



**Arizona
Department of
Health Services**

**2013 Annual Consumer Survey
Report**

December 2013

Office of Performance Improvement

Arizona Department of Health Services
Division of Behavioral Health Services
Bureau of Quality and Integration

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YEAR 2013 ADULT CONSUMER SURVEY (ENGLISH AND SPANISH)

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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 satisfaction surveys 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

Within ADHS/DBHS, Consumer Survey results are:

- Reviewed by the ADHS/DBHS Quality Management (QM) Committee;
- Used by the QM Committee as a critical source of information to drive system improvements through RBHA contracts and QM Plans;
- Incorporated into the Annual Performance Improvement Reports to provide a comprehensive update on performance across contractual performance measures
- Used for certain Performance Incentive System calculations
- Tracked and trended by Network development to determine network capacity by measuring member perception of behavioral health services in relation to the established survey domains.
- Analyzed by the office of Information Management and the Office of Performance improvement to identify and improve on performance gabs in the various survey domains.

Survey outcomes are also:

- Disseminated to ADHS/DBHS stakeholders and consumers via the ADHS/DBHS website and Performance Dashboard;
- Submitted to these national organizations as part of federal grant requirements for use in national reporting and evaluation:
 - 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 2013 survey was conducted from April through May 2013. Adult and Youth survey results are summarized as follows.

Adult Consumer Survey results:

Statewide:

- *Service Accessibility, General satisfaction and Service Quality and Appropriateness* domains showed a statistically significant change from 2012 results.
- *Outcomes* domain scores dropped by two percentage points.
- *Improved Functioning and Social Connectedness* domains showed slight increases in 2013 but represented no statistically significant changes from the 2012 survey results.

RBHA Specific:

- Magellan (GSA 6) showed a statistically significant change in the *General Satisfaction and the Service Quality domains*.
- Cenpatico in GSA 2 showed a decrease in two domains: *Participation in treatment planning* by one percentage points and *Social Connectedness* by two percentage points
- CPSA (GSA 5) had a percentage drop in scores for the *Outcomes, Improve Functioning and Social Connectedness* domains

YSS-F Consumer Survey results:

Statewide:

- *Service Accessibility* showed a statistically significant decrease in 2013 when compared to the 2012 survey results ($P \leq 0.03$).
- *Improved Functioning* domain decreased by four percentage point.
- *Participation in Treatment*, increased by one percentage points.

RBHA Specific:

- Cenpatico in GSA 3 demonstrated a significant decrease of six percentage points in the *improved Functioning* domain from 2012 results.
- Cenpatico's GSA 4 demonstrated a significant twelve percent increase for the *Outcomes* domain with a statistically significant ($P \leq 0.005$). Cenpatico's GSA 4 showed percentage increases in five of its six domains.
- CPSA (GSA 5) experienced a five percent increase in *Cultural Sensitivity and Participation in Treatment planning* domains.

Regional Behavioral Health Authorities (RBHA) and Tribal Behavioral Health Authorities (TBHA) results from the 2013 Consumer Survey are presented separately to preserve the integrity of findings as two different sampling methodologies were used to get the survey sample. Refer to Section III-Survey Response Rates for details about the differences in the RBHA and TBHA surveys.

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 2012.

Within ADHS/DBHS, Consumer Survey results are:

- Reviewed by the ADHS/DBHS Quality Management (QM) Committee;
- Used by the QM Committee as a critical information source to drive system improvements through RBHA contracts and QM Plans;
- Incorporated into the Annual Performance Improvement Reports to provide a comprehensive update on performance across contractual performance measures
- Used for certain Performance Incentive System calculations.
- Tracked and trended by the office of Network Development to determine network capacity by measuring member perception of behavioral health services in relation to the established survey domains and,
- Analyzed by the office of Information Management and the Office of Performance improvement to identify and improve on performance gaps in the various survey domains.
- Used by the Office of Information Management to conduct correlation analyses between survey domains and performance indicators.

Survey outcomes are also:

- Disseminated to ADHS/DBHS stakeholders and consumers via the ADHS/DBHS website and Performance Dashboard;
- Submitted to these national organizations as part of federal grant requirements for use in national reporting and evaluation:
 - 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 Sample and the Response Rates

A total of 5,800 RBHA-enrolled consumers were included for the MHSIP Consumer Survey random sample pool; 4,001 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 82% for adults and 82% 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 2013 Tribal Behavioral Health Authority Health Survey Results.

TABLE-1: Survey Response Rate Based on Surveys Offered for Each RBHA/GSA - Consumer Survey 2013

RBHA/GSA	Surveys Offered (a)			Surveys Completed (b)			Response Rate (b/a)		
	Overall	Adult	Youth	Overall	Adult	Youth	Overall	Adult	Youth
GSA 1 - NARBHA	938	437	501	800	358	442	85%	82%	88%
GSA 2 - Cenpatico	519	298	221	421	247	174	81%	83%	79%
GSA 3 - Cenpatico	636	360	276	519	290	229	82%	81%	83%
GSA 4 - Cenpatico	667	296	371	542	242	300	81%	82%	81%
GSA 5 - CPSA	693	365	328	539	304	235	78%	83%	72%
GSA 6 - Magellan	548	254	294	462	210	252	84%	83%	86%
Statewide RBHA	4,001	2,010	1,991	3,283	1,651	1,632	82%	82%	82%

IV. Methodology and Survey Administration

Two survey populations (sampling frame) were identified for use in 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 43,263 adult and 34,032 youth RBHA-enrolled Title XIX/XXI consumers were eligible to participate in the 2013 survey. Please refer to Attachment B (2013 Consumer Survey Protocol) for details on sampling frame development, inclusion/exclusion criteria, survey instruments, and survey administration guidelines.

The ADHS/DBHS utilized a Likert Scale model to have respondents rate the domain questions of the Consumer Survey from strongly agree (numeric value of 5) to strongly disagree (numeric value of 1), and an option for Not Applicable (numeric value 0). Consumer perception was determined as positive for those domains where the question responses equaled 3.5 or above.

TABLE-2 and TABLE-3 show the number and percentage of sample surveys that were not included in the domain score. This is 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. It also occurs when 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
GSA 1 - NARBHA	2 (0.6%)	3 (0.8%)	9 (2.5%)	8 (2.2%)	14 (3.9%)	8 (2.2%)	6 (1.7%)
GSA 2 - Cenpatico	3 (1.2%)	5 (2.0%)	16 (6.5%)	9 (3.6%)	15 (6.1%)	12 (4.9%)	3 (1.2%)
GSA 3 - Cenpatico	0	1 (0.3%)	7 (2.4%)	3 (1.0%)	13 (4.5%)	8 (2.8%)	9 (3.1%)
GSA 4 - Cenpatico	1 (0.4%)	0	4 (1.7%)	3 (1.2%)	5 (2.1%)	3 (1.2%)	5 (2.1%)
GSA 5 - CPSA	1 (0.3%)	2 (0.7%)	20 (6.6%)	6 (2.0%)	23 (7.6%)	21 (6.9%)	21 (6.9%)
GSA 6 - Magellan	8 (3.7%)	9 (1.2%)	27 (12.3%)	13 (5.9%)	23 (10.5%)	18 (8.2%)	19 (8.7%)
Statewide RBHA	15 (0.9%)	20 (1.2%)	83 (5.0%)	42 (2.5%)	93 (5.6%)	70 (4.2%)	63 (3.8%)

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
GSA 1 - NARBHA	4 (0.9%)	7 (1.6%)	9 (2.1%)	26 (6.0%)	3 (0.7%)	3 (0.7%)	7 (1.6%)
GSA 2 - Cenpatico	1 (0.6%)	2 (1.1%)	1 (0.6%)	6 (3.4%)	1 (0.6%)	1 (0.6%)	5 (2.9%)
GSA 3 - Cenpatico	1 (0.4%)	4 (1.7%)	3 (1.3%)	5 (2.2%)	4 (1.7%)	3 (1.3%)	2 (0.9%)
GSA 4 - Cenpatico	2 (0.7%)	3 (1.0%)	5 (1.7%)	9 (3.0%)	8 (2.7%)	7 (2.3%)	4 (1.3%)
GSA 5 - CPSA	3 (1.3%)	10 (4.3%)	2 (0.9%)	12 (5.1%)	8 (3.4%)	8 (3.4%)	9 (3.8%)
GSA 6 - Magellan	6 (2.3%)	13 (5.1%)	9 (3.5%)	20 (7.8%)	10 (3.9%)	9 (3.5%)	9 (3.5%)
Statewide RBHA	17 (1.0%)	39 (2.4%)	29 (1.8%)	78 (4.8%)	34 (2.1%)	31 (1.9%)	36 (2.2%)

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:

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

The statewide survey results are weighted to adjust for the different population sizes of each Geographic Service Area (GSA). The adjusted rate eliminates confounding due to variations in the population sizes of the GSAs sampled. Please refer to Attachment C, 2013 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 obtain the samples for the 2013 Consumer Survey: one for the Regional Behavioral Health Authorities (RBHA) and another for the Tribal Behavioral Health Authorities (TBHA). The TBHA scores were not 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. Adult Survey Analysis and Results

Demographics

A total of 1,651 completed adult surveys were analyzed. The breakdown of the respondents is done by gender, age, ethnicity, race, length of enrollment in services, length of enrollment and behavioral health category. Please see Attachment D, 2013 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, 2013 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 2013 Adult Survey and compares them to previous surveys.

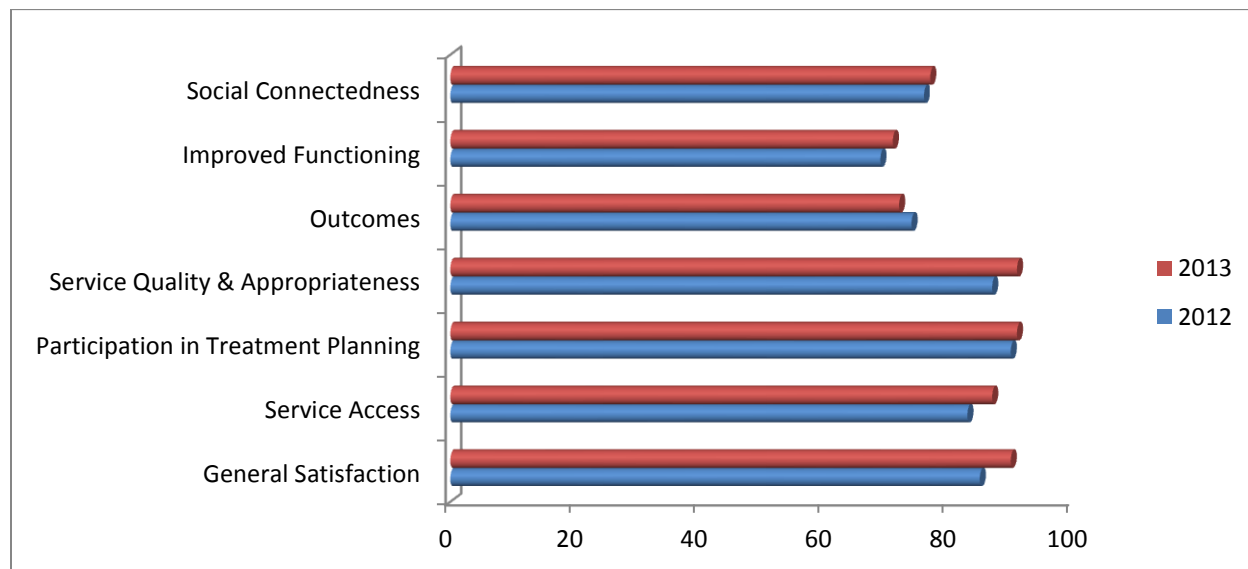
The t-test was used to compare survey results for 2012 and 2013 and determine whether there were any statistically significant differences between the mean of the samples of each domain. A P-value of 0.05 with 95% confidence interval is used to determine statistical significance. A score is therefore considered to be of statistical significance when it is less than or equals to 0.05. The initials: "ns" (Not Significant) is used to denote changes in the results between the current and previous year that are not statistically significant. The statewide analyses are based on weighted scores.

