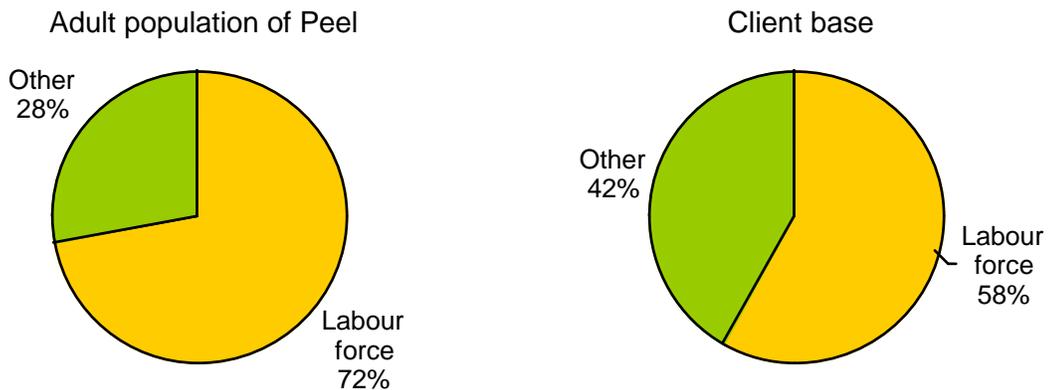
Labour force participation rate

Based on the 2006 Census, there were 651,200 Peel residents age 15 years and older who participated in the labour force in 2006. Within Peel, Caledon had the highest participation rate (75 percent) followed by Brampton (73 percent) and Mississauga (71 percent).

“Labour force participation rate” groups those who are either employed or unemployed together and takes this as a proportion of the eligible adult population. This latter group includes students, homemakers and those who choose not to work (in addition to the employed and unemployed).

Among Peel clients, labour force participation is 14% lower than in the general population.

Figure 4. Among Peel clients, labour force participation is lower than in the general population



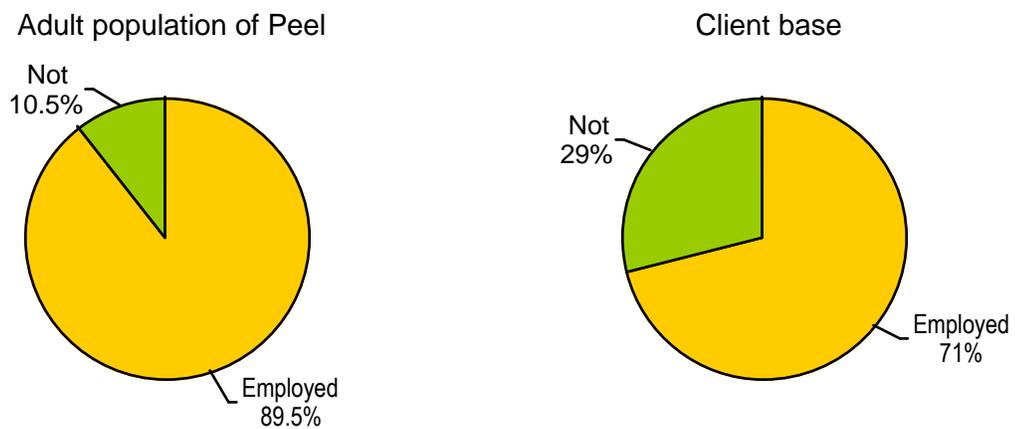
Adult population figures are from the 2006 Census.

Unemployment

Unemployment rate refers to the percentage of individuals in the labour force who are seeking work. Amongst Peel's client base, approximately three times as many clients are unemployed as in the general population.

The unemployment rate amongst Peel clients (29%) is approximately three times as great as that of the adult population of Peel in general (10.5%).

Figure 5. Among Peel clients, unemployment is higher than in the general population



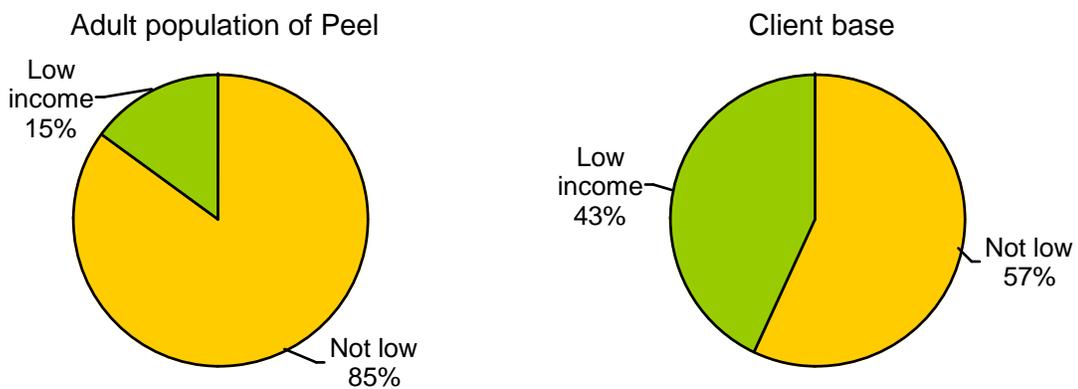
Adult population figures are from the Peel Finance Department Economic Note, April–June 2009.

Income

Based on Census data reported for the calendar year 2005 within the GTA, Toronto had the highest rate of low income residents (25 percent) followed by Peel (15 percent), York (13 percent), Durham and Halton (with 9 percent each).

Peel clients are almost three times as likely to have low incomes² (43%) as the adult population of Peel (15%).

Figure 6. There are more low-income families among Peel clients than in the general population



Adult population figures are from the 2006 Census.

² Statistics Canada defines low income on the basis of family size – the low income threshold increases with the number of people in the household. Information at this level of detail was not available in this survey, so low income was estimated. Any respondent receiving a subsidized service (e.g. Ontario Works, Peel Living) was deemed to be low income, along with 15% of other respondents (the average for Peel).

3. The Client Satisfaction Index

Satisfaction with individual services

The 2009 survey assesses satisfaction with 29 Peel services (Table 2).

The Environment, Transportation and Planning Services (ETPS) and the Employee and Business Services (EBS) services that fall within the scope of this survey are provided to all residents. Ratings of these services are therefore taken from the general population sample, which is representative of the population of Peel as a whole. Most of the services offered within the Health Services and Human Services departments are used by segments of the population with specific needs. Satisfaction ratings for these services are from samples of clients who used those services in the past year³. The ratings also include those in the general population who had used the service in the past year.

In general, Table 2 appears to show a slight upward trend in satisfaction scores for 2009. Most of these differences are not statistically significant and should not be regarded as indications of real change. The pattern for the large majority of services is stability.

The substantial increase for the Heritage Complex, from 7.9 to 8.7, is consistent with several initiatives that the Complex has undertaken in the past year to improve client service. The drop in contracted childcare services has no ready explanation. This now stands at 8.4, essentially equivalent to subsidized childcare provided by the Region of Peel. It is possible that the 2008 score was anomalously high.

In the ETPS group, four services are significantly higher than in 2008. The increases are just 0.2 to 0.3 points out of 10 in magnitude. Because the ETPS services are evaluated in the general population survey, with a large sample of 1,468 respondents, rather small differences can be statistically significant.

The client samples for Emergency Shelters and Transitional Housing and for TransHelp were constructed differently in 2008 and 2009, and the year-by-year scores for these services are not directly comparable.

³ Ratings for the Health Services and Human Services are made by those who used the service in question as their "recent experience" that they described in detail, see Chapter 4 and 5.

