



**2011 Annual Consumer Survey  
Report**

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YEAR 2011 ADULT CONSUMER SURVEY (ENGLISH AND SPANISH)

YEAR 2011 YOUTH CONSUMER SURVEY FOR FAMILIES (ENGLISH AND SPANISH)

## I. Executive Summary

The Arizona Department of Health Services/Division of Behavioral Health Services (ADHS/DBHS), Tribal/Regional Behavioral Health Authorities (T/RBHAs) and contracted service providers jointly conduct statewide consumer surveys during each fiscal year.

Each year, two surveys are administered based on the Substance Abuse and Mental Health Services Administration's (SAMSHA's) Mental Health Statistics Improvement Program (MHSIP) consumer surveys: The Adult Consumer Survey and The Youth Services Survey for Families (YSS-F).

The surveys request independent feedback from Title XIX/XXI adults and families of youth receiving services through Arizona's publicly funded behavioral health system. The surveys measure consumers' perceptions of behavioral health services in relation to the following domains:

- General Satisfaction
- Access to Services
- Service Quality/Appropriateness
- Participation in Treatment
- Outcomes
- Cultural Sensitivity
- Improved Functioning
- Social Connectedness

ADHS/DBHS Consumer Survey data results are routinely:

- Reviewed in the ADHS/DBHS Quality Management (QM) Committee meetings;
- Used as the basis for recommendations from the QM Committee, which are incorporated in RBHA contracts and QM Plans;
- Disseminated to ADHS/DBHS stakeholders and consumers via the ADHS/DBHS website.

Survey outcomes are always reported to:

- The National Association of State Mental Health Program Directors' (NASMHPD)
- National Research Institute (NRI)
- Western States Decision Support Group (WSDSG)
- Substance Abuse and Mental Health Services Administration's (SAMHSA) Mental Health Statistics Improvement Program (MHSIP)

The fiscal year 2011 survey was conducted from April 4 through May 27, 2011.

For RBHA contractors, ADHS/DBHS identified the following findings for the Adult Consumer Survey results:

- At a statewide level, one domain (*Service Access*) improved by 3 percent, while five (*Participation in Treatment Planning, Service Quality and Appropriateness, Outcomes, Improved Functioning, Social Connectedness*) decreased from 2 to 5 percent.
- None of these statewide increases or decreases were statistically significant.

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- Magellan had statistically significant decreases from the 2010 survey of 6 to 10 percent in three domains (*Participation in Treatment Planning, Service Quality and Appropriateness, Outcomes*).

For the YSS-F Survey ADHS/DBHS identified the following findings for RBHA contractors overall:

- At a statewide level, three domains had increases in scores (*Service Access, Participation in Treatment Planning, Social Connectedness*) by 1 to 3 percent.
- Statewide, three domains (*General Satisfaction, Outcomes, Improved Functioning*) decreased from the 2010 results by 3 to 4 percent.
- None of these increases or decreases were statistically significant.
- Cenpatico-2 had statistically significant increases from the 2010 survey in two domains (*General Satisfaction, Social Connectedness*) of 8 and 9 percent.
- Cenpatico-4 had a statistically significant increase from the 2010 survey in one domain (*Service Access*) by 7 percent.
- Magellan had statistically significant decreases from the 2010 survey in three domains (*General Satisfaction, Outcomes, Improved Functioning*) of 8 and 10 percent.

Regional Behavioral Health Authorities (RBHA) and Tribal Behavioral Health Authorities (TBHA) results from the 2011 Consumer Survey are presented separately to preserve the integrity of findings as two different sampling methodologies were used to get the survey sample. (For details, please refer to Section III-Survey Response Rates.)

## II. Introduction

The Arizona Department of Health Services/Division of Behavioral Health Services (ADHS/DBHS) and the Regional Behavioral Health Authorities (RBHAs) in collaboration with their contracted providers administered the statewide consumer survey during April and May of 2011.

Survey data results are:

- Reviewed in the ADHS/DBHS Quality Management (QM) Committee meetings;
- Used as the basis for recommendations from the QM Committee, which are incorporated in RBHA contracts and QM Plans;
- Disseminated to ADHS/DBHS stakeholders and consumers via the ADHS/DBHS website.

Survey outcomes are reported to:

- The National Association of State Mental Health Program Directors' (NASMHPD)
- National Research Institute (NRI)
- Western States Decision Support Group (WSDSG)
- Substance Abuse and Mental Health Services Administration's (SAMHSA) Mental Health Statistics Improvement Program (MHSIP)

## III. Survey Response Rates

A total of 5,800 RBHA-enrolled consumers were included for the MHSIP Consumer Survey random sample pool; 3,473 consumers were contacted and asked to complete a survey. The response rate is calculated by dividing the number of surveys returned by the number of enrollees asked to participate. Statewide response rates based on surveys offered were 85% for adults and 86% for youth, as seen in TABLE-1. Please see Attachment B for a complete discussion of the survey protocol.

The Tribal Behavioral Health Authorities (TBHA) scores are not included in the statewide results due to the TBHA convenience sampling methodology which solicits responses at the convenience of the recipients rather than from a random sample of TBHA enrolled recipients. Therefore the results are reported separately in Attachment A-2011 Tribal Behavioral Health Authority Health Survey Results.

**TABLE-1: Survey Response Rate Based on Surveys Offered for Each RBHA/GSA - Consumer Survey 2011**

RBHA/GSA	Surveys Offered (a)			Surveys Completed (b)			Response Rate (b/a)		
	Overall	Adult	Youth	Overall	Adult	Youth	Overall	Adult	Youth
CBHS 2	480	328	152	386	262	124	81%	80%	84%
CBHS 3	489	243	246	398	201	197	82%	83%	82%
CBHS 4	553	269	284	427	194	233	77%	72%	82%
CPSA 5	675	374	301	645	352	293	95%	96%	94%
Magellan	519	262	257	420	224	196	83%	84%	82%
NARBHA	757	370	387	673	340	333	90%	92%	87%
Statewide RBHA	3,473	1,846	1,627	2,949	1,573	1,376	86%	85%	86%

## IV. Methodology and Survey Administration

Two survey populations (sampling frame) were identified leading to the use of the Adult Consumer Survey and the YSS-F:

- **Adults** - Title XIX/XXI behavioral health recipients who are 18 years of age or older, and are enrolled in any of the adult programs: Serious Mental Illness (SMI), Substance Abuse or General Mental Health (Non-SMI).
- **Youth** - Title XIX/XXI behavioral health recipients under age 18 and enrolled in the Child/Adolescent program.

A total of 74,312 adult and 35,853 youth RBHA-enrolled Title XIX/XXI consumers were eligible to participate in the 2011 survey. Please refer to Attachment B (2011 Consumer Survey Protocol) for details on sampling frame development, inclusion/exclusion criteria, survey instruments, and survey administration guidelines.

The ADHS/DBHS Consumer Survey utilized a Likert Scale model to have respondents rate the domain questions from strongly agree (numeric value of 1) to strongly disagree (numeric value of 5), and an option for Not Applicable (numeric value 0). Consumer perception was determined as positive for those domains where the question responses averaged 2.5 or below.

TABLE-2 and TABLE-3 show the number and percentage of sample surveys that were not included in the domain score, presented by RBHA/GSA and domain. Surveys are excluded from a domain's score when more than one-third of the questions have a response that cannot be determined. This occurs most often when no response is marked, and can also occur if more than one response is marked. See Attachment B for a full discussion of the survey protocol.

**TABLE-2: Adult Number and Percent of Surveys Excluded Due to Non-Responses by Domain and RBHA /GSA**

RBHA	General Satisfaction	Service Access	Participation in Treatment Planning	Service Quality & Appropriateness	Outcomes	Improved Functioning	Social Connectedness
Cenpatico-2	3 (1.2%)	0	16 (6.1%)	2 (0.8%)	10 (3.8%)	5 (1.9%)	5 (1.9%)
Cenpatico-3	13 (6.5%)	1 (0.5%)	16 (8.0%)	11 (5.5%)	15 (7.5%)	12 (2.6%)	8 (4.0%)
Cenpatico-4	7 (3.6%)	4 (2.1%)	10 (5.2%)	4 (2.1%)	4 (2.1%)	5 (2.6%)	6 (3.1%)
CPSA-5	24 (6.8%)	7 (2.0%)	25 (7.1%)	12 (3.4%)	22 (6.3%)	23 (6.5%)	12 (3.4%)
Magellan	27 (12.1%)	11 (4.9%)	29 (12.9%)	15 (6.7%)	24 (10.7%)	22 (9.8%)	17 (7.6%)
NARBHA	15 (4.4%)	3 (0.9%)	8 (2.4%)	7 (2.1%)	13 (3.8%)	9 (2.6%)	7 (2.1%)
Statewide RBHA	89 (5.7%)	26 (1.7%)	104 (6.6%)	51 (3.2%)	88 (5.6%)	76 (4.8%)	55 (3.5%)

**TABLE-3: Youth Number and Percent of Surveys Excluded Due to Non-Responses by Domain and RBHA/GSA**

RBHA	General Satisfaction	Service Access	Participation in Treatment Planning	Cultural Sensitivity	Outcomes	Improved Functioning	Social Connectedness
Cenpatico-2	0	0	0	1 (0.8%)	2 (1.6%)	2 (1.6%)	5 (4.0%)
Cenpatico-3	3 (1.5%)	4 (2.0%)	3 (1.5%)	10 (5.1%)	3 (1.5%)	2 (1.0%)	6 (3.0%)
Cenpatico-4	0	3 (1.3%)	0	4 (1.7%)	2 (0.9%)	1 (0.4%)	1 (0.4%)
CPSA-5	5 (1.7%)	10 (3.4%)	10 (3.4%)	23 (7.8%)	13 (4.4%)	13 (4.4%)	15 (5.1%)
Magellan	15 (7.7%)	16 (8.2%)	16 (8.2%)	31 (15.8%)	20 (10.2%)	20 (10.2%)	23 (11.7%)
NARBHA	4 (1.2%)	3 (0.9%)	6 (1.8%)	17 (5.1%)	8 (2.4%)	8 (2.4%)	7 (2.1%)
Statewide RBHA	67 (4.9%)	77 (5.6%)	77 (5.6%)	157 (11.4%)	98 (7.1%)	97 (7.0%)	112 (8.1%)

## V. Data Analysis

ADHS/DBHS provided each RBHA with an Access database to compile survey responses. All completed surveys were entered and the database was submitted to ADHS/DBHS. Each RBHA analyzed its respective survey data using an SPSS script designed and provided by ADHS/DBHS to ensure consistency in data analysis. Statewide survey data is analyzed as follows:

- By Domain;
- By Domain Line Item;
- Sub-group Analysis; and
- Comparison to Past Survey Performance.

The statewide survey results are weighted to correct the sample design, taking the different population sizes for each Geographic Service Area (GSA) into consideration. The weighted averages were taken to avoid the over/under representation of highly/less populated GSAs. Please refer to Attachment C, 2011 Raw Data, for further specifics of the weighting methodology and weights applied to each GSA.

## VI. Statewide Survey Data Limitations

Two different sampling methodologies were used to get the 2011 Consumer Survey sample. The Tribal Behavioral Health Authorities (TBHA) scores could not be included in the statewide results due to the TBHA convenience sampling methodology which solicits responses at the convenience of the recipients and providers rather than from a random sample of TBHA enrolled recipients.

## VII. Survey Findings

### MHSIP ADULT

#### Demographics

A total of 1,573 completed adult surveys were analyzed. The breakout of the respondents is by gender, age, ethnicity, race, length of enrollment in services, length of enrollment and behavioral health category. Please see Attachment D, 2011 Adult Demographics for complete demographics information.

#### Domain Line Item Analysis

A specific set of questions was developed to gather scores for each domain. Line items are specific questions pertaining to each survey domain (Attachment E, 2011 Adult Line Item); analysis of the respondents' answers to a question under a domain, either positive or negative, affects the overall domain score. Table-4 demonstrates the results of the 2011 Adult Survey and compares them to previous surveys. A P-value of 95% significance when less than or equal to 0.05 or "ns" for "not significant" is listed to reflect the change from the prior year. The statewide statistics are based on weighted scores.

**TABLE-4 Statewide RBHA Adult Consumer Survey Results by Domain for 2007 - 2011**

Domain	2007 %	2008 % (P-value)	2009 % (P-value)	2010 % (P-value)	2011 % (P-value)
General Satisfaction	86	82 (ns)	84 (ns)	86 (ns)	86 (ns)
Service Access	77	73 (ns)	78 (ns)	81 (ns)	84 (ns)
Participation in Treatment Planning	79	89 (0.01)	82 (0.03)	92 (0.01)	87 (ns)
Service Quality & Appropriateness	88	84 (ns)	89 (ns)	90 (ns)	88 (ns)
Outcomes	74	68 (ns)	70 (ns)	75 (ns)	72 (ns)
Improved Functioning	66	68 (ns)	68 (ns)	71 (ns)	69 (ns)
Social Connectedness	65	68 (ns)	68 (ns)	79 (0.02)	76 (ns)

Color	Key
	statistically significant increase
	statistically significant decrease

The 2011 statewide adult survey findings identify:

- **General Satisfaction:** Three questions were asked in the survey to ascertain *General Satisfaction* (Attachment E). The overall score for this domain was 86%, representing an average score based on three (3) questions. No increases or decreases were found in the 2011 survey results for this domain.
- **Service Access:** Six questions in the survey gathered information regarding *Access to Services* (Attachment E). This domain scored at 84%, based on an average score of six (6) questions, representing a three (3) percent increase compared to 2010, however the increase was not statistically significant
- **Participation in Treatment Planning:** The survey comprised two (2) questions to indicate *Participation in Treatment Planning* (Attachment E). The overall score for this domain was 87% which is an average score based on two (2) questions. This domain had a five (5) percent decrease compared to 2010. However the decrease was not statistically significant.
- **Service Quality and Appropriateness:** Nine questions in the survey focused on *Service Quality and Appropriateness* (Attachment E). The overall score for this domain was 88%, representing an average score based on nine (9) questions. This domain had a two (2) percent decrease compared to 2010. However the decrease was not statistically significant.
- **Outcomes:** Eight questions were asked to get consumers' perception on *Outcomes* (Attachment E). The overall score for this domain was 72%. This indicates a three (3) percent decrease compared to 2010, however the decrease was not statistically significant.
- **Improved Functioning:** Five questions indicate respondent's impressions of *Improved Functioning* (Attachment E). The overall score for this domain was 69%. This indicates a two (2) percent decrease compared to 2010, however the decrease was not statistically significant.
- **Social Connectedness:** Four questions were asked in the survey to ascertain *Social Connectedness* (Attachment E). The score for this domain was 76%. This indicates a three (3) percent decrease compared to 2010, however the decrease was not statistically significant.

In summary, score for the *Service Access* domain increased. The *Improved Functioning* domain remains the lowest and the *Quality & Appropriateness* domain scored the highest. Although these domains showed differences as compared to last year's survey, none of the differences is statistically significant.

While there were no significant increases or decreases in the statewide survey results from 2010 to 2011, at the RBHA/GSA level, ADHS/DBHS identified opportunities for improvement.

TABLE-5 through TABLE-10 show positive responses for each RBHA/GSA by domain. Included are the years 2007 through 2011.