TABLE-4 Statewide RBHA Adult Consumer Survey Results by Domain for 2007 – 2013

Domain	2007 %	2008 % (P-value)	2009 % (P-value)	2010 % (P-value)	2011 % (P-value)	2012 % (P-value)	2013 % (P-value)
General Satisfaction	86	82 (ns)	84 (ns)	86 (ns)	86 (ns)	85 (ns)	90 (0.01)
Service Access	77	73 (ns)	78 (ns)	81 (ns)	84 (ns)	83 (ns)	87 (0.06)
Participation in Treatment Planning	79	89 (0.01)	82 (0.03)	92 (0.01)	87 (ns)	90 (0.01)	91 (ns)
Service Quality & Appropriateness	88	84 (ns)	89 (ns)	90 (ns)	88 (ns)	87 (ns)	91 (0.00)
Outcomes	74	68 (ns)	70 (ns)	75 (ns)	72 (ns)	74 (ns)	72 (ns)
Improved Functioning	66	68 (ns)	68 (ns)	71 (ns)	69 (ns)	69 (ns)	71 (ns)
Social Connectedness	65	68 (ns)	68 (ns)	79 (0.02)	76 (ns)	76 (ns)	77 (ns)

Color	Key
	statistically significant increase
	statistically significant decrease

Figure 1-The 2013 Statewide Adult Survey Results: Rate Change Analyses



■ **General Satisfaction:** Three questions were asked in the survey to ascertain *General Satisfaction* (Attachment E). The overall score for this domain is 90%, representing an average score based on three questions. This domain increased by five percent from the 2012 survey results (See fig 1). This also led to a statistically significant change.

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- **Service Access:** Six questions in the survey gathered information regarding *Access to Services* (Attachment E). The average score for this domain is 87%, indicating a four percent increase from 2012. (See fig 1), indicating a statistically significant change.
- **Participation in Treatment Planning:** Two survey questions were used to determine score for the *Participation in Treatment Planning* (Attachment E). The average score for this domain is 91%, indicating a slight one percent increase from the 2012 results (See fig 1).
- **Service Quality and Appropriateness:** Nine questions in the survey focused on *Service Quality and Appropriateness* (Attachment E). The average score for this domain is 91%. This domain showed a four percent increase (See fig 1), which is of statistical significant.
- **Outcomes:** Eight questions were asked to obtain consumers' perception on *Outcomes* (Attachment E). The overall score for this domain is 72%, indicating a decreased by two percent from the 2012 results (See fig 1).
- **Improved Functioning:** Five questions indicate respondents' impressions of *Improved Functioning* (Attachment E). The overall score for this domain is 71%, indicating a two percent increases in this domain. (See fig 1).
- **Social Connectedness:** Four questions were asked in the survey to ascertain *Social Connectedness* (Attachment E). This domain scored 77%, showing a one percent increase from the 2012 survey score. (See fig 1).

RBHA and GSA specific Adult survey findings are presented in tables 5 through 10 (page 11 and 12); the Tables include percentages and P-values for each domain by RBHA and GSA ranging from 2007 through 2013.

TABLE-5: GSA 1 - NARBHA Adult Consumer Survey Results by Domain for 2007 - 20123

Domain	2007 %	2008 % (P-value)	2009 % (P-value)	2010 % (P-value)	2011 % (P-value)	2012 % (P-value)	2013 % (P-value)
General Satisfaction	84	85 (ns)	84 (ns)	88 (ns)	90 (ns)	86 (ns)	89 (ns)
Service Access	73	80 (ns)	79 (ns)	83 (ns)	85 (ns)	86 (ns)	85 (ns)
Participation in Treatment Planning	78	92 (0.00)	80 (0.00)	92 (0.00)	91 (ns)	93 (ns)	93 (ns)
Service Quality & Appropriateness	87	88 (ns)	88 (ns)	90 (ns)	93 (ns)	92 (ns)	94 (ns)
Outcomes	74	71 (ns)	64 (ns)	72 (ns)	76 (ns)	72 (ns)	71 (ns)
Improved Functioning	63	68 (ns)	63 (ns)	71 (ns)	74 (ns)	69 (ns)	71 (ns)
-Social Connectedness	61	65 (ns)	68 (ns)	78 (0.03)	80 (ns)	78 (ns)	80 (ns)

TABLE-6: GSA 2 – Cenpatico Adult Consumer Survey Results by Domain for 2007 - 2013

Domain	2007 %	2008 % (P-value)	2009 % (P-value)	2010 % (P-value)	2011 % (P-value)	2012 % (P-value)	2013 % (P-value)
General Satisfaction	87	84 (ns)	86 (ns)	91 (ns)	89 (ns)	88 (ns)	91 (ns)
Service Access	80	82 (ns)	81 (ns)	90 (0.02)	88 (ns)	83 (ns)	88 (ns)
Participation in Treatment Planning	79	86 (ns)	82 (ns)	93 (0.00)	91 (ns)	92 (ns)	91 (ns)
Service Quality & Appropriateness	87	88 (ns)	89 (ns)	92 (ns)	90 (ns)	91 (ns)	91 (ns)
Outcomes	78	71 (ns)	71 (ns)	81 (0.03)	82 (ns)	69 (0.00)	73 (ns)
Improved Functioning	73	75 (ns)	67 (ns)	75 (ns)	77 (ns)	70 (0.03)	71 (ns)
Social Connectedness	74	75 (ns)	71 (ns)	83 (0.01)	83 (ns)	80 (ns)	78 (ns)

TABLE-7: GSA 3 - Cenpatico Adult Consumer Survey Results by Domain for 2007 - 2013

Domain	2007 %	2008 % (P-value)	2009 % (P-value)	2010 % (P-value)	2011 % (P-value)	2012 % (P-value)	2013 % (P-value)
General Satisfaction	90	82 (0.01)	83 (ns)	86 (ns)	86 (ns)	89 (ns)	88 (ns)
Service Access	83	77 (ns)	79 (ns)	84 (ns)	86 (ns)	91 (ns)	88 (ns)
Participation in Treatment Planning	82	87 (ns)	79 (0.02)	88 (0.03)	91 (ns)	94 (ns)	93 (ns)
Service Quality & Appropriateness	89	86 (ns)	88 (ns)	88 (ns)	88 (ns)	93 (ns)	92 (ns)
Outcomes	79	68 (0.01)	71 (ns)	77 (ns)	75 (ns)	81 (ns)	79 (ns)
Improved Functioning	72	73 (ns)	71 (ns)	72 (ns)	73 (ns)	78 (ns)	75 (ns)
Social Connectedness	71	72 (ns)	71 (ns)	80 (0.05)	81 (ns)	88 (ns)	79 (0.005)

Color	Key
	statistically significant increase
	statistically significant decrease

TABLE-8: GSA 4 - Cenpatico Adult Consumer Survey Results by Domain for 2007 - 2013

Domain	2007 %	2008 % (P-value)	2009 % (P-value)	2010 % (P-value)	2011 % (P-value)	2012 % (P-value)	2013 % (P-value)
General Satisfaction	87	87 (ns)	86 (ns)	87 (ns)	91 (ns)	93 (ns)	91 (ns)
Service Access	86	83 (ns)	83 (ns)	87 (ns)	89 (ns)	93 (ns)	93 (ns)
Participation in Treatment Planning	81	92 (0.01)	84 (0.00)	92 (0.03)	95 (ns)	94 (ns)	92 (ns)
Service Quality & Appropriateness	91	90 (ns)	89 (ns)	90 (ns)	93 (ns)	95 (ns)	95 (ns)
Outcomes	78	73 (ns)	70 (ns)	75 (ns)	76 (ns)	82 (ns)	76 (ns)
Improved Functioning	76	67 (0.04)	64 (ns)	73 (ns)	70 (ns)	76 (ns)	70 (ns)
Social Connectedness	73	67 (ns)	66 (ns)	77 (0.02)	79 (ns)	81 (ns)	82 (ns)

TABLE-9: GSA 5 - CPSA Adult Consumer Survey Results by Domain for 2007 – 2013

Domain	2007 %	2008 % (P-value)	2009 % (P-value)	2010 % (P-value)	2011 % (P-value)	2012 % (P-value)	2013 % (P-value)
General Satisfaction	85	83 (ns)	78 (ns)	87 (0.03)	89 (ns)	87 (ns)	87 (ns)
Service Access	78	67 (0.01)	69 (ns)	79 (0.03)	85 (ns)	78 (0.02)	79 (ns)
Participation in Treatment Planning	78	91 (0.00)	78 (0.00)	92 (0.03)	92 (ns)	89 (ns)	89 (ns)
Service Quality & Appropriateness	89	80 (0.00)	87 (ns)	90 (ns)	91 (ns)	85 (0.02)	87 (ns)
Outcomes	70	66 (ns)	68 (ns)	69 (ns)	75 (ns)	75 (ns)	71 (ns)
Improved Functioning	64	64 (ns)	65 (ns)	68 (ns)	72 (ns)	70 (ns)	68 (ns)
Social Connectedness	64	62 (ns)	65 (ns)	78 (0.01)	76 (ns)	75 (ns)	74 (ns)

**TABLE-10: GSA 6 – Value Options in 2007 and Magellan 2008 - 2013
Adult Consumer Survey Results by Domain**

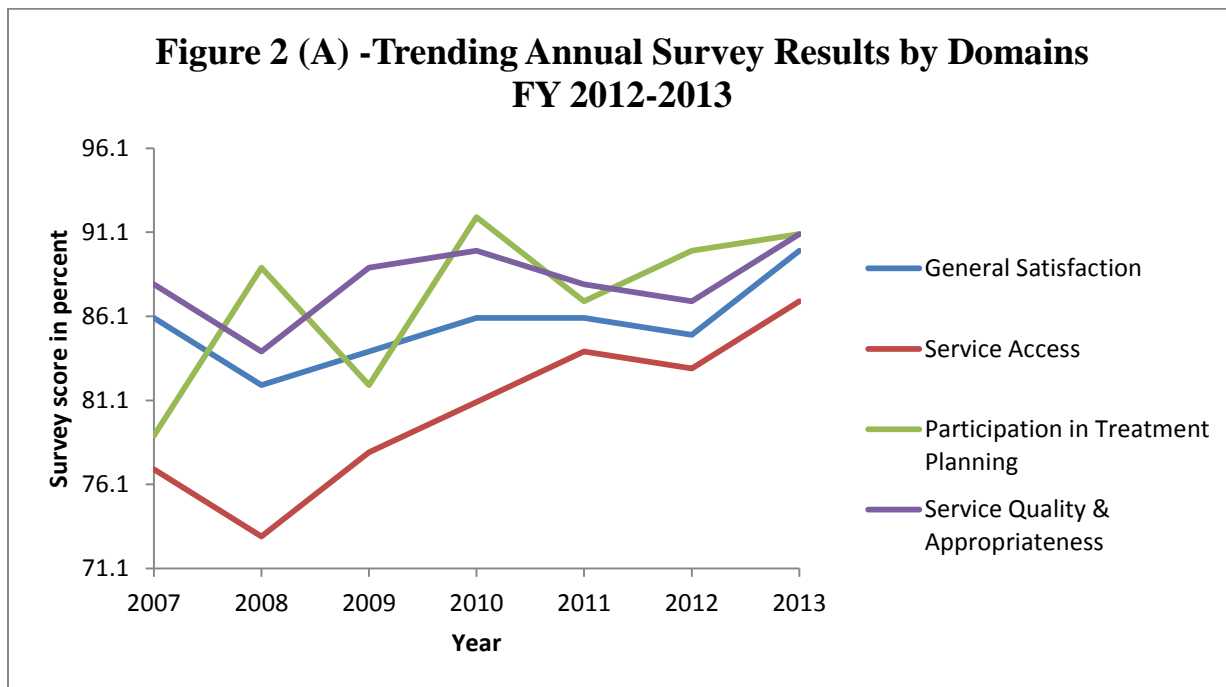
Domain	2007 %	2008 % (P- value)	2009 % (P- value)	2010 % (P- value)	2011 % (P- value)	2012 % (P- value)	2013 % P- value)
General Satisfaction	87	80 (0.04)	86 (ns)	85 (ns)	83 (ns)	83 (ns)	92 (0.003)
Service Access	83	71 (0.00)	82 (0.02)	79 (ns)	83 (ns)	85 (ns)	89 (ns)
Participation in Treatment Planning	83	87 (ns)	85 (ns)	92 (0.05)	82 (0.00)	89 (0.04)	91 (ns)
Service Quality & Appropriateness	90	83 (0.02)	90 (ns)	90 (ns)	84 (0.05)	84 (ns)	91 (0.021)
Outcomes	77	68 (0.03)	73 (ns)	77 (ns)	68 (0.03)	72 (ns)	71 (ns)
Improved Functioning	67	68 (ns)	71 (ns)	72 (ns)	65 (ns)	65 (ns)	72 (ns)
Social Connectedness	67	69 (ns)	69 (ns)	79 (0.03)	74 (ns)	74 (ns)	77 (ns)