Table 2. Overall satisfaction with individual Peel services

Service	Satisfaction (0–10)	
	2008	2009
Human Services		
Ontario Works Services: <i>Active clients</i>	7.5	7.5
Ontario Works Services: <i>Recent clients</i>	6.2	6.8
Emergency Shelters & Transitional Housing §	7.3	6.7
Region of Peel Learn. Play. Care: <i>Full fee</i>	8.5	9.0
Region of Peel Learn. Play. Care: <i>Subsidized</i>	8.2	8.3
Contracted Childcare Services *	9.1	8.4
Childcare Subsidy Wait List Service	3.8	4.6
Rent Supplement Service: <i>Commercial buildings</i>	6.6	7.4
Peel Living Residential Services	7.7	8.1
Peel Living Wait List Service	4.8	4.3
Market Applicant List	–	6.0
Health Services		
Long Term Care Services *	8.2	8.5
Smoking Cessation Clinical Services	8.4	8.2
Dental Screening Service (CINOT)	7.5	8.9
Breastfeeding Support Services	8.5	9.0
Prenatal Services	9.1	9.3
Healthy Babies Healthy Children Services	8.8	9.1
Healthy Sexuality Clinics	–	9.2
Food Handler Training	–	9.6
Paramedic Services	–	9.1
Environment, Transportation and Planning Service		
Water Quality *	7.5	7.8
Water Billing and Collection Service *	8.0	8.3
Water Meter Repairs and Maintenance	8.3	8.4
TransHelp Service §	7.5	8.5
Road Maintenance (Regional Roads) *	6.8	7.0
Waste Collection Service (curbside pickup) *	8.0	8.2
Community Recycling Service	8.2	8.6
Employee and Business Services		
Heritage Complex *	7.9	8.7
Client Contact Centre	7.6	7.7

* Statistically significant difference year to year

§ Samples differ in 2008, 2009: Results are not directly comparable

One 2008 service, Falls Prevention Clinics, was not included in the 2009 research.

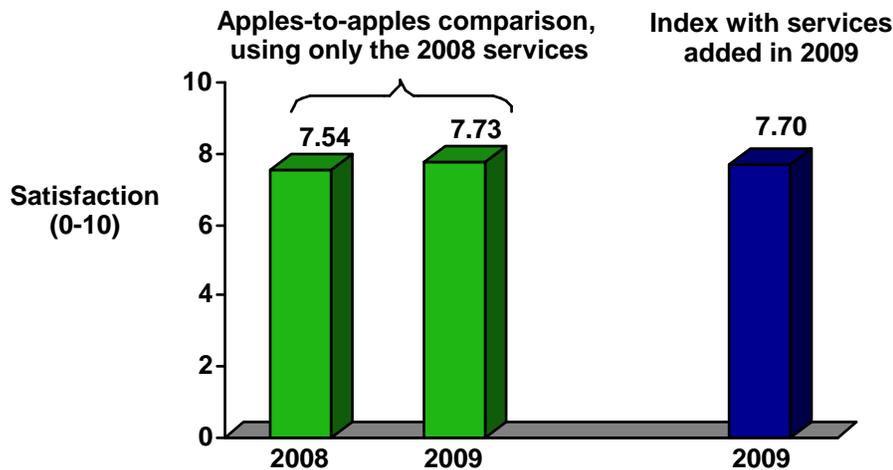
Construction of the Client Satisfaction Index

To obtain a single overall satisfaction score for the Region, the individual scores were combined into a Client Satisfaction Index (CSI). Simply averaging all the scores would give equal prominence to each service, but some of the services are much larger in scope than others. As in 2008, the Index was calculated by weighting each service in proportion to its budget. Waste Management, for example, accounts for 11 percent of the budget of all the services in the survey, so the satisfaction score for Waste Management contributes 11% to the value of the Index.

The Client Satisfaction Index for 2009 is calculated in two ways:

- The two left-hand columns include the services that are common to the 2008 and 2009 surveys (i.e. they exclude the services added in 2009). This apples-to-apples comparison uses a) the identical set of services, and b) identical budget proportions (2008 values). On this basis, the Index has increased by 0.19 points out of 10.⁴
- The right-hand column includes the services added in 2009 (Paramedic Services, Healthy Sexuality Clinics, and Food Handler Training), and also uses 2009 budget proportions. The value of the complete Index is 7.70.

Figure 7. The Client Satisfaction Index



⁴ An index is an aggregate of different measures, not a statistical estimate. As such, it is not relevant to determine if the 2008 and 2009 values differ to a statistically significant degree.

Methodological note

Budgets can change for a variety of reasons. In a recession, relatively more money may go to Human Services. As a consequence, the impact of Human Services scores on the CSI would be greater, and, at least in theory, could alter the value of the Index. There are two views on this. One is that the budget remains a valid yardstick and that the CSI should reflect the changed spending pattern. The alternative is to freeze the proportions so that each service contributes the same amount to the Index every year.

In practice, the two methods are likely to yield similar results, because there is relatively little variation in satisfaction scores across services (wait lists being the exception). Both methods are acceptable from a research perspective – the decision should be made on the basis of what is more reasonable to Peel’s management team. It may be useful to compute the CSI both ways.

4. Access matters

Access is an essential part of the service experience, and problems with access impact client satisfaction.

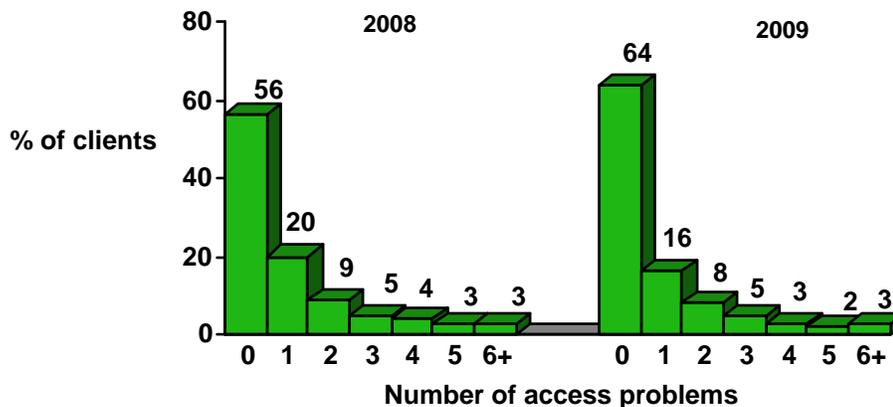
Clients were asked a detailed set of questions about a recent experience with the Region of Peel. Clients from the Health Services and Human Services lists were asked about their experience with that particular service. Clients in the general population survey chose any recent experience. Most often this was an ETPS or EBS service, though some had used Health Services and Human Services and chose to describe them.

The results on access and on drivers of satisfaction, Chapter 5, are based on this recent service experience.

Fewer clients had access problems in 2009 vs. 2008

Respondents were asked if they encountered any of 16 different access problems in the context of their single recent service. Figure 8 shows that 64% of clients in 2009 had no access problems, compared to 56% in 2008. The difference is statistically significant. The individual problems are listed in Table 3.

Figure 8. Fewer clients had access problems in 2009



Access problems decrease satisfaction

Some access problems have a more profound impact than others. “I had to wait too long in line” caused a decrease in satisfaction of 1.2 points, while ‘The process was too complicated, too much red tape’ lead to a decrease of 3.5 points.

