

2006
Performance Report
Core Programs

Pathways Counseling Center, Inc.

Performance Report: All Core Programs

Introduction

This performance report relies heavily on the data collected and processed in the Ohio Outcomes Data Mart. The information gathered in the Data Mart is from the Ohio Scales (for adolescents) and the Ohio Consumer Outcomes (for adults). Every client at our agency is asked to participate in the outcomes process. Data is also collected from agency-designed surveys administered in regular intervals through-out the year. Through this process the agency staff receives feedback on service delivery in the following areas: Access, Effectiveness, Efficiency, and Input from Stakeholders. The agency directors arbitrarily chose “Target Goal Expectancies” for each domain. These choices were influenced by past measurements of performance.

The data from the outcomes forms is used in two ways: 1) as a tool for establishing treatment direction and 2) as a means to enhance the overall performance of the agency. Clinicians record the individual outcome scores in the clients’ Diagnostic Assessment and subsequent scorings are included in the chart. By comparing these scores the clinicians may make inferences about a client’s progress and may make suggestions about his or her treatment direction.

Corporately, the overall scores from the instruments are gathered and compared to the goals set by the agency staff and directors. This comparison gives rise to suggestions of how to enhance treatment delivery in certain areas. This process reminds the staff of the value of teamwork and of the need to support one another in our efforts to provide excellent behavioral health services to the communities of Putnam County.

Outline

- I. Outcomes
 - A. Access: Adult and Adolescent*
 - B. Effectiveness
 - Adolescent/Parent Outcomes
 - Adult
 - C. Efficiency: Adult and Adolescent/Parent*
 - D. Input from Stakeholders: Adult and Adolescent*

* Note: For now, Input from Stakeholders and Access data for adult and child service outcomes are taken from the same source and denote no distinction between whether the client is receiving adult or child services.

PROGRAM: ADULT and ADOLESCENT SERVICES

DOMAIN: ACCESS

DATE: 2006

OBJECTIVE	Client's have optimal access to services
INDICATORS	<p># of New Client Surveys and Anonymous Client Satisfaction Surveys completed</p> <p>New Client Survey % of "yes" answers to the following questions: #2 "Were you able to schedule an appointment in a timely manner?"</p> <p>Anonymous Client Satisfaction Survey's % of "yes" answers to the following questions: #1 "Were appointments made at times convenient for you?" # 2 "Were cancelled or rescheduled appointments completed in a timely manner?"</p>
WHO APPLIED TO:	All adult clients
TIME OF MEASURE:	Upon received
DATA SOURCE:	New Client Survey, Anonymous Client Satisfaction Survey and Intake Data Sheet
OBTAINED BY:	Support Staff
TARGET GOAL EXPECTANCY:	80% of clients will respond "yes" to questions on the New Client Survey and Anonymous Client Satisfaction Survey.
KEY CHARACTERISTICS OF PERSON'S SERVED:	Adults; requesting services at Pathways
BARRIERS WHICH IMPACT TARGET GOAL:	Type of Presenting Problem Special Requests by client Court-ordered clients
CLIENT SEVERITY FACTORS WHICH IMPACT TARGET GOAL:	Refusal to answer survey Incarceration Severity of Diagnosis
INTERNAL/ORGANIZATIONAL FACTORS WHICH IMPACT TARGET GOAL:	Limited staff Limited evening hours

A. Access: Adult and Adolescent Outcomes 2006

The following outcomes information is from the New Client Survey and the Anonymous Client Satisfaction Survey. These questions were chosen because they reflect a client's perception of their ability to access the services at our agency.

New Client Survey

#2: Were you able to schedule an appointment in a timely manner?

Yes	202	99%
No	3	1%
blank	5	

Anonymous Client Satisfaction Survey

#1: Were appointments made at times convenient to you?

Yes	32.5	98.4%
No	.5	1.6%

Anonymous Client Satisfaction Survey

#2: Were rescheduled appointments completed in a timely manner?

Yes	27	100%
No	0	0%

According to these outcomes the staff at Pathways does an excellent job of assuring access to our services. Although the Intake Data Sheet was modified to record the time lapse between a request for an appointment and the actual appointment date, the information was not included here. The answers to question #1 of the Anonymous Client Satisfaction Survey reflect the staff's ability to schedule appointments in a timely manner. Also, when there is a special request (specific counselor, schedule around work or school hours, etc.) during the initial phone interview the support staff informs the clients that such requests may delay the time of their initial visit. This type of communication is essential to ensure that the clients are informed of our service limitations and abilities.