Color	Key
	statistically significant increase
	statistically significant decrease

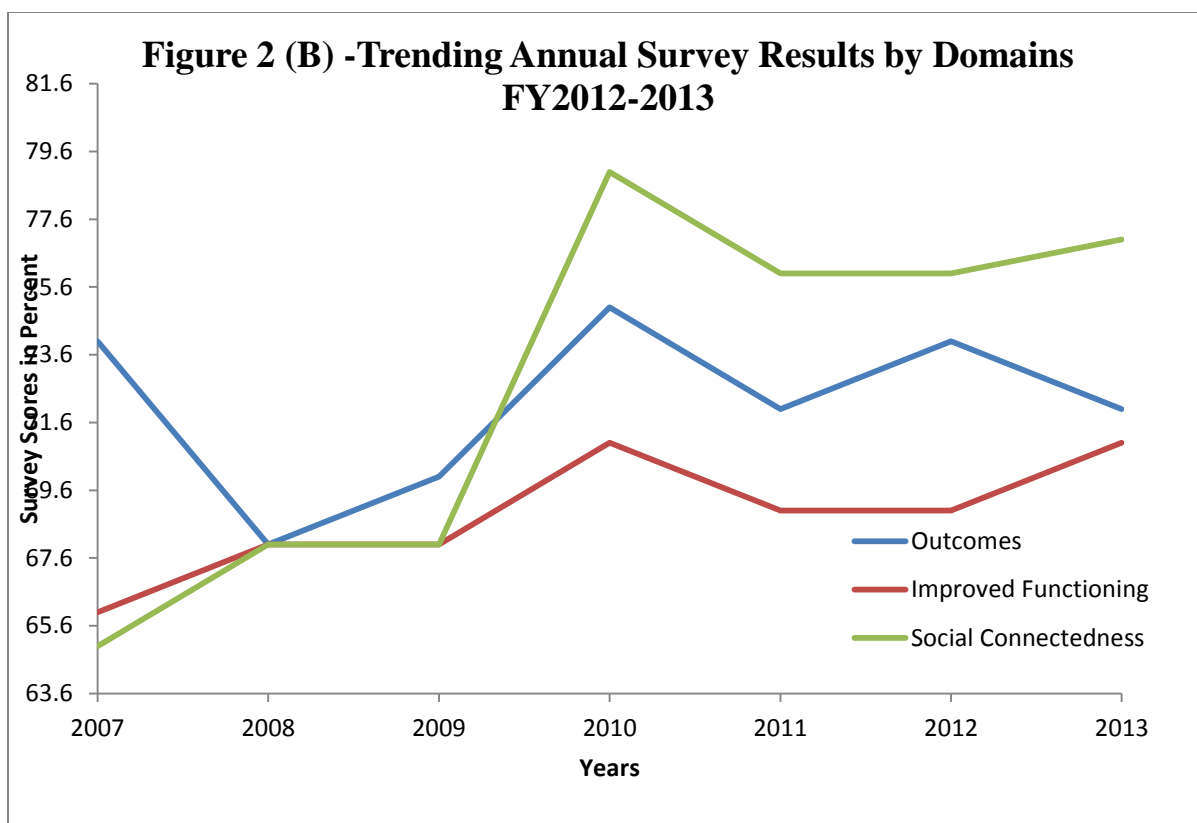
Summary of the 2013 Adult Survey Results:

Statewide:

- The domains with the highest scores in 2013 for the adult population in the 2013 survey results are: *General Satisfaction, Service Access and Service Quality and appropriateness.*
- *General Satisfaction* domain improved by five percent representing a statistically significant score with a P-value of 0.01 when compared to the 2012 results.
- *Service Quality and Appropriateness* increased by four percent from the 2012 score, indicating a statistical significance with a P-value of 0.21 when compared to the 2012 results.
- *Service Access* also showed an increase of four percent from the 2012 results. This was however not statistically significant.
- *Outcomes* domain showed a slight decrease by two percent.
- *Social Connectedness* and *Improved Functioning* domains both showed a slight increase by one and two percent respectively from the 2012 survey results.



Domains	2007	2008	2009	2010	2011	2012	2013
General Satisfaction	86%	82%	84%	86%	86%	85%	90%
Service Access	77%	73%	78%	81%	84%	83%	87%
Participation in Treatment Planning	79%	89%	82%	92%	87%	90%	91%
Service Quality & Appropriateness	88%	84%	89%	90%	88%	87%	91%



Domains	2007	2008	2009	2010	2011	2012	2013
Outcomes	74%	68%	70%	75%	72%	74%	72%
Improved Functioning	66%	68%	68%	71%	69%	69%	71%
Social Connectedness	65%	68%	68%	79%	76%	76%	77%

RBHA Specific:

- Magellan (GSA 6) showed a statistically significant increase in two domains: *General Satisfaction* ($P \leq 0.003$), and *Service Quality* ($P \leq 0.02$), which may be attributed to Magellan’s initiatives during FY2012.
- Cenpatico (GSA 3) showed statistically significant change in the Social Connectedness domain ($P \leq 0.005$)

VIII. RBHA Specific Adult Initiatives

Cenpatico and CPSA submitted to ADHS/DBHS some initiatives for the adult population to address deficiencies identified in their Consumer Survey report:

Cenpatico recognized the statistically significant decreases in *Outcomes* and *Functioning* domains for GSA 2 in the 2012 survey and reported actions planned to address these areas.

- Cenpatico developed a Performance Improvement Plan (PIP) in December 2012 that included the collection of a quarterly satisfaction survey to measure its consumer satisfaction with providers in each GSA.
- Cenpatico will maintain this practice, and plans to enhance the survey in January 2013 with particular attention to these domains.
- Feedback from the surveys will be shared with Cenpatico's QM Committee and its provider network each quarter.
- After two quarters of collecting results from the new 2013 survey, Cenpatico will assess each of its geographic areas for the need of targeted interventions where the need for improvement is indicated.

ADHS/DBHS requires Cenpatico to regularly report updates on these initiatives to ensure there is a positive impact and performance improvement. ADHS/DBHS will meet and discuss with Cenpatico about trends in survey results.

CPSA acknowledged the need for improvements specifically in the *Service Access* and *Service Quality & Appropriateness* domains. Listed below are steps CPSA is implementing to improve and meet the needs of consumers.

- CPSA continues to maintain frequent communication with members to ensure coordination of, and access to, behavioral health services among Comprehensive Service Providers and other community resources.
- CPSA maintains an Audio Visual Library on the website that includes a comprehensive overview of member-centered educational materials intended to educate and empower members. CPSA will continue to improve its website to be more inclusive of information and training opportunities for members and families.
- CPSA shares these results with all Comprehensive Service Providers (CSP) and expects implementation of improvements in their systems to meet and exceed the needs of members.
- CPSA QM staff continues to audit comprehensive Service Provider medical charts and provide real-time feedback to Comprehensive Service Provider staff on key MHSIP indicators.
- CPSA Compliance Committee is working on issues around system-wide sub-contract tracking systems and any specific compliance issues that the CPSA Comprehensive Service Provider Team cannot resolve.
- CPSA continues to involve peers in the support of members through the Recovery Support Initiative and the development of Recovery Support Centers established within the CSPs.
- CPSA implemented a pilot program utilizing the Outcomes Rating Scale and the Session Rating Scale in order to elicit ongoing member feedback to improve treatment or service outcomes.

IX. YSS-F Survey Analysis and Results

Demographics

A total of 1,991 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 F2013 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, 2013 YSS-F Line Item). Table-11 demonstrates the results of the 2013 YSS-F Survey and compares them to the 2012 survey results.

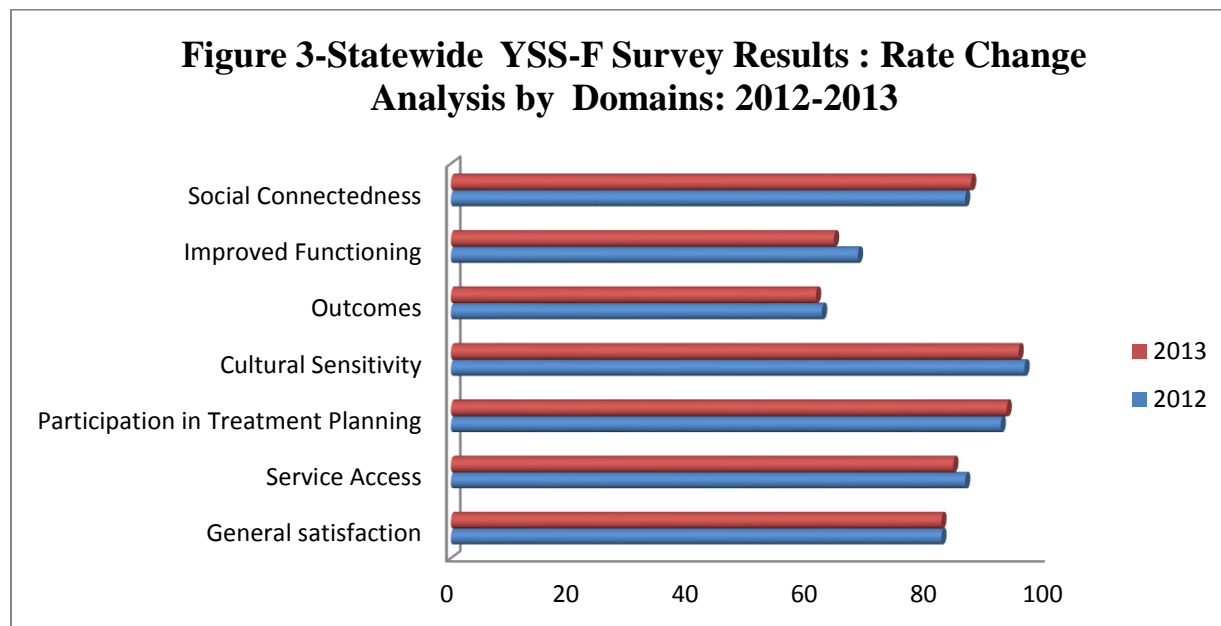
The t-test analysis was used to compare survey results for 2012 and 2013 to determine if there were any statistically significant differences between each domain’s average scores. A P-value 0.05 with 95% confidence interval significance was used to determine statistical significance: if the p-value is less than or equal to 0.05, the result will be considered statistically significant and if it is more than 0.05, it will be considered not statistically significant. The abbreviation “ns” is used for “not significant” to denote no statistically significant change from the previous year. The statewide analyses are based on weighted scores.