Table 3. Access problems decrease satisfaction

Problem	Percent of clients	Decrease in satisfaction (0–10)
Among all clients		
Process too complicated, too much red tape	12%	3.5
Access to staff was difficult	10%	3.4
I got incorrect/conflicting information	9%	3.0
I didn't know where to get the information I needed	10%	2.4
Hours of service did not fit my schedule	10%	1.1
Among those who visited a Peel office or site		
Peel staff did not take enough time to explain things	5%	2.9
Office was in an inconvenient location	14%	1.2
I had to wait too long in line	5%	0.9
I got bounced from one person/department to another	3%	0.4
Among those who telephoned		
Staff did not take enough time to explain things to me	10%	3.6
No response or slow response to phone messages	19%	2.9
I got bounced from one person or department to another	16%	2.3
I had to wait too long on hold	14%	2.1
Among those who visited the Peel website		
I had trouble finding the right site	6%	2.1
I had trouble finding the information I needed	25%	1.9
I had trouble getting the right email address (or no response to an email)	8%	1.3

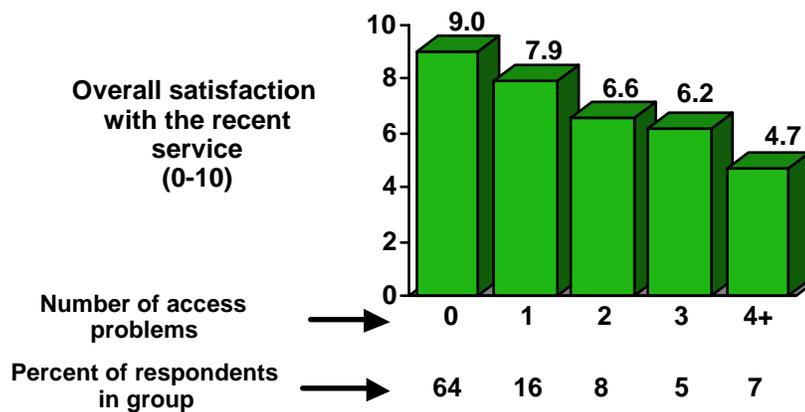
Evidence of the impact of access problems on satisfaction

Figure 9 highlights an important finding. While each specific access problem has some impact on satisfaction, multiple problems compound the impact (Figure 9).

The 64% of respondents who experienced no access problems report very high satisfaction scores (9.0). About two-thirds (64 percent) of respondents who had contact with Peel experienced no access problems and therefore were very satisfied. One access problem (16 percent of respondents) dropped satisfaction to 7.9. This is lower than respondents who had no access problems, however it still represents a satisfied score.

When respondents experienced 2 access problems, their scores dropped to 6.6. With 3 or more access problems, satisfaction scores begin to plummet. Although only 12 percent of respondents experienced 3 or more problems, 7% of Peel residents who had contact with Peel experienced 4 or more access problems, resulting in low satisfaction scores of 4.7.

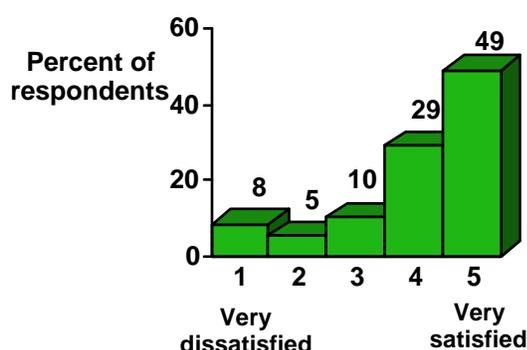
Figure 9. Impact of access problems on satisfaction



5. Drivers of satisfaction

Figure 10 shows how Peel clients rated overall satisfaction with their “recent service” The result is very encouraging in that 78 percent gave a Satisfied or Very Satisfied response. Still, this chart raises the question of *why* some clients were happy while others were not.

Figure 10. Overall satisfaction with the recent service – all respondents



More specifically, the question is whether there are elements of the service delivery process that have a strong and consistent impact on satisfaction, across clients and across services. The 2008 Peel client survey identified five elements that account for most of the variation in overall satisfaction. These are termed the “drivers of satisfaction”.

The 2009 survey reviews these drivers, and separates them into three groups on the basis of the type of service involved.

- The simplest group is transactional services where no interaction with Peel staff is involved – services such as getting information from the website or mailing an application.
- The next group is transactional services that involve staff. These might include visiting the CRC, having a water meter repaired, or calling the Contact Centre.
- The third group is termed “relational services” and includes many of the Health and Human Services. These are typically longer term services where there is important interaction between the client and service provider and includes prenatal classes, Ontario Works, Peel Living, LTC and many others.

Transactional services generally involve only one or two points of contact or “touch-points. If the service is unfamiliar, there may be an information-gathering phase such as consulting the website or calling the Contact Centre (Table 4). Clients then progress directly to the service delivery or fulfillment phase. While

most transactional services are short term, resolving a problem such as a disputed water bill may play out over longer periods of time.

Relational services often involve additional points of contact. This is especially true of services that involve subsidies. The number of touch-points that a client experiences depends on both the service and the client’s situation.

Each touch-point presents the client with a different set of processes and possibly different Peel staff. This way of looking at service delivery raises two questions:

- To what extent do the drivers of satisfaction differ across services?
- To what extent do the drivers of satisfaction differ across touch-points?

Existing research suggests that there is likely a good deal of commonality to the drivers across both services and touch-points, but some differences are bound to occur as well. At this time, we examine the three situations illustrated in Table 4 – transactional services with and without staff involvement, and relational services.

Table 4. “Touch-points” in service delivery

Type of contact	Transactional Services:		Relational Services
	No staff	Staff	
Gathering information about the service	√	√	√
Screening			√
Assessment			√
Service Delivery	√	√	√
Maintaining Eligibility			√
Appeals Process			√
Termination			√

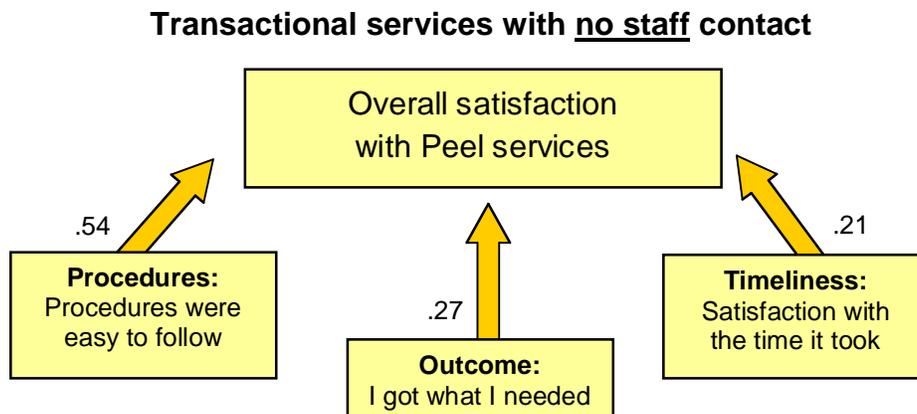
Transactional services with no staff contact

Drivers are identified through statistical analysis. All relevant questions about the service delivery process are considered, and the analysis determines which elements of the process have a strong and consistent impact on clients' overall satisfaction with the service. (Demographic factors such as age and length of residence in Canada are also considered. These have little or no impact on satisfaction with Peel services, as discussed in Chapter 6).

For transactional services with no staff contact, there are three drivers:

- Procedures were easy to follow
- Outcome (getting what you needed)
- Satisfaction with the time it took

Figure 11. Drivers of satisfaction:



The drivers account for 67% of the variance in satisfaction⁵

Clients who found procedures easy and who got what they needed in a reasonable amount of time give very high satisfaction ratings. This is illustrated in Figure 12. The first column represents the 59% of clients who got what they needed and who rated Peel's performance at either 4/5 or 5/5 on the other drivers – “Procedures were easy to follow“ and “Satisfaction with the time it took”. The group, where all the drivers are in positive territory, rated overall satisfaction at 9.1 out of 10.