PROGRAM: ADULT and ADOLESCENT SERVICES

DOMAIN: EFFICIENCY

DATE: 2006

OBJECTIVE	Services are provided in accordance with the client's level of expectation and comfort
INDICATORS	<p># of Ohio Outcomes and Anonymous Client Satisfaction Surveys completed</p> <p>New Client Survey % of "yes" answers on the following questions: # 3 "Did you receive friendly & courteous service over the phone?" #4 "Were you treated with respect during your first visit to Pathways?"</p> <p>Anonymous Client Satisfaction Survey % of "yes" answers on the following questions: #3 "Were the services provided to you what you needed?" #4 "If applicable, are you satisfied that your service providers were culturally aware and/or competent?"</p>
WHO APPLIED TO:	All adult clients completing the Ohio Consumer Outcomes and Anonymous Client Satisfaction Survey
TIME OF MEASURE:	During intake and @ 60 days after closure
DATA SOURCE:	Anonymous Client Satisfaction Survey and New Client Survey
OBTAINED BY:	Support staff
TARGET GOAL EXPECTANCY:	90 %
KEY CHARACTERISTICS OF PERSON'S SERVED:	Participated in Intake Enrolled in Program
BARRIERS WHICH IMPACT TARGET GOAL:	Court-ordered, client does not want services and length of treatment
CLIENT SEVERITY FACTORS WHICH IMPACT TARGET GOAL:	Severity of diagnosis, relapse, functioning and compliance to services
INTERNAL/ORGANIZATIONAL FACTORS WHICH IMPACT TARGET GOAL:	Type of diagnosis and limits of service provider

C. Efficiency: Adult and Adolescent Outcomes

The following outcomes information is from the New Client Survey and the Anonymous Client Satisfaction Survey. These questions were chosen because they reflect a client's perception of service provision and whether or not services were provided in accordance with their expectations and comfort levels. We expected to see high scores in these areas ($\leq 85\%$) as they are a reflection of how well we communicate with and attend to the client's needs. A sample of the total number of surveys is included in this report.

New Client Survey

#3: Did you receive friendly and courteous service over the phone?

Yes	113	98%
No	2	2%

#4: Were you treated with respect during your first visit to Pathways?

Yes	102	99%
No	1	1%
n/a	8	

Anonymous Client Satisfaction Survey

#3: Were the services provided to you what you needed?

Yes	41	89%
No	5	11%

#4: Are you satisfied that your service providers were culturally aware and/or competent?

Yes	36	97%
No	1	3%

Question # 3 of the client Satisfaction Survey is the only concern. Perhaps the client's expectations are skewed or perhaps they were initially negative due to a court referral. Clinicians may want to attend to the client's expectations during the initial rapport-building phase of services. Overall, the report reflects a positive connection with client's throughout the process of treatment.

PROGRAM: ADOLESCENT SERVICES

DOMAIN: EFFECTIVENESS

DATE: 2006

OBJECTIVE	Client and parents report positive changes across a spectrum of indicators related to their health, safety, esteem, presenting problem and satisfaction with services
INDICATORS	# of Child and Adolescent Outcomes (Outcomes Data Mart) % of favorable answers for the following areas: Functioning Problem Severity Satisfaction with Services
WHO APPLIED TO:	All child & adolescent clients and their parent/guardian completing the Ohio Youth Problem, Functioning and Satisfaction Scales
TIME OF MEASURE:	Beginning of treatment and 90 day into treatment
DATA SOURCE:	ODMH Data Mart
OBTAINED BY:	Support staff and clinical staff
TARGET GOAL EXPECTANCY:	70 % for each indicator
KEY CHARACTERISTICS OF PERSON'S SERVED:	Participated in Intake Child, Adolescent or Parent/Guardian
BARRIERS WHICH IMPACT TARGET GOAL:	May be generally behaviorally problematic
CLIENT SEVERITY FACTORS WHICH IMPACT TARGET GOAL:	Severity of diagnosis and diagnosis of Oppositional Defiant Disorder Client may leave treatment process prior to completing second administration of instrument.
INTERNAL/ORGANIZATIONAL FACTORS WHICH IMPACT TARGET GOAL:	Limits of services