**TABLE-5: Cenpatico-2 Adult Consumer Survey Results by Domain for 2007 - 2011**

Domain	2007 %	2008 % (P-value)	2009 % (P-value)	2010 % (P-value)	2011 % (P-value)
General Satisfaction	87	84 (ns)	86 (ns)	91 (ns)	89 (ns)
Service Access	80	82 (ns)	81 (ns)	90 (0.02)	88 (ns)
Participation in Treatment Planning	79	86 (ns)	82 (ns)	93 (0.00)	91 (ns)
Service Quality & Appropriateness	87	88 (ns)	89 (ns)	92 (ns)	90 (ns)
Outcomes	78	71 (ns)	71 (ns)	81 (0.03)	82 (ns)
Improved Functioning	73	75 (ns)	67 (ns)	75 (ns)	77 (ns)
Social Connectedness	74	75 (ns)	71 (ns)	83 (0.01)	83 (ns)

**TABLE-6: Cenpatico-3 Adult Consumer Survey Results by Domain for 2007 - 2011**

Domain	2007 %	2008 % (P-value)	2009 % (P-value)	2010 % (P-value)	2011 % (P-value)
General Satisfaction	90	82 (0.01)	83 (ns)	86 (ns)	86 (ns)
Service Access	83	77 (ns)	79 (ns)	84 (ns)	86 (ns)
Participation in Treatment Planning	82	87 (ns)	79 (0.02)	88 (0.03)	91 (ns)
Service Quality & Appropriateness	89	86 (ns)	88 (ns)	88 (ns)	88 (ns)
Outcomes	79	68 (0.01)	71 (ns)	77 (ns)	75 (ns)
Improved Functioning	72	73 (ns)	71 (ns)	72 (ns)	73 (ns)
Social Connectedness	71	72 (ns)	71 (ns)	80 (0.05)	81 (ns)

**TABLE-7: Cenpatico-4 Adult Consumer Survey Results by Domain for 2007 - 2011**

Domain	2007 %	2008 % (P-value)	2009 % (P-value)	2010 % (P-value)	2011 % (P-value)
General Satisfaction	87	87 (ns)	86 (ns)	87 (ns)	91 (ns)
Service Access	86	83 (ns)	83 (ns)	87 (ns)	89 (ns)
Participation in Treatment Planning	81	92 (0.01)	84 (0.00)	92 (0.03)	95 (ns)
Service Quality & Appropriateness	91	90 (ns)	89 (ns)	90 (ns)	93 (ns)
Outcomes	78	73 (ns)	70 (ns)	75 (ns)	76 (ns)
Improved Functioning	76	67 (0.04)	64 (ns)	73 (ns)	70 (ns)
Social Connectedness	73	67 (ns)	66 (ns)	77 (0.02)	79 (ns)

Color	Key
	statistically significant increase
	statistically significant decrease

**TABLE-8: CPSA-5 Adult Consumer Survey Results by Domain for 2007 – 2011**

Domain	2007 %	2008 % (P-value)	2009 % (P-value)	2010 % (P-value)	2011 % (P-value)
General Satisfaction	85	83 (ns)	78 (ns)	87 (0.03)	89 (ns)
Service Access	78	67 (0.01)	69 (ns)	79 (0.03)	85 (ns)
Participation in Treatment Planning	78	91 (0.00)	78 (0.00)	92 (0.00)	92 (ns)
Service Quality & Appropriateness	89	80 (0.00)	87 (ns)	90 (ns)	91 (ns)
Outcomes	70	66 (ns)	68 (ns)	69 (ns)	75 (ns)
Improved Functioning	64	64 (ns)	65 (ns)	68 (ns)	72 (ns)
Social Connectedness	64	62 (ns)	65 (ns)	78 (0.01)	76 (ns)

**TABLE-9: Adult Consumer Survey Results by Domain for Value Options in 2007 and Magellan in 2008-2011**

Domain	2007 %	2008 % (P-value)	2009 % (P-value)	2010 % (P-value)	2011 % (P-value)
General Satisfaction	87	80 (0.04)	86 (ns)	85 (ns)	83 (ns)
Service Access	83	71 (0.00)	82 (0.02)	79 (ns)	83 (ns)
Participation in Treatment Planning	83	87 (ns)	85 (ns)	92 (0.05)	82 (0.00)
Service Quality & Appropriateness	90	83 (0.02)	90 (ns)	90 (ns)	84 (0.05)
Outcomes	77	68 (0.03)	73 (ns)	77 (ns)	68 (0.03)
Improved Functioning	67	68 (ns)	71 (ns)	72 (ns)	65 (ns)
Social Connectedness	67	69 (ns)	69 (ns)	79 (0.03)	74 (ns)

**TABLE-10: NARBHA Adult Consumer Survey Results by Domain for 2007 - 2011**

Domain	2007 %	2008 % (P-value)	2009 % (P-value)	2010 % (P-value)	2011 % (P-value)
General Satisfaction	84	85 (ns)	84 (ns)	88 (ns)	90 (ns)
Service Access	73	80 (ns)	79 (ns)	83 (ns)	85 (ns)
Participation in Treatment Planning	78	92 (0.00)	80 (0.00)	92 (0.00)	91 (ns)
Service Quality & Appropriateness	87	88 (ns)	88 (ns)	90 (ns)	93 (ns)
Outcomes	74	71 (ns)	64 (ns)	72 (ns)	76 (ns)
Improved Functioning	63	68 (ns)	63 (ns)	71 (ns)	74 (ns)
Social Connectedness	61	65 (ns)	68 (ns)	78 (0.03)	80 (ns)

Color	Key
	statistically significant increase
	statistically significant decrease

Of the six RBHA/GSAs, one contractor, Magellan experienced statistically significant changes from the 2010 to 2011 survey. Specifically, there were significant decreases in three domains; *Participation in Treatment Planning* fell 10% (P=0.00), *Service Quality & Appropriateness* fell 6% (P=0.05), and *Outcomes* fell 9% (P=0.03) compared to 2010.

Magellan has recognized the statistically significant decrease in the *Outcomes* domain and reported steps they are taking to address this area. Magellan's goal will be to implement a continuous quality improvement approach that utilizes customer input to plan, design, measure, assess and improve behavioral health services. Listed below are the steps Magellan will implement for the adult *Outcomes* domain population. These steps are also expected to improve *Social Connectedness* and *Improved Functioning* domains.

- Magellan will share the 2010 and 2011 Adult Satisfaction results with Provider Network Organizations (PNO) leadership and utilize the PNO Clinical Workgroup to identify root causes of poor performance and develop key initiatives to address these deficiencies.
- Develop process to administer *Adult Satisfaction Survey* to all PNO clinics to identify baseline performance measures by clinic and PNO on a quarterly basis.
- Present most recent survey outcomes to each PNO clinics' Clinic Advisory Committee to assist with the development of key clinic specific initiatives to improve poor performance.
- Require PNOs to develop and submit Performance Improvement Plans for areas of poor performance that clearly delineate clinic processes that will improve outcomes.
- Magellan will review quarterly Adult Satisfaction Survey results with PNO executive leadership.

ADHS/DBHS recognizes Magellan's initiatives/action items do not address two domains that indicated a statistically significant decrease, *Service Quality & Appropriateness* domain and *Participation in Treatment Planning* domain. Magellan has been notified to submit an initiatives/action items report to ADHS/DBHS in a timely manner.

## MHSIP YSS-F

### Demographics

A total of 1,376 completed youth surveys were analyzed. The breakout of the respondents is reported by gender, age group, ethnicity, race, length of enrollment in services, and involvement in a Child and Family Team (CFT). Please see Attachment F, 2011 YSS-F Demographics for complete demographics information.

### Domain Line Item Analysis

Line items are specific questions pertaining to each survey domain. Analysis of answers to each domain specific line item indicates the aspects of service delivery the respondents report as either positively or negatively affecting the overall domain score (Attachment G, 2011 YSS-F Line Item). Table-11 demonstrates the results of the 2011 YSS-F Survey and compares them to previous surveys. A P-value of 95% significance when less than or equal to 0.05 or “ns” for “not significant” is listed to reflect the change from the prior year. The statewide statistics are based on weighted scores.

**TABLE-11: Statewide Youth Consumer YSS-F Survey Results by Domain for 2007 - 2011**

Domain	2007 %	2008 % (P-value)	2009 % (P-value)	2010 % (P-value)	2011 % (P-value)
General Satisfaction	78	77 (ns)	80 (ns)	85 (ns)	82 (ns)
Service Access	78	73 (ns)	76 (ns)	83 (ns)	86 (ns)
Participation in Treatment Planning	90	87 (ns)	89 (ns)	92 (ns)	94 (ns)
Cultural Sensitivity	92	90 (ns)	90 (ns)	96 (0.05)	96 (ns)
Outcomes	58	60 (ns)	68 (ns)	69 (ns)	65 (ns)
Improved Functioning	61	58 (ns)	66 (ns)	71 (ns)	67 (ns)
Social Connectedness	82	79 (ns)	83 (ns)	88 (ns)	89 (ns)

Color	Key
	statistically significant increase
	statistically significant decrease

The 2011 statewide YSS-F survey findings indicate:

- **General Satisfaction:** Six questions were asked in the survey to ascertain *General Satisfaction* (Attachment G). This domain scored 82%, a decrease by three (3) percent compared to 2010. However this decrease is not statistically significant.
- **Service Access:** Two questions in the survey gathered information regarding *Access to Services* (Attachment G). This domain scored 86%, an increase by three (3) percent, representing an average score based on 2 questions. However, this increase is not statistically significant compared to 2010.
- **Participation in Treatment Planning:** The survey comprised three questions to indicate *Participation in Treatment Planning* (see Attachment G). The score for this domain scored 94% up two (2) percent from 2010, representing an average score. This increase is not statistically significant.
- **Cultural Sensitivity:** Four questions in the survey focused on *Cultural Sensitivity* (Attachment G). This domain scored 96%, representing an average score. No increases or decreases were found in the 2011 survey results for this domain.
- **Outcomes:** Eight questions were asked to get consumers' perception on *Outcomes* (Attachment G). The overall score for this domain was 65%; indicating a four (4) percent decrease from 2010, however this decrease was not statistically significant.
- **Improved Functioning:** Six questions indicate respondent's impressions of *Improved Functioning* (Attachment G). The overall score for this domain was 67%. This domain decreased by four (4) percent from 2010; however this decrease was not statistically significant.
- **Social Connectedness:** Four questions were asked in the survey to ascertain *Social Connectedness* (see Attachment G). This domain scored 89%. Representing an average score. The increase by one (1) percent compared to 2010 is not statistically significant. .

In summary, scores for the *Service Access* and *Participation in Treatment Planning* domains increased. The *Outcomes* domain remains the lowest and the *Cultural Sensitivity* domain remains the highest. Although these domains showed differences as compared to last year's survey, none of the differences is statistically significant.

2011 Consumer Survey Report

While there were no significant increases or decreases in the statewide survey results from 2010 to 2011, at the RBHA/GSA level, ADHS/DBHS identified opportunities for improvement and recognized areas of improvement.

TABLE-12 through TABLE-17 show positive responses for each RBHA/GSA by domain. Included are the years 2007 through 2011.

**TABLE-12: Cenpatico-2 Youth Consumer YSS-F Survey Results by Domain for 2007 - 2011**

Domain	2007 %	2008 % (P-value)	2009 % (P-value)	2010 % (P-value)	2011 % (P-value)
General Satisfaction	89	76 (0.00)	81 (ns)	82 (ns)	91 (0.02)
Service Access	86	81 (ns)	82 (ns)	90 (0.04)	95 (ns)
Participation in Treatment Planning	88	86 (ns)	94 (0.02)	93 (ns)	96 (ns)
Cultural Sensitivity	96	94 (ns)	93 (ns)	99 (0.02)	99 (ns)
Outcomes	76	70 (ns)	62 (ns)	69 (ns)	71 (ns)
Improved Functioning	78	69 (0.03)	61 (ns)	70 (ns)	73 (ns)
Social Connectedness	89	86 (ns)	85 (ns)	89 (ns)	97 (0.01)

**TABLE-13: Cenpatico-3 Youth Consumer YSS-F Survey Results by Domain for 2007 - 2011**

Domain	2007 %	2008 % (P-value)	2009 % (P-value)	2010 % (P-value)	2011 % (P-value)
General Satisfaction	77	74 (ns)	75 (ns)	87 (0.01)	86 (ns)
Service Access	74	74 (ns)	76 (ns)	90 (0.00)	90 (ns)
Participation in Treatment Planning	88	80 (0.01)	88 (0.05)	90 (ns)	89 (ns)
Cultural Sensitivity	90	89 (ns)	89 (ns)	94 (ns)	96 (ns)
Outcomes	65	65 (ns)	66 (ns)	77 (0.02)	73 (ns)
Improved Functioning	65	62 (ns)	65 (ns)	79 (0.00)	74 (ns)
Social Connectedness	77	77 (ns)	78 (ns)	87 (0.03)	87 (ns)

**TABLE-14: Cenpatico-4 Youth Consumer YSS-F Survey Results by Domain for 2007 - 2011**

Domain	2007 %	2008 % (P-value)	2009 % (P-value)	2010 % (P-value)	2011 % (P-value)
General Satisfaction	78	78 (ns)	85 (ns)	80 (ns)	84 (ns)
Service Access	86	80 (ns)	91 (0.01)	87 (ns)	94 (0.04)
Participation in Treatment Planning	92	90 (ns)	98 (0.01)	91 (0.00)	94 (ns)
Cultural Sensitivity	91	92 (ns)	96 (ns)	95 (ns)	97 (ns)
Outcomes	66	61 (ns)	66 (ns)	66 (ns)	70 (ns)
Improved Functioning	68	62 (ns)	65 (ns)	69 (ns)	71 (ns)
Social Connectedness	82	87 (ns)	87 (ns)	88 (ns)	91 (ns)

Color	Key
	statistically significant increase
	statistically significant decrease

**TABLE-15: CPSA-5 Youth Consumer YSS-F Survey Results by Domain for 2007 - 2011**

Domain	2007 %	2008 % (P-value)	2009 % (P-value)	2010 % (P-value)	2011 % (P-value)
General Satisfaction	81	79 (ns)	82 (ns)	81 (ns)	88 (ns)
Service Access	76	73 (ns)	74 (ns)	84 (0.02)	87 (ns)
Participation in Treatment Planning	89	86 (ns)	86 (ns)	88 (ns)	93 (ns)
Cultural Sensitivity	90	90 (ns)	86 (ns)	94 (0.02)	97 (ns)
Outcomes	65	63 (ns)	72 (ns)	62 (0.03)	68 (ns)
Improved Functioning	66	62 (ns)	72 (0.04)	66 (ns)	71 (ns)
Social Connectedness	86	82 (ns)	84 (ns)	84 (ns)	90 (ns)

**TABLE-16: Youth Consumer YSS-F Survey Results by Domain for Value Options in 2007 and Magellan in 2007 - 2011**

Domain	2007 %	2008 % (P-value)	2009 % (P-value)	2010 % (P-value)	2011 % (P-value)
General Satisfaction	77	75 (ns)	77 (ns)	86 (0.03)	78 (0.02)
Service Access	75	70 (ns)	73 (ns)	80 (ns)	82 (ns)
Participation in Treatment Planning	86	87 (ns)	88 (ns)	93 (ns)	94 (ns)
Cultural Sensitivity	93	90 (ns)	91 (ns)	98 (0.01)	96 (ns)
Outcomes	62	56 (ns)	68 (0.02)	71 (ns)	61 (0.03)
Improved Functioning	63	53 (0.04)	64 (0.03)	72 (ns)	63 (0.05)
Social Connectedness	79	75 (ns)	82 (ns)	88 (ns)	88 (ns)

**TABLE-17: NARBHA Youth Consumer YSS-F Survey Results by Domain for 2007 - 2011**

Domain	2007 %	2008 % (P-value)	2009 % (P-value)	2010 % (P-value)	2011 % (P-value)
General Satisfaction	76	84 (ns)	83 (ns)	90 (ns)	90 (ns)
Service Access	77	81 (ns)	79 (ns)	90 (0.01)	94 (ns)
Participation in Treatment Planning	91	88 (ns)	92 (ns)	93 (ns)	94 (ns)
Cultural Sensitivity	93	93 (ns)	93 (ns)	96 (ns)	97 (ns)
Outcomes	51	72 (0.00)	67 (ns)	70 (ns)	69 (ns)
Improved Functioning	55	71 (0.00)	66 (ns)	73 (ns)	71 (ns)
Social Connectedness	80	87 (ns)	87 (ns)	91 (ns)	90 (ns)

Color	Key
	statistically significant increase
	statistically significant decrease

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Cenpatico-2 experienced a statistically significant increase in two domains. *General Satisfaction* domain increased 9% (P=0.01) and *Social Connectedness* domain increased 8% (P=0.03) compared to 2010.