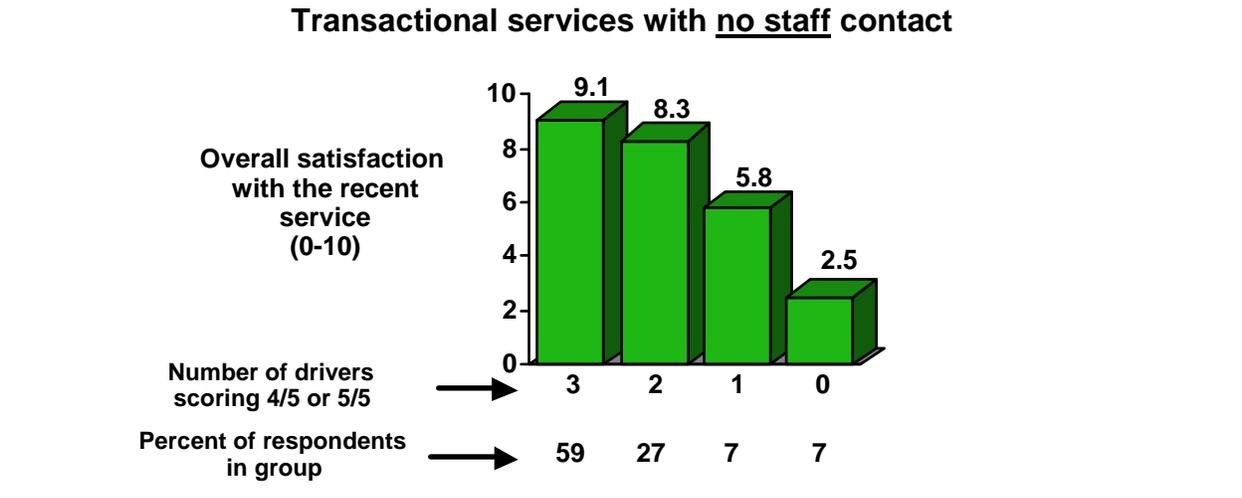
The second column represents the 27% of clients who found service less than positive on any one of the three drivers. Either they did not get what they needed or they rated one of the other drivers at 1 or 2 or 3 out of 5. Their overall satisfaction with service delivery drops to 8.3 out of 10.

⁵ The number above the driver is a standardized regression coefficient. The value of .54 for “Procedures were easy to follow” means that a 1-unit increase in client ratings of Procedures will lead to an increase of .54 units in overall satisfaction.

Each succeeding column represents an additional driver below the positive threshold. When all three drivers are less than positive, overall satisfaction is just 2.5 out of 10.

Figure 12 represents a slight simplification, in that the drivers do not have equal impacts – for this group of transactional services, timeliness has a smaller effect than the other drivers. Still, it shows that their impact is incremental and that each one of them is important. Clients who experience good service on each dimension are extremely satisfied, but to the extent that any drivers slip, so does client satisfaction.

Figure 12. Impact of the drivers:



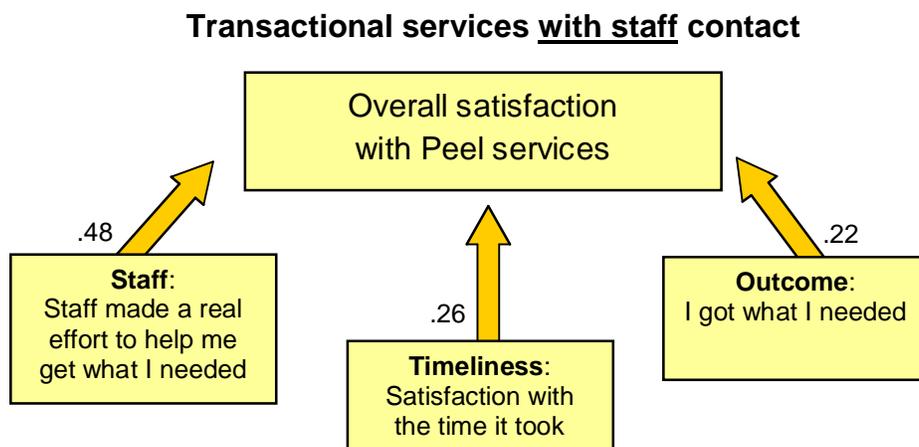
Another indication of the impact of the drivers is the fact that they account for 68% of the variance in overall satisfaction. This is approaching the practical limit of what survey research can hope to explain. It is not possible to approach a 100% explanation because a) people vary in their needs and expectations – for example, timeliness is more important to some than to others, and b) transactional services where staff are not involved covers a rather diverse set of interactions. The three present drivers explain most of what we can realistically expect to account for.

Transactional services with staff contact

For transactional services with staff contact, Timeliness and Outcome remain part of the driver set, while "Procedures were easy to follow" drops out. It is replaced by the item, "Staff made a real effort to help me get what I needed". In transactional services that involve staff, staff performance is the biggest driver.

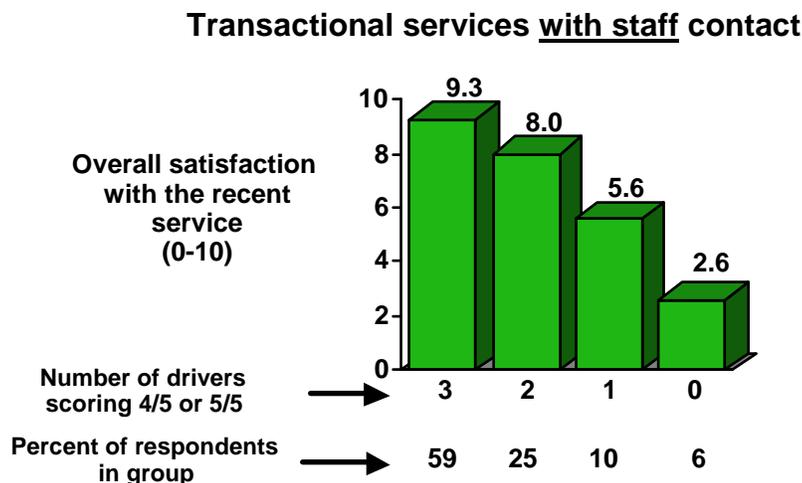
The impact of the drivers, Figure 14, is very similar to the case where no staff are present. Most clients experience good service on all three drivers, and for this group overall satisfaction stands at a very high level of 9.3 out of 10. If performance on the drivers slips, so does client satisfaction.

Figure 13. Drivers of satisfaction:



The drivers account for 66% of the variance in satisfaction

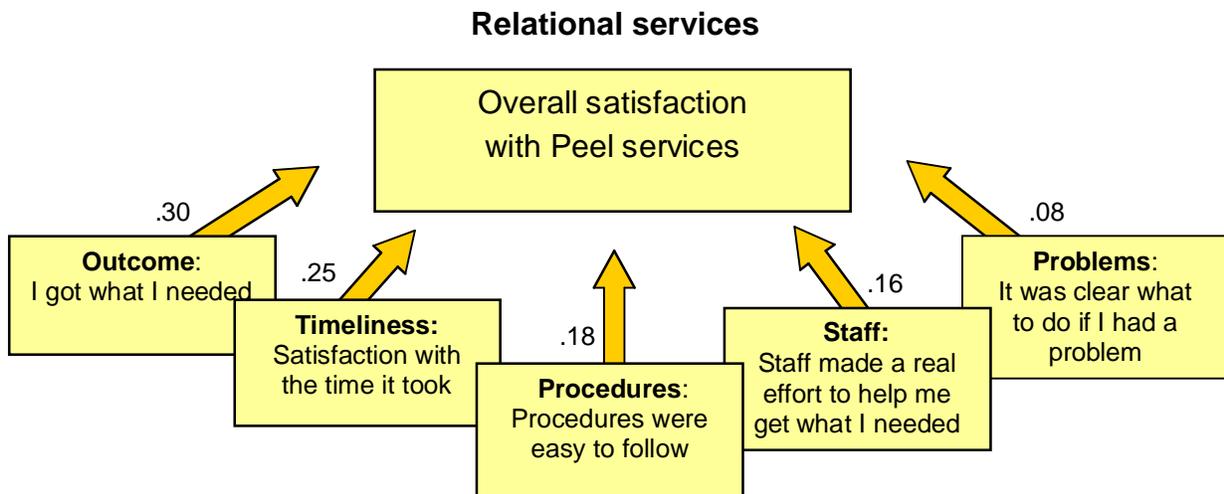
Figure 14. Impact of the drivers:



Relational services

Relational services are more complex than transactional services, and so it is not surprising that the set of drivers expands (Figure 15). Each of the drivers discussed in the transactional context is present, plus one more, “It was clear what to do if I had a problem”.