TABLE-11: Statewide Youth Consumer YSS-F Survey Results by Domain for 2007 – 2013

Domain	2007 %	2008 % (P-value)	2009 % (P-value)	2010 % (P-value)	2011 % (P-value)	2012 % (P-value)	2013 % (P-value)
General Satisfaction	78	77 (ns)	80 (ns)	85 (ns)	82 (ns)	82 (ns)	82 (ns)
Service Access	78	73 (ns)	76 (ns)	83 (ns)	86 (ns)	86 (ns)	84 (0.03)
Participation in Treatment Planning	90	87 (ns)	89 (ns)	92 (ns)	94 (ns)	92 (0.02)	93 (ns)
Cultural Sensitivity	92	90 (ns)	90 (ns)	96 (0.05)	96 (ns)	96 (ns)	95 (ns)
Outcomes	58	60 (ns)	68 (ns)	69 (ns)	65 (ns)	62 (0.00)	61 (ns)
Improved Functioning	61	58 (ns)	66 (ns)	71 (ns)	67 (ns)	68 (ns)	64 (ns)
Social Connectedness	82	79 (ns)	83 (ns)	88 (ns)	89 (ns)	86 (0.03)	87 (ns)

Color	Key
	statistically significant increase
	statistically significant decrease

The 2013 statewide YSS-F Survey Results:



Domains	2012	2013
General satisfaction	82%	82%
Service Access	86%	84%
Participation in Treatment Planning	92%	93%
Cultural Sensitivity	96%	95%
Outcomes	62%	61%
Improved Functioning	68%	64%
Social Connectedness	86%	87%

- **General Satisfaction:** Six questions were asked in the survey to ascertain *General Satisfaction* (Attachment G). The overall score for this domain is 82%. There was no change in this domain between the 2012 and 2013 survey results.
- **Service Access:** Two questions in the survey gathered information regarding *Access to Services* (Attachment G). The score for this domain is 84%, indicating a 2% drop from the 2012 survey results.
- **Participation in Treatment Planning:** The survey comprised three questions to indicate *Participation in Treatment Planning* (see Attachment G). The score for this domain is 93%, up one percent from 2012 results. The increase was however not statistically significant.
- **Cultural Sensitivity:** Four questions in the survey focused on *Cultural Sensitivity* (Attachment G). The average score for this domain is 95%, indicating a decrease by 1% from the 2012 results.

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- **Outcomes:** Eight questions were asked to get consumers' perception on *Outcomes* (Attachment G). The average score for this domain is 61% which is a decline by one percent from 2012.
- **Improved Functioning:** Six questions indicate respondents' impressions of *Improved Functioning* (Attachment G). The average score for this domain is 64%, demonstrating a four percent decrease from 2012m results
- **Social Connectedness:** Four questions were asked in the survey to ascertain *Social Connectedness* (see Attachment G). This domain scored 87%, indicating one percent increase from 2012.

RBHA and GSA specific YSS- F survey findings are presented in tables 12 through 17 (page 16 and 17); they include percentages and P-values for each domain by RBHA and GSA ranging from 2007 through 2013.

TABLE-12: GSA 1 - NARBHA Youth Consumer YSS-F Survey Results by Domain for 2007 – 2013

Domain	2007 %	2008 % (P-value)	2009 % (P-value)	2010 % (P-value)	2011 % (P-value)	2012 % (P-value)	2013 % (P-value)
General Satisfaction	76	84 (ns)	83 (ns)	90 (ns)	90 (ns)	85 (ns)	85 (ns)
Service Access	77	81 (ns)	79 (ns)	90 (0.01)	94 (ns)	90 (ns)	93 (ns)
Participation in Treatment Planning	91	88 (ns)	92 (ns)	93 (ns)	94 (ns)	93 (ns)	96 (ns)
Cultural Sensitivity	93	93 (ns)	93 (ns)	96 (ns)	97 (ns)	98 (ns)	97 (ns)
Outcomes	51	72 (0.00)	67 (ns)	70 (ns)	69 (ns)	65 (ns)	67 (ns)
Improved Functioning	55	71 (0.00)	66 (ns)	73 (ns)	71 (ns)	68 (ns)	71 (ns)
Social Connectedness	80	87 (ns)	87 (ns)	91 (ns)	90 (ns)	92 (ns)	90 (ns)

TABLE-13: GSA 2 - Cenpatico Youth Consumer YSS-F Survey Results by Domain for 2007 – 2013

Domain	2007 %	2008 % (P-value)	2009 % (P-value)	2010 % (P-value)	2011 % (P-value)	2012 % (P-value)	2013 % (P-value)
General Satisfaction	89	76 (0.00)	81 (ns)	82 (ns)	91 (0.02)	89 (ns)	88 (ns)
Service Access	86	81 (ns)	82 (ns)	90 (0.04)	95 (ns)	93 (ns)	91 (ns)
Participation in Treatment Planning	88	86 (ns)	94 (0.02)	93 (ns)	96 (ns)	93 (ns)	93 (ns)
Cultural Sensitivity	96	94 (ns)	93 (ns)	99 (0.02)	99 (ns)	97 (ns)	95 (ns)
Outcomes	76	70 (ns)	62 (ns)	69 (ns)	71 (ns)	75 (ns)	74 (ns)
Improved Functioning	78	69 (0.03)	61 (ns)	70 (ns)	73 (ns)	76 (ns)	76 (ns)
Social Connectedness	89	86 (ns)	85 (ns)	89 (ns)	97 (0.01)	94 (ns)	91 (ns)

TABLE-14: GSA 3 - Cenpatico Youth Consumer YSS-F Survey Results by Domain for 2007 – 2013

Domain	2007 %	2008 % (P-value)	2009 % (P-value)	2010 % (P-value)	2011 % (P-value)	2012 % (P-value)	2013 % (P-value)
General Satisfaction	77	74 (ns)	75 (ns)	87 (0.01)	86 (ns)	88 (ns)	82 (ns)
Service Access	74	74 (ns)	76 (ns)	90 (0.00)	90 (ns)	93 (ns)	92 (ns)
Participation in Treatment Planning	88	80 (0.01)	88 (0.05)	90 (ns)	89 (ns)	96 (0.00)	93 (ns)
Cultural Sensitivity	90	89 (ns)	89 (ns)	94 (ns)	96 (ns)	97 (ns)	96 (ns)
Outcomes	65	65 (ns)	66 (ns)	77 (0.02)	73 (ns)	71 (ns)	67 (ns)
Improved Functioning	65	62 (ns)	65 (ns)	79 (0.00)	74 (ns)	74 (ns)	68 (ns)
Social Connectedness	77	77 (ns)	78 (ns)	87 (0.03)	87 (ns)	91 (ns)	89 (ns)

Color	Key
	statistically significant increase
	statistically significant decrease

TABLE-15: GSA 4 - Cenpatico Youth Consumer YSS-F Survey Results by Domain for 2007 – 2013

Domain	2007 %	2008 % (P-value)	2009 % (P-value)	2010 % (P-value)	2011 % (P-value)	2012 % (P-value)	2013 % (P-value)
General Satisfaction	78	78 (ns)	85 (ns)	80 (ns)	84 (ns)	82 (ns)	88 (0.04)
Service Access	86	80 (ns)	91 (0.01)	87 (ns)	94 (0.04)	92 (ns)	91 (ns)
Participation in Treatment Planning	92	90 (ns)	98 (0.01)	91 (0.00)	94 (ns)	92 (ns)	93 (ns)
Cultural Sensitivity	91	92 (ns)	96 (ns)	95 (ns)	97 (ns)	96 (ns)	95 (ns)
Outcomes	66	61 (ns)	66 (ns)	66 (ns)	70 (ns)	63 (ns)	75 (0.007)
Improved Functioning	68	62 (ns)	65 (ns)	69 (ns)	71 (ns)	67 (ns)	76 (0.01)
Social Connectedness	82	87 (ns)	87 (ns)	88 (ns)	91 (ns)	88 (ns)	92 (ns)

TABLE-16: GSA 5 - CPSA Youth Consumer YSS-F Survey Results by Domain for 2007 – 2013

Domain	2007 %	2008 % (P-value)	2009 % (P-value)	2010 % (P-value)	2011 % (P-value)	2012 % (P-value)	2013 % (P-value)
General Satisfaction	81	79 (ns)	82 (ns)	81 (ns)	88 (ns)	84 (ns)	85 (ns)
Service Access	76	73 (ns)	74 (ns)	84 (0.02)	87 (ns)	81 (ns)	83 (ns)
Participation in Treatment Planning	89	86 (ns)	86 (ns)	88 (ns)	93 (ns)	89 (ns)	94 (ns)
Cultural Sensitivity	90	90 (ns)	86 (ns)	94 (0.02)	97 (ns)	91 (0.01)	96 (ns)
Outcomes	65	63 (ns)	72 (ns)	62 (0.03)	68 (ns)	62 (0.01)	60 (ns)
Improved Functioning	66	62 (ns)	72 (0.04)	66 (ns)	71 (ns)	66 (ns)	64 (ns)
Social Connectedness	86	82 (ns)	84 (ns)	84 (ns)	90 (ns)	86 (ns)	85 (ns)

TABLE-17: GSA 6 - Value Options in 2007 and Magellan in 2008 – 2013 Youth Consumer YSS-F Survey Results by Domain

Domain	2007 %	2008 % (P-value)	2009 % (P-value)	2010 % (P-value)	2011 % (P-value)	2012 % (P-value)	2013 % (P-value)
General Satisfaction	77	75 (ns)	77 (ns)	86 (0.03)	78 (0.02)	80 (ns)	80 (ns)
Service Access	75	70 (ns)	73 (ns)	80 (ns)	82 (ns)	87 (ns)	81 (ns)
Participation in Treatment Planning	86	87 (ns)	88 (ns)	93 (ns)	94 (ns)	93 (ns)	92 (ns)
Cultural Sensitivity	93	90 (ns)	91 (ns)	98 (0.01)	96 (ns)	97 (ns)	95 (ns)
Outcomes	62	56 (ns)	68 (0.02)	71 (ns)	61 (0.03)	60 (ns)	58 (ns)
Improved Functioning	63	53 (0.04)	64 (0.03)	72 (ns)	63 (0.05)	60 (ns)	61 (ns)
Social Connectedness	79	75 (ns)	82 (ns)	88 (ns)	88 (ns)	84 (ns)	86 (ns)

Color	Key
	statistically significant increase
	statistically significant decrease

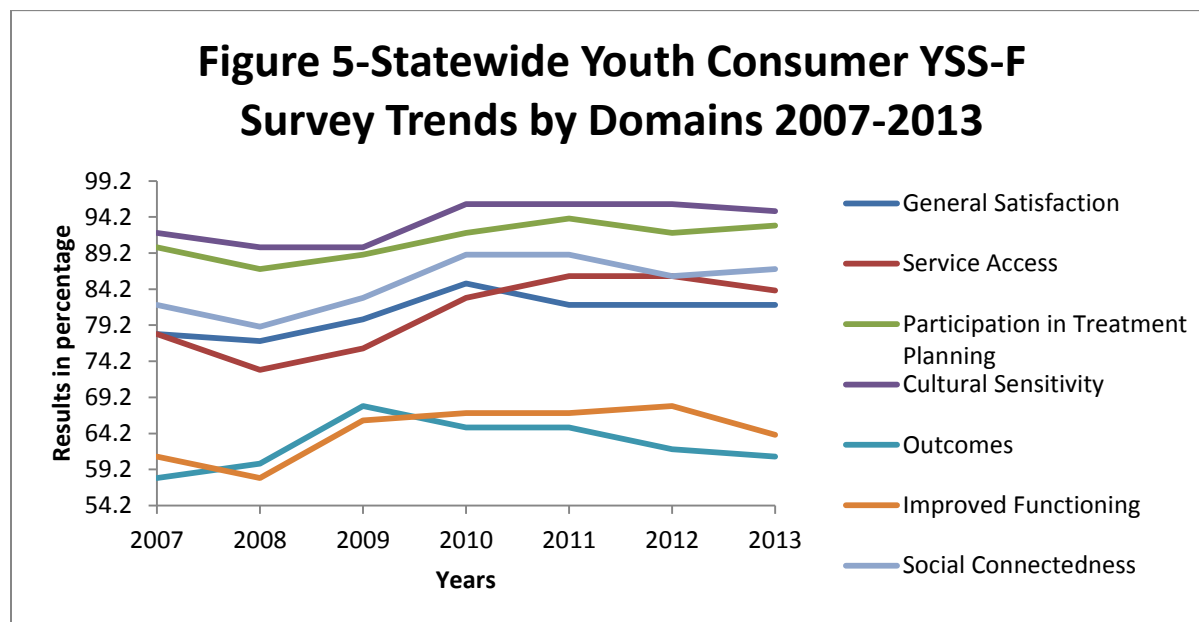
Summary of the 2012 YSS-F Survey Results:

Statewide:

- Significant declines were noted in the 2013 statewide youth survey results compared to 2012.
 - *Service Access* and the improved functioning domains showed a percentage decrease from the 2012 results.
 - *Social Connectedness* domain increased by two percentage points.