B. Effectiveness: Adolescent Outcomes

The following outcomes information is from the Ohio Mental Health Consumer Outcomes System’s Youth and Parent forms. These outcomes reflect a child’s perception of change in their functioning, problem severity, and satisfaction with services. Parents also rate their perception of these outcomes for their children. We hope to see and improvement of scores from time = 30 (the first administration of the instrument) to time = 90 (the follow-up administration given 90 days later). It is common for a child to refuse to complete a section. The “missing” column reflects this fact. The indicators are scored on a 5 point Likert scale and expressed as percentages. The options vary from section to section but the child and the parent forms have the same selections.

We expect to see improvement from the initial administration of the instrument, time = 30, to the follow-up administration of the instrument, time = 90. The follow-up administration is given to clients who remain in treatment for 90 days.

Functioning: how well a child is functioning in the day-to-day activities (school, home, peers, etc.)

Child Functioning									
time	n	mean	stan. dev.	ex.troub.	q.a.f. troub.	some troub	doing ok	very well	missing
30	91	55.35	13.42	0	7.69	19.78	45.05	25.27	2.2
90	21	59.71	11.08	0	0	19.05	33.33	47.62	0

Parents Functioning									
time	n	mean	stan. dev	ex.troub.	q.a.f. troub.	some troub	doing ok	very well	missing
30	151	48	14.88	1.32	14.57	27.81	39.07	10.6	6.62
90	33	54.19	15.35	0	6.06	24.24	39.39	24.24	6.06

Functioning Overall: In time = 30, 70% of children report they are doing “ok” or “very well”. At time = 90, 81% report the same score. 49% of parents, in time = 30, reported their child is “doing ok” or “very well” and in time = 90 their score rose to 65%. Both child and parent scores increased over time. As is often the case the children report better scores for themselves compared to their parent’s scores. This may be a useful talking point in the counseling session.

Problem Severity: client’s perception of how behavior and attitude negatively affect their functioning in day-to-day activities

Child: Problem Severity									
time	n	mean	stan. dev.	no sig.	low	moderate	intense	very intense	missing
30	91	26.7	16.2	10.99	29.67	30.77	19.78	7.96	1.1
90	21	22.57	12.69	9.52	42.86	33.33	14.29	0	0

Parents: Problem Severity									
time	n	mean	stan. dev.	no sig.	low	moderate	intense	very intense	missing
30	151	27.4	16.01	13.25	22.52	36.42	19.21	7.28	1.32
90	33	19.61	11.62	18.18	42.42	18.18	15.15	0	6.06

Problem Severity Overall: in time = 30, nearly 42% of children reported “no significant” or “low” negative impact upon activities compared to almost 36% of parents for the same measure. In time = 90, 50.5% of children reported the same scores compared to more than 60% of parents. In time = 90 neither the parents nor the children reported “very intense” negative affect upon their functioning.

Satisfaction: a client’s and parent’s satisfaction with services.

Child Satisfaction									
time	n	mean	stan. dev.	xtr. satis.	mod. satis.	som. satis.	mod. Disat.	ext. disat.	missing
30	71	11.28	5.17	15.49	19.72	11.27	7.04	2.82	29.58
90	16	10.33	4.73	18.75	37.5	12.5	0	6.25	6.25

Parents Satisfaction									
time	n	mean	stan. dev.	xtr. satis.	mod. satis.	som. satis.	mod. Disat.	ext. disat.	missing
30	151	8.88	5.39	29.14	10.6	5.3	5.96	5.96	41.72
90	33	6.35	4.04	76.76	0	12.12	3.03	0	6.06

Satisfaction: This measurement records a child’s and parent’s satisfaction with services to date. Because this is administered on the first day of contact this score is often left blank. Parents and children state they haven’t enough time to make a conclusion about their services. This is why there are a large number of “missing” scores for the initial administration of the measure. The most significant score in this section, in my opinion, is the “extremely satisfied” score in the parent’s portion. Almost 77% of parents report they are satisfied with services at the second administration of the outcome form. Hopefully this is a reflection of their involvement with

services provided to their child and the clinicians' connection to the parent during the care of their child at the agency. Again, sample size is a consideration. 71 adolescents and 151 parents were initially involved in the administration of the instrument. At 3 months into services only 16 adolescents and 33 parents completed the instrument. One could surmise that only the clients with more severe symptoms stayed in therapy for at least 3 months.