Figure 15. Drivers of satisfaction:

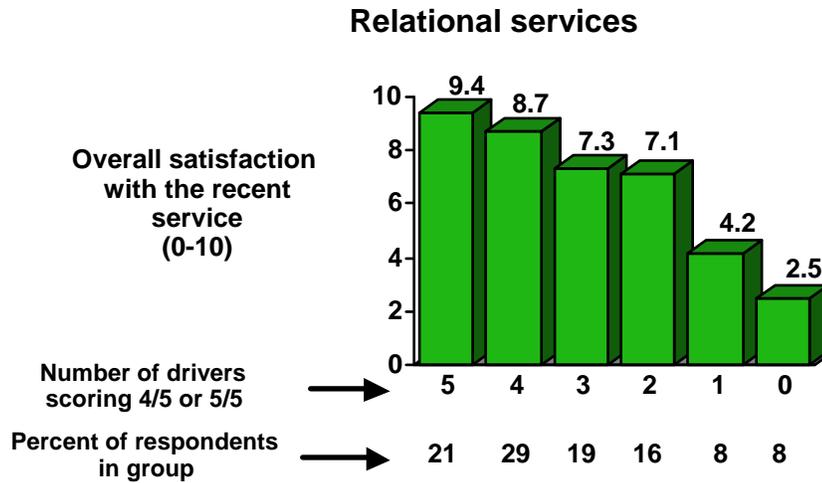


The drivers account for 56% of the variance in satisfaction

The drivers account for 56% of the variance in satisfaction for relational services, which is slightly less than for transactional services, but still a strong result. The slight decrease probably reflects the fact that client groups with differing needs are involved and the types of contact that they have with Peel differs as well. It is perhaps surprising that the five drivers account for as much variance as they do they do, given the diversity of client experiences that are involved.

Figure 16 shows the familiar step-wise decrease in client satisfaction as problems with the drivers arise.

Figure 16. Impact of the drivers:



Performance on the drivers

Performance scores on the drivers can indicate where to target service improvement efforts. It is generally easier to improve a low-scoring element than one that is already doing well. Table 5 shows that for both types of transactional service, all the drivers score high – no area is crying out for attention.

In the relational services, outcome and satisfaction with the time it took appear relatively low, at least at first glance. To a large degree, these lower numbers reflect clients on the three wait lists – Peel Living, Market Applicants (seniors), and childcare. Without the wait lists, the timeliness score for relational services rises to 8.1 – not significantly different from the transactional groups – and the outcome score increases to 75%. It should be noted that outcomes are inherently less certain in relational services – you may not get your first choice of childcare site, and your OW payment may fall short of expectation.

Table 5. Performance on the drivers

Driver	Transactional Services:		Relational Services
	No staff	Staff	
Outcome (% who got what they needed) *	84%	86%	65%
Satisfaction with the time it took *	8.0	8.3	7.4
It was clear what to do if I had a problem	–	–	7.8
Staff made a real effort	–	8.1	8.4
Procedures were easy to follow	8.6	–	8.1

* Statistically significant difference among groups

Implications

Three important points emerge from these results.

First, it is apparent that the Region of Peel can provide a very high degree of service to its citizens. This chapter began with the finding, Figure 10, that 78 percent of all clients rated their recent experience at either 4 or 5 out of five. In addition, scores on the drivers are high across the three types of service. Peel does not, therefore have to re-think its approach to service delivery. (If only a few clients gave their service a 5 out of 5, Peel might consider a large scale re-vamping of service delivery, but this is clearly not Peel's situation).

The current results emphasize that high scores come from service delivery that is consistently high across the full set of drivers. **Improvements will arise by ensuring that all clients experience the level of service that the majority receive today.**

Secondly, there are, limitations to what Peel can do. It is not always possible to give clients the outcome they want, (although it is possible to present that outcome in ways that are more easily comprehended by the client or with a sense of empathy for their situation). The limitations on outcomes probably arise more often in the relational services than elsewhere, and they may place a ceiling on the performance score for this driver. With the other drivers, there is theoretically no ceiling. Staff can make an effort on behalf of every client, though if workload is high and time is short it may not be a practical reality. Timely service is clearly possible, as most clients give good ratings for timeliness, however delays caused by inefficient processes or regulations may impact some.

Third, the high proportions of variance that the drivers account for imply that a corporate-wide approach to service improvement is feasible. The same drivers apply to clients across the spectrum. This should not prevent individual services from enquiring more deeply into the dynamics of their own client groups, but there is without doubt a fundamental commonality to client satisfaction across services and departments.

With the Client Satisfaction index now at 7.70, it is likely that future gains may be relatively small, but incremental improvement is still possible.

6. The role of demographics in client satisfaction

Introduction

A great deal of client research emphasizes the role of demographic factors – gender, age, income and so on. The forgoing analysis of drivers did, in fact, test demographic variables, but none of them have sufficient impact that they could be considered drivers of satisfaction. The drivers described previously account for between 56% and 68% of the variance in client satisfaction, while demographic variables account from anywhere between zero and about five percent.

This chapter takes a second pass at the demographic issue to determine whether there are smaller or more localized instances where demographics are an important consideration.

Some questions are:

- Can dissatisfied clients be identified on the basis of demographic characteristics?
- Are clients who face unusual difficulties less satisfied with service delivery?
- How do clients who are most in need experience Peel services?

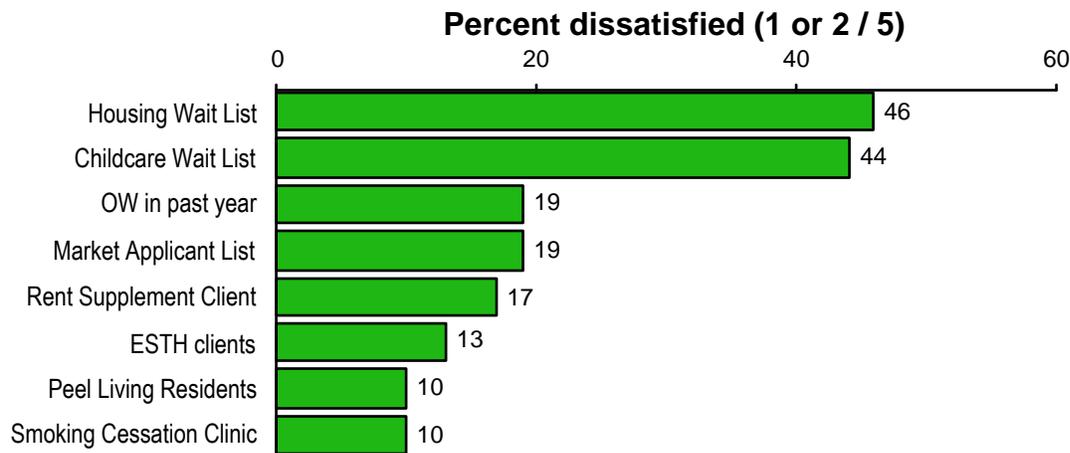
Dissatisfied clients are clustered in a few services

To begin with, it is important to recognize that many services have their own distinct demographic profile. LTC clients are generally over age 65 and the majority is female. Certain health services are entirely or predominantly younger females (including HBHC, Breastfeeding, and Healthy Sexuality). Differences like this can confound a demographic analysis. For example, if results show that satisfaction varies with age, it may simply mean that services used mainly by younger people get higher (or lower) satisfaction scores than services used mainly by older people. Because of this, it is important to test demographic influences within service areas.

Figure 17 shows how low levels of satisfaction are strongly associated with just a few Peel services. Wait Lists are clearly at the top of the list with the Housing Wait List resulting in 46% dissatisfied clients and Childcare Wait List in 44% dissatisfied clients.

As an aside, the low average satisfaction score among OW clients who left within the past year is mainly due to those who were involuntarily terminated. OW clients who left the program voluntarily registered overall satisfaction levels very close to current clients.

Figure 17. Dissatisfied clients are clustered in a few services



The other 21 ETPS, Health and Human Services had fewer than 10% dissatisfied clients.

Dissatisfied clients cannot be defined demographically

Tests were run to determine whether satisfied and dissatisfied clients differed on demographic dimensions within eight major service areas (listed in Table 6), Dissatisfied clients do not differ from satisfied clients on standard demographics including:

- Age
- Gender
- First language
- Income
- Length of residence in Canada or in Peel.