Additionally,

- *Improved Functioning* domain increased in score by one percentage point from 2012.
- *General Satisfaction* domain showed no change in percentage points between the 2012 and 2013



RBHA Specific:

- Cenpatico (GSA 2) showed significant increase in the *Service Access* and *Outcomes* domains but experience slight percentage decreases in *Participation and Treatment* and *Social Connectedness* domains
- CPSA (GSA 5) experienced percentage decreases in three domains: *Improved Functioning*, *Social Connectedness* and *Outcomes*

X. RBHA Specific YSS-F Initiatives

CPSA recognizes the declines in certain domains of the Youth Consumer survey and has developed plans and activities to improve performance in the *Outcomes* domain of the youth survey. CPSA plans to utilize performance improvement projects as a strategic to improve scores in the youth consumer survey. Specifically, Comprehensive Service Providers have addressed some of the following in their PIPs:

- In order to guide service planning and service provision in a way that aligns with the MHSIP, CSPs are choosing to continue to incorporate MHSIP outcome indicators into forms used by clinical services, that will be utilized at the beginning of every appointment to address where members feel they are in treatment relative to outcomes attributable to treatment. Staff representatives from QM, Clinical services and Customer Service Committees have been meeting to create these forms as well as a process for staff to discuss these eight indicators with the members.

This is an opportunity for staff to address what may or may not be working in treatment, allowing the opportunity for members to address outcomes with their clinical team on a consistent basis. This PIP initiative was a huge focus for the Adult providers in 2012 and once again appeared to make a significant impact based on the Outcome domain scores. Some of the youth providers are choosing to address the Outcomes Indicator language more specifically in the CFT agenda, by implementing this language into the CFT Agenda forms, and calling on CFT coaches to monitor the effectiveness of this language within the CFT. The effectiveness of these tools will be closely evaluated in the 2013 Corrective Action Plans across the CPSA Children's system.

- CSPs are choosing to continue to conduct internal biannual audits to assess compliance. Any identified trends in this audit structure would lead to QM interventions and implementation of new strategies based on the results of these audits.
- Continued incorporation of MHSIP Outcomes domain language in assessment tools will allow for a better assessment of progress, or lack thereof, by the members of the clinical team and guardians/parents/caregivers.
- CSPs have continued to focus on the accuracy and effectiveness of maintaining highly functioning Electronic Medical Records in order to better track members and their progress while coordinating care with other agencies that may be addressing member care as well.
- CSPs have also created work groups comprised of Clinical and QM staff, who are addressing how to incorporate, identify, communicate and document outcomes with the Child and Family Team. Many CSPs report that though this is a current occurrence the focus on documenting these actions in a way that clearly defines outcomes must be addressed.
- CSPs are creating additional Service Planning Training in hopes of creating more meaningful measures and goals with members. This strategy should directly impact the

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- perception of Outcomes with members.
- CSPs have implemented the Customer Service/Cultural Liaison positions to focus on increasing customer satisfaction.
 - CSP's have implemented consumer advisory boards to encourage the consumer voice in efforts to provide the highest quality services to consumers.
 - CSPs are also providing training by RSS staff at New Employee Orientation and at CM sites. The training will focus on recovery and strengths-based language. MHSIP outcomes language will be discussed as examples for clinicians to use when engaging members in the discussion of progress.

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Magellan identified domains that did not perform well during the 2013 survey and has put in place some activities to improve the scores. To improve the scores in the Youth Outcome, Improved Functioning and Service Access domains for example,

- In October 2013, analysis began to determine the reasons recipients do not feel their services are positively impacting their outcomes began through the existing committee structure as well as a Child Provider Meeting and Workgroup. Two areas were targeted for improvement: 1.) limited feedback delivered to individuals and families regarding the progress towards goals and 2.) staff members do not consistently focus interactions / services based on the person's goals, preferences and needs. Performance Improvement Plans will be implemented to address these areas. The Clinic Advisory Committees will also be asked to solicit feedback from recipients. The Customer Service Committee will review information and PIP updates on a routine basis and put forward further recommendations.

NARBHA recognizes the opportunity to use the information from the 2013 MHSIP Survey to make system

Improvements, and will participate in statewide initiatives with ADHS/DBHS to continue to improve scores for each domain. Special attention will be placed around the *Outcomes* and *Improved Functioning* domains, which continue to receive the lowest scores from both Adult and Youth surveys.

- As part of their strategy, NARBHA survey outcomes are reported to the Quality Management Committee, the NARBHA Leadership Council, ADHS/DBHS, Responsible Agencies, the NARBHA Board of Directors and all NARBHA staff. Performance Improvement and Quality Management will provide continuous technical assistance throughout the survey process, assisting Responsible Agencies to identify opportunities to improve the survey process, response rates and results. Targeted technical assistance is provided when there is a substantial decrease in overall results from the prior year

XI. Statewide Improvement Opportunities

ADHS/DBHS recognizes the opportunity to use the information from the 2013 survey results to make system improvements, and will implement statewide initiatives with the RBHAs to continue to improve scores for each domain. Special attention will be placed around the *Outcomes* and *Improved Functioning* domains, which continue to receive the lowest scores from both Adults and Children. DBHS will also carry out a performance improvement project to improve on the number of surveys responses that are returned. A comprehensive plan to re-engineer the consumer survey distribution process includes a review of the time of the year when the surveys are distributed, increase consumer education on the relevance of the survey to systems improvement, and increase monitoring of the use of survey results by all ADHS/DBHS contractors to drive systems improvement.

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.

XII. 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 2013-2014 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 2012 and 2013 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 expected an increase in the Outcomes domain. However, based on the 2013 survey results, there was a decrease in the *Outcome* domain by two percentage points. ADHS/DBHS will perform a root cause analysis of the drop in scores in the outcome domain and develop a plan with its contractors to improve scores.
 - 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.

System Initiatives:

- ADHS/DBHS, along with family members and recipient input, developed the *Behavioral Health System Performance Framework and Dashboard* as a means to evaluate the effectiveness of the system using standardized measures, such as family and recipient identified outcomes, the National Outcomes Measures (NOMs) and ADHS/DBHS/BQMO performance metrics.
- ADHS/DBHS continues to routinely update its Behavioral Health System Performance Framework and Dashboard, providing transparency, accountability, and increased consumer education regarding ADHS/DBHS performance measures.
- ADHS/DBHS as part of the survey re-engineering process has initiated a plan through the office of Performance Improvement and the Office of Information Management to

carryout correlation analyses between the survey results and other appropriate performance measures to identify and utilized any indicators that associate survey results to performance measures.

- ADHS/DBHS has also increase information sharing of survey results and initiatives between departments of the ADHS/DBHS. The Office of Information Management, the Office of Performance Improvement and the Office of Costumer Service have expanded information sharing of survey results. This is in addition to existing collaboration between the office of information management and the Adult System of Care in the use of survey results to drive systems improvement.

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 for youth and families with complex needs. 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. Consumer Survey results are shared with all divisions at DBHS, including the Children's System of Care so the areas needing improvement can be addressed. 180 SOCPR reviews were conducted last year with another 180 scheduled for FY13. There were also more than one thousand Brief Practice Reviews (BPR's) conducted via telephonic interviews with caregivers. 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 caseloads for children with complex needs through the 2013 Fiscal year.
- 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 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 monitor and promote development of generalist direct support programming through the use of a SE Modifier to track encounter activity and through regular program updates.
- 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. During FY13 a

particular emphasis has been placed on supporting the certification process for peer mentors in order to more formally integrate those services into the developing system of care. Additionally the newly revised Youth Involvement Practice Protocol will continue to strengthen the youth and family involvement in the system of care.

- 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.

XIII. Conclusion

The Annual Consumer Surveys are a valuable source of information, providing direct feedback from members about their experience with behavioral health services. The results identify areas of satisfaction as well as opportunities for improvement. The *Participation in Treatment Planning* and *Service Quality & Appropriateness* domains have had the most favorable statewide results in the Adult Survey for each of the last three years, while *Outcomes, Improved Functioning*, and *Social Connectedness* have consistently shown the most room for improvement.

The Children's Survey has reflected statewide satisfaction levels of over 90 percent in the *Participation in Treatment Planning* and *Cultural Sensitivity* domains for the last three years; the results for the *Outcomes* and *Improved Functioning* domains have been the lowest statewide scores of all domains for that population for every year of the Survey.

This year's 2013 adult statewide Survey results show a slight drop in the *Outcomes* domain while *General Satisfaction* and *Service Quality and Appropriateness* domains demonstrated significant increases by five and four percentage points respectively. The *General Satisfaction* domain however demonstrated the largest improvement in rate change. The highest scoring domain for the adult population in 2013 is *Participation in Treatment Planning* and the lowest is the *Improved Functioning* domain.

In the 2013 adult survey at the RBHA/GSA level, Magellan (GSA 6) showed a significant increase in *Participation in Treatment Planning* domain by seven percentage points, leading to a statistically significant change ($P \leq 0.04$). This may be attributed to Magellan's initiatives during FY2012. Cenpatico (GSA 4) showed six percent decrease in the *Outcome* domain.

Declines were noted in the 2013 statewide youth survey. Four domains: *Service Access*, *Cultural Sensitivity*, *Outcomes* and *Improved Functioning* showed slight decreases from the 2012 survey results.

At the RBHA/GSA level on the children's 2013 survey, Cenpatico (GSA 3) showed a significant increase in *Participation in Treatment Planning* domain by seven percentage points ($P \leq 0.00$). CPSA (GSA 5) experienced statistically significant decreases in two domains: *Cultural Sensitivity* and *Outcomes* domains fell six percentage points each from 2011 ($P \leq 0.01$).

Initiatives have been developed by ADHS/DBHS to address areas of concern reflected in the Survey results, specifically the *Outcomes, Improved Functioning, Service Access*, and *Social Connectedness* domains. Both the Adult and Children's System of Care Strategic Plans are informed by Survey results. Standardized measures are shared with DBHS stakeholders through the Behavioral Health System Performance Framework and Dashboard.

In addition, there are RBHA-specific activities. Cenpatico is enhancing an existing Performance Improvement Project and its quarterly satisfaction survey to better identify the need for targeted interventions. CPSA maintains frequent contact with members and has implemented feedback through rating scales to enhance treatment and service outcomes. ADHS/DBHS will monitor and work closely with these RBHAs to improve member satisfaction.