Cenpatico-4 experienced a statistically significant increase in one domain. *Service Access* domain increased 7% (P=0.04) compared to 2010.

Magellan experienced a statistically significant decrease in three domains. *General Satisfaction* domain fell 8% (P=0.02), *Outcomes* domain fell 10% (P=0.03), and *Improved Functioning* domain fell 9% (P=0.05) compared to 2010.

Magellan acknowledges the statistically significant decreases and has addressed implementation for the *General Satisfaction* and *Outcomes* domains. Listed below are steps Magellan is taking to improve consumers' satisfaction. These steps are also expected to improve the *Improved Functioning* domain.

- Magellan is working with the children's Provider Network Organizations (PNO) to meet expectations for expansion of high needs case management capacity. High Needs Case Managers (HNCM) have a limited caseload size and work with families of children with complex needs, including multi-system involvement, to coordinate services and supports. The PNOs have in place screening processes and high needs indicators to guide Qualified Service Providers (QSP) in referring children with complex needs for HNCM assignment. The PNOs are moving toward conducting screening and assessment of children with high needs indicators at the PNO level in order to streamline the process of identifying and implementing appropriate services.
- Through the "Meet Me Where I Am" Design Team, Magellan is monitoring service utilization and average length of stay in generalist direct support services and encouraging the providers to periodically review the service array with child and family teams to ensure that services are producing desired outcomes and that transitions occur appropriately as treatment objectives are met and intensive services are no longer needed, thereby freeing up program capacity to other families who are in need of the services.
- The Children's Dashboard is measuring individual provider and children's Provider Network Organizations (PNO) performance on the National Outcomes Measures as well as the Functional Outcomes Measures. The Dashboard is available on the Magellan of Arizona website.
- The System of Care Practice Review (SOCPR) is now moving toward the close of its second year as the statewide mechanism for monitoring fidelity of practice to system of care principles. Following the first year of SOCPR, Magellan assisted children's PNOs and provider agencies in developing Performance Improvement Plans (PIP) to address opportunities for improvement identified in the SOCPR for children with high needs and the Brief Practice Review for all other children. Magellan QM/QI has conducted interim monitoring of provider PIPs through requesting progress updates from the providers and has supported the DBHS contractor in sharing the findings of the 2<sup>nd</sup> round of SOCPR and Brief Practice Reviews with providers and has assisted providers in developing further PIPs when warranted by practice review findings.

- The Responsible and Responsive Service Position Paper soon to be released by the Magellan Responsible and Responsive Service Initiative includes information promoting an outcomes orientation. In the position paper, which has contributions from the children's PNOs and which will be distributed to children's provider agencies, provider agencies are encouraged to put in place mechanisms for measuring outcomes at the individual and family level and at the organizational level to drive performance improvement activities. An Outcomes Workgroup of the initiative will continue to meet on a monthly basis to address ways to improve outcomes in the children's system.

## VIII. Statewide Improvement Opportunities

ADHS/DBHS recognizes the opportunity to improve efforts supported by the 2011 survey results; and intends to pursue initiatives with the RBHAs to continue to improve scores for each domain. Special attention will be placed around the *Outcomes, Improved Functioning, and Social Connectedness* domains.

In addition to general statewide initiatives, RBHA-specific activities are undertaken as part of standard ADHS/DBHS processes, as appropriate. Survey results are shared with the RBHAs, and they are required to respond with analysis of any problem areas, along with plans for improvement. ADHS/DBHS reviews their conclusions and plans, and monitors implementation and progress.

### ADHS/DBHS Initiatives:

Below are ADHS/DBHS initiatives for both the Children and Adult systems of care that address *Outcomes, Improved Functioning, Service Access and Social Connectedness*:

#### Adult Initiatives:

- The 2012-2014 ADHS/DBHS Adult System of Care (ASOC)-Strategic Plan (SP) establishes goals and objectives for statewide network development priorities in part through a review of State and GSA network analysis, review of data sets, community input, and the identification of best practices efforts that are designed to assist individuals moving through recovery and increasing the quality of life outcomes. The analyses of the ASOC-strategic plan and the 2010 and 2011 Adult and Youth Consumer Survey identified similar priorities. For example:
  - An objective in the ASOC-SP is to increase the employment rate for persons with Serious Mental Illness (SMI), General Mental Health (GMH) and Substance Abuse (SA). The Outcomes domain of the Consumer Survey addresses a person's ability to: 1) control his/her life, 2) operate in school, and work environment, and 3) do better in social situations; by achieving the improvement in employment rate in ASOC-SP, ADHS/DBHS expects an increase in the Outcomes domain.
  - The ASOC-SP includes an objective to increase the percentage of peers and family members satisfied with their access to services which was identified as an area needing improvement in the Consumer Survey Report. Additionally, ASOC-SP includes strategies to conduct statewide discussion on the awareness and community needs around Trauma Informed Care.

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- ADHS/DBHS is in the process of finalizing policies on clinical supervision and have developed a Clinical Supervision Review Tool for T/RBHAs to ensure sufficient clinical supervision for their behavioral health staff, at least four hours monthly. The aim is to improve delivery of services and quality of care which will ultimately affect outcomes and access to care.

### System Initiatives:

- In October, 2010 ADHS/DBHS modified its enrollment process to automatically enroll Title XIX/XXI persons into its behavioral health programs. AHHCCS members no longer need to undertake an additional step to enroll for behavioral health services. As a result, this process reduced a potential barrier to services.
- ADHS/DBHS, along with family member and recipient input, developed the *Behavioral Health System Outcomes Framework and Dashboard* as a means to focus departmental planning efforts by evaluating the effectiveness of the system using standardized measures, such as family and recipient identified outcomes, the National Outcomes Measures (NOMs) and ADHS/DBHS performance metrics.
- ADHS/DBHS foresees that the development of the Outcomes Framework will impact the future Consumer Survey results due to increased transparency, provider education and accountability in service provision. The development of the Outcomes Framework is in direct response to the identified need for transparency, accountability, improved family, recipient and provider education and tracking of outcomes as a means to drive both individual recipient and program outcomes.

### Children's Initiatives:

- ADHS/DBHS continues to use the System of Care Practice Review (SOCPR) process developed by the University of South Florida to assess Child and Family Team (CFT) practice. These intensive case reviews include outcomes-focused questions to ensure CFTs are identifying and tracking outcomes as well as evaluating the effectiveness of provided services and improved functioning. The reviews are conducted at the individual provider level and are used to develop annual performance improvement plans. The plans are approved by DBHS and monitored by the RBHA with regular updates provided to DBHS.
- For FY10, ADHS/DBHS earmarked approximately five million dollars of additional funding to the RBHAs to increase the number of case managers with reduced caseloads. During the course of FY10, there was an increase of approximately 104 case managers statewide serving children with complex needs. In total this focused effort has developed approximately 469 case managers statewide as of the end of the FY11 fiscal year. ADHS/DBHS continues to monitor the availability of case managers with reduced case loads for children with complex needs.
- The continued emphasis on in-home direct support services, as established by the *Meet Me Where I Am (MMWIA)* Campaign, has been a valuable resource to children and families with the most complex needs. These services put direct support workers in

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homes, schools and communities at the times and for as many hours as necessary to meet the family's needs, leading to improved functioning and better outcomes.

- ADHS/DBHS continues to promote family and youth involvement in the Children's Behavioral Health System. In partnership with family-run organizations, efforts are focused on building and sustaining an infrastructure and agency culture to support and involve youth and family members at all levels of the system.
- The annual Children's System of Care (CSOC) Strategic Plan (SP) provides a vehicle for the Division and RBHAs to address key goals around CFT Practice Model monitoring through the Practice Review process, and development of youth and family involvement and leadership, Generalist Direct Support services and High Needs Case Management services to work with children and families with the most complex needs.
- The strategic activities prioritized in CSOC-SP continue to promote family driven care as well as youth and family involvement in local and statewide committees and system development activities. Focus is placed on specific populations such as children ages birth to 5, transition aged youth, and youth with substance use disorders in order to more clearly define their needs and help providers develop expertise in working with these youth.

## IX. Conclusion

For the 2011 Adult Survey statewide, ADHS/DBHS established no statistically significant increases or decreases compared to the 2010 Survey results. However, the *Service Access* domain continues to indicate improvement by three (3) percent.

For the 2011 Adult Survey RBHA/GSA level, ADHS/DBHS found statistically significant decreases in three domains from Magellan. Scores for the *Participation in Treatment Planning*, *Service Quality and Appropriateness*, and *Outcomes* domains fell from 6 to 10 percent.

For the YSS-F Survey, ADHS/DBHS established no statistically significant increases or decreases compared to the 2010 Survey results. However, three domains *Service Access*, *Participation in Treatment Planning*, and *Social Connectedness* continue to indicate improvement by 1 to 3 percent.

For the YSS-F Survey RBHA/GSA level, ADHS/DBHS found statistically significant increases and decreases. Cenpatico-2 increased in two domains *General Satisfaction* and *Social Connectedness* from 8 to 9 percent. Cenpatico-22, increased in one domain *Service Access* by seven (7) percent. Magellan decreased in three domains *General Satisfaction*, *Outcomes*, and *Improved Functioning*, from 8 to 10 percent.

ADHS/DBHS is working with Magellan on initiatives for these problem areas and will monitor the implementation.

As per the ADHS/DBHS Contract with the RBHAs, Consumer Satisfaction with *Service Outcomes* on the Annual Consumer Survey is a performance incentive; a score of 70% or greater on the *Outcomes* domain of the Consumer Survey makes up 25% of the incentive award. Adult and Youth survey results are evaluated independently, each contributing to half of the award. ADHS/DBHS believes that assisting members in the identification and tracking of treatment outcomes is imperative to improving behavioral health recipients' overall perception of the quality of services they receive.

# **ATTACHMENT-A**

## **2011 Tribal Behavioral Health Authority Survey Results**

Arizona Tribal Behavioral Health Authorities (TBHAs) Gila River Indian Community, Pascua Yaqui Centered Spirit Program, Navajo Nation and White Mountain Apache Tribe participated in the 2011 Consumers Survey. The Tribal BHAs have shown an overall increase in participation from 381 participants in 2010 to 438 in 2011. All TBHAs conduct a convenience sampling of their enrolled members. Overall, the number of surveys completed by tribal participants increased this year, particularly by Navajo Nation and White Mountain Apache Tribe.

TBHA	Number of Surveys Completed		
	Adult Survey	YSS-F	Total
<b>Gila River</b>	26	28	54
<b>Navajo Nation</b>	132	45	177
<b>Pascua Yaqui</b>	100	57	157
<b>White Mountain Apache</b>	30	20	50
<b>Statewide TBHA</b>	288	150	438

### **Methodology and Survey Administration**

A convenience sampling methodology was used (rather than a random sampling); therefore, all persons enrolled with the TBHAs were eligible for participation in this survey.

### **Data Analysis**

TBHAs results were submitted directly to ADHS/DBHS and entered into the database; analyses were conducted by ADHS/DBHS staff.

### **Summary of Results:**

*General Satisfaction* and *Participation in Treatment Planning* domains reported positive responses for adults receiving services through TBHAs compared to 2010 results. *Participation in Treatment Planning* domain showed the highest rate of satisfaction and improvement. *Outcomes* and *Improved Functioning* domains remain the lowest rates of satisfaction for adults receiving services.

Families of children receiving services through the TBHAs reported satisfaction and improvements in *Cultural Sensitivity* and *Social Connectedness* domains compared to 2010. *Cultural Sensitivity* domain scored the highest rate of satisfaction for the families of youth. *Outcomes* and *Improved Functioning* domains remain the lowest rates of satisfaction reported.

### Summary of 2010 & 2011 TBHA Results for Adults

TBHA	General Satisfaction		Service Access		Participation in Treatment Planning		Service Quality & Appropriateness		Outcomes		Improved Functioning		Social Connectedness	
	2010	2011	2010	2011	2010	2011	2010	2011	2010	2011	2010	2011	2010	2011
<b>Gila River</b>	93%	92%	90%	85%	92%	92%	90%	96%	77%	84%	74%	84%	88%	85%
<b>Navajo Nation</b>	89%	91%	80%	80%	79%	89%	85%	88%	73%	82%	76%	83%	75%	86%
<b>Pascua Yaqui</b>	95%	94%	94%	86%	89%	90%	94%	93%	87%	82%	88%	78%	91%	85%
<b>White Mtn Apache</b>	91%	93%	95%	96%	86%	86%	91%	86%	86%	76%	83%	86%	100%	90%

TBHA scores are not included in statewide numbers due to TBHA convenience sampling methodology.

### Summary of 2010 & 2011 TBHA Results for Youth

TBHA	General Satisfaction		Service Access		Participation in Treatment Planning		Cultural Sensitivity		Outcomes		Improved Functioning		Social Connectedness	
	2010	2011	2010	2011	2010	2011	2010	2011	2010	2011	2010	2011	2010	2011
<b>Gila River</b>	91%	82%	91%	86%	97%	96%	97%	100%	57%	64%	57%	64%	94%	96%
<b>Navajo Nation</b>	86%	84%	75%	72%	78%	87%	78%	91%	75%	73%	75%	75%	72%	91%
<b>Pascua Yaqui</b>	84%	96%	100%	100%	84%	95%	98%	100%	58%	71%	65%	75%	93%	95%
<b>White Mtn Apache</b>	89%	100%	100%	90%	89%	90%	100%	100%	67%	85%	67%	85%	78%	95%

TBHA scores are not included in statewide numbers due to TBHA convenience sampling methodology.

# ATTACHMENT-B



# **STATEWIDE CONSUMER SURVEY PROTOCOL**

**2011**

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**Arizona Department of Health Services  
Division of Behavioral Health Services**

## Executive Summary

The protocol for the 2011 consumer survey is based on the methodological and administrative guidelines followed in recent years.

Two consumer surveys will be administered again in 2011; one for adults and one for the parents/guardians of children receiving behavioral health services. The survey will be available to consumers in two languages: English and Spanish. Survey data will be entered into an SPSS database by the Regional Behavioral Health Authorities (RBHAs) and forwarded to the Arizona Department of Health Services/Division of Behavioral Health Services (ADHS/DBHS).

Prior to implementation of the 2011 survey, ADHS/DBHS will provide each Geographic Service Area (GSA) with the CIS (Client Information System) Client IDs for 500 adult consumers and 400 to 500 youth consumers who the RBHAs/providers will encourage to participate in the survey. Each CIS Client ID will be linked to a Survey ID reference number to allow for tracking of which consumers completed a survey. The survey will be administered during April and May 2011.

As in previous years, the primary administration route will be to distribute the survey at the provider sites. As the consumer checks in for their appointment, the survey questionnaire will be handed to them. The consumer will be requested to complete the questionnaire prior to their appointment, but will be allowed to finalize the survey after the appointment if needed, or be provided with an addressed, stamped envelope to mail the survey in to the RBHA if they did not have time to complete it in the office. A drop box will be provided at each provider site for consumers to drop off their completed surveys. In cases where consumers who are selected for the sample have home appointments (as opposed to clinic appointments) during the survey timeframe, the questionnaire will be completed at home and mailed using the addressed, stamped envelope to be provided with the survey. If the consumer does not have a clinic or home appointment scheduled during the survey administration period or no-shows for a scheduled appointment, a non-clinical staff at the RBHA may conduct the survey by phone. Providers will never have access to completed surveys or individual survey results.

ADHS has the statewide oversight responsibility for implementation and analysis of the survey data. The RBHAs will be responsible for ensuring that providers strictly adhere to the protocol. The providers are primarily responsible for the survey administration.