Two other specific groups, single mothers and immigrant women over the age of 50 were examined, as other studies have found that they can fall through the cracks. Results showed:

- Single mothers are not less satisfied than other clients on Childcare, OW, Housing, Prenatal Care or any of the Wait Lists.
- Immigrant women over age 50 are not less satisfied than Canadian born women over 50.

With regard to immigrant women, many in this group do not get the all services that they might benefit from. This survey does not address that issue, but it shows that those immigrant women who are able to access Peel services are as satisfied with what they get as are other women.

Demographics and the drivers of satisfaction

Attention now turns to the drivers of satisfaction: are there demographic segments who do not get as good service on the driver elements?

Outcome is a driver for each type of service (both relational and transactional services). Table 6 shows the enormous variation in outcome across services: clients who perceived that they had a successful outcome ranged from 6 percent on the wait lists to 100% for paramedic services⁶.

Once again, each service area has its own demographic profile, so it is important to look at demographics within similar services.

The demographic variables assessed were gender, first language, length of residence in Canada, age, education, and household income. The eight service areas and six demographic variables lead to 48 separate tests for Outcome alone. A small number of these produced “statistically significant” differences, but then one expects 1 in 20 such tests to produce a “wrong” result.

The tests were repeated for the other drivers with similar results. The clear conclusion is that demographic variables have no meaningful impact on the drivers of satisfaction.

Whether looking at overall satisfaction or the drivers of satisfaction, demographics do not differentiate more and less successful clients within individual services.

This is a very positive result: Peel clients of all backgrounds receive similar quality of service!

Table 6. Outcomes for selected services

Service	Get what they needed (%)	Did not (%)
Paramedics	100	0
Prenatal, Breastfeeding, HBHC, CINOT	91	9
EBS	85	15
Childcare	87	13
ETPS	87	13
Peel Living	71	29
OW	60	40
Wait Lists (Childcare, Housing)	6	94

⁶ As a courtesy, paramedic services where the patient died were omitted from the survey.

7. The OW client service journey

Peel decided to investigate Ontario Works (OW) in detail. OW is used as a case study of a complex service in order to better understand the drivers of relational services. The sample was expanded to 662 clients in total. An excellent response rate of 65% was achieved through an in-depth telephone survey. The survey tracked clients at seven discrete touch-points. The full results of this survey are reported separately; this Chapter describes the model of overall satisfaction for OW clients.

Clients of OW are distinctive in that they have ongoing relationships with staff involving multiple contacts. Client service journeys typically last months to years. OW represents a vital service offered by Peel, one that in an economic downturn is even more critical to Peel clients. OW, therefore, represents an excellent opportunity to illustrate a complex relational service.

OW clients interact with Peel at seven classic key touch-points, described below in Table 7. Some of these touch-points are specific to OW, while others are common to relational services in general.

Clients were asked about their experience during the past 12 months only, as recollections of more distant events can be less than clear. Forty-five percent of the OW clients had been through the initial screening process during this time. They described their experience using a set of eight agree/disagree scales, and their responses have an average correlation of .36 with their overall satisfaction rating with the OW program.

Each of the seven touch-points is correlated with overall satisfaction. In other words, what happens at each touch-point has a lasting impact on the client.

Table 7. Ontario Works: Seven classic touch-points

Touch-points	Percent involved (in past 12 months)	Correlation with overall satisfaction
Screening	45%	.36
START Program	26%	.48
Initial interviews with caseworker	47%	.38
Ongoing/current caseworker process	97%	.49
Maintaining eligibility	89%	.41
Appeals	10%	.48
Termination	15%	.41

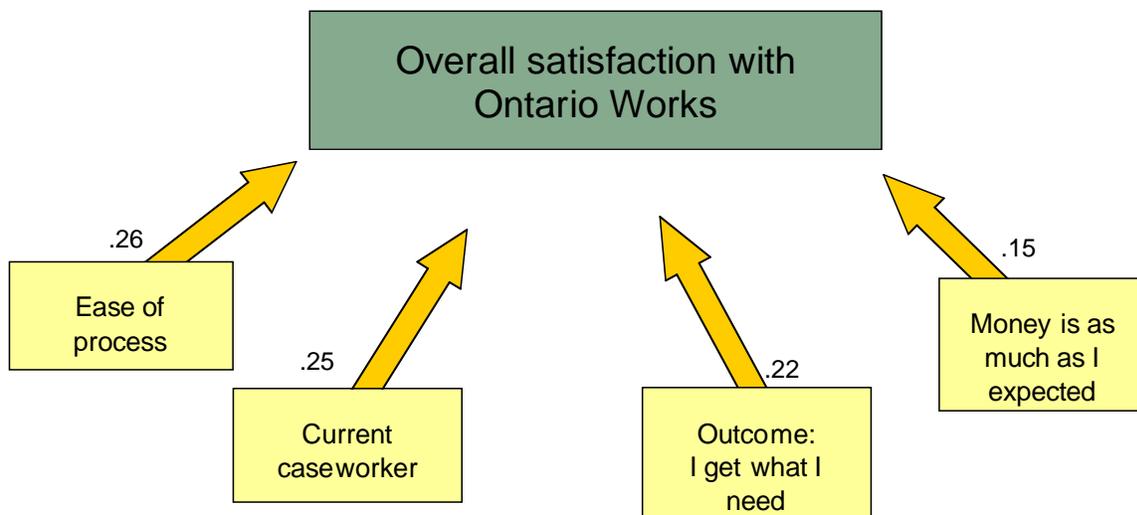
The OW driver model

The OW driver model is an example of a complex relational service. Although the drivers are labeled slightly differently from the relational model described earlier, their content is very similar.

The five drivers include the following components:

- 1 Ease of process** is a composite variable that includes two of the drivers from the general driver model (Figure 15). These are, "It was clear what to do if I had a problem" and "Procedures were easy to follow".
- 2 Current caseworker** is a composite of 7 items. This driver is very similar in meaning to "Staff made a real effort to help me get what I needed".
- 3 Outcome** is identical to the driver in the general Peel relational services.
- 4 Expectations around financial support** is qualitatively different from the drivers of relational services generally:
 - Just under half of OW clients stated that they got less money than they expected, and these people are less satisfied than other OW clients.
 - There does not appear to be a pattern to this, e.g. clients who had been on OW on previous occasions were just as likely to say they got less than expected as were new OW cases.

Figure 18. Drivers of satisfaction: Ontario Works



The drivers account for 46% of the variance in overall satisfaction

8. Trust and confidence in Peel

Introduction

The results described in this chapter are based on the general population survey of 1,468 Peel residents. The standard margin of error for the general population sample of 1,468 is +/- 2.6%.

Trust and confidence in public institutions have been studied extensively over the past 50 years in many countries around the world. Various factors contribute to trust/confidence or the lack of it, including how governments deal with economic and social issues. Citizens' views of political parties and government policies also play a role. The present analysis does not extend to these larger issues, but examines whether citizens' perceptions of Peel services contribute to trust and confidence.

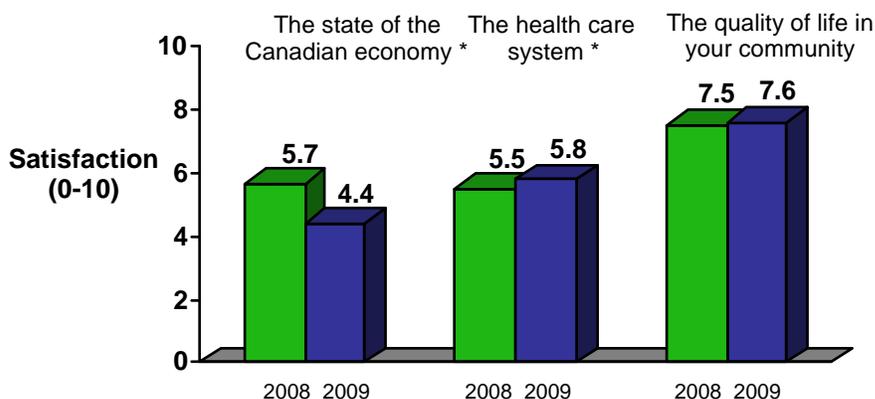
Global indicators

Members of the general population in Peel were asked, overall how satisfied they were with three flagship issues, namely,

- The present state of the Canadian economy
- The health care system
- The quality of life in Peel.

