



TOBY DOUGLAS
DIRECTOR

State of California—Health and Human Services Agency
Department of Health Care Services



EDMUND G. BROWN JR.
GOVERNOR

Date: June 18, 2014

CCS Information Notice: 14-12

TO: ALL COUNTY CALIFORNIA CHILDREN SERVICES (CCS) PROGRAM
AND GENETICALLY HANDICAPPED PERSONS PROGRAM (GHPP),
MEDICAL CONSULTANTS, COUNTY MEDICAL STAFF, AND SYSTEMS
OF CARE DIVISION (SCD) STAFF

SUBJECT: COUNTY PARTICIPATION IN THE 2015 TITLE V NEEDS
ASSESSMENT FAMILY SURVEY

It is time again for the Title V Needs Assessment, which is done every five years to determine the needs and priorities for the CCS Program. This year, we are conducting a statewide CCS Program Family Survey. The purpose of this Information Notice is to explain survey objectives and parameters, as well as to identify the method(s) your county may select to carry out the process.

The CCS Program Family Survey Objectives, Methods, and Parameters

The multi-language (English and Spanish) survey tool will be available by July 1, 2014, via SurveyMonkey.com. We anticipate the survey process will occur between July 2014 and October 2014, and each survey will take five to ten minutes to complete. Counties will be asked to administer the survey to a minimum of 5 percent or 50 clients, whichever is greater, annual medical review option only of their CCS Program caseloads. The survey tool will solicit family input regarding:

- Quality of services, including Medical Therapy Units (MTUs);
- Access to services, including availability of necessary services, geographic access and timelines of appointments;
- Medical home/coordination of care by Special Care Centers/Medical Doctors;
- Interaction with the local CCS Program office, including the CCS Program coordination of care including transition, understanding the CCS Program, communication with the CCS Program staff.

The survey will be administered at the time of annual medical review (AMR).

Counties may select one of two survey methods, or a combination of both, as detailed on the following page:

Survey Method 1 involves having the CCS Program staff conduct the survey, in-person or by phone, and directly enter each family's responses to the survey questions into SurveyMonkey.com.

Survey Method 2 involves sending a letter to families, with a link to SurveyMonkey.com, and having the family enter responses to survey questions directly into the survey form.

Please note, the first survey method requires the county CCS Program staff time, and the second method requires that the family have web access and is able to complete the survey without assistance.

Please use the attached response form to specify your county's CCS Program Family Survey designated contact person's name, phone number, and e-mail address, as well as your county's preferred method(s). Also attached is the number of surveys requested from each county (five percent of county caseload as of May 2014).

Local county participation is voluntary, but this statewide family survey provides a rare opportunity to view the family perspective on the CCS Program, and the more surveys returned, the more valuable the results will be. Thank you in advance for your time and assistance in completing the Title V Needs Assessment process.

Sincerely,

Original Signed by Jill M. Abramson

Jill M. Abramson, MD, MPH, FAAP, Chief,
Medical Policy and Consultation Section

Attachment

**The California Children's Services (CCS) Program
Family Survey County Response Form**

Name of County: _____

Designated CCS Family Survey Contact Name: _____

Contact Phone #: _____ Contact e-mail: _____

Please specify which of the survey time frame options, below, work(s) best for your county.

OPTION 1: Family Survey Conducted by the CCS Program staff, by phone or in person.

At the time of Annual Medical Review (AMR), the CCS Program County staff will conduct the survey, in-person or by phone. The staff will log into the SurveyMonkey.com website, and enter data based on the responses of the family to the survey questions. This allows clients without internet or smartphone access to participate in the process.

OPTION 2: Family Survey Completed by Family

At the time of the AMR, the CCS Program County staff will select the parent letter from the Correspondence module of CMS Net. This will generate a letter on county letterhead with the county CCS Program general phone number. The staff will then print and send the letter to the parent/family describing the survey, along with a link to the survey tool. Then, the family can enter the SurveyMonkey.com website and complete the survey by phone or computer.

Please note, your county may combine Option 1 and Option 2 as long as the survey is not conducted for the same individual more than once.

Please return the completed form via e-mail, on or before June 22, 2014, to:
Paulette.Meeks@dhcs.ca.gov or Jill.Abramson@dhcs.ca.gov.