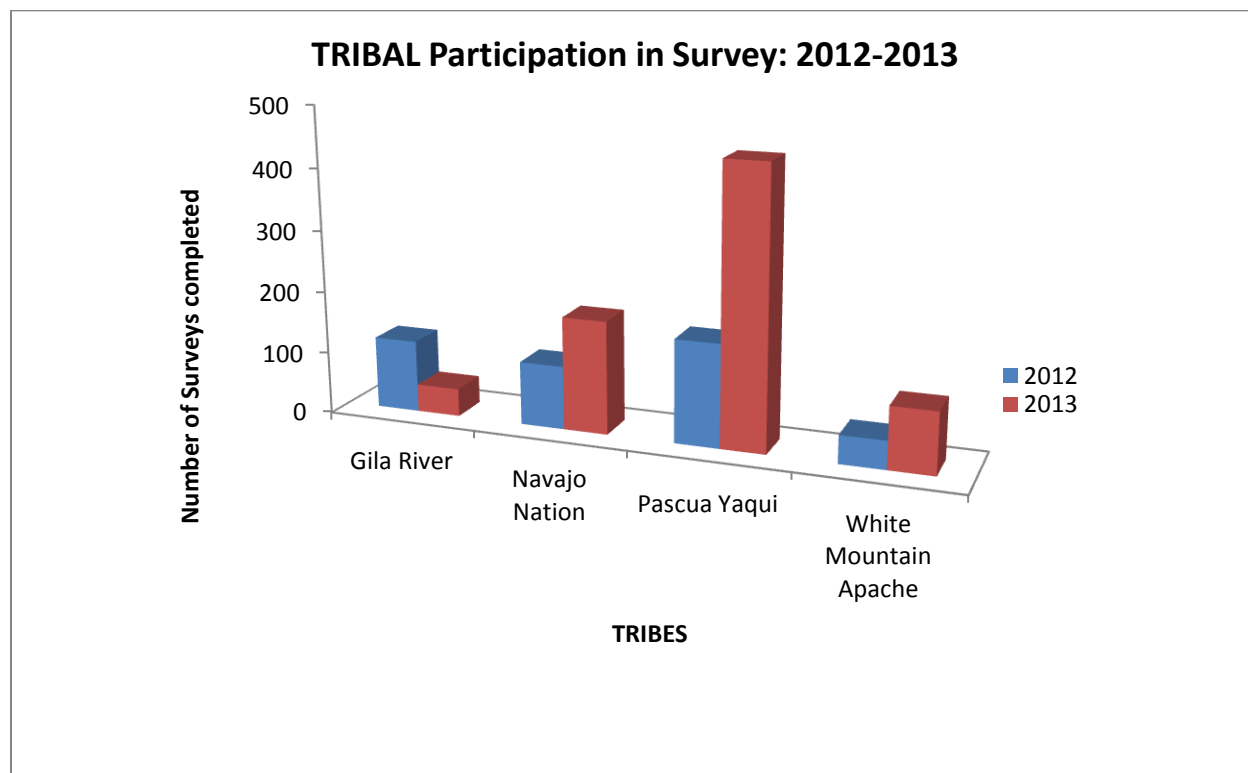
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As per the ADHS/DBHS Contract with the RBHAs, satisfaction with service *Outcomes* on the Annual Consumer Survey is a performance incentive; a score of 70% or greater on the *Outcomes* domain of the Consumer Survey makes up 25% of the incentive award. 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

2013 Tribal Behavioral Health 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 2013 Consumers Survey. The Tribal BHAs have shown an overall slight increase in participation from 433 participants in 2012 to 775 in 2013. All Tribal BHAs conduct a convenience sampling of their enrolled members. The number of surveys completed by tribal participants varied this year, White Mountain, Navajo Nation and Pascua Yaqui increased while Gila River decreased.



TBHA	Number of Surveys Completed		
	Adult Survey	YSS-F	Total
Gila River	26	19	45
Navajo Nation	137	46	183
Pascua Yaqui	317	130	447
White Mountain Apache	80	20	100
Statewide TBHA	560	215	775

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 the survey.

Data Analysis

TBHAs results were submitted directly to ADHS/DBHS and entered into the database; analysis was conducted by ADHS/DBHS staff in the Office of Information Management.

Summary of Results:

General Satisfaction domain demonstrates the highest scores for adults receiving services through Tribal BHAs in 2013 compared to 2012. *Social Connectedness* domain showed a decrease in rate of satisfaction amongst TBHA adults.

Navajo Nation scored 100% in the Cultural *Sensitivity* domain and White Mountain showed a great decrease from 100% to 67% from 2012 to 2013 in the Youth *Improved Functioning* domain. *Outcomes and Improved Functioning* domains continue to remain the lowest rates of satisfaction reported from families of youth receiving services through the Tribal BHAs.

Summary of 2010 to 2013 Tribal Behavioral Health Authorities Results for Adults

TBHA	General Satisfaction			Service Access			Participation in Treatment Planning			Service Quality & Appropriateness			Outcomes			Improved Functioning			Social Connectedness		
	2011	2012	2013	2011	2012	2013	2011	2012	2013	2011	2012	2013	2011	2012	2013	2011	2012	2013	2011	2012	2013
Gila River	92%	89%	96%	85%	81%	88%	92%	85%	92%	96%	83%	88%	84%	68%	78%	84%	70%	88%	85%	85%	88%
Navajo Nation	91%	85%	82%	80%	85%	83%	89%	88%	88%	88%	87%	88%	82%	75%	72%	83%	80%	72%	86%	87%	77%
Pascua Yaqui	94%	94%	92%	86%	92%	90%	90%	89%	92%	93%	92%	91%	82%	82%	81%	78%	84%	79%	85%	91%	85%
White Mtn Apache	93%	93%	94%	96%	87%	73%	86%	87%	74%	86%	88%	70%	76%	87%	72%	86%	80%	74%	90%	93%	88%

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

Summary of 2010 to 2013 Tribal Behavioral Health Authorities Results for Youth

TBHA	General Satisfaction			Service Access			Participation in Treatment Planning			Cultural Sensitivity			Outcomes			Improved Functioning			Social Connectedness		
	2011	2012	2013	2011	2012	2013	2011	2012	2013	2011	2012	2013	2011	2012	2013	2011	2012	2013	2011	2012	2013
Gila River	82%	86%	90%	86%	96%	90%	96%	91%	78%	100%	100%	95%	64%	68%	74%	64%	68%	74%	96%	96%	95%
Navajo Nation	84%	94%	98%	72%	88%	96%	87%	88%	91%	91%	94%	100%	73%	94%	93%	75%	94%	93%	91%	94%	98%
Pascua Yaqui	96%	93%	90%	100%	92%	89%	95%	92%	90%	100%	97%	95%	71%	93%	80%	75%	93%	80%	95%	95%	92%
White Mtn Apache	100%	100%	76%	90%	100%	81%	90%	100%	86%	100%	100%	95%	85%	100%	67%	85%	100%	67%	95%	100%	91%

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

ATTACHMENT-B



**STATEWIDE CONSUMER SURVEY
PROTOCOL**

2013

Arizona Department of Health Services
Division of Behavioral Health Services

Executive Summary

The protocol for the 2013 consumer survey is based on the methodological and administrative guidelines followed in previous years.

Two consumer surveys will be administered again in 2013; 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 2013 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 2013.

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

The 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: 5=Strongly Agree, 4=Agree, 3=Neutral, 2=Disagree, and 1=Strongly Disagree. A Not Applicable option is also available if the question does not apply.

In addition to the state-added question related to cultural sensitivity, two state-added questions introduced in the 2011 Adult survey tool to gather information specific to National CLAS Standards (Culturally and Linguistically Appropriate Services) will be retained again this year. The three state-added questions in the Adult survey tool are:

Q37 – In creating my service plan my cultural preferences were included. (For example: values, traditions, beliefs, race, language, etc.)

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.)

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 5=Strongly Agree, 4=Agree, 3=Neutral, 2=Disagree, and 1=Strongly Disagree. A Not Applicable option is also available if the question does not apply.

As with the Adult tool, in addition to the state-added question related to cultural sensitivity, two state-added questions introduced in the 2011 YSS-F tool to gather information specific to National CLAS Standards (Culturally and Linguistically Appropriate Services) will be retained again this year. The three state-added questions in the YSS-F tool are:

Q29 – In creating my child's service plan our cultural preferences were included (For example: values, traditions, beliefs, race, language, etc.)

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.)

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.

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 and 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. The adult clients may be enrolled in any program: General Mental Health, Substance Abuse, or Seriously Mentally Ill. Clients turning age 18 between October 1, 2012 and the end of the survey period, May 24, 2013, will be filtered out of the sample frame.

The sample frame will be composed of:

- (a) Client must have an open Episode of Care (EOC) in FY2013;
- (b) Client must be Title XIX or Title XXI eligible in FY2013;
- (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

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.

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 Timeline Attachment to 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, retaining copies for reference, and databases containing survey results by July 26, 2013.

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. Tribal RBHAs will submit to ADHS/DBHS the completed paper surveys, retaining copies for reference, by July 26, 2013. ADHS/DBHS will enter the survey data collected at the tribal RBHAs into an SPSS database and provide results to each Tribal BHAS in Excel spreadsheets.

Survey Administration

Survey Timeframe

The survey will be administered for a period of eight weeks: April 1 through May 24, 2013.

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

run the analysis to determine RBHA survey results and provide the results to each RBHA from which the RBHAs will write their reports. 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.

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 that will be utilized for evaluating the domain areas within the survey are as follows:

1. Recode ratings of 'not applicable' as missing values
2. For each survey, exclude domains where more than one-third of the domain questions are missing
3. Calculate the mean of the items for each respondent
4. Calculate the percent of scores that are greater than or equal to 3.5 through 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= Total number of clients in sample that were contacted and asked to participate in the survey

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.

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

ATTACHMENT-C

Raw Data

**Arizona Department of Health Services
Division of Behavioral Health Services
2012 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. 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 are 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:

<i>RBHA</i>	<i>Total Surveys</i>	<i>RBHA Population</i>	<i>RBHA Surveys</i>	<i>Total Population</i>	<i>Equation</i>	<i>Weight</i>
7	1,660	24,166	219	43,263	$(1660*24166)/(219*43263)$	4.23401
26	1,660	8,846	304	43,263	$(1660*8846)/(304*43263)$	1.11652
15	1,660	6,186	358	43,263	$(1660*6186)/(358*43263)$	0.66301
22	1,660	1,757	242	43,263	$(1660*1757)/(242*43263)$	0.27858
2	1,660	1,065	247	43,263	$(1660*1065)/(247*43263)$	0.16544
32	1,660	1,243	290	43,263	$(1660*1243)/(290*43263)$	0.16446
7	1,642	19,542	260	34,032	$(1642*19542)/(260*34032)$	3.62645
26	1,642	7,139	235	34,032	$(1642*7139)/(235*34032)$	1.46573
15	1,642	3,851	444	34,032	$(1642*3851)/(444*34032)$	0.41848
22	1,642	1,696	300	34,032	$(1642*1696)/(300*34032)$	0.27277
32	1,642	930	229	34,032	$(1642*930)/(229*34032)$	0.19594
2	1,642	874	174	34,032	$(1642*874)/(174*34032)$	0.24235

2013 MHSIP Consumer Survey
 Numbers Used in Calculation of Performance

ADULT SURVEY

RESULTS BY T/RBHA & MHSIP DOMAIN

Domain: General Satisfaction

T/RBHA	Denominator	Numerator	Positive Response Percentage
GSA 1 - NARBHA	356	316	89%
GSA 2 - Cenpatico 2	244	221	91%
GSA 3 - Cenpatico 3	290	255	88%
GSA 4 - Cenpatico 4	241	220	91%
GSA 5 - CPSA	303	263	87%
GSA 6 - Magellan	211	194	92%
Statewide RBHA	1,623	1,464	90%
Gila River	25	24	96%
Navajo Nation	136	112	82%
Pascua Yaqui	314	288	92%
White Mountain			
Apache	80	75	94%

Domain: Service Access

T/RBHA	Denominator	Numerator	Positive Response Percentage
GSA 1 - NARBHA	355	302	85%
GSA 2 - Cenpatico 2	242	214	88%
GSA 3 - Cenpatico 3	289	255	88%
GSA 4 - Cenpatico 4	242	225	93%
GSA 5 - CPSA	302	239	79%
GSA 6 - Magellan	210	187	89%
Statewide RBHA	1,617	1,399	87%
Gila River	25	22	88%
Navajo Nation	136	113	83%
Pascua Yaqui	316	285	90%
White Mountain			
Apache	77	56	73%

Domain: Participation in Treatment Planning

T/RBHA	Denominator	Numerator	Positive Response
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			Percentage
GSA 1 - NARBHA	349	326	93%
GSA 2 - Cenpatico 2	231	210	91%
GSA 3 - Cenpatico 3	283	263	93%
GSA 4 - Cenpatico 4	238	220	92%
GSA 5 - CPSA	284	254	89%
GSA 6 - Magellan	192	174	91%
Statewide RBHA	1,512	1,376	91%
Gila River	26	24	92%
Navajo Nation	131	115	88%
Pascua Yaqui	304	280	92%
White Mountain			
Apache	65	48	74%

Domain: Service Quality & Appropriateness

T/RBHA	Denominator	Numerator	Positive Response Percentage
GSA 1 - NARBHA	350	329	94%
GSA 2 - Cenpatico 2	238	217	91%
GSA 3 - Cenpatico 3	287	264	92%
GSA 4 - Cenpatico 4	239	226	95%
GSA 5 - CPSA	298	258	87%
GSA 6 - Magellan	206	188	91%
Statewide RBHA	1,590	1,444	91%
Gila River	25	22	88%
Navajo Nation	137	121	88%
Pascua Yaqui	314	285	91%
White Mountain			
Apache	74	52	70%