## Survey Instruments

Two MHSIP survey instruments are the Adult Consumer Survey and the Youth Services Survey for Families (YSS-F). The adult survey will be administered to adult consumers of behavioral health services and the YSS-F will be administered to parents/guardians of children receiving behavioral health services.

The MHSIP Adult Consumer Survey measures seven domains: (1) Service Accessibility; (2) Service Quality or Appropriateness (which includes one item concerning cultural sensitivity); (3) Consumer Participation in Treatment Planning; (4) Outcomes; (5) General Satisfaction; (6) Improved Functioning; and (7) Social Connectedness. In addition, the questionnaire includes a module of questions to determine the impact of services received on the recipient's involvement with the criminal justice system. All questions are scored using a Likert Scale of 1 through 5 as follows: 1=Strongly Agree, 2=Agree, 3=Neutral, 4=Disagree, and 5=Strongly Disagree. A Not Applicable option is also available if the question does not apply.

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Two state-added questions were added to the 2011 Adult survey tool to gather information specific to National CLAS Standards (Culturally and Linguistically Appropriate Services):

Q38 – Services were provided in a language I understood.

Q39 – In creating my service plan our tribal customs and beliefs were included. (For example: being asked to participate in traditional healing practices.)

Additionally, the clarifiers at the end of one MHSIP question (Q18) and one state-added question on the Adult tool (Q37) were modified to provide additional clarification.

The MHSIP YSS-F focuses on the following seven domain areas: (1) Service Accessibility; (2) Participation in Treatment Planning; (3) Cultural Sensitivity; (4) Satisfaction with Services; (5) Outcomes; (6) Social Connectedness; and (7) Improved Functioning. Additional questions solicit information about the youth's criminal justice contact and school attendance. Questions are scored with a five-point Likert Scale where 1=Strongly Agree, 2=Agree, 3=Neutral, 4=Disagree, and 5=Strongly Disagree. A Not Applicable option is also available if the question does not apply.

Two state-added questions were added to the 2011 YSS-F tool to gather information specific to National CLAS Standards (Culturally and Linguistically Appropriate Services):

Q30 – Services were provided in a language my child understood.

Q31 – In creating my child's service plan our tribal customs and beliefs were included. (For example: being asked to participate in traditional healing practices.)

Additionally, the clarifiers at the end of one MHSIP question (Q15) and one state-added question on the YSS-F tool (Q29) were modified to provide additional clarification.

The RBHA and/or provider may pre-print the following information on the survey tool prior to distribution to client:

- RBHA Name
- Provider Name
- Survey Id
- Provider Facility ID
- Behavioral Health Category
- Entitlement Status (Title XIX or XXI)
  
- Distribution Method (Home, Clinic, or Phone)
- Client enrollment with DDD

Both survey tools have four main sections: (1) demographic section, (2) MHSIP survey questions, (3) state-added questions, and (4) open-ended qualitative section.

The demographic section provides descriptive information about the consumer's age, gender, race, ethnicity, and relationship of the person completing the survey to the service recipient.

The second section of the survey contains the MHSIP standardized questions. They serve as benchmark tools to compare consumer perception of behavioral health systems across the nation.

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The third section consists of state-added questions to elicit consumer input regarding the inclusion of cultural preferences in the consumer's treatment planning and to provide information relative to the National CLAS Standards.

The fourth and final section of the survey contains open-ended questions to solicit consumer comments. Two questions are asked of consumers – focusing on identifying what has been most helpful with their services, and what the consumer believes would improve services. The section entitled other comments is intended to provide consumers with an additional area on the survey to provide open-ended feedback on any issue.

## **Confidentiality**

The front page of the survey questionnaire addresses confidentiality of the responses. Survey results are aggregated and not presented at an individual consumer level. The providers will never have access to completed surveys or individual survey results. Thematic analysis is conducted on written comments.

## **Non-mandatory (Voluntary)**

The survey questionnaire likewise informs the respondent that participation in the survey is voluntary; every individual can choose to participate or not. It also notifies the respondent that non-participation will not affect the services they are currently or will receive in the future. Participating in the survey is one way the consumer may help improve the system they use.

## **Languages**

The survey will be available to consumers in English and Spanish languages. Each survey form will be printed in English on one side and Spanish on the reverse side. For consumers with limited English proficiency who speak a language other than Spanish, the RBHA and/or the provider administering the survey will extend their best effort to translate the survey in the consumer's preferred language by utilizing the Language Line or other translation/interpretation services officially utilized by the RBHA or their provider. The extent of assistance provided in language translation should not attempt to define what the question means.

## **Sampling Design**

### *Sample Frame*

The sample frame refers to the population eligible to take the survey. This is the pool from which ADHS/DBHS will randomly select the sampled population. ADHS/DBHS will create an adult and a youth sample from the CIS database for each GSA. Clients 18 or older on December 1, 2010 are grouped as adults, and clients under 18 are grouped as youth. The adult clients may be enrolled in any program: General Mental Health, Substance Abuse, or Seriously Mentally Ill.

The sample frame will be composed of:

- (a) Client must be enrolled in FY2011;
- (b) Client must be Title XIX or Title XXI eligible in FY2011;
- (c) Client must have received a mental health service other than inpatient, transportation, laboratory and/or radiology services, or crisis;
- (d) The service must have occurred in the previous 6 months.

### *Drawing of sample*

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ADHS/DBHS will create a random sample and provide each GSA with a list of 500 adult and 400 to 500 youth clients to be surveyed.

### *Administering survey*

ADHS/DBHS will provide the RBHAs with a list of randomly selected clients. The RBHA will duplicate the Survey ID number on the survey tool to be offered that specific consumer. To protect the confidentiality of the consumer, none of the parties' privy to this information (DBHS, RBHA, Provider) will link the survey responses to consumers.

ADHS/DBHS will provide the RBHAs with a database to store the survey results.

The RBHA will disseminate the surveys; track which consumers have completed the survey; track why surveys were not completed; enter the survey data into the provided database; and submit to ADHS/DBHS: the completed paper surveys, the database containing all survey results, the database detailing which consumers completed a survey and for every consumer that did not complete a survey, the reason the survey was not completed. The RBHAs will enter data into the two ADHS/DBHS provided databases but the RBHAs will not alter the databases in any way.

The provider agency is responsible for identifying the specific provider location or site from which the consumer is presently receiving services.

## **Survey Methodology**

### *Distribution Method*

The primary distribution method is a non-clinical staff at the provider office (i.e., clinic) handing the survey questionnaire to the consumer. As the consumer checks in for their appointment, s/he will be provided with a copy of the survey questionnaire to complete. If the consumer agrees to participate, s/he will be requested to complete the survey prior to his/her appointment. If the consumer is unable to complete the questionnaire, s/he will be allowed to finish it on site after the appointment or be provided with an addressed, stamped envelope to mail the survey in if they did not have time to complete it in the office. A drop box will be provided on site for completed surveys. Additionally, a specific area at the provider office will be designated for completing the survey.

If the individual randomly selected has a scheduled appointment at home during the survey window, the provider staff will bring the survey questionnaire at the appointment date. If the consumer agrees to participate, s/he will be advised to complete the survey after the staff leaves and to mail the completed questionnaire to the RBHA using the pre-addressed, stamped envelope provided with the survey.

If the individual does not have an appointment during the survey window, a non-clinical staff at the RBHA may conduct the survey over the phone. As an alternative, a non-clinical staff at the provider site may contact the consumer by phone to ask for their participation in the survey, offering a return envelope for the completed survey to be mailed. All return envelopes provided as a means for the consumer to submit their completed survey must be addressed to the RBHA.

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A check box in the questionnaire will be used to track the distribution method. The adult survey will be administered to the adult consumer. If the individual requests assistance, a guardian may complete the questionnaire on the consumer's behalf. The YSS-F will be administered to the parent/guardian of the child receiving services. If the parent or guardian is not at the appointment, then the survey will not be provided.

### *List of Survey Clients*

ADHS/DBHS will provide each RBHA with a list of survey consumers to track those who complete a survey or the reason they did not complete a survey. The list of survey consumers will contain fields for:

- RBHA ID
- Contractor ID
- Survey ID
- AHCCCS ID
- Last Name
- First Name
- Date of Birth
- Sex
- Survey Offered Date
- Survey Completed Date
- Reason Not Completed
- Provider ID
- Client contact phone number

The RBHAs will submit their lists of survey clients to ADHS/DBHS bi-weekly throughout the survey administration period to keep ADHS/DBHS informed regarding the status of response rates and reasons for non-participation of sampled consumers. Due dates for submission of bi-weekly lists are included in the Task Timeline section on page 9 of this Protocol.

Since this document contains protected health information, it will be treated as a confidential document.

### *ADHS/DBHS Post-administration Follow-up*

During the survey administration period, RBHAs will attempt to achieve participation of all consumers on its list of survey clients. Every effort will be made to separate service delivery from sample collection.

At the end of the administration period, RBHAs will provide ADHS/DBHS with the completed list of survey consumers indicating which consumers completed the survey and which did not, with the reasons and a contact phone number for those who did not participate. At that point, the RBHA will delete the list of survey consumers. RBHAs will submit to ADHS/DBHS the completed paper surveys and a database containing survey results by July 29, 2011.

Tribal RBHAs participate in the Annual Consumer Survey by way of a convenience sampling of their enrolled consumers. These entities will be provided a master survey tool for each population that can be copied for distribution.

### **Survey Administration**

The survey will be administered for a period of two months: April 4 through May 27, 2011.

### *Roles and Responsibilities*

ADHS/DBHS is responsible for the statewide oversight of the survey administration to ensure consistent implementation of the survey protocol. The protocol, client sample, survey instruments, and survey results database will be created by ADHS/DBHS. ADHS/DBHS will provide technical assistance throughout the survey process. Periodic monitoring, training, timelines, and use of checklist will be utilized to guide the T/RBHAs on critical points in the process.

The T/RBHAs have the primary responsibility for ensuring that the protocol is precisely followed within their geographic regions. Direct oversight and assistance will be provided by the T/RBHAs to their providers. The T/RBHAs will ensure that the providers are appropriately trained and prepared to administer the survey. The RBHAs will enter data into the two ADHS/DBHS provided databases but the RBHAs will not alter the databases in any way including creating tables, changing the names of tables or fields, or creating a different value coding scheme.

Each provider agency is primarily responsible for each of its sites in which the survey is to be administered. Each site will maintain all necessary materials for survey administration. At each site, a drop box and a designated area will be provided for consumers to complete the survey. Providers will also be responsible for the day-to-day operations – including having the survey tools, materials for completing the survey (pens, pencils, clipboards), envelopes for return of the survey if needed, assigned resources for administration and collection of data for the survey.

### *Non-Randomly Selected Consumers (Walk-in Requests)*

ADHS/DBHS does not require the RBHAs to extend survey participation efforts beyond the randomly selected populations but at the individual discretion of each RBHA/GSA, the RBHA may furnish its provider agencies with survey forms to give consumers who express a desire to participate in the survey but whose names do not appear on the lists of survey consumers (i.e., the consumer was not randomly selected). However, to maintain the scientific rigor of the protocol, the survey questionnaire completed by this group of respondents will be tracked separately by the RBHA. Names of individuals who belong to this group will not be added to the survey client list. This group will be tracked in some other ways as described in the succeeding paragraph.

If the RBHA elects to collect responses from non-selected consumers, the same protocol will be followed for this group of respondents but the staff administering the survey will ensure that these “voluntary” surveys are kept separate from those on the lists of survey clients (randomly selected consumers). Several control measures will be used. First, consumers that are not randomly selected to participate in the survey (i.e., walk-in respondents) will be given a copy of the survey questionnaire with the pre-filled section of the questionnaire not completed. Second, the survey questionnaire that will be used for non-randomly selected consumers will be color-coded. (Note: Surveys for the random sample will be printed on white paper.) RBHAs will enter the responses on the voluntary surveys into the same database as the results of the selected respondents, using the correct indicator, “C” for control (selected) respondents and “V” for voluntary (non-selected) respondents.

**2011 Consumer Survey Report**  
**Pre-Survey Activities**

*Notification to Consumers about the Survey*

To encourage greater participation, efforts will be made to inform consumers in advance about the survey. T/RBHAs and providers will be encouraged to utilize all or a combination of any of the following media: flyers, posters, website announcements, or other promotional materials.

A staff member or members at each provider site will be assigned to work on the survey. In addition to daily survey administrative duties, a component of the staff member's role will include assisting consumers with the survey if necessary. Assistance may include: reading the survey to individuals unable to read, explaining the Likert scale used for scoring answers, emphasizing confidentiality of the survey, or ensuring consumers that participation in the survey is voluntary. Staff will be allowed to provide administrative assistance to the consumer, or provide encouragement to participate in the survey process. However, staff will not be able to explain the meaning of particular questions or provide interpretations on what particular questions mean.

**Data Management and Reporting**

*Scoring Protocol*

The scoring protocol recommended by MHSIP will be utilized for evaluating the domain areas within the survey, as follows:

1. Recode ratings of 'not applicable' as missing values.
2. For each survey, exclude domains more than one-third of the domain questions missing.
3. Calculate the mean of the items for each respondent.
4. Calculate the percent of scores that are less than 2.5

*Technical assistance*

ADHS will provide technical assistance to the RBHAs as needed.

*Response Rate Calculation:*

The rate will be calculated for each population for each GSA using the formula:

$$\text{Response rate} = A / B$$

Where:

A= Total number of surveys returned

B= 400 to 500 (sample population)

*Weighting methodology*

The statewide data will be weighted by GSA client population to compensate for the stratified sample collection. Weights will be applied to the survey data prior to any statewide data analysis.

2011 Consumer Survey Report  
**Dissemination of Findings**

The following methods have been identified to circulate findings:

- ❖ Reporting of survey results in management meetings – Executive Management, Quality Management, Human Rights Committees, Behavioral Health Planning Council, other consumer advocate groups, and other interest groups that may be identified
- ❖ Dissemination of information by providers to their local communities
- ❖ Having copies of the survey available at the provider sites
- ❖ Publishing results of survey on ADHS, RBHA and provider websites

**Timeline for tasks to be completed by RBHA and ADHS/DBHS:**

- ❖ **March 1, 2011:** ADHS/DBHS provides each RBHA with:  
*Lists of consumers in survey samples*  
*Survey tools, Adult and YSS-F* – Survey tools in Adobe format to be copied by T/RBHA (white for selected respondents; light green for voluntary respondents). Header portion of survey tools will be editable for RBHA entry of information called for.  
*Database* – for RBHA data entry of survey results.
- ❖ **March:**  
RBHAs identify appropriate provider for consumers on lists of survey consumers, copy ADHS/DBHS-provided survey tools, complete top portions specific to each consumer and forward survey tools to providers.
- ❖ **April 4 – May 27, 2011:** Administer survey
- ❖ **April 22, May 6, May 20, June 10, 2010:** RBHA submits to ADHS/DBHS:  
*Lists of survey clients* – the lists of survey clients with current status regarding which consumers have and have not completed a survey.
- ❖ **July 29, 2011:** RBHA submits to ADHS/DBHS:  
*Database containing survey results.*  
*Completed surveys* – this includes surveys completed by selected respondents as well as voluntary respondents. A copy of the surveys is to be retained by the RBHA.
- ❖ **December 9, 2011:** RBHA submits a written report of survey findings to ADHS/DBHS. This report will provide analysis of 2010 consumer survey results and performance improvement activities planned or implemented to address areas in need of improvement.

