MRS Customer Satisfaction: Overview

February 13, 2025

Michigan Department of Labor & Economic Opportunity Michigan Rehabilitation Services





Overview of CS Survey

Has been conducted by Project Excellence since 2003

- 2 Survey Variations: Satisfaction at Plan and Satisfaction at Exit
- -2 months selected for each survey

Background Concepts:

- -Customer choice
- -Informed consent
- -Customer involvement in VR services

Overview of Survey Process

MRS sends MSU-PE customer information from AWARE for CS survey

MSU-PE emails online survey invitation to customers with email on file

- Qualtrics
- Reminder email sent 1 week later if not completed

MSU-PE sends MRS information of customers to be sent mailed survey

• Includes customers from initial list with no email listed and email non-respondents

Paper-pencil surveys mailed (1 mo after online survey)

- MRS sends list (Excel file), Cover Letter and Survey to LEO Communications & Outreach Departmental Analyst (Alicia Kirkey) for processing with DTMB mailing
- Includes business reply return envelope addressed directly to Su Pi at MSU-PE



Overview of the Survey Instrument -Plan

Customer Satisfaction Survey Plan for Employment

Michigan Rehabilitation Services (MRS) & Michigan Council for Rehabilitation Services (MCRS)

Circle one answer for each question:

	Definitely YES	Mostly YES	Mostly NO	Definitely NO	Not Sure
	9	(3)	100	15	
Were you involved in choosing your employment goal?	4	3	2	1	0
2. Are you satisfied with the employment goal in your plan?	4	3	2	1	0
3. Does your counselor understand your needs?	4	3	2	1	0
4. Are you satisfied with your overall experience so far with MRS?	4	3	2	1	0
5. How likely is it that you would recommend MRS to a family member, friend or colleague?	4	3	2	1	0
6. What is your job goal?					

7. How often do you have contact with your counselor?

- At least weekly
- 2. Two to three times a month
- 3. About once a month
- Every other month
- Other:

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8. Were you told that you can request help from the Client Assistance Pro	gram	(CAP	1)*7
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- Yes
- 2. No
- 3. Not sure

*Client Assistance Program (CAP): CAP is designed to assist individuals with disabilities in understanding and using rehabilitation and independent living services. Applicants and eligible individuals may be provided advocacy and representation to ensure and protect their rights in their relationship with projects, programs, and services under the Rehabilitation Act, as amended.

. Would you like to we received so far?		about how you feel about the service	es y
		about how you feel about the service	es y
ve received so far? If you would like to	YES	NO bout your services, please print, sign yo	
ve received so far? If you would like to	YES talk to a manager at MRS a	NO bout your services, please print, sign yo	
If you would like to below, and provide	YES talk to a manager at MRS a	NO bout your services, please print, sign yo	
If you would like to below, and provide	YES talk to a manager at MRS a	NO bout your services, please print, sign yo	

THANK YOU VERY MUCH FOR YOUR FEEDBACK!

Overview of the Survey Instrument -Exit

Customer Satisfaction Survey

Michigan Rehabilitation Services (MRS) & Michigan Council for Rehabilitation Services (MCRS)

Definitely

Mostly

Mostly

Definitely

Circle one answer for each question:

	YES	YES	NO	NO	
	<u> </u>	(3)	"	5.5	
Were you involved in choosing your employment goal?	4	3	2	1	
2. Were you actively involved in choosing the services in your plan?	4	3	2	1	
3. Did your counselor understand your needs?	4	3	2	1	
Were you satisfied with your counselor's assistance to obtain or maintain a job?	4	3	2	1	
5. Were you satisfied with the length of time to receive your services?	4	3	2	1	
6. Were you satisfied with the services you received?	4	3	2	1	
7. Were you satisfied with your overall experience with MRS?	4	3	2	1	
8. How likely is it that you would recommend MRS to a family member, friend or colleague?	4	3	2	1	
9. What was the most positive thing regarding your experience with MRS?					

11. Are you working now? (circle one) YES NO If you answered YES, you are working, please answer the next four questions. If you ARE WORKING now, how satisfied are you with: 12. Your wages earned? 13. Your job benefits (e.g., health insurance, vacation, sick leave)? 14. Your chance to move up (i.e., promotion)? 15. Your job overall? 16. Would you like to talk to a manager at MRS about the services you received? YES NO If you circled YES, please print and sign your name below and provide a phone number where you can be reached. PLEASE KNOW THAT YOUR ANSWERS WILL BE SEEN BY THE MANAGER WHO CALLS YOU.							
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insurance, vacation, sick leave)? 14. Your chance to move up (i.e., promotion)? 15. Your job overall? 4 3 2 1 16. Would you like to talk to a manager at MRS about the services you received? YES NO If you circled YES, please print and sign your name below and provide a phone number where you can be reached. PLEASE KNOW THAT YOUR ANSWERS WILL BE SEEN BY THE MANAGER WHO CALLS YOU.	12. Your wages earned?	4	3	2	1		
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Where you can be reached. PLEASE KNOW THAT YOUR ANSWERS WILL BE SEEN BY THE MANAGER WHO CALLS YOU.	•						
Print Name: ()	where you can be reached. PLEASE KNOW THAT YOUR ANSWERS WILL BE SEEN BY THE MANAGER						
Phone Number	Print Name: () Phone Number						
Sign Name:							

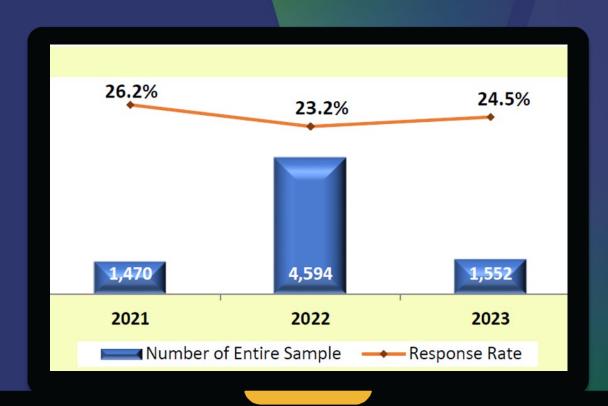
10. Based on your experience, how should MRS improve services?

PLEASE TURN OVER TO FINISH THE SURVEY

Response Rates

~20-25% response rate

FY 2022: Data collected for CS at Plan for 6-month pilot to see if there would be an improvement in response rate



Deliverables/Reports



2 rounds of district specific satisfaction feedback for each survey (Plan, Exit) sent to District/Site Managers

- -Includes sample size, number of responses, response rate, satisfaction rate for each question and customer comments
- -District/unit level information



Customer Satisfaction at Plan Annual Report (FY)



Customer Satisfaction at Exit Annual Report (FY)



Coming Soon...

NAME
DIVISION/UNIT
Michigan Rehabilitation Services
Office of Employment and Training
Michigan Department of Labor and Economic Opportunity
ADDRESS
PHONE
EMAIL



We Want Your Feedback!

Take the Survey

Or copy and paste the URL below into your internet browser:

https://msu.co1.qualtrics.com/jfe/form/SV_dnDv9j9OHIWkyjA

VOTE You can find resources for voting at the Michigan Voter Information Center by visiting www.Michigan.gov/Vote.

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Immediate Customer Satisfaction Feedback via links/QR codes in MRS staff email signatures (district specific)







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