Domain: Outcomes

T/RBHA	Denominator	Numerator	Positive Response Percentage
GSA 1 - NARBHA	344	245	71%
GSA 2 - Cenpatico 2	232	169	73%
GSA 3 - Cenpatico 3	277	218	79%
GSA 4 - Cenpatico 4	237	181	76%
GSA 5 - CPSA	281	199	71%
GSA 6 - Magellan	196	140	71%
Statewide RBHA	1,522	1,092	72%
Gila River	23	18	78%
Navajo Nation	136	98	72%
Pascua Yaqui	306	247	81%
White Mountain	75	54	72%

Apache

Domain: Improved Functioning

T/RBHA	Denominator	Numerator	Positive Response Percentage
GSA 1 - NARBHA	350	247	71%
GSA 2 - Cenpatico 2	235	167	71%
GSA 3 - Cenpatico 3	282	210	75%
GSA 4 - Cenpatico 4	239	168	70%
GSA 5 - CPSA	283	191	68%
GSA 6 - Magellan	201	144	72%
Statewide RBHA	1,551	1,096	71%
Gila River	24	21	88%
Navajo Nation	137	98	72%
Pascua Yaqui	304	239	79%
White Mountain			
Apache	78	58	74%

Domain: Social Connectedness

T/RBHA	Denominator	Numerator	Positive Response Percentage
GSA 1 - NARBHA	352	281	80%
GSA 2 - Cenpatico 2	244	191	78%
GSA 3 - Cenpatico 3	281	221	79%
GSA 4 - Cenpatico 4	237	194	82%
GSA 5 - CPSA	283	209	74%
GSA 6 - Magellan	200	154	77%
Statewide RBHA	1,549	1,194	77%
Gila River	24	21	88%
Navajo Nation	135	104	77%
Pascua Yaqui	308	262	85%
White Mountain			
Apache	77	68	88%

STATEWIDE RESULTS FOR EACH QUESTION IN DOMAIN

General Satisfaction:	Denominator	Numerator	Positive Response Percentage
<i>Q1</i>	1,618	1,474	91%
<i>Q2</i>	1,599	1,408	88%
<i>Q3</i>	1,600	1,444	90%
Service Access			
<i>Q4</i>	1,606	1,332	83%

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Q5	1,599	1,388	87%
Q6	1,553	1,196	77%
Q7	1,605	1,417	88%
Q8	1,589	1,344	85%
Q9	1,543	1,184	77%

Participation in Treatment Planning

Q11	1,570	1,404	89%
Q17	1,561	1,285	82%

Service Quality & Appropriateness

Q10	1,570	1,384	88%
Q12	1,581	1,326	84%
Q13	1,598	1,417	89%
Q14	1,569	1,362	87%
Q15	1,562	1,287	82%
Q16	1,589	1,456	92%
Q18	1,549	1,309	85%
Q19	1,549	1,304	84%
Q20	1,535	1,285	84%

Outcomes

Q21	1,572	1,220	78%
Q22	1,577	1,196	76%
Q23	1,543	1,109	72%
Q24	1,506	1,101	73%
Q25	1,545	1,039	67%
Q26	1,234	731	59%
Q27	1,434	971	68%
Q28	1,558	1,028	66%

Improved Functioning

Q28	1,558	1,028	66%
Q29	1,552	1,126	73%
Q30	1,549	1,150	74%
Q31	1,547	1,080	70%
Q32	1,545	1,039	67%

Social Connectedness

Q33	1,547	1,203	78%
Q34	1,552	1,233	79%
Q35	1,536	1,003	65%
Q36	1,559	1,258	81%

2013 MHSIP Consumer Survey
 Numbers Used in Calculation of Performance

YOUTH SERVICES SURVEY FOR FAMILIES

RESULTS BY T/RBHA & MHSIP DOMAIN

Domain: General Satisfaction

T/RBHA	Denominator	Numerator	Positive Response Percentage
GSA 1 - NARBHA	431	368	85%
GSA 2 - Cenpatico 2	173	153	88%
GSA 3 - Cenpatico 3	228	186	82%
GSA 4 - Cenpatico 4	298	261	88%
GSA 5 - CPSA	232	197	85%
GSA 6 - Magellan	251	201	80%
Statewide RBHA	1,599	1,316	82%
Gila River	19	17	90%
Navajo Nation	44	43	98%
Pascua Yaqui	128	115	90%
White Mountain Apache	21	16	76%

Domain: Service Access

T/RBHA	Denominator	Numerator	Positive Response Percentage
GSA 1 - NARBHA	428	398	93%
GSA 2 - Cenpatico 2	172	156	91%
GSA 3 - Cenpatico 3	225	207	92%
GSA 4 - Cenpatico 4	297	270	91%
GSA 5 - CPSA	225	187	83%
GSA 6 - Magellan	244	197	81%
Statewide RBHA	1,561	1,307	84%
Gila River	19	17	90%
Navajo Nation	44	42	96%
Pascua Yaqui	128	114	89%
White Mountain Apache	21	17	81%

Domain: Participation in Treatment Planning

T/RBHA	Denominator	Numerator	Positive Response Percentage
GSA 1 - NARBHA	426	409	96%
GSA 2 - Cenpatico 2	173	161	93%

2013 Consumer Survey Report

GSA 3 - Cenpatico 3	226	209	93%
GSA 4 - Cenpatico 4	295	275	93%
GSA 5 - CPSA	233	218	94%
GSA 6 - Magellan	248	228	92%
Statewide RBHA	1,586	1,473	93%
Gila River	18	14	78%
Navajo Nation	44	40	91%
Pascua Yaqui	125	112	90%
White Mountain Apache	21	18	86%

Domain: Cultural Sensitivity

T/RBHA	Denominator	Numerator	Positive Response Percentage
GSA 1 - NARBHA	409	397	97%
GSA 2 - Cenpatico 2	168	160	95%
GSA 3 - Cenpatico 3	224	214	96%
GSA 4 - Cenpatico 4	291	277	95%
GSA 5 - CPSA	223	213	96%
GSA 6 - Magellan	237	225	95%
Statewide RBHA	1,521	1,451	95%
Gila River	19	18	95%
Navajo Nation	42	42	100%
Pascua Yaqui	127	121	95%
White Mountain Apache	21	20	95%

Domain: Outcomes

T/RBHA	Denominator	Numerator	Positive Response Percentage
GSA 1 - NARBHA	432	288	67%
GSA 2 - Cenpatico 2	173	128	74%
GSA 3 - Cenpatico 3	225	150	67%
GSA 4 - Cenpatico 4	292	219	75%
GSA 5 - CPSA	227	135	60%
GSA 6 - Magellan	247	144	58%
Statewide RBHA	1,575	961	61%
Gila River	19	14	74%
Navajo Nation	44	41	93%
Pascua Yaqui	127	102	80%
White Mountain Apache	21	14	67%

Domain: Improved Functioning

T/RBHA	Denominator	Numerator	Positive Response Percentage
GSA 1 - NARBHA	432	305	71%

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GSA 2 - Cenpatico 2	173	132	76%
GSA 3 - Cenpatico 3	226	154	68%
GSA 4 - Cenpatico 4	293	222	76%
GSA 5 - CPSA	227	146	64%
GSA 6 - Magellan	248	152	61%
Statewide RBHA	1,579	1,016	64%
Gila River	19	14	74%
Navajo Nation	44	41	93%
Pascua Yaqui	127	102	80%
White Mtn	21	14	67%

Domain: Social Connectedness

T/RBHA	Denominator	Numerator	Positive Response Percentage
GSA 1 - NARBHA	428	383	90%
GSA 2 - Cenpatico 2	169	153	91%
GSA 3 - Cenpatico 3	227	202	89%
GSA 4 - Cenpatico 4	296	273	92%
GSA 5 - CPSA	226	191	85%
GSA 6 - Magellan	248	214	86%
Statewide RBHA	1,576	1,367	87%
Gila River	19	18	95%
Navajo Nation	44	43	98%
Pascua Yaqui	129	119	92%
White Mtn	21	19	91%

STATEWIDE RESULTS FOR EACH QUESTION IN DOMAIN

General Satisfaction:	Denominator	Numerator	Positive Response Percentage
<i>Q1</i>	1,593	1,353	85%
<i>Q4</i>	1,588	1,295	82%
<i>Q5</i>	1,542	1,230	80%
<i>Q7</i>	1,579	1,275	81%
<i>Q10</i>	1,574	1,255	80%
<i>Q11</i>	1,570	1,161	74%
Service Access			
<i>Q8</i>	1,589	1,234	78%
<i>Q9</i>	1,584	1,302	82%
Participation in Treatment Planning			
<i>Q2</i>	1,567	1,413	90%
<i>Q3</i>	1,569	1,449	92%
<i>Q6</i>	1,558	1,466	94%

Cultural Sensitivity

Q12	1,596	1,500	94%
Q13	1,503	1,363	91%
Q14	1,575	1,512	96%
Q15	1,505	1,353	90%

Outcomes

Q16	1,577	1,025	65%
Q17	1,566	994	64%
Q18	1,570	1,046	67%
Q19	1,575	981	62%
Q20	1,583	924	58%
Q21	1,574	881	56%
Q22	1,555	959	62%

Improved Functioning

Q16	1,577	1,025	65%
Q17	1,566	994	64%
Q18	1,570	1,046	67%
Q19	1,575	981	62%
Q20	1,583	924	58%
Q22	1,555	959	62%

Social Connectedness

Q23	1,585	1,345	85%
Q24	1,579	1,378	87%
Q25	1,573	1,275	81%
Q26	1,563	1,294	83%

CLAS (New in 2011)

Q30	1,526	1,478	97%
Q31	804	640	80%

ATTACHMENT-D

2013 Adult Demographics
2013 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	%
Gender														
Male	604	93.1%	578	89.3%	566	90.7%	562	92.6%	477	78.1%	470	75.4%	489	79.0%
Female	816	88.3%	783	85.2%	829	90.6%	786	90.2%	584	67.4%	598	67.8%	671	76.3%
Age Group														
18-21	93	89.4%	91	88.3%	74	76.3%	86	88.7%	69	74.2%	62	64.6%	86	87.8%
22-30	164	80.0%	172	86.0%	186	92.1%	170	90.9%	155	77.5%	148	74.0%	150	77.3%
31-45	522	88.6%	511	85.7%	518	88.2%	495	88.6%	391	69.3%	400	71.7%	434	76.4%
46-65	570	94.1%	514	85.2%	559	93.9%	524	93.1%	391	70.5%	395	67.2%	434	75.0%
66-75	59	98.3%	58	95.1%	56	98.2%	53	96.4%	46	79.3%	47	79.7%	54	88.5%
76+	10	100%	10	100%	10	100%	10	100%	9	90.0%	9	90.0%	8	80.0%
Race														
White only	1,017	90.0%	975	86.4%	1,015	91.6%	993	91.1%	759	71.3%	771	70.7%	835	76.6%
White only	104	89.7%	95	82.6%	99	86.1%	96	87.3%	59	57.8%	62	58.5%	73	65.8%
African American only	13	100%	13	100%	13	100%	13	100%	12	92.3%	11	84.6%	11	84.6%
Asian only														
Am Indian/Al Native only	27	93.1%	21	72.4%	29	96.7%	27	93.1%	20	69.0%	13	44.8%	22	73.3%
Nat Hawaiian/Pacific														
Islander only	7	100%	7	100%	7	100%	7	100%	6	85.7%	5	71.4%	6	85.7%
Multiple Race	45	88.2%	41	80.4%	46	90.2%	44	95.7%	42	85.7%	45	97.8%	37	74.0%
Ethnicity														
Hispanic or Latino	403	91.6%	386	88.9%	377	88.5%	343	88.9%	314	76.6%	286	69.4%	308	78.0%
Not Hispanic or Latino	893	89.4%	849	85.4%	895	91.8%	872	91.3%	658	70.4%	680	70.5%	743	76.3%
Length of Services														
0-6 months	40	78.4%	41	78.8%	39	76.5%	42	82.4%	37	78.7%	36	76.6%	38	88.4%
7-11 months	45	80.4%	48	87.3%	51	92.7%	43	78.2%	31	67.4%	40	78.4%	45	84.9%
1-2 years	119	91.5%	119	92.2%	117	94.4%	102	91.9%	98	76.6%	77	64.2%	95	79.8%
3-5 years	159	90.9%	146	83.4%	158	90.3%	148	86.5%	110	67.9%	118	70.2%	121	72.5%
5 years +	1,049	90.7%	998	86.6%	1,033	91.3%	1,008	93.5%	782	71.4%	783	70.2%	855	76.1%
Program														
SMI	894	90.0%	845	85.3%	890	90.7%	861	92.1%	668	70.5%	684	71.4%	711	74.2%
Non-SMI	567	90.6%	550	88.6%	550	91.1%	511	89.0%	421	73.7%	408	69.3%	481	81.9%