# **ATTACHMENT-C**

## **Raw Data**

**Arizona Department of Health Services  
Division of Behavioral Health Services  
2011 Annual Consumer Survey  
Raw Data**

Assumptions for interpreting data:

1. Denominator – Number of responses to specific domain or question on completed/analyzed surveys.
2. Numerator – Number of positive responses to specific domain or question on completed/analyzed surveys.
3. T/RBHA – specific numbers and percentages are based on actual valid survey returns.
4. Statewide RBHA numbers and percentages are based on weighted scores.
5. Tribal BHA scores not included in Statewide numbers/percentages due to Tribal BHA convenience sampling methodology.
6. Weighting: As a result, if weighting were not applied for the Statewide performance calculation, a GSA with a relatively smaller population would be over represented and a GSA with a larger population would be under represented. The weight applied to each GSA is determined by the number of clients enrolled in the GSA. Weighting is utilized to correct the sample design when describing statewide data. Each GSA is provided a similar number of surveys to have completed but the GSAs have very different population sizes.

The table below details the specific weighting factors used:

	RBHA	Total Surveys	RBHA Population	RBHA Surveys	Total Population	Equation	Weight
Adult	7	1,573	38,541	224	74,312	$(1573*38541)/(224*74312)$	3.64204
	26	1,573	16,294	352	74,312	$(1573*16294)/(352*74312)$	0.97984
	15	1,573	10,293	340	74,312	$(1573*10293)/(340*74312)$	0.64082
	22	1,573	3,816	194	74,312	$(1573*3816)/(194*74312)$	0.41637
	2	1,573	2,559	262	74,312	$(1573*2559)/(262*74312)$	0.20675
	32	1,573	2,809	201	74,312	$(1573*2809)/(201*74312)$	0.29582
Youth	7	1,376	20,342	196	35,853	$(1376*20342)/(196*35853)$	3.98319
	26	1,376	7,152	293	35,853	$(1376*7152)/(293*35853)$	0.93681
	15	1,376	3,962	333	35,853	$(1376*3962)/(333*35853)$	0.45663
	22	1,376	2,140	233	35,853	$(1376*2140)/(233*35853)$	0.35249
	32	1,376	1,274	197	35,853	$(1376*1274)/(197*35853)$	0.24820
	2	1,376	983	124	35,853	$(1376*983)/(124*35853)$	0.30425

2011 Consumer Survey Report  
**2011 MHSIP Consumer Survey**  
**Numbers Used in Calculation of Performance**  
**ADULT SURVEY**  
**RESULTS BY T/RBHA & MHSIP DOMAIN**

*Domain: General Satisfaction*

<b>T/RBHA</b>	<b>Denominator</b>	<b>Numerator</b>	<b>Positive Response Percentage</b>
Cenpatico 2	259	231	89%
Cenpatico 3	188	161	86%
Cenpatico 4	187	171	91%
CPSA 5	328	292	89%
Magellan	197	164	83%
NARBHA	325	293	90%
<b>Statewide RBHA</b>	<b>1,434</b>	<b>1,238</b>	<b>86%</b>
Gila River	25	23	92%
Navajo Nation	127	115	91%
Pascua Yaqui	97	91	94%
White Mountain Apache	29	27	93%

*Domain: Service Access*

<b>T/RBHA</b>	<b>Denominator</b>	<b>Numerator</b>	<b>Positive Response Percentage</b>
Cenpatico 2	262	231	88%
Cenpatico 3	200	172	86%
Cenpatico 4	190	169	89%
CPSA 5	345	292	85%
Magellan	213	176	83%
NARBHA	337	287	85%
<b>Statewide RBHA</b>	<b>1,522</b>	<b>1,280</b>	<b>84%</b>
Gila River	26	22	85%
Navajo Nation	127	102	80%
Pascua Yaqui	98	84	86%
White Mountain Apache	28	27	96%

*Domain: Participation in Treatment Planning*

<b>T/RBHA</b>	<b>Denominator</b>	<b>Numerator</b>	<b>Positive Response Percentage</b>
Cenpatico 2	246	224	91%
Cenpatico 3	185	169	91%
Cenpatico 4	184	174	95%
CPSA 5	327	302	92%
Magellan	195	160	82%
NARBHA	332	303	91%
<b>Statewide RBHA</b>	<b>1,426</b>	<b>1,242</b>	<b>87%</b>
Gila River	24	22	92%
Navajo Nation	127	113	89%
Pascua Yaqui	96	86	90%
White Mountain Apache	28	24	86%

**Domain: Service Quality & Appropriateness**

<b>T/RBHA</b>	<b>Denominator</b>	<b>Numerator</b>	<b>Positive Response Percentage</b>
Cenpatico 2	260	235	90%
Cenpatico 3	190	168	88%
Cenpatico 4	190	176	93%
CPSA 5	340	308	91%
Magellan	209	176	84%
NARBHA	333	310	93%
<b>Statewide RBHA</b>	<b>1,497</b>	<b>1,313</b>	<b>88%</b>
Gila River	25	24	96%
Navajo Nation	128	112	88%
Pascua Yaqui	97	90	93%
White Mountain Apache	28	24	86%

**Domain: Outcomes**

<b>T/RBHA</b>	<b>Denominator</b>	<b>Numerator</b>	<b>Positive Response Percentage</b>
Cenpatico 2	252	205	81%
Cenpatico 3	186	139	75%
Cenpatico 4	190	145	76%
CPSA 5	330	246	75%
Magellan	200	136	68%
NARBHA	327	247	76%
<b>Statewide RBHA</b>	<b>1,448</b>	<b>1,039</b>	<b>72%</b>
Gila River	25	21	84%
Navajo Nation	128	105	82%
Pascua Yaqui	99	81	82%
White Mountain Apache	29	22	76%

**Domain: Improved Functioning**

<b>T/RBHA</b>	<b>Denominator</b>	<b>Numerator</b>	<b>Positive Response Percentage</b>
Cenpatico 2	257	199	77%
Cenpatico 3	189	137	72%
Cenpatico 4	189	132	70%
CPSA 5	329	237	72%
Magellan	202	132	65%
NARBHA	331	244	74%
<b>Statewide RBHA</b>	<b>1,458</b>	<b>1,006</b>	<b>69%</b>
Gila River	25	21	84%
Navajo Nation	129	107	83%
Pascua Yaqui	98	76	78%
White Mountain Apache	29	25	86%

**Domain: Social Connectedness**

<b>T/RBHA</b>	<b>Denominator</b>	<b>Numerator</b>	<b>Positive Response Percentage</b>
Cenpatico 2	257	212	82%
Cenpatico 3	193	157	81%
Cenpatico 4	188	148	79%
CPSA 5	340	258	76%
Magellan	207	154	74%
NARBHA	333	267	80%
<b>Statewide RBHA</b>	<b>1,489</b>	<b>1,137</b>	<b>76%</b>
Gila River	26	22	85%
Navajo Nation	131	112	85%
Pascua Yaqui	100	85	85%
White Mountain Apache	30	27	90%

**STATEWIDE RESULTS FOR EACH QUESTION IN DOMAIN**

<b>General Satisfaction:</b>	<b>Denominator</b>	<b>Numerator</b>	<b>Positive Response Percentage</b>
Q1	1,507	1,336	89%
Q2	1,490	1,217	82%
Q3	1,491	1,315	88%
<b>Service Access</b>			
Q4	1,515	1,234	81%
Q5	1,485	1,295	87%
Q6	1,444	1,145	79%
Q7	1,501	1,290	86%
Q8	1,497	1,220	81%
Q9	1,429	1,060	74%
<b>Participation in Treatment Planning</b>			
Q11	1,494	1,327	89%
Q17	1,460	1,180	81%
<b>Service Quality &amp; Appropriateness</b>			
Q10	1,509	1,287	85%
Q12	1,491	1,252	84%
Q13	1,503	1,372	91%
Q14	1,465	1,259	86%
Q15	1,472	1,175	80%
Q16	1,461	1,323	91%
Q18	1,426	1,217	85%
Q19	1,453	1,223	84%
Q20	1,423	1,151	81%

## 2011 Consumer Survey Report

### Outcomes

Q21	1,480	1,178	80%
Q22	1,480	1,117	75%
Q23	1,479	1,084	73%
Q24	1,458	1,029	71%
Q25	1,462	982	67%
Q26	1,146	698	61%
Q27	1,357	835	62%
Q28	1,437	925	64%

### Improved Functioning

Q28	1,437	925	64%
Q29	1,468	1,062	72%
Q30	1,476	1,099	74%
Q31	1,471	1,000	68%
Q32	1,465	1,041	71%

### Social Connectedness

Q33	1,456	1,079	74%
Q34	1,458	1,112	76%
Q35	1,453	900	62%
Q36	1,449	1,157	80%

2011 Consumer Survey Report

2011 MHSIP Consumer Survey

Numbers Used in Calculation of Performance

**YOUTH SERVICES SURVEY FOR FAMILIES**

**RESULTS BY T/RBHA & MHSIP DOMAIN**

*Domain: General Satisfaction*

<b>T/RBHA</b>	<b>Denominator</b>	<b>Numerator</b>	<b>Positive Response Percentage</b>
Cenpatico 2	124	113	91%
Cenpatico 3	194	166	86%
Cenpatico 4	233	195	84%
CPSA 5	288	253	88%
Magellan	181	141	78%
NARBHA	329	295	90%
<b>Statewide RBHA</b>	<b>1,309</b>	<b>1,078</b>	<b>82%</b>
Gila River	28	23	82%
Navajo Nation	45	38	84%
Pascua Yaqui	56	54	96%
White Mountain Apache	20	20	100%

*Domain: Service Access*

<b>T/RBHA</b>	<b>Denominator</b>	<b>Numerator</b>	<b>Positive Response Percentage</b>
Cenpatico 2	124	118	95%
Cenpatico 3	193	174	90%
Cenpatico 4	230	215	93%
CPSA 5	283	247	87%
Magellan	180	148	82%
NARBHA	330	309	94%
<b>Statewide RBHA</b>	<b>1,299</b>	<b>1,117</b>	<b>86%</b>
Gila River	28	24	86%
Navajo Nation	43	31	72%
Pascua Yaqui	55	55	100%
White Mountain Apache	20	18	90%

*Domain: Participation in Treatment Planning*

<b>T/RBHA</b>	<b>Denominator</b>	<b>Numerator</b>	<b>Positive Response Percentage</b>
Cenpatico 2	124	119	96%
Cenpatico 3	194	173	89%
Cenpatico 4	233	220	94%
CPSA 5	283	264	93%
Magellan	180	170	94%
NARBHA	327	308	94%
<b>Statewide RBHA</b>	<b>1,299</b>	<b>1,222</b>	<b>94%</b>
Gila River	26	25	96%
Navajo Nation	45	39	87%
Pascua Yaqui	56	53	95%
White Mountain Apache	20	18	90%

**Domain: Cultural Sensitivity**

<b>T/RBHA</b>	<b>Denominator</b>	<b>Numerator</b>	<b>Positive Response Percentage</b>
Cenpatico 2	123	122	99%
Cenpatico 3	187	179	96%
Cenpatico 4	229	223	97%
CPSA 5	270	261	97%
Magellan	165	158	96%
NARBHA	316	307	97%
<b>Statewide RBHA</b>	<b>1,219</b>	<b>1,174</b>	<b>96%</b>
Gila River	27	27	100%
Navajo Nation	45	41	91%
Pascua Yaqui	57	57	100%
White Mountain Apache	20	20	100%

**Domain: Outcomes**

<b>T/RBHA</b>	<b>Denominator</b>	<b>Numerator</b>	<b>Positive Response Percentage</b>
Cenpatico 2	122	86	70%
Cenpatico 3	194	142	73%
Cenpatico 4	231	161	70%
CPSA 5	280	190	68%
Magellan	176	107	61%
NARBHA	325	223	69%
<b>Statewide RBHA</b>	<b>1,278</b>	<b>824</b>	<b>64%</b>
Gila River	28	18	64%
Navajo Nation	44	32	73%
Pascua Yaqui	56	40	71%
White Mountain Apache	20	17	85%

**Domain: Improved Functioning**

<b>T/RBHA</b>	<b>Denominator</b>	<b>Numerator</b>	<b>Positive Response Percentage</b>
Cenpatico 2	122	89	73%
Cenpatico 3	195	145	74%
Cenpatico 4	232	165	71%
CPSA 5	280	198	71%
Magellan	176	111	63%
NARBHA	325	231	71%
<b>Statewide RBHA</b>	<b>1,279</b>	<b>854</b>	<b>67%</b>
Gila River	28	18	64%
Navajo Nation	44	33	75%
Pascua Yaqui	56	42	75%
White Mtn	20	17	85%

**Domain: Social Connectedness**

<b>T/RBHA</b>	<b>Denominator</b>	<b>Numerator</b>	<b>Positive Response Percentage</b>
Cenpatico 2	119	115	97%
Cenpatico 3	191	167	87%
Cenpatico 4	232	211	91%
CPSA 5	278	250	90%
Magellan	173	152	88%
NARBHA	326	294	90%
<b>Statewide RBHA</b>	<b>1,264</b>	<b>1,125</b>	<b>89%</b>
Gila River	27	26	96%
Navajo Nation	44	40	91%
Pascua Yaqui	56	53	95%
White Mtn	20	19	95%

**STATEWIDE RESULTS FOR EACH QUESTION IN DOMAIN**

<b>General Satisfaction:</b>	<b>Denominator</b>	<b>Numerator</b>	<b>Positive Response Percentage</b>
Q1	1,324	1,120	85%
Q4	1,273	1,041	82%
Q5	1,230	963	78%
Q7	1,309	1,081	83%
Q10	1,290	1,036	80%
Q11	1,269	936	74%
<b>Service Access</b>			
Q8	1,309	1,055	81%
Q9	1,312	1,084	83%
<b>Participation in Treatment Planning</b>			
Q2	1,267	1,098	87%
Q3	1,295	1,182	91%
Q6	1,306	1,227	94%
<b>Cultural Sensitivity</b>			
Q12	1,303	1,236	95%
Q13	1,179	1,068	91%
Q14	1,305	1,242	95%
Q15	1,186	1,091	92%
<b>Outcomes</b>			
Q16	1,291	879	68%
Q17	1,262	804	64%
Q18	1,273	866	68%
Q19	1,262	865	69%
Q20	1,271	752	59%
Q21	1,278	769	60%
Q22	1,282	817	64%

## 2011 Consumer Survey Report

### Improved Functioning

Q16	1,291	879	68%
Q17	1,262	804	64%
Q18	1,273	866	68%
Q19	1,262	865	69%
Q20	1,271	752	59%
Q22	1,282	817	64%

### Social Connectedness

Q23	1,270	1,082	85%
Q24	1,256	1,111	88%
Q25	1,263	1,054	83%
Q26	1,251	1,090	87%

### CLAS (New in 2011)

Q30	1,247	1,204	97%
Q31	603	456	76%

# ATTACHMENT-D

**2011 Adult Demographics**

**2011 Adult Consumer Survey, Percent of Positive Response by Domain and Subgroup**

Subgroup	General Satisfaction		Service Access		Service Quality and Appropriateness		Participation in Treatment Planning		Outcomes		Improved Functioning		Social Connectedness	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
<b>Gender</b>														
Male	505	88%	559	88%	546	88%	525	90%	470	79%	428	73%	480	79%
Female	731	85%	720	81%	765	87%	716	85%	567	67%	576	66%	655	74%
<b>Age Group</b>														
18-21	82	87%	89	90%	89	91%	88	98%	81	86%	72	81%	71	76%
22-30	219	85%	202	75%	233	86%	216	82%	166	65%	172	66%	202	77%
31-45	373	84%	418	86%	405	86%	381	87%	332	73%	320	70%	377	79%
46-65	490	88%	495	85%	507	88%	488	88%	404	71%	377	66%	415	72%
66-75	48	92%	50	98%	51	100%	41	80%	32	67%	39	75%	42	81%
76+	8	100%	8	100%	7	100%	7	100%	3	43%	7	100%	8	100%
<b>Race</b>														
White only	897	87%	916	85%	960	90%	907	88%	761	74%	745	71%	819	77%
African American only	75	84%	86	88%	81	84%	68	85%	53	64%	50	60%	72	78%
Asian only	10	71%	14	100%	9	64%	14	100%	10	100%	10	91%	6	100%
Am Indian/Al Native only	44	80%	45	66%	46	69%	45	71%	43	64%	42	64%	46	68%
Nat Hawaiian/Pacific Islander only	3	100%	3	75%	3	75%	3	75%	2	50%	2	59%	2	100%
Multiple Race	33	64%	37	67%	41	73%	37	77%	32	58%	30	73%	39	70%
<b>Ethnicity</b>														
Hispanic or Latino	308	90%	326	92%	306	88%	296	90%	262	76%	249	73%	276	80%
Not Hispanic or Latino	872	85%	893	82%	942	88%	883	86%	721	70%	705	67%	799	75%
<b>Length of Services</b>														
0-6 months	46	74%	61	94%	54	84%	60	98%	40	70%	38	64%	41	72%
7-11 months	79	80%	79	76%	85	83%	77	85%	76	79%	70	71%	89	86%
1-2 years	243	86%	240	83%	263	90%	239	88%	198	70%	188	67%	219	75%
3-5 years	259	92%	255	87%	263	91%	244	88%	190	70%	185	67%	213	75%
5 years +	575	86%	597	84%	601	86%	572	86%	497	72%	485	70%	534	76%

2011 Consumer Survey Report

<b>Program</b>														
SMI	466	86%	486	83%	484	83%	455	82%	393	71%	384	68%	415	72%
Non-SMI	766	87%	789	85%	824	90%	782	90%	641	72%	617	70%	717	79%

# ATTACHMENT-E

**2011 Adult Line Item**

**2011 Adult Consumer Survey, Statewide Percent of Positive Response by Line Item**

(Line specific numbers are based on actual valid survey returns. Domain percentages are based on weighted scores.)

