

TI Year 3 Member/Family Experience Survey  
Results Tabulation Instructions

**Instructions**

Click the "Survey" tab at the bottom of the Excel Workbook to enter survey results tabulation. This document is found in the Document Validation Criteria as well.

- 1) Enter the TI Site Participation Number (SPN) for that location into the SPN Field.

<b>SPN:</b> _____
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- 2) Choose the Area of Concentration for that site. Click the cell to reveal the dropdown arrow.

<b>Area of Concentration</b>	
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- 3) As shown in the example below, enter the number of responses for each survey response in the yellow cells. The grey cells will auto-calculate the total responses and the % of responses per question.

Question	Number of Responses					Total Responses
	5 Very Satisfied	4 Satisfied	3 Neither	2 Dissatisfied	1 Very Dissatisfied	
1 →	3 27%	5 45%	2 18%	1 9%	0 0%	11
2 →	6 55%	2 18%	0 0%	0 0%	0 0%	8
3 →	0 0%	0 0%	0 0%	0 0%	0 0%	0
4 →	0 0%	0 0%	0 0%	0 0%	0 0%	0
5 →	0 0%	0 0%	0 0%	0 0%	0 0%	0
6 →	0 0%	0 0%	0 0%	0 0%	0 0%	0

- 4) Rank up to five Social Determinants of Health (SDOH) needs that were identified at this site. Please only choose 1-5 one time, with **1 indicating the highest priority** (example below). Less than five needs can be ranked, but no more than five should be selected.

Please Rank Up To 5 SDOH Needs Identified At This Site	
1	Education
5	Employment
2	Food
3	Housing
4	Personal Safety
5	Social and Emotional Isolation
1	Transportation
2	Utilities

Thank You!

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- 5) Upload the completed Excel spreadsheet through the Attestation Portal when you attest for this milestone. The milestone also requires submission of an action plan that addresses process improvement and trends identified from the survey data.

**Attachments**

*Please DO NOT upload files containing Protected Health Information (PHI) or Personally Identifiable Information (PII).*

Type: Survey results summary and plan (CC# )

Select file to upload:  No file chosen

Accepted File Types: pdf, doc, docx, gif, jpg, bmp, png, xls, xlsx Max File Size: 10MB

FileName	File Type	Upload Date
<input checked="" type="checkbox"/> Member_Survey_Example.xlsx	Survey results summary and plan	7/20/2019
<input checked="" type="checkbox"/> Survey Trends and Action Plan Example.docx	Survey results summary and plan	7/20/2019

**SURVEY QUESTIONS- FOR REFERENCE ONLY**

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- 1: How satisfied are you with the helpfulness of our staff during the referral process?
- 2: How satisfied were you with the amount of time it took to make the referral appointment for you?
- 3: How satisfied were you with the location of the social service organization?
- 4: How satisfied were you with the wait time to receive services/support at the social service organization?
- 5: How satisfied were you with the care and concern of staff at the social service organization?
- 6: Overall, how satisfied were you with the help you received for the support and services you needed?