PROGRAM: ADULT SERVICES

DOMAIN: EFFECTIVENESS

DATE: 2006

OBJECTIVE	Client reports positive changes across a spectrum of indicators related to their health, safety, esteem, presenting problem and satisfaction with services
INDICATORS	# of Ohio Consumer Outcomes (Outcomes Data Mart) and Anonymous Client Satisfaction Survey % of clients scoring favorably for the following areas -Quality of Life including sub-scores of Friendship, Financial, Freedom, and Relationships -Symptom Management including sub-scores of Physical Health and Symptom Recognition and Prevention % of clients responding "yes" to question #6 on Anonymous Client Satisfaction Survey
WHO APPLIED TO:	All adult clients completing the Ohio Consumer Outcomes and Anonymous Client Satisfaction Survey
TIME OF MEASURE:	Beginning of treatment and 90 days into treatment
DATA SOURCE:	ODMH Data Mart
OBTAINED BY:	Support staff
TARGET GOAL EXPECTANCY:	Realize and increase in scores over time
KEY CHARACTERISTICS OF PERSON'S SERVED:	Participated in Intake Enrolled in Program
BARRIERS WHICH IMPACT TARGET GOAL:	Court-ordered, length of treatment, and Non-voluntarily seeking service
CLIENT SEVERITY FACTORS WHICH IMPACT TARGET GOAL:	Severity of diagnosis, relapse, functioning, and compliance to services
INTERNAL/ORGANIZATIONAL FACTORS WHICH IMPACT TARGET GOAL:	Staff and limits of services

B. Effectiveness: Adult Outcomes

The following outcomes information is from the Ohio Mental Health Consumer Outcomes System’s Adult Consumer Form. These outcomes reflect a client’s perception of change in Quality of Life. Furthermore, four areas of their Quality of Life score are examined individually. These areas are Friendship, Financial, Freedom, and Relationships. The indicators are scored on a 5 point Likert scale and expressed as percentages. The options given are “terrible”, “mostly dissatisfied”, “equally satisfied/dissatisfied”, “most satisfied”, and “very pleased”. We will also examine a client’s perception of how well they manage the symptoms associated with their mental and emotional distress or mental illness. The options given are “always”, “often”, “sometimes”, “seldom”, and “never”.

We expect to see improvement from the initial administration of the instrument, time = 30, to the follow-up administration of the instrument, time = 90. The follow-up administration is given to clients who remain in treatment for 90 days. Subsequent administrations are also listed but for the sake of this report they will not be discussed.

Quality of Life Scores

Quality of Life									
time	n	mean	stan. dev.	terrible	mostly dis.	equally sat./dis.	mostly sat.	very pleased	missing
30	188	3.18	0.69	3.72	15.96	44.68	23.4	9.04	3.19
90	32	3.3	0.62	3.13	6.25	43.75	40.63	3.13	3.13
180	31	3.09	0.7	0	25.81	41.94	22.58	6.45	3.23
270	21	2.88	0.75	4.76	33.33	33.33	14.29	4.76	9.52
1 year	18	3.6	0.5	0	0	33.33	55.56	11.11	0

Friendship									
time	n	mean	stan. dev.	terrible	mostly dis.	equally sat./dis.	mostly sat.	very pleased	missing
30	188	3.23	1.14	6.38	21.81	25.53	30.32	13.83	2.13
90	32	3.51	1.09	3.13	18.75	15.63	43.75	15.63	3.13
180	31	3.10	1.15	9.68	19.35	29.03	29.03	9.68	3.23
270	21	2.77	1.21	14.29	19.05	33.33	9.52	9.52	14.29
1 year	18	3.55	0.85	0	11.11	33.33	44.44	11.11	0

Financial									
time	n	mean	stan. dev.	terrible	mostly dis.	equally sat./dis.	mostly sat.	very pleased	missing
30	188	2.36	1.01	32.45	21.81	27.66	13.83	2.13	2.13
90	32	2.35	0.96	25	28.13	31.25	12.5	0	3.13
180	31	2.32	1.11	35.48	19.35	25.81	9.68	6.45	3.23
270	21	1.82	0.93	52.38	19.05	9.52	9.52	0	9.52
1 year	18	2.95	0.87	11.11	16.67	38.89	33.33	0	0