Survey Item	Number	Percent
<b>General Satisfaction:</b>	<b>1238</b>	<b>86%</b>
1. I like the services that I received here.	1336	89%
2. If I had other choices, I would still get services from this agency.	1217	82%
3. I would recommend this agency to a friend or family member.	1315	88%
<b>Service Access:</b>	<b>1280</b>	<b>84%</b>
4. The location of services was convenient (parking, public transportation, distance, etc.)	1234	81%
5. Staff were willing to see me as often as I felt it was necessary.	1295	87%
6. Staff returned my call in 24 hours.	1145	79%
7. Services were available at times that were good for me.	1290	86%
8. I was able to get all the services I thought I needed.	1220	82%
9. I was able to see a psychiatrist when I wanted to.	1060	74%
<b>Participation in Treatment Planning</b>	<b>1242</b>	<b>87%</b>
11. I felt comfortable asking questions about my treatment and medication.	1327	89%
17. I, not staff, decided my treatment goals.	1180	81%
<b>Service Quality and Appropriateness</b>	<b>1313</b>	<b>88%</b>
10. Staff here believe that I can grow, change and recover.	1287	85%
12. I feel free to complain.	1252	84%
13. I was given information about my rights.	1372	91%
14. Staff encouraged me to take responsibility for how I live my life.	1259	86%
15. Staff helped me to understand what side effects to watch out for.	1175	80%
16. Staff respected my wishes about who is and who is not to be given information about my treatment..	1323	91%
18. Staff were sensitive to my cultural background (For example: values, traditions, beliefs, race, language, etc.)	1217	86%
19. Staff helped me obtain the information I needed so that I could take charge of managing my illness.	1223	84%
20. I was encouraged to use consumer-run programs (support groups, drop-in centers, crisis phone line, etc.)	1151	81%
<b>Outcomes</b>	<b>1039</b>	<b>72%</b>
21. I deal more effectively with daily problems.	1178	80%
22. I am better able to control my life.	1117	76%
23. I am better able to deal with crisis.	1084	73%
24. I am getting along better with my family.	1029	71%
25. I do better in social situations.	982	67%
26. I do better in school and/or work	698	61%
27. My housing situation has improved	835	62%
28. My symptoms are not bothering me as much.	925	64%

<b>Improved Functioning</b>	<b>1006</b>	<b>69%</b>
28. My symptoms are not bothering me as much.	925	64%
29. I do things that are more meaningful to me.	1062	72%
30. I am better able to take care of my needs.	1099	75%
31. I am better able to handle things when they go wrong.	1000	68%
32. I am better able to do things that I want to do.	1041	71%
<b>Social Connectedness</b>	<b>1137</b>	<b>69%</b>
33. I am happy with the friendships I have.	1079	74%
34. I have people with whom I can do enjoyable things.	1112	76%
35. I feel I belong in my community.	900	62%
36. In a crisis, I would have the support I need from family or friends.	1157	80%

**ATTACHMENT-F**

**2011 YSS-F Demographics**  
**2011 YSS-F, Percent of Positive Response by Domain and Subgroup**

Subgroup	General Satisfaction		Service Access		Cultural Competency		Participation in Treatment Planning		Outcomes		Improved Functioning		Social Connectedness	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
<b>Gender</b>														
Male	677	80%	709	85%	758	96%	789	93%	529	64%	544	66%	732	89%
Female	393	87%	404	89%	409	97%	425	96%	287	64%	302	68%	389	89%
<b>Age Group</b>														
0-4	78	92%	83	98%	78	99%	80	94%	56	69%	58	71%	8	93%
5-12	612	83%	633	87%	662	97%	706	95%	492	68%	502	69%	639	90%
13-17	387	80%	401	83%	434	95%	436	92%	276	58%	294	62%	409	88%
<b>Race</b>														
White only	697	83%	742	88%	773	98%	787	94%	507	62%	525	64%	714	88%
African American only	88	77%	87	76%	100	95%	102	91%	78	71%	83	76%	98	87%
Asian only	7	88%	7	88%	7	88%	8	100%	6	86%	6	86%	7	100%
Am Indian/Al Native only	34	87%	31	80%	38	100%	34	90%	27	69%	28	72%	37	97%
Nat Hawaiian/Pacific Islander only	10	100%	10	100%	10	100%	10	100%	9	90%	9	90%	9	100%
Multiple Race	72	77%	82	83%	74	85%	92	99%	54	56%	58	60%	86	94%
<b>Ethnicity</b>														
Hispanic or Latino	398	87%	395	88%	418	96%	428	94%	315	71%	327	73%	411	91%
Not Hispanic or Latino	655	80%	697	85%	731	96%	768	94%	494	61%	512	64%	689	88%
<b>Length of Services</b>														
0-6 months	92	81%	102	87%	105	96%	107	93%	61	54%	64	57%	92	86%
7-11 months	126	83%	132	90%	149	100%	135	89%	98	67%	103	71%	137	94%
1-2 years	387	86%	414	91%	411	97%	437	97%	312	72%	322	74%	412	94%
3-5 years	272	84%	275	85%	290	96%	312	96%	203	62%	213	65%	283	90%
5 years +	145	73%	151	77%	165	92%	173	87%	115	59%	117	60%	151	77%
<b>CFT</b>														
Yes	752	83%	786	88%	833	97%	850	95%	573	65%	593	68%	787	91%
No	251	78%	254	78%	269	95%	299	91%	198	62%	206	64%	268	85%

# **ATTACHMENT-G**

**2011 YSS-F Line Item**

**2011 YSSF, Statewide Percent of Positive Response by Line Item**

(Line specific numbers are based on actual valid survey returns. Domain percentages are based on weighted scores.)

Survey Item	Number	Percent
<b>General Satisfaction:</b>	<b>1078</b>	<b>82%</b>
1. Overall, I am satisfied with the services my child received.	1120	85%
4. The people helping my child stuck with us no matter what.	1041	82%
5. I felt my child had someone to talk to when he/she was troubled.	963	78%
7. The services my child and/or family received were right for us.	1081	83%
10. My family got the help we wanted for my child.	1036	80%
11. My family got as much help as we needed for my child.	936	74%
<b>Service Access</b>	<b>1117</b>	<b>86%</b>
8. The location of services was convenient for us.	1055	81%
9. Services were available at times that were convenient for us.	1084	83%
<b>Participation in Treatment Planning</b>	<b>1222</b>	<b>94%</b>
2. I helped to choose my child's services.	1098	87%
3. I helped to choose my child's treatment goals.	1182	91%
6. I participated in my child's treatment.	1227	94%
<b>Cultural Sensitivity</b>	<b>1174</b>	<b>96%</b>
12. Staff treated me with respect.	1236	95%
13. Staff respected my family's religious/spiritual beliefs.	1068	91%
14. Staff spoke with me in a way that I understood.	1242	95%
15. Staff were sensitive to my cultural/ethnic background.	1091	92%
<b>Outcomes</b>	<b>824</b>	<b>65%</b>
16. My child is better at handling daily life.	879	68%
17. My child gets along better with family members.	804	64%
18. My child gets along better with friends and other people.	866	68%
19. My child is doing better in school and/or work.	865	69%
20. My child is better able to cope when things go wrong.	752	59%
21. I am satisfied with our family life right now.	769	60%
22. My child is better able to do things he or she wants to do.	817	64%
<b>Improved Functioning</b>	<b>854</b>	<b>67%</b>
16. My child is better at handling daily life.	879	68%
17. My child gets along better with family members.	804	64%
18. My child gets along better with friends and other people.	866	68%
19. My child is doing better in school and/or work.	865	69%
20. My child is better able to cope when things go wrong.	752	59%
22. My child is better able to do things he or she wants to do.	817	64%
<b>Social Connectedness</b>	<b>1125</b>	<b>89%</b>
23. I know people who will listen and understand me when I need to talk.	1082	85%
24. I have people that I am comfortable talking with about my child's problems.	1111	88%
25. In a crisis, I would have the support I need from family or friends.	1054	83%
26. I have people with whom I can do enjoyable things.	1090	87%

# ATTACHMENT-H

**List of Acronyms**  
**2011 Consumer Survey Report**

<b>Acronyms</b>	<b>Description</b>
ADHS/DBHS	Arizona Department of Health Services/Division of Behavioral Health Services
ASOC	Adult System of Care
CBHS	Cenpatico Behavioral Health Services
CFT	Child and Family Team
CPSA	Community Partnership of Southern Arizona
CSOC	Children’s System of Care
CSOCPR	Child System of Care Practice Review
CSR	Consumer Survey Report
GMH	General Mental Health
GSA	Geographical Service Area
MHSIP	Mental Health Statistics Improvement Program
MMWIA	Meet Me Where I Am
NARBHA	Northern Arizona Regional Behavioral Health Authority
NASMHPD	National Association of State Mental Health Program Directors
NOMs	National Outcomes Measures
NRI	National Research Institute
QM	Quality Management
RBHA	Regional Behavioral Health Authority
RSS	Recovery Support Specialist
SA	Substance Abuse
SAMSHA	Substance Abuse and Mental Health Services Administration
SMI	Serious Mental Illness
TBHA	Tribal Behavioral Health Authority
WSDSG	Western States Decision Support Group
YSS-F	Youth Services Survey for Families

**APPENDIX-1**  
**(See attached)**  
**Year 2011 Adult Consumer Survey**  
**(English and Spanish)**

**THIS SECTION MUST BE COMPLETED BY T/RBHA OR PROVIDER!**

Name of Service Agency: \_\_\_\_\_  
T/RBHA NAME: \_\_\_\_\_ Facility ID: \_\_\_\_\_  
Program/Fund Source: SMI  Non-SMI (GMH or SA)   
Client's Entitlement Status: TXIX  TXXI  Survey ID: \_\_\_\_\_  
Survey completed at: Home  Clinic  By Phone  Client enrolled in DDD: Yes \_\_\_\_\_ No \_\_\_\_\_

**YEAR 2011 ADULT CONSUMER SURVEY**

Please help us improve our program by completing this survey about the services you have received in the last six months. We are interested in your honest opinion. All responses will be treated as confidential. Any personal information will be excluded in the presentation of the survey results.

Your current and/or future services will not be affected if you decide not to participate in this survey.

If you have already taken this survey during the months of April or May 2011, you do not need to complete it again.

After you have completed the survey, please fold and drop it in the survey box before you leave the office today. Thank you.

**Use Pen or Pencil**

**Please fill in the bubbles completely with your answers to the following questions:**

**Information about the Person Receiving Services:**

Age: \_\_\_\_\_

Sex:  Male  Female

Ethnicity:  Hispanic or Latino  Not Hispanic or Latino

Please check all applicable race categories:

Race:  White  Black/African American  Asian  American Indian/Alaska Native  
 Native Hawaiian/Pacific Islander

How long have you been receiving mental health and/or substance abuse services? (from any provider)

0 - 6 months  7 - 11 months  1 - 2 years  3 - 5 years  more than 5 years

**About the Person Completing This Survey:**

I am the person directly receiving services.  Yes  No

If not, please check your relation to the person who is directly receiving services:

Parent/Guardian  Friend  Relative (Uncle, Aunt, Cousin, Grandparent, etc.)  Other

**Please continue to answer questions on the next page.**

PLEASE MARK YOUR ANSWERS BY FILLING IN THE BUBBLES COMPLETELY

In order to provide the best possible behavioral health services, we need to know what you think about the services you received DURING THE LAST 6 MONTHS, the people who provided it, and the results.

	Strongly Agree	Agree	I am Neutral	Disagree	Strongly Disagree	Not Applicable
1. I like the services that I received here.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. If I had other choices, I would still get services from this agency.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. I would recommend this agency to a friend or family member.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. The location of services was convenient (parking, public transportation, distance, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Staff were willing to see me as often as I felt it was necessary.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Staff returned my call in 24 hours.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Services were available at times that were good for me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. I was able to get all the services I thought I needed.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. I was able to see a psychiatrist when I wanted to.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. Staff here believe that I can grow, change and recover.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. I felt comfortable asking questions about my treatment and medication.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. I feel free to complain.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. I was given information about my rights.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. Staff encouraged me to take responsibility for how I live my life.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15. Staff helped me to understand what side effects I should watch out for.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16. Staff respected my wishes about who is and who is not to be given information about my treatment.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17. I, not staff, decided my treatment goals.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18. Staff were sensitive to my cultural background. (For example: values, traditions, beliefs, race, language, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
19. Staff helped me obtain the information I needed so that I could take charge of managing my illness.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
20. I was encouraged to use consumer-run programs (support groups, drop-in centers, crisis phone line, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

As a direct result of the services I received:

21. I deal more effectively with daily problems.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
22. I am better able to control my life.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
23. I am better able to deal with crisis.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
24. I am getting along better with my family.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
25. I do better in social situations.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
26. I do better in school and/or work.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
27. My housing situation has improved.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
28. My symptoms are not bothering me as much.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29. I do things that are more meaningful to me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
30. I am better able to take care of my needs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
31. I am better able to handle things when they go wrong.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
32. I am better able to do things that I want to do.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please continue to answer questions on the next page.