ATTACHMENT-E

2013 Consumer Survey Report

2013 Adult Line Item

2013 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
General Satisfaction:	1,464	90.2%
1. I like the services that I received here.	1,474	91.1%
2. If I had other choices, I would still get services from this agency.	1,408	88.0%
3. I would recommend this agency to a friend or family member.	1,444	90.3%
Service Access:	1,399	86.5%
4. The location of services was convenient (parking, public transportation, distance, etc.)	1,332	83.0%
5. Staff were willing to see me as often as I felt it was necessary..	1,388	86.8%
6. Staff returned my call in 24 hours.	1,196	77.0%
7. Services were available at times that were good for me.	1,417	88.3%
8. I was able to get all the services I thought I needed.	1,344	84.6%
9. I was able to see a psychiatrist when I wanted to.	1,184	76.7%
Participation in Treatment Planning	1,376	91.0%
11. I felt comfortable asking questions about my treatment and medication.	1,404	89.4%
17. I, not staff, decided my treatment goals.	1,285	82.3%
Service Quality and Appropriateness	1,444	90.8%
10. Staff here believe that I can grow, change and recover.	1,384	88.2%
12. I feel free to complain.	1,326	83.8%
13. I was given information about my rights.	1,417	88.6%
14. Staff encouraged me to take responsibility for how I live my life.	1,362	86.8%
15. Staff helped me to understand what side effects to watch out for.	1,287	82.4%
16. Staff respected my wishes about who is and who is not to be given information about my treatment..	1,456	91.6%
18. Staff were sensitive to my cultural background (For example: values, traditions, beliefs, race, language, etc.)	1,309	84.5%
19. Staff helped me obtain the information I needed so that I could take charge of managing my illness.	1,304	84.2%
20. I was encouraged to use consumer-run programs (support groups, drop-in centers, crisis phone line, etc.)	1,285	83.7%
Outcomes	1,092	71.7%
21. I deal more effectively with daily problems.	1,220	77.6%
22. I am better able to control my life.	1,196	75.8%
23. I am better able to deal with crisis.	1,109	71.8%
24. I am getting along better with my family.	1,101	73.1%
25. I do better in social situations.	1,039	67.2%
26. I do better in school and/or work	731	59.2%
27. My housing situation has improved	971	67.7%
28. My symptoms are not bothering me as much.	1,028	66.0%
Improved Functioning	1,096	70.6%
28. My symptoms are not bothering me as much.	1,028	66.0%
29. I do things that are more meaningful to me.	1,126	72.6%
30. I am better able to take care of my needs.	1,150	74.3%
31. I am better able to handle things when they go wrong.	1,080	69.8%
32. I am better able to do things that I want to do.	1,039	67.3%
Social Connectedness	1,194	77.1%
33. I am happy with the friendships I have.	1,203	77.8%
34. I have people with whom I can do enjoyable things.	1,233	79.4%
35. I feel I belong in my community.	1,003	65.3%
36. In a crisis, I would have the support I need from family or friends.	1,258	80.7%

ATTACHMENT-F

2013 YSS-F Demographics
2013 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	%
Gender														
Male	929	82.7%	917	83.7%	1,027	95.7%	1043	93.2%	690	62.2%	730	65.6%	969	87.3%
Female	383	81.5%	386	83.9%	420	94.4%	424	92.0%	266	57.7%	284	61.6%	393	85.4%
Age Group														
0-4	1	100%	1	100%	1	100%	1	100%	1	50.0%	1	50.0%	1	100%
5-12	148	84.1%	148	87.6%	165	95.4%	167	96.0%	121	69.1%	131	74.4%	151	86.3%
13-17	1,168	82.2%	1,158	83.3%	1,285	95.3%	1304	92.5%	839	60.0%	883	63.0%	1,215	86.8%
Race														
White only	877	80.2%	882	82.3%	975	95.2%	1005	92.6%	626	58.1%	669	61.8%	939	86.9%
African American only	114	89.8%	110	87.3%	118	96.7%	124	98.4%	79	63.2%	85	67.5%	104	83.9%
Asian only	5	100%	5	100%	5	100%	5	100%	1	20.0%	1	20.0%	5	100%
Am Indian/Al Native only	40	85.1%	39	88.6%	45	97.8%	41	87.2%	36	76.6%	36	76.6%	45	95.7%
Nat Hawaiian/Pacific Islander only	9	100%	9	100%	9	100%	7	87.5%	7	77.8%	7	77.8%	8	100%
Multiple Race	60	80.0%	60	85.7%	67	89.3%	59	84.3%	45	64.3%	48	68.6%	58	77.3%
Ethnicity														
Hispanic or Latino	470	87.2%	445	84.8%	513	95.9%	508	95.0%	331	62.3%	342	64.4%	466	87.9%
Not Hispanic or Latino	774	80.0%	783	82.6%	856	95.0%	884	92.3%	566	59.2%	610	63.5%	824	86.6%
Length of Services														
0-6 months	74	79.6%	74	80.4%	90	98.9%	90	97.8%	45	48.4%	53	57.0%	71	83.5%
7-11 months	94	87.0%	97	93.3%	98	96.1%	105	93.8%	58	56.3%	64	62.1%	91	82.7%
1-2 years	141	75.8%	152	82.6%	169	93.9%	176	94.6%	113	61.1%	117	62.9%	144	78.3%
3-5 years	259	83.0%	260	84.4%	285	96.0%	277	91.7%	180	57.7%	197	63.1%	264	85.4%
5 years +	705	83.3%	682	82.7%	763	95.4%	785	93.3%	541	64.5%	562	66.7%	758	90.0%
CFT														
Yes	967	85.3%	932	84.3%	1,045	96.0%	1,051	94.2%	683	61.4%	719	64.5%	979	88.0%
No	286	77.1%	302	82.1%	327	95.1%	343	91.2%	221	59.2%	237	63.5%	309	83.7%

ATTACHMENT-G

2013 YSS-F Line Item**2013 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
General Satisfaction:	1,316	82.3%
1. Overall, I am satisfied with the services my child received.	1,353	84.9%
4. The people helping my child stuck with us no matter what.	1,295	81.6%
5. I felt my child had someone to talk to when he/she was troubled.	1,230	79.8%
7. The services my child and/or family received were right for us.	1,275	80.7%
10. My family got the help we wanted for my child.	1,255	79.7%
11. My family got as much help as we needed for my child.	1,161	73.9%
Service Access	1,307	83.8%
8. The location of services was convenient for us.	1,234	77.7%
9. Services were available at times that were convenient for us.	1,302	82.2%
Participation in Treatment Planning	1,473	92.9%
2. I helped to choose my child's services.	1,413	90.2%
3. I helped to choose my child's treatment goals.	1,449	92.3%
6. I participated in my child's treatment.	1,466	94.1%
Cultural Sensitivity	1,451	95.3%
12. Staff treated me with respect.	1,500	94.0%
13. Staff respected my family's religious/spiritual beliefs.	1,363	90.6%
14. Staff spoke with me in a way that I understood.	1,512	96.0%
15. Staff were sensitive to my cultural/ethnic background.	1,353	89.9%
Outcomes	961	61.0%
16. My child is better at handling daily life.	1,025	65.0%
17. My child gets along better with family members.	994	63.5%
18. My child gets along better with friends and other people.	1,046	66.6%
19. My child is doing better in school and/or work.	981	62.3%
20. My child is better able to cope when things go wrong.	924	58.4%
21. I am satisfied with our family life right now.	881	56.0%
22. My child is better able to do things he or she wants to do.	959	61.6%
Improved Functioning	1,016	64.3%
16. My child is better at handling daily life.	1,025	65.0%
17. My child gets along better with family members.	994	63.5%
18. My child gets along better with friends and other people.	1,046	66.6%
19. My child is doing better in school and/or work.	981	62.3%
20. My child is better able to cope when things go wrong.	924	58.4%
22. My child is better able to do things he or she wants to do.	959	61.6%
Social Connectedness	1,367	86.8%
23. I know people who will listen and understand me when I need to talk.	1,345	84.9%
24. I have people that I am comfortable talking with about my child's problems.	1,378	87.3%
25. In a crisis, I would have the support I need from family or friends.	1,275	81.0%
26. I have people with whom I can do enjoyable things.	1,294	82.8%

ATTACHMENT-H

List of Acronyms
2013 Consumer Survey Report

Acronyms	Description
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
T/RBHA	Tribal/Regional Behavioral Health Authority
WSDSG	Western States Decision Support Group
YSS-F	Youth Services Survey for Families

APPENDIX-1
(See attached)
Year 2013 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 2013 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

2013 Consumer Survey Report

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.

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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?

What would improve the services that you receive here?

Please list any other comments you may want to share:

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 <input type="radio"/> No - SMI (GMH o SA) <input type="radio"/>	
El Estado de Elegibilidad del Cliente: TXIX <input type="radio"/> TXXI <input type="radio"/>	ID de la encuesta: _____
Encuesta tomada en: Casa <input type="radio"/> Clínica <input type="radio"/> Por teléfono <input type="radio"/>	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

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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.

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"/>

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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.

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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.

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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?

¿Qué mejoraría los servicios que usted recibe aquí?

Por favor escriba cualquier otro comentario que usted quiera compartir:

Gracias por completar este cuestionario.

APPENDIX-2
(See attached)
Year 2013 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 2013 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

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 last 6 months ? (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
<input type="radio"/> Other (describe): _____		
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)	

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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:		

¡¡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 <input type="radio"/> TXXI <input type="radio"/>	ID de la encuesta: _____
Encuesta tomada en : Casa <input type="radio"/> Clínica <input type="radio"/> Por teléfono <input type="radio"/>	Cliente inscrito en DDD: Si _____ No _____

ENCUESTA PARA FAMILIAS DE JÓVENES QUE RECIBIERON SERVICIOS DURANTE EL AÑO 2013

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 Hawai/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?	<hr/> <hr/>					
28. ¿Qué mejoraría los servicios aquí?	<hr/> <hr/>					

Por favor siga contestando preguntas en la siguiente página.

POR FAVOR MARQUE SUS RESPUESTAS RELLENANDO LAS BURBUJAS COMPLETAMENTE

Pregunta adicional del estado:	Muy De acuerdo	De acuerdo	Neutro	En desacuerdo	Muy en desacuerdo	No Aplica
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 éste?	<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)	

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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
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

Por favor siga contestando preguntas en la siguiente página.

POR FAVOR MARQUE SUS RESPUESTAS RELLENANDO LAS BURBUJAS COMPLETAMENTE

44. Desde que comenzó a recibir servicios, el número de días que mi hijo estuvo en la escuela fue...	<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	
45. ¿Ha sido su hijo arrestado durante los 12 meses pasados?	<input type="radio"/> Sí	<input type="radio"/> No
46. ¿Estuvo arrestado su hijo durante los 12 meses antes a éste?	<input type="radio"/> Sí	<input type="radio"/> No
47. Durante el año pasado, los incidentes de su niño 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 encuentro con policía éste año o el año pasado)	
48. ¿Fue expulsado su niño o suspendido de la escuela durante los 12 meses pasados?	<input type="radio"/> Sí	<input type="radio"/> No
49. ¿Fue expulsado su niño o suspendido de la escuela durante los 12 meses antes de esto?	<input type="radio"/> Sí	<input type="radio"/> No
50. Durante el año pasado, el número de días mi niño fue a la escuela era...	<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	