Six months into a recession, perceptions of the economy are understandably down. Interestingly however, respondents' perceptions of the quality of life in the Peel community have not slipped.

Figure 19. Global indicators



* Statistically significant difference year to year

Results are based on the general population

Trust and confidence in Peel

The survey posed six agree/disagree statements on different aspects of trust and confidence in the Region of Peel (Table 8). Four of these dimensions show statistically significant increases from 2008 to 2009. It can be hypothesized, but not proven, that the increased scores here are associated with the economic crisis. In other words, citizens tend to turn to local/regional governments with hope and with the expectation that they will support and care for their citizens. Peel remains on solid ground in the eyes of its residents, even though governments around the world are under stress.

Table 8. Trust and confidence in Peel

Statement	2008	2009
	Agreement (0 – 10)	
Peel employees are honest in their dealings with citizens *	7.9	8.2
Peel employees can be counted on to correct mistakes when they happen	7.5	7.7
Peel is well managed *	7.3	7.7
Peel conducts its business in an open and accountable manner	7.3	7.5
I can count on Peel to do what is best for its citizens *	7.2	7.4
Peel gives me good value for my tax dollars *	6.8	7.0

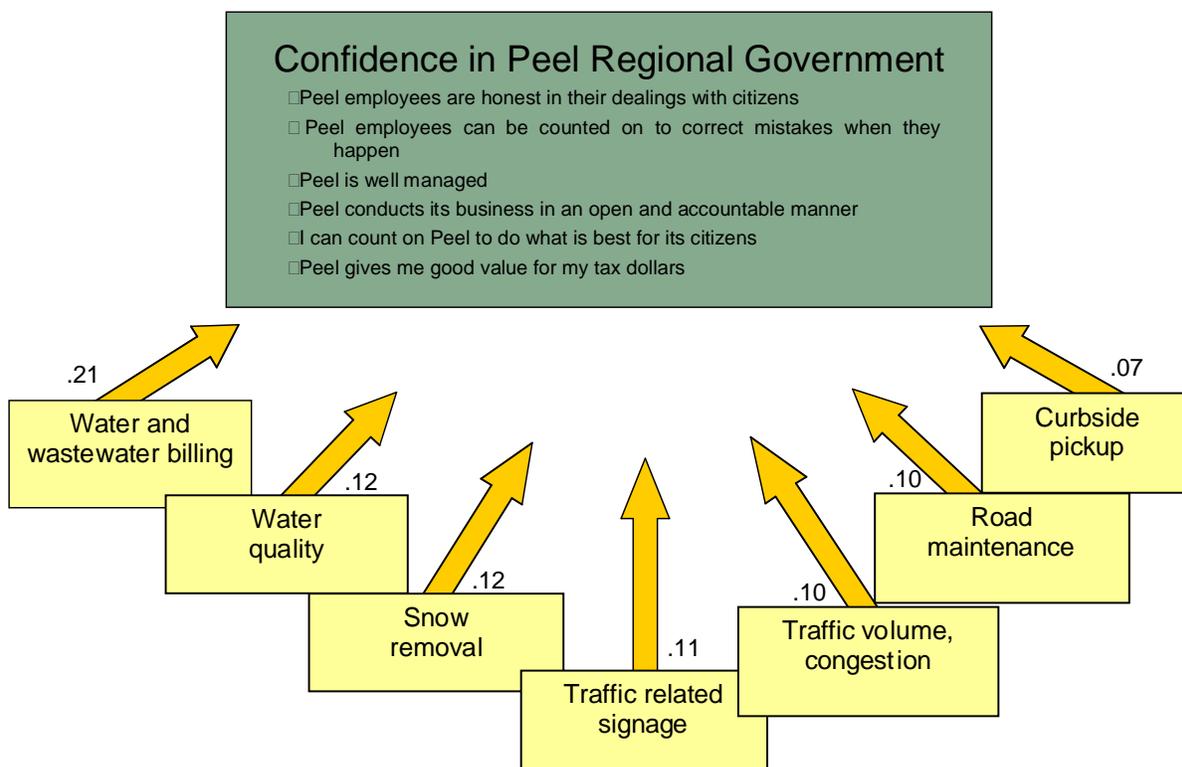
* Statistically significant difference year to year
Results are based on the general population of Peel

Drivers of trust and confidence in Peel Regional Government

“Trust” and “Confidence” in government are complex notions and no single survey question can produce a complete measure of them. In this survey, trust and confidence are measured as the average of the six statements in Table 8. Each statement addresses a different aspect of trust and confidence and together they form a scale.

Figure 20 shows that client satisfaction with each of the seven ETPS services contributes an increment to trust and confidence. There is some variation in impact from service to service, but the seven services are more similar than they are different. Together they account for 24 percent of the variance in trust/confidence. (The percentage of variance accounted for is less than in the other driver models, however, as was mentioned earlier, this model does not include factors such as citizens’ perceptions of policies and political figures that are known to have an important impact on confidence.)

Figure 20. Impact of Regional services on trust and confidence: General Population



- Satisfaction with these services accounts for 24 percent of the variance in confidence in the Region of Peel
- Numbers above the services are standardized regression coefficients. They indicate the impact that each service has on confidence
- Results are based on the general population of Peel

9. Priorities for government

This chapter focuses on perceptions of the general population in Peel on one set of important questions: What do Peel citizens believe are the priorities for government action?

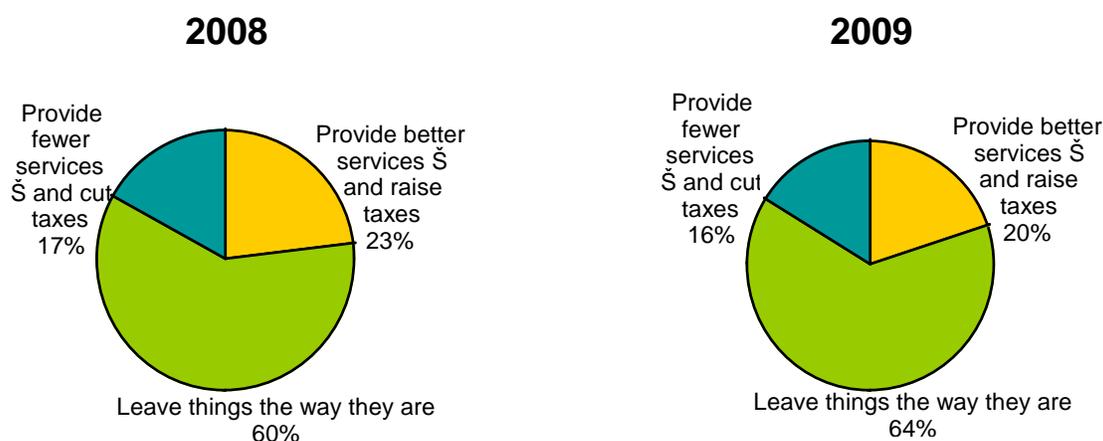
What should governments do?

Residents of Peel were asked “Thinking about governments generally – not just Peel – which direction should governments take”? They were given four options:

- Provide better services – and increase taxes to pay for them
- Provide fewer services – and cut taxes
- Leave things the way they are
- No opinion.

The results in Figure 21 exclude the one-quarter of the population who had no opinion. The majority in both 2008 (60%) and 2009 (64%) stated that they thought governments should leave things the way they are.

Figure 21. What should governments do?



* Difference year to year is not statistically significant

Who advocates more and fewer services?