PLEASE MARK YOUR ANSWERS BY FILLING IN THE BUBBLES COMPLETELY

*For questions 33-36 please answer for relationships with persons other than your mental health provider(s)*

	Strongly Agree	Agree	I am Neutral	Disagree	Strongly Disagree	Not Applicable
33. I am happy with the friendships I have.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
34. I have people with whom I can do enjoyable things.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
35. I feel I belong in my community.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
36. In a crisis, I would have the support I need from family or friends.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**State-added Questions:**

37. In creating my service plan my cultural preferences were included. (For example: values, traditions, beliefs, race, language, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
38. Services were provided in a language I understood.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
39. In creating my service plan our tribal customs and beliefs were included. (For example: being asked to participate in traditional healing practices.) <i>If you do not participate in tribal customs, please mark Not Applicable.</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Please answer the following questions to let us know how you are doing.**

40. How long have you received mental health services from this provider?	<input type="radio"/> Less than a year (less than 12 months) (Continue to Question 41)
	<input type="radio"/> 1 year or more (at least 12 months) (Skip to Question 44)

***If you answered "Less than a year (less than 12 months)", please complete questions 41 - 43.***

41. Were you arrested since you began to receive mental health services?	<input type="radio"/> Yes	<input type="radio"/> No
42. Were you arrested during the 12 months prior to that?	<input type="radio"/> Yes	<input type="radio"/> No
43. Since you began to receive mental health services, have your encounters with police...	<input type="radio"/> been reduced (for example, I have not been arrested, hassled by police, taken by police to a shelter or crisis program)	
	<input type="radio"/> stayed the same	
	<input type="radio"/> increased	
	<input type="radio"/> not applicable (I had no police encounters this year or last year)	

***If you answered "1 year or more (at least 12 months)", please complete questions 44 - 46.***

44. Were you arrested during the last 12 months?	<input type="radio"/> Yes	<input type="radio"/> No
45. Were you arrested during the 12 months prior to that?	<input type="radio"/> Yes	<input type="radio"/> No
46. Over the last year, have your encounters with police...	<input type="radio"/> been reduced (for example, I have not been arrested, hassled by police, taken by police to a shelter or crisis program)	
	<input type="radio"/> stayed the same	
	<input type="radio"/> increased	
	<input type="radio"/> not applicable (I had no police encounters this year or last year)	

**Please continue to answer questions on the next page.**

**2011 Consumer Survey Report**

Please feel free to use the space provided below to comment on any of your answers. Also, if there are areas which were not covered by this questionnaire which you feel should have been, please write them in the comments section. Thank you for your time and cooperation in completing this questionnaire.

What have been some of the most helpful things about the services you received over the last 6 months?

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What would improve the services that you receive here?

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Please list any other comments you may want to share:

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**Thank you for completing this questionnaire.**

¡¡ESTA SECCIÓN DEBE SER COMPLETADA POR LA RBHA O EL PROVEEDOR!!

Nombre de Agencia de Servicio \_\_\_\_\_

NOMBRE de LA RBHA: \_\_\_\_\_ ID de la agencia o proveedor: \_\_\_\_\_

Fuente de Programa/Fondo: SMI  No - SMI (GMH o SA)

El Estado de Elegibilidad del Cliente: TXIX  TXXI  ID de la encuesta: \_\_\_\_\_

Encuesta tomada en: Casa  Clínica  Por teléfono  Cliente inscrito en DDD: Si \_\_\_\_\_ No \_\_\_\_\_

**ENCUESTA DE SERVICIOS PARA ADULTOS QUE RECIBIERON SERVICIOS DURANTE EL AÑO 2011**

Por favor ayúdenos a mejorar nuestro programa completando ésta revisión sobre los servicios que usted ha recibido en los últimos seis meses. Estamos interesados en su opinión honesta. Todas las respuestas serán tratadas como confidenciales. Cualquier información personal será excluida en la presentación de los resultados ésta encuesta.

Sus servicios actuales y/o futuros no se verán afectados si usted decide no participar en ésta encuesta.

Si usted ha tomado ya ésta encuesta en los meses de abril o mayo de 2011, no tiene que completarla otra vez.

Después de que usted haya finalizado, por favor doble la hoja y deposítela en la caja de encuestas, antes de usted salga de la oficina hoy. Gracias.

**Use pluma o lápiz**

**Por favor rellene las burbujas completamente con sus respuestas a las siguientes preguntas:**

**Información acerca de la persona que recibe los servicios:**

Edad: \_\_\_\_\_

Sexo:  Masculino  Femenino

Pertenencia étnica:  Hispano o Latino  No Hispano o Latino

**Por favor compruebe todas las categorías de raza aplicables**

Raza:  Blanco  Negro/Africano Americano  Asiático  
 Nativo Americano / Nativo de Alaska  Nativo de Hawai/Isleño del Pacífico

¿Por cuánto tiempo ha estado recibiendo servicios de salud mental y/o de abuso de sustancias?  
(de cualquier proveedor)

0 - 6 meses  7 - 11 meses  1 - 2 años  3 - 5 años  más de 5 años

**Sobre la persona que completa ésta encuesta:**

Soy la persona que directamente recibe servicios:  Sí  No

Si no, por favor marque la relación con la persona que recibe directamente servicios:

Padre/Guardián  Amigo  Pariente (Tío, Tía, Primo, Abuelo, etc.)  Otro

**Por favor siga contestando preguntas en la siguiente página.**

2011 Consumer Survey Report

**POR FAVOR MARQUE SUS RESPUESTAS RELLENANDO LAS BURBUJAS COMPLETAMENTE**

**A fin de proporcionar un mejor servicio en los cuidados de salud mental y de abuso de sustancias, tenemos que saber lo que usted piensa sobre los servicios que recibió DURANTE los 6 MESES PASADOS, la gente que lo proporcionó, y los resultados.**

	Muy de acuerdo	De acuerdo	Neutro	En Desacuerdo	Muy en desacuerdo	No Aplica
1. Me gustaron los servicios que recibí aquí.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Si yo tuviera otras opciones, yo todavía preferiría los servicios de esta agencia.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Yo recomendaría ésta agencia a un miembro de la familia o un amigo.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. La ubicación de los servicios fue conveniente (estacionamiento, transporte público, distancia, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. El personal quiso verme tan a menudo como sentí que era necesario.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. El personal devolvió mi llamada en 24 horas.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Los servicios estaban disponibles a las horas que eran convenientes para mí.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Recibí los servicios que pensé que necesitaba.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. Pude ver a un Psiquiatra cuando así lo solicité.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. El personal aquí cree que puedo crecer, cambiar y recuperarme.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. Me sentí cómodo haciendo preguntas acerca de mi tratamiento y medicación.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. Me siento libre de presentar mis inquietudes sobre los servicios.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. Me dieron la información sobre mis derechos.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. El personal me animó a tomar la responsabilidad de como vivo mi vida.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15. El personal me ayudó a entender acerca de los efectos secundarios sobre los que debo estar preparado.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16. El personal respetó mis deseos sobre a quién sí y a quien no deben dar información sobre mi tratamiento.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17. Yo, y no el personal, decidí las metas de mi tratamiento.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18. El personal fue respetuoso de mis raíces culturales/étnicas. (Por ejemplo: mis valores, tradiciones, creencias, raza, lenguaje, etc.).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
19. El personal me ayudó a obtener la información que necesité de modo que yo pudiera hacerme cargo de manejar mi enfermedad.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
20. Fui animado a usar programas manejados por consumidores (grupos de apoyo, centros de ayuda informal, línea telefónica de crisis, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Como un resultado directo de los servicios recibí:**

21. Manejo de forma más eficaz los problemas diarios.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
22. Soy más capaz de controlar mi vida.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
23. Soy más capaz de lidiar con las crisis.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
24. Me llevo mejor con los miembros de mi familia.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
25. Me desenvuelvo mejor en situaciones sociales.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
26. Tengo mejor desempeño en la escuela y/o trabajo.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
27. Mi situación de vivienda ha mejorado.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
28. Los síntomas no me molestan tanto como antes.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29. Hago cosas que son más significativas para mí.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
30. Soy más capaz de ocuparme de mis necesidades.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
31. Soy más capaz de manejar las cosas o situaciones cuando no van bien.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
32. Soy más capaz de hacer cosas que quiero hacer.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Por favor siga contestando preguntas en la siguiente página

**POR FAVOR MARQUE SUS RESPUESTAS RELLENANDO LAS BURBUJAS COMPLETAMENTE**

**Para las preguntas 33-36 por favor responda basado en las relaciones con personas diferentes de su proveedor (es) de salud mental.**

	Muy de acuerdo	De acuerdo	Neutro	En Desacuerdo	Muy en desacuerdo	No Aplica
33. Soy feliz con las amistades que tengo.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
34. Tengo a personas con quienes puedo hacer cosas agradables.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
35. Siento que pertenezco a mi comunidad.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
36. En una crisis, yo tendría el apoyo que necesito de familia o amigos.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Preguntas adicionales del estado:**

37. En la creación de mi plan de servicios, mis preferencias culturales fueron incluidas. (Por ejemplo; mis valores, tradiciones, creencias, raza, lenguaje, etc.).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
38. Los servicios me fueron proporcionados en un lenguaje que entendí.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
39. En la creación de mi plan de servicios las tradiciones y creencias de mi tribu fueron incluidas (Por ejemplo: me preguntaron si quería participar en sesiones de sanación tradicional). <i>Si usted no participa de las tradiciones tribales, por favor marque la opción "No aplica".</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Por favor conteste las siguientes preguntas para hacernos saber cómo se encuentra.**

40. ¿Durante cuánto tiempo ha recibido usted servicios de salud mental de éste proveedor?	<input type="radio"/> Menos de un año (menos de 12 meses) (Continué con la pregunta 41)
	<input type="radio"/> 1 año o más (al menos 12 meses) (Vaya a la pregunta 44)

**Si su respuesta es "menos de un año (menos de 12 meses)", por favor complete las preguntas 41-43.**

41. ¿Ha sido usted arrestado desde que comenzó a recibir servicios de salud mental?	<input type="radio"/> Sí	<input type="radio"/> No
42. ¿Ha sido usted arrestado durante los 12 meses anteriores a esto?	<input type="radio"/> Sí	<input type="radio"/> No
43. Desde que usted comenzó a recibir servicios de salud mental, ha tenido incidentes con la policía...	<input type="radio"/> han disminuido (por ejemplo, no he sido arrestado, molestado por la policía, enviado por la policía a un refugio o programa de crisis)	
	<input type="radio"/> han sido igual	
	<input type="radio"/> han aumentado	
	<input type="radio"/> no aplicable (yo no he tenido ningún incidente con la policía durante este año o el año pasado)	

**Si su respuesta es "1 año o más (al menos 12 meses)", por favor complete las preguntas 44 - 46.**

44. ¿Ha sido arrestado durante los 12 meses pasados?	<input type="radio"/> Sí	<input type="radio"/> No
45. ¿Ha sido arrestado durante los 12 meses anteriores a esto?	<input type="radio"/> Sí	<input type="radio"/> No
46. Durante el año pasado, sus incidentes con la policía ...	<input type="radio"/> han disminuido (por ejemplo, no he sido arrestado, molestado por policía, enviado por la policía a un refugio o programa de crisis)	
	<input type="radio"/> han sido igual	
	<input type="radio"/> han aumentado	
	<input type="radio"/> no aplicable (yo no he tenido ningún encuentro con la policía durante este año o el año pasado)	

**Por favor siga contestando preguntas en la siguiente página.**

**2011 Consumer Survey Report**

Por favor siéntase libre de usar el espacio proporcionado abajo para comentar sobre cualquiera de sus respuestas. También, si hay áreas que no fueron cubiertas por este cuestionario que usted siente que deberían haber sido incluidas, por favor escríbalas en la sección de comentarios. Gracias por su tiempo y cooperación en completar éste cuestionario.

¿Cuáles han sido algunas cosas más provechosas sobre los servicios que usted recibió durante los 6 meses pasados?

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¿Qué mejoraría los servicios que usted recibe aquí?

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Por favor escriba cualquier otro comentario que usted quiera compartir:

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**Gracias por completar este cuestionario.**

**APPENDIX-2**  
**(See attached)**  
**Year 2011 Youth Consumer Survey for Families**  
**(English and Spanish)**

**THIS SECTION MUST BE COMPLETED BY T/RBHA OR PROVIDER!**

Name of Service Agency: \_\_\_\_\_

T/RBHA NAME: \_\_\_\_\_ Facility ID: \_\_\_\_\_

Client's Entitlement Status: TXIX  TXXI  Survey ID: \_\_\_\_\_

Survey completed at: Home  Clinic  By Phone  Client enrolled in DDD: Yes \_\_\_\_\_ No \_\_\_\_\_

**YEAR 2011 YOUTH SERVICES SURVEY FOR FAMILIES**

Please help us improve our program by completing this survey about the services you have received in the last six months. We are interested in your honest opinion. All responses will be treated as confidential. Any personal information will be excluded in the presentation of the survey results.

Your child and family's current and/or future services will not be affected if you decide not to participate in this survey.

If you have already taken this survey in the months of April or May 2011, then you do not need to complete it again.

After you have completed the survey, please fold and drop it in the survey box before you leave the office today. Thank you.

**Use Pen or Pencil**

**Please fill in the bubbles completely with your answers to the following questions:**

**Information about the Person Receiving Services:**

Child's Age: \_\_\_\_\_

Child's Sex:  Male  Female

Child's Ethnicity:  Hispanic or Latino  Not Hispanic or Latino

Please check all applicable race categories:

Child's Race:  White  Black/African American  Asian  American Indian/Alaska Native  
 Native Hawaiian/Pacific Islander

How long has your child been receiving mental health and/or substance abuse services? (from this provider)

0 - 6 months  7 - 11 months  1 - 2 years  3 - 5 years  more than 5 years

Please check your relationship with the child:  Parent/Guardian  Friend  
 Relative (Uncle, Aunt, Cousin, Grandparent, etc.)  
 Other

Does your family have a Child and Family Team?  Yes  No

**Please continue to answer questions on the next page.  
PLEASE MARK YOUR ANSWERS BY FILLING IN THE BUBBLES COMPLETELY**

2011 Consumer Survey Report

Please help our agency make services better by answering some questions about the services your child received OVER THE LAST 6 MONTHS.	Strongly Agree	Agree	I am Neutral	Disagree	Strongly Disagree	Not Applicable
1. Overall, I am satisfied with the services my child received.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. I helped to choose my child's services.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. I helped to choose my child's treatment goals.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. The people helping my child stuck with us no matter what.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. I felt my child had someone to talk to when he/she was troubled.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. I participated in my child's treatment.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. The services my child and/or family received were right for us.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. The location of services was convenient for us.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. Services were available at times that were convenient for us.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. My family got the help we wanted for my child.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. My family got as much help as we needed for my child.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. Staff treated me with respect.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. Staff respected my family's religious/spiritual beliefs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. Staff spoke with me in a way that I understood.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15. Staff were sensitive to my cultural/ethnic background. (For example: values, traditions, beliefs, race, language, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**As a result of the services my child and/or family received:**

16. My child is better at handling daily life.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17. My child gets along better with family members.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18. My child gets along better with friends and other people.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
19. My child is doing better in school and/or work.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
20. My child is better able to cope when things go wrong.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
21. I am satisfied with our family life right now.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
22. My child is better able to do things he or she wants to do.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**As a result of the services my child and/or family received: please answer for relationships with persons other than your mental health provider(s).**

23. I know people who will listen and understand me when I need to talk.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
24. I have people that I am comfortable talking with about my child's problems.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
25. In a crisis, I would have the support I need from family or friends.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
26. I have people with whom I can do enjoyable things.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

27. What has been the most helpful thing about the services you and your child received over the last 6 months?

28. What would improve the services here? \_\_\_\_\_

Please continue to answer questions on the next page.

PLEASE MARK YOUR ANSWERS BY FILLING IN THE BUBBLES COMPLETELY

State-added Questions:	Strongly Agree	Agree	I am Neutral	Disagree	Strongly Disagree	Not Applicable
29. In creating my child's service plan our cultural preferences were included. (For example: values, traditions, beliefs, race, language, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
30. Services were provided in a language my child understood.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
31. In creating my child's service plan our tribal customs and beliefs were included. (For example: being asked to participate in traditional healing practices.) <i>If you do not participate in tribal customs, please mark Not Applicable.</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please answer the following questions to let us know how your child is doing.