Freedom									
time	n	mean	stan. dev.	terrible	mostly dis.	equally sat./dis.	mostly sat.	very pleased	missing
30	188	3.22	1.19	9.57	17.02	28.72	27.13	15.43	2.13
90	32	3.64	1.14	6.25	6.25	28.13	31.25	25	3.13
180	31	3.43	1.22	9.68	9.68	25.81	32.26	19.35	3.23
270	21	3.36	1.06	0	23.81	23.81	28.57	14.29	9.52
1 year	18	3.88	0.67	0	0	27.78	55.56	16.67	0

Relationships										
time	n	mean	stan. dev.	terrible	mostly dis.	equally sat./dis.	mostly sat.	very pleased	missing	n/a
30	188	3.3	1.33	9.57	20.21	23.4	17.02	26.06	3.19	0.53
90	32	3.55	1.18	6.25	9.38	25	28.13	21.88	3.13	6.25
180	31	3.2	1.29	9.68	22.58	22.58	22.58	19.53	3.23	0
270	21	3.5	1.24	4.75	14.29	23.81	19.05	23.81	9.52	4.75
1 year	18	4.23	0.9	0	0	27.78	16.67	50	0	5.56

Narrative

Quality of Life Overall (QOL): From time = 30 to time = 90 the scores for QOL increased. Initially only about 32% of adult clients ranked their perception of QOL as “mostly satisfied” and “very pleased”. In the follow-up administration almost 44% noted the same rank.

Friendship (FRND): From time = 30 to time = 90 the scores for FRND increased. Initially only about 44% of adult clients ranked their perception of FRND as “mostly satisfied” and “very pleased”. In the follow-up administration almost 59% noted the same rank.

Financial (FIN): From time = 30 to time = 90 the scores for FIN decreased. Initially about 16% of adult clients ranked their perception of FIN as “mostly satisfied” and “very pleased”. In the follow-up administration only 12.5% noted the same rank.

Freedom (FRDM): From time = 30 to time = 90 the scores for FRDM increased. Initially only about 44% of adult clients ranked their perception of FRND as “mostly satisfied” and “very pleased”. In the follow-up administration almost 59% noted the same rank.

Relationships (REL): From time = 30 to time = 90 the scores for REL increased. Initially about 43% of adult clients ranked the perception of REL as “mostly satisfied” and “very pleased”. In the follow-up administration 50% noted the same rank.

All scores except for Financial increased in the given time span. This may be because the amount of money a person has is a hard number whereas the other sections in the QOL examination are more subjective in nature. Even though scores increased in the QOL section and three of the four areas examined one will find it difficult to garner any conclusions from the data due to the limits of the Outcome Data Mart. It is not possible to track only the clients who stayed in the therapy through the subsequent administration of the Ohio Consumer Outcome at time = 90. All client’s scores are measured in time = 30 and a fraction, those who stayed in therapy, are measured in time = 90. Ideally we would be able to eliminate the scores of the clients who did not return for the follow-up administration and examine only those scores for the report.

Symptom Management Scores

Physical									
time	n	mean	stan. dev.	terrible	mostly dis.	equally sat./dis.	mostly sat.	very pleased	missing
30	188	3.24	1.41	14.36	14.36	22.34	15.96	25	7.98
90	32	2.93	1.36	18.75	15.63	21.88	21.88	12.5	9.38
180	31	2.88	1.17	12.9	16.13	29.03	19.53	6.45	16.13
270	21	2.33	1.49	33.33	23.81	9.52	4.76	14.29	14.29
1 year	18	2.93	1.23	16.67	5.56	44.44	11.11	11.11	11.11

Symptom Rec.									
time	n	mean	stan. dev.	never	seldom	sometimes	often	always	missing
30	188	3.01	1.13	12.77	13.83	36.17	24.47	7.98	4.79
90	32	2.93	1.18	15.63	12.5	40.63	18.75	9.38	3.13
180	31	3.34	1.11	6.45	9.68	38.71	22.58	16.13	6.45
270	21	3.26	0.93	4.76	14.29	23.81	47.62	0	9.52
1 year	18	3.22	0.87	0	22.22	38.89	33.33	5.56	0

