

Consumer Perception Survey Data EBP Symposium April 3-April 4, 2017

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TOPICS

- Consumer Perception Survey California Data Collection
- Data analysis pilot demonstration
- Feedback and data use examples
- Discussion:
 - ✓ How do or should we use satisfaction data?
 - ✓ What role does satisfaction data play in outcomes tracking?
 - ✓ What are barriers/challenges with gathering satisfaction data?



Consumer Perception Data Collection in California

- Goal of the survey: To collect data for reporting on the federally determined National Outcomes Measures (NOMs)
- The Substance Abuse and Mental Health Services administration (SAMHSA) requires reporting on NOMs
- Receipt of federal Community Mental Health Services Block Grant (MHBG) funding is contingent upon the submission CPS data
- CIBHS oversees the data processing of the CPS data for the state of California
- Recently initiated a pilot to test the use of eBHS for CPS survey data



The National Outcome Measures (NOM) Purpose (SAMHSA)

"The Substance Abuse and Mental Health Services Administration (SAMHSA) has identified 10 domains for National Outcome Measures (NOM). The domains embody meaningful, real-life outcomes for people who are striving to attain and sustain recovery, build resilience, and work, learn, live, and participate fully in their communities. The NOMs matrix represents the beginning of a state-level reporting system that, in turn, will create an accurate and current national picture of substance-abuse and mental-health services."



NOM - Domain 8

SAMHSA's National Outcome Measure Domains

- Abstinence from drug use and alcohol abuse
 - a) Decreasing symptoms of mental illness and improved functioning
- Resilience and sustaining recovery
 - a) Getting and keeping a job or enrolling and staying in school
- Resilience and sustaining recovery
 - a) Decreased involvement with the criminal justice system
- 4) Resilience and sustaining recovery
 - a) Securing a safe, decent, and stable place to live
- Resilience and sustaining recovery
 - Social connectedness to and support from others in the community such as family, friends, co-workers, and classmates
- Increased access to services for both mental health and substance abuse
- Retention in services for substance abuse or decreased inpatient hospitalizations for mental health treatment
- 8) Quality of services provided
 - a) Client perception of care
- 9) Quality of services provided
 - a) Cost-effectiveness
- 10) Quality of services provided
 - a) Use of evidence-based practices in treatment





ADULT SURVEY Fall 2016

ENGLISH Without QOL



Please help our agency make services better by answering some questions. Your answers are confidential and will not influence current or future services you receive. For each survey item below, please fill in the circle that corresponds to your choice. Please fill in the circle completely.

EXAMPLE: Correct Incorrect

MHSIP Consumer Survey*:

Please answer the following questions based on the LAST 6 MONTHS OR if you have not received services for 6 months, just give answers based on the services you have received so far. Indicate if you Strongly Agree, Agree, are Neutral, Disagree, or Strongly Disagree with each of the statements below. If the question is about something you have not experienced, fill in the circle for Not Applicable to indicate that this item does not apply to you.

			Strongly Agree	Agree	I am Neutral	Disagree	Strongly Disagree	Not Applicable
	1.	I like the services that I received here.	0	0	0	0	0	0
\	2.	If I had other choices, I would still get services from this agency.	General		0	0	0	0
	3.	I would recommend this agency to a friend or family member.	Satisfaction Domain		0	0	0	0
	4.	The location of services was convenient (parking, public transportation, distance, etc.).	O	0	0	0	0	0
	5.	Staff were willing to see me as often as I felt it was necessary.	0	0	0	0	0	0
	6.	Staff returned my calls within 24 hours.	0	0	0	0	0	0
	7.	Services were available at times that were good for n	ne. O	0	0	0	0	0
	8.	I was able to get all the services I thought I needed.	0	0	0	0	0	0