32. Is your child currently living with you?	<input type="radio"/> Yes	<input type="radio"/> No
33. Has your child lived in any of the following places in the <b>last 6 months</b> ? (CHECK ALL THAT APPLY)		
<input type="radio"/> With one or both parents	<input type="radio"/> With another family member	<input type="radio"/> Foster home
<input type="radio"/> Therapeutic foster home	<input type="radio"/> Crisis shelter	<input type="radio"/> Homeless shelter
<input type="radio"/> Group home	<input type="radio"/> Residential treatment facility	<input type="radio"/> Hospital
<input type="radio"/> Local jail or detention facility	<input type="radio"/> State correctional facility	<input type="radio"/> Runaway/homeless/on the streets
34. In the last year, did your child see a medical doctor (or nurse) for a health check up or because he/she was sick? (Check one)	<input type="radio"/> Yes, in a clinic or office	
	<input type="radio"/> Yes, but only in a hospital emergency room	
	<input type="radio"/> No	
	<input type="radio"/> Do not remember	
35. Is your child on medication for emotional/behavioral problems?	<input type="radio"/> Yes	<input type="radio"/> No
36. If yes, did the doctor or nurse tell you and/or your child what side effects to watch for?	<input type="radio"/> Yes	<input type="radio"/> No
37. Is your child still getting services from this provider?	<input type="radio"/> Yes	<input type="radio"/> No
38. How long did your child receive services from this provider?	<input type="radio"/> Less than 1 month	
	<input type="radio"/> 1-5 Months	
	<input type="radio"/> 6 months to 1 year	
	<input type="radio"/> More than 1 year (skip to Question 45)	
39. Was your child arrested since beginning to receive mental health services?	<input type="radio"/> Yes	<input type="radio"/> No
40. Was your child arrested during the 12 months prior to that?	<input type="radio"/> Yes	<input type="radio"/> No
41. Since your child began to receive mental health services, have their encounters with the police...	<input type="radio"/> been reduced (for example, they have not been arrested, hassled by the police, taken by police to a shelter or crisis program)	
	<input type="radio"/> stayed the same	
	<input type="radio"/> increased	
	<input type="radio"/> not applicable (They had no police encounters this year or last year)	
42. Was your child expelled or suspended from school since beginning services?	<input type="radio"/> Yes	<input type="radio"/> No
43. Was your child expelled or suspended from school during the 12 months prior to that?	<input type="radio"/> Yes	<input type="radio"/> No

Please continue to answer questions on the next page.

PLEASE MARK YOUR ANSWERS BY FILLING IN THE BUBBLES COMPLETELY

44. Since starting to receive services, the number of days my child was in school is...	<input type="radio"/> greater	
	<input type="radio"/> about the same	
	<input type="radio"/> less	
	<input type="radio"/> does not apply (please select why this does not apply)	
	<input type="radio"/> child did not have a problem with attendance before starting services	
	<input type="radio"/> child is too young to be in school	
	<input type="radio"/> child was expelled from school	
	<input type="radio"/> child is home schooled	
	<input type="radio"/> child dropped out of school	
	<input type="radio"/> Other:	
45. Was your child arrested during the last 12 months?	<input type="radio"/> Yes	<input type="radio"/> No
46. Was your child arrested during the 12 months prior to that?	<input type="radio"/> Yes	<input type="radio"/> No
47. Over the past year, have your child's encounters with the police...	<input type="radio"/> been reduced (for example, they have not been arrested, hassled by the police, taken by police to a shelter or crisis program)	
	<input type="radio"/> stayed the same	
	<input type="radio"/> increased	
	<input type="radio"/> not applicable (They had no police encounters this year or last year)	
48. Was your child expelled or suspended from school during the last 12 months?	<input type="radio"/> Yes	<input type="radio"/> No
49. Was your child expelled or suspended from school during the 12 months prior to that?	<input type="radio"/> Yes	<input type="radio"/> No
50. Over the last year, the number of days my child was in school is...	<input type="radio"/> greater	
	<input type="radio"/> about the same	
	<input type="radio"/> less	
	<input type="radio"/> does not apply (please select why this does not apply)	
	<input type="radio"/> child did not have a problem with attendance before starting services	
	<input type="radio"/> child is too young to be in school	
	<input type="radio"/> child was expelled from school	
	<input type="radio"/> child is home schooled	
	<input type="radio"/> child dropped out of school	
<input type="radio"/> Other:		

Please continue to answer questions on the next page.



¡¡ESTA SECCIÓN DEBE SER COMPLETADA POR LA RBHA O EL PROVEEDOR!!

Nombre de Agencia de Servicio \_\_\_\_\_

NOMBRE de la RBHA: \_\_\_\_\_ ID de agencia o proveedor: \_\_\_\_\_

El Estado de Elegibilidad del Cliente: TXIX  TXXI  ID de la encuesta: \_\_\_\_\_

Encuesta tomada en : Casa  Clínica  Por teléfono  Cliente inscrito en DDD: Si \_\_\_\_\_ No \_\_\_\_\_

**ENCUESTA PARA FAMILIAS DE JÓVENES QUE RECIBIERON SERVICIOS DURANTE EL AÑO 2011**

**Por favor ayúdenos a mejorar nuestro programa completando ésta encuesta sobre los servicios que usted ha recibido en los últimos seis meses. Estamos interesados en su opinión honesta. Todas las respuestas serán tratadas como confidenciales. Cualquier información personal será excluida en la presentación de los resultados de ésta encuesta.**

Los servicios actuales y/o futuros de su hijo(a) o la familia no se verán afectados si usted decide no participar en esta encuesta.

Si usted ha tomado ya esta encuesta en los meses de abril o mayo de 2011, no tiene que completarla otra vez.

Después de que usted haya finalizado, por favor doble la hoja y deposítela en la caja de encuestas, antes de usted salga de la oficina hoy. Gracias.

**Use pluma o lápiz**

**Por favor rellene las burbujas completamente con sus respuestas a las preguntas siguientes:**

**Información acerca de la persona que recibe los servicios:**

La Edad del Niño: \_\_\_\_\_

El Sexo del Niño:  Masculino  Femenino

La Pertenencia étnica del Niño  Hispano o Latino  No Hispano o Latino

**Por favor compruebe todas las categorías de raza aplicables:**

La Raza del Niño:  Blanco  Negro/Africano Americano  Asiático  
 Nativo Americano / Nativo de Alaska  Nativo de Hawaii/Isleño del Pacífico

¿Por cuánto tiempo ha estado su hijo recibiendo servicios de salud mental y/o de abuso de sustancias? (De éste proveedor)

0 - 6 meses  7 - 11 meses  1 - 2 años  3 - 5 años  más de 5 años

Por favor indique su relación con el niño:

Padre/Guardián  Amigo  
 Pariente (Tío, Tía, Primo, Abuelo, etc.)  
 Otro

¿Tiene su familia un Equipo del Niño y la Familia?  Sí  No

**Por favor siga contestando preguntas en la siguiente página.**

**POR FAVOR MARQUE SUS RESPUESTAS RELLENANDO LAS BURBUJAS COMPLETAMENTE**

Por favor ayude a nuestra agencia a mejorar los servicios, contestando algunas preguntas sobre los servicios que su niño recibió DURANTE LOS ÚLTIMOS 6 MESES.

	Muy De acuerdo	De acuerdo	Neutro	En desacuerdo	Muy en desacuerdo	No Aplica
1. En general, estoy satisfecho con los servicios que mi hijo recibió.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Ayudé elegir los servicios de mi hijo.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Ayudé elegir los objetivos de tratamiento de mi hijo.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. La gente que ayuda a mi hijo nos apoyó sin falta.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Sentí que mi hijo tenía a alguien para dirigirse cuando estaba preocupado.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Participé en el tratamiento de mi hijo.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Los servicios que mi hijo y/o la familia recibieron fueron los apropiados para nosotros.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. La ubicación de los servicios fue conveniente para nosotros.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. Los servicios estuvieron disponibles en momentos en que fue conveniente para nosotros.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. Mi familia recibió la ayuda que estábamos buscando para mi hijo.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. Mi familia recibió tanta ayuda como necesitábamos para mi hijo.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. El personal me trató con respeto.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. El personal respetó las creencias religiosas/espirituales de mi familia.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. El personal habló conmigo de tal forma que entendí.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15. El personal fue respetuoso de mis raíces culturales/étnicas. (Por ejemplo: mis valores, tradiciones, creencias, raza, lenguaje, etc.).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Como resultado de los servicios que mi niño y/o la familia recibieron:**

16. Mi hijo maneja de forma más eficaz los problemas diarios.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17. Mi hijo se lleva mejor con los otros miembros de la familia.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18. Mi hijo se lleva mejor con los amigos y otras personas.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
19. A mi hijo le va mejor en la escuela y/o el trabajo.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
20. Mi hijo está más dispuesto a enfrentar las situaciones difíciles.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
21. Estoy satisfecho con nuestra vida familiar actualmente.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
22. Mi hijo es más capaz de hacer las cosas que quiere hacer.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Como resultado de los servicios que mi niño y/o la familia recibieron: por favor responda basado en las relaciones con personas diferentes de su proveedor(es) de salud mental.**

23. Conozco gente que escuchará y me entenderá cuando necesito hablar.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
24. Tengo personas con las que me siento cómodo hablando acerca del problema de mi hijo.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
25. En una crisis, yo tendría el apoyo que necesito de mi familia o amigos.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
26. Cuento con personas con quienes puedo hacer cosas agradables.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
27. ¿Cuál ha sido la cosa más provechosa sobre los servicios usted y su hijo recibieron durante los 6 meses pasados?						
28. ¿Qué mejoraría los servicios aquí?						

Por favor siga contestando preguntas en la siguiente página.

**POR FAVOR MARQUE SUS RESPUESTAS RELLENANDO LAS BURBUJAS COMPLETAMENTE**

	Muy De acuerdo	De acuerdo	Neutro	En desacuerdo	Muy en desacuerdo	No Aplica
<b>Pregunta adicional del estado:</b>						
29. En la creación del plan de servicios de mi hijo, nuestras preferencias culturales fueron incluidas. (Por ejemplo; mis valores, tradiciones, creencias, raza, lenguaje, etc.).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
30. Los servicios fueron proporcionados en un lenguaje que mi hijo entendiera.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
31. En la creación del plan de servicios de mi hijo nuestras tradiciones y creencias tribales fueron incluidas (Por ejemplo: se nos preguntó si queríamos participar en sesiones de sanación tradicional). <i>Si usted no participa de las tradiciones tribales, por favor marque la opción "No aplica".</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Por favor conteste las siguientes preguntas, para informarnos acerca de cómo va su hijo.**

32. ¿Vive actualmente su hijo con usted?	<input type="radio"/> Sí	<input type="radio"/> No
33. ¿Ha vivido su hijo en cualquiera de los siguientes sitios en los últimos 6 meses? (MARQUE TODAS LAS QUE APLICAN)		

- |   |   |   |
|---|---|---|
| <input type="radio"/> Con uno o ambos padres                  | <input type="radio"/> Con otro miembro de familia | <input type="radio"/> Familia adoptiva            |
| <input type="radio"/> Familia adoptiva terapéutica            | <input type="radio"/> Refugio de crisis           | <input type="radio"/> Refugio para los sin hogar  |
| <input type="radio"/> Casa de Grupo                           | <input type="radio"/> Centro de tratamiento       | <input type="radio"/> Hospital                    |
| <input type="radio"/> Cárcel local o instalación de detención | <input type="radio"/> Instalación correccional    | <input type="radio"/> Escapó/o vive en las calles |
| <input type="radio"/> Otro (describa) _____                   |   |   |

34. ¿Durante el año pasado, visitó su hijo un médico (o enfermera) para un control de salud o porque él/ella estaba enfermo? (Elija una de las opciones)	<input type="radio"/> Sí, en una clínica o oficina	
	<input type="radio"/> Sí, pero sólo en un cuarto de emergencia de hospital	
	<input type="radio"/> No	
	<input type="radio"/> No recuerdo	
35. ¿Está su hijo tomando medicamentos para problemas de conducta / emocionales?	<input type="radio"/> Sí	<input type="radio"/> No
36. ¿Si la respuesta es afirmativa, responda si el médico o la enfermera le explicaron con qué clase de efectos secundarios debe estar alerta?	<input type="radio"/> Sí	<input type="radio"/> No
37. ¿Todavía está su hijo recibiendo servicios de éste proveedor?	<input type="radio"/> Sí	<input type="radio"/> No
38. ¿Por cuánto tiempo recibió su hijo servicios de éste proveedor?	<input type="radio"/> Menos de 1 mes	
	<input type="radio"/> 1-5 Meses	
	<input type="radio"/> 6 Meses a 1 año	
	<input type="radio"/> Más de 1 año (vaya a la pregunta 45)	
39. ¿Ha sido su hijo arrestado desde que comenzó a recibir servicios de salud mental?	<input type="radio"/> Sí	<input type="radio"/> No
40. ¿Estuvo arrestado su hijo durante los 12 meses anteriores a esto?	<input type="radio"/> Sí	<input type="radio"/> No
41. Desde que su hijo comenzó a recibir servicios de salud mental, los incidentes con la policía...	<input type="radio"/> han disminuido (por ejemplo, no ha sido arrestado, molestado por la policía, llevado por la policía a un refugio o programa de crisis)	
	<input type="radio"/> han sido igual	
	<input type="radio"/> han aumentado	
	<input type="radio"/> no aplicable (no tuvo ningún incidente con la policía éste año o el año pasado)	
42. ¿Ha sido su hijo expulsado o suspendido de su escuela desde que comenzó a recibir los servicios?	<input type="radio"/> Sí	<input type="radio"/> No

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43. ¿Fue su hijo expulsado o suspendido de su escuela durante los 12 meses anteriores a éste?	<input type="radio"/> Sí	<input type="radio"/> No
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**Por favor siga contestando preguntas en la siguiente página.**

Por favor siga contestando preguntas en la siguiente página.

**POR FAVOR MARQUE SUS RESPUESTAS RELLENANDO LAS BURBUJAS COMPLETAMENTE**

<p>44. Desde que comenzó a recibir servicios, el número de días que mi hijo estuvo en la escuela fue...</p>	<input type="radio"/> mayor <input type="radio"/> el mismo <input type="radio"/> menos <input type="radio"/> no se aplica (por favor seleccione por qué éste no se aplica) <input type="radio"/> el niño no tenía un problema con la asistencia antes de los servicios iniciales <input type="radio"/> el niño es demasiado joven para estar en la escuela <input type="radio"/> el niño fue expulsado de la escuela <input type="radio"/> el niño está siendo enseñado en la casa <input type="radio"/> el niño abandonó la escuela <input type="radio"/> Otro	
<p>45. ¿Ha sido su hijo arrestado durante los 12 meses pasados?</p>	<input type="radio"/> Sí	<input type="radio"/> No
<p>46. ¿Estuvo arrestado su hijo durante los 12 meses antes a esto?</p>	<input type="radio"/> Sí	<input type="radio"/> No
<p>47. Durante el año pasado, los incidentes de su niño con la policía...</p>	<input type="radio"/> han disminuido (por ejemplo, no ha sido arrestado, molestado por la policía, llevado por la policía a un refugio o programa de crisis) <input type="radio"/> han sido igual <input type="radio"/> han aumentado <input type="radio"/> no aplicable ( no tuvo ningún encuentro con policía éste año o el año pasado)	
<p>48. ¿Fue expulsado su niño o suspendido de la escuela durante los 12 meses pasados?</p>	<input type="radio"/> Sí	<input type="radio"/> No
<p>49. ¿Fue expulsado su niño o suspendido de la escuela durante los 12 meses antes de esto?</p>	<input type="radio"/> Sí	<input type="radio"/> No
<p>50. Durante el año pasado, el número de días mi niño fue a la escuela era...</p>	<input type="radio"/> mayor <input type="radio"/> el mismo <input type="radio"/> menos <input type="radio"/> no se aplica (por favor seleccione por qué éste no se aplica) <input type="radio"/> El niño no tenía un problema con la asistencia antes de servicios iniciales <input type="radio"/> El niño es demasiado joven para estar en la escuela <input type="radio"/> El niño fue expulsado de la escuela <input type="radio"/> El niño está siendo enseñado en la casa <input type="radio"/> El niño abandonó la escuela <input type="radio"/> Otro	

Por favor siga contestando preguntas en la siguiente página.