It is interesting to ask who it is that wants fewer services/lower taxes: are they less satisfied with the services that they get from Peel? Contrasting those who advocate more services and those who advocate fewer services shows that:

The two groups do *not* differ significantly on:

- Satisfaction with their “recent service”
- Satisfaction with the 9 ETPS and EBS services
- Demographic characteristics: Gender, Born in Canada vs. not, Education and Income

However, those who advocate *more* services/higher taxes:

- Have slightly greater confidence in Peel (on some but not all measures)
- Rate most priorities for government action higher (Figure 22).

And those who advocate *fewer* services:

- Perceive less value for their tax dollars
- Support reducing the size and cost of government.

In other words, those who favour more services and higher taxes represent a liberal element that believes in a stronger role for government. Those who lean toward fewer services and lower taxes tend to be fiscal and policy conservatives.

It is important to note that service quality and demographics have no bearing on who advocates more and who advocates fewer services.

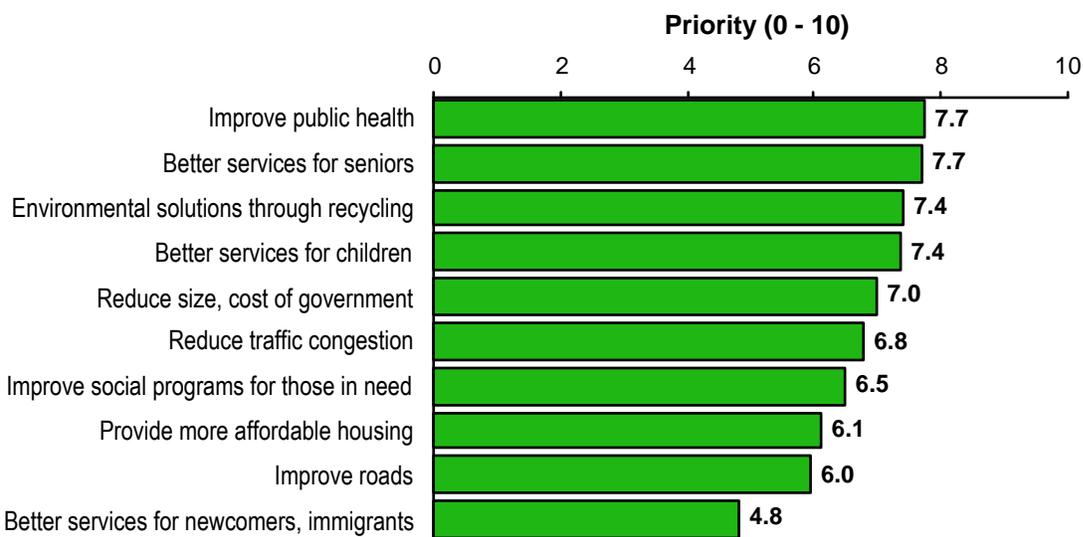
Action priorities for governments

The following results (like other findings in this chapter) describe the adult population of Peel as a whole, and not Peel's client base (where there is greater emphasis on Health Services and Human Services).

The survey question asked respondents about their priorities for governments in general, not specifically Peel. In the future, this question will focus specifically on Peel services. This broad focus may mean that some respondents interpreted {Improve public health} as meaning improvements to the health system in general.

It is interesting to note that traffic congestion and roads fall beneath a number of Health and Human Services, namely, public health, better services for seniors and better services for children.

Figure 22. Peel residents' priorities for governments



Results are based on the general population

Priorities for government, 2008 and 2009

The survey question asked about priorities for governments in general, not specifically Peel.

In looking at the 2008 results vs. the 2009 results the question arises, “Why the slippage?” The survey did not ask respondents reasons for their priority ratings so we can only hypothesize, “Are these results a sign of retrenching in a bad economy?” Perhaps some citizens feel that, when the economy is under siege, governments should hold the line rather than embark on new ventures.

Table 9. Priorities for government, 2008 vs. 2009

Priority	2008	2009
	Priority (0 – 10)	
Improve public health *	8.4	7.7
Better services for seniors *	8.3	7.7
Environmental solutions through recycling *	8.1	7.4
Better services for children *	7.9	7.4
Reduce size, cost of government *	7.4	7.0
Reduce traffic congestion *	7.5	6.8
Improve social programs for those in need *	7.1	6.5
Provide more affordable housing *	6.6	6.1
Improve roads *	7.0	6.0
Better services for newcomers, immigrants *	5.3	4.8

* Statistically significant difference year to year
Results are based on the general population

10. Highlights of results and forward momentum

Highlights of results

- 1 Peel clients differ from the population at large in terms of gender, age, immigrant status, labour force participation, unemployment and income.
- 2 Client satisfaction with Peel services in 2009 is generally stable. Several services registered significant increases in satisfaction.
- 3 The drivers remain strong predictors of client satisfaction.
- 4 Peel has a new powerful tool to improve services based on drivers in 3 distinct service contexts, namely, transactional services with no staff, transactional services with staff and relational services
- 5 New insights into the OW service journey provide key to improving all complex relational services.
- 6 Peel citizens express very high levels of trust and confidence in their regional government.
- 7 Service quality contributes strongly to trust/confidence in government.

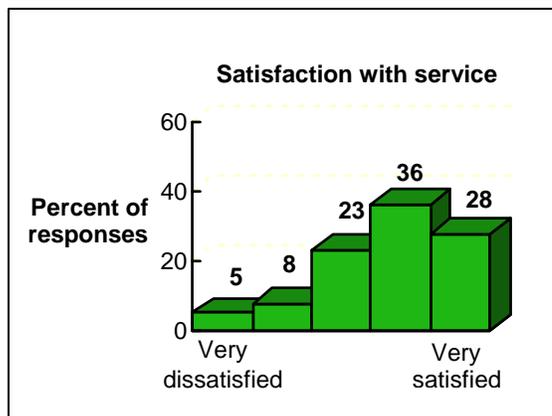
Forward momentum

- 1** Peel's Common Purpose Strategy is working well. The discovery and use of an empirically founded set of client satisfaction drivers has fostered a cohesive and comprehensive approach to service across the organization.
- 2** Results of the 2009 client-focused research demonstrate that staff efforts are paying off with incremental positive changes in satisfaction.
- 3** This is a Peel employee story. The positive results for client satisfaction and confidence in Regional administration are a tribute to the staff. The delivery of consistently high quality service to Peel clients could not have been achieved without the focused effort and skilled work of Peel staff.
- 4** Peel should continue its excellent work:
 - Communicate results effectively to all staff/Council
 - Help specific services generate new solutions
 - Support specific service improvements
 - Focus on problem areas e.g. wait lists, web
 - Continue regular measurement strategy using validated statistical method and complex sampling to monitor client satisfaction and confidence and to enable regular feedback to all staff.

Appendix: Explaining variance

The 5 bars in the chart to the right show how people differ in satisfaction with some service. These differences can be represented mathematically, and the statistical term that describes the differences is variance. Variance is a measure of how people differ in their response.

Peel's client research seeks to understand why people differ – in mathematical terms it seeks to *explain* the variance in response. For example, suppose that all respondents aged 18-24 answered "very dissatisfied" (1 out of 5) to this question, while very person aged 25-34 answered 2 out of 5, and so on. Age would then account for 100 percent of the variance in response to this question – if you knew the respondent's age you would know exactly their position on the statement.



The opposite possibility is that age is completely unrelated to satisfaction. In this case, there would be the same proportion of 18-24 year olds (and each other age group) at each level of satisfaction. Knowing a person's age would give no hint as to whether they were satisfied with the service or not.

The opposite possibility is that age is completely unrelated to satisfaction. In this case, there would be the same proportion of 18-24 year olds (and each other age group) at each level of satisfaction. Knowing a person's age would give no hint as to whether they were satisfied with the service or not.

In practical terms, explaining 50 percent or more of the variance in some area means that one has a very good understanding of the situation. Research never explains 100 percent of the variance because people respond differently to events – timely service may be the most critical determinant of satisfaction for one person while getting help from staff may be for another.

Research that explains 20 or 30 percent of the variance in a situation is less compelling but may also be useful. Research that explains less than 10 percent is generally not useful in the sphere of service delivery.