Symptom Prev.									
time	n	mean	stan. dev.	never	seldom	sometimes	often	always	missing
30	188	2.92	1	9.57	19.15	36.7	24.47	3.19	6.91
90	32	3.3	0.95	3.13	9.38	50	18.75	12.5	6.25
180	31	3.03	1.05	3.23	25.81	41.94	9.68	12.9	6.45
270	21	2.94	0.41	0	9.52	71.43	4.76	0	14.29
1 year	18	3.16	0.92	5.56	11.11	50	27.78	5.56	0

Physical: This measurement refers to the clients’ perception of physical health. From time = 30 to time = 90 the scores for Physical Health decreased. Initially about 41% of adult clients ranked their perception of Physical Health as “mostly satisfied” and “very pleased”. In the follow-up administration only 35% noted the same rank. It is likely that people with greater physical health concerns actually stay in counseling longer. The clients with high physical health satisfaction do not continue in counseling so they are not given a second administration of the Outcomes measure.

Symptom Recognition: This measurement refers to the client’s ability to recognize symptoms of their mental illness. From time = 30 to time = 90 the scores for Symptom Recognition decreased. Initially about 32.5% of adult clients ranked their ability to recognize symptoms of their illness as “often” or “always”. In the follow-up administration only about 27% noted the same rank. Again, due to the limitation of the Outcomes Data Mart we are not able to count only those individuals who complete the outcomes at times 30 and 90. Even so, it appears that some improvement in symptom explanation is warranted.

Symptom Prevention: This measurement refers to a client’s ability to proactively prevent symptoms from impacting their life. From time = 30 to time = 90 the scores for this outcomes measure increase. At time = 30 the clients scored in the top range almost 28% of the time. In time = 90, 31% scored in the same range. This change could be because of the difference in sample sizes. To improve scores clinicians could include, in their initial contact with clients, a discussion about symptom recognition and management.

PROGRAM: ADULT and ADOLESCENT SERVICES

DOMAIN: INPUT FROM STAKEHOLDERS

DATE: 2006

OBJECTIVE	Stakeholders/Clients will provide feedback to the agency
INDICATORS	# of Post-Discharge Surveys completed Post-Discharge score averages
WHO APPLIED TO:	All stakeholders
TIME OF MEASURE:	"When received" for Post-Discharge Surveys (the surveys are distributed 60 days after treatment discharge)
DATA SOURCE:	Post-Discharge Surveys
OBTAINED BY:	Support staff and clinical reviewers
TARGET GOAL EXPECTANCY:	A score of <3 indicates agreement with the question
KEY CHARACTERISTICS OF PERSON'S SERVED:	Stakeholders and referral sources
BARRIERS WHICH IMPACT TARGET GOAL:	Lack of response Some believe services should be free of charge
OTHER FACTORS WHICH IMPACT TARGET GOAL:	No release of information

D. Input from Stakeholders: Adult and Adolescent

The following outcomes information is derived from feedback from referral sources and the Post Discharge Survey results (PDS). The PDS is sent to all clients 60 days after they are discharged from services. The eight questions on the survey record how they think our services affected positive change in their lives. On the PDS a score less than “3” is considered a good score.

Post Discharge Survey (35 total)

- | | |
|--|-----|
| 1. Since ending services at Pathways I have maintained my personal goals | 2.1 |
| 2. I feel good about myself. | 2.1 |
| 3. I have learned and continue to use self-help skills. | 2.2 |
| 4. I believe I am able to make good choices in finding help. | 1.8 |
| 5. I can handle every-day stress. | 2.3 |
| 6. I believe I am capable of facing the future. | 1.8 |
| 7. The services I received at Pathways met my needs. | 2.1 |
| 8. Should the need arise I would return to Pathways for help. | 2.0 |

Feedback from referral sources gives us an indication of how our services are perceived by the community. Consistently referral sources report they would like more communication from us regarding clients referred to our agency. Such requests have prompted us to explain to them the limits of confidentiality when discussing personal health information. Through our dialogue we’ve stressed the importance of obtaining a proper “Release of Information” so that we may provide the referral source with information.

Post Discharge Survey results demonstrate consistent excellence by the clinical staff in providing services. All score averages are below the mid-point score of “3” and reflect a general consensus of agreement with the statements. This direct feedback is important as the agency considers goals for its strategic planning.