Outcomes Domain

As a direct result of the services I received:	Strongly Agree	Agree	I am Neutral	Disagree	Strongly Disagree	Not Applicable
23. I am better able to deal with crisis.	0	0	0	0	0	0
24. I am getting along better with my family.	0	0	0	0	0	0
25. I do better in social situations.	0	0	0	0	0	0
26. I do better in school and /or work.	0	0	0	0	0	0
27. My housing situation has improved.	0	0	0	0	0	0
28. My symptoms are not bothering me as much.	0	0	0	0	0	0
29. I do things that are more meaningful to me.	0	0	0	0	0	0
30. I am better able to take care of my needs.	0	0	0	0	0	0
31. I am better able to handle things when they go wrong.	0	0	0	0	0	0
32. I am better able to do things that I want to do.	0	0	0	0	0	0

Questions that fall in the outcomes domain



Quality of Life – Optional Questions

Quality of Life Questions:

Please answer each of the following questions by filling in the circle that best describes your experience or how you feel. Please fill in only one circle for each question. For some questions, you may choose Not Applicable if the question does not apply to you.

General Life Satisfaction	Terrible	Unhappy	Mostly Dissatisfied	Mixed	Mostly Satisfied	Pleased	Delighted
1. How do you feel about your life in general?	0	0	0	0	0	0	0
Living Situation							
Think about your current living situation.			Mostly		Mostly		
How do you feel about:	Terrible	Unhappy	Dissatisfied	Mixed	Satisfied	Pleased	Delighted
A. The living arrangements where you live?	0	0	0	0	0	0	0
B. The privacy you have there?	0	0	0	0	0	0	0
C. The prospect of staying on where you currently live for a long period of time?	0	0	0	0	0	0	0
Daily Activities & Functioning							
Think about how you spend your spare time.How do you feel about:	Terrible	Unhappy	Mostly Dissatisfied	Mixed	Mostly Satisfied	Pleased	Delighted
A. The way you spend your spare time?	0	0	0	0	0	0	0
B. The chance you have to enjoy pleasant or beautiful things?	0	0	0	0	0	0	0
C. The amount of fun you have?	0	0	0	0	0	0	0
D. The amount of relaxation in your life?	0	0	0	0	0	0	0



Arrest Data

Please answer the following questions to let us know how you are doing.				
 Approximately, how long have you received This is my first visit here. I have had more than one visit but I have received services for less than one month. 	services here? O 1 - 2 Months O 3 - 5 Months O 6 months to 1 year	○ More than 1 year		
Please answer Questions #2 - 4, below, if you have been receiving services for ONE YEAR OR LESS. If you have been receiving services for "MORE THAN ONE YEAR," please SKIP to Questions #5. 2. Were you arrested since you began to receive mental health services? OYes ONO 3. Were you arrested during the 12 months prior to that? OYes ONO 4. Since you began to receive mental health services, have your encounters with the police Obeen reduced (for example, I have not been arrested, hassled by police, taken by police to a shelter or crisis program) O stayed the same O increased				
O not applicable (I had no police encounters this year or last year) SKIP to Question #8, below				
Please answer Questions #5 - 7 only if you have been receiving mental health services for "MORE THAN ONE YEAR."				
5. Were you arrested during the last 12 months? O Yes O No				
6. Were you arrested during the 12 months prior to that? OYes ONo				
7. Over the last year, have your encounters with the police				

Demographics

	Please answer the following questions to let us know a little about you.	
	8. What is your gender?	Filtering
		option
(10. What is your race? (Please mark all that apply.)	•
	O American Indian / Alaskan Native O Native Hawaiian / Other Pacific Islander O Unknown	
	O Asian O White / Caucasian	
	O Black / African American O Other	
	CONTINUED ON NEXT PAGE	
_	CSI County Client Number ****Must be entered on EVERY page*** Page 4 of 5	
DOB allows	Survey Dates: November 1-15, 2010 ENGLISH Adult Survey	
for age	11. What is your date of birth? (Write it in the boxes AND fill in the circles that correspond. See Example.) Date of Birth (mm-dd-vvvv) • EXAMPLE: Date of birth on April 30, 1967:	
filtering 🚃	Date of Birth (mm-dd-yyyy)	
option	1. Write in your date of birth	
· W_	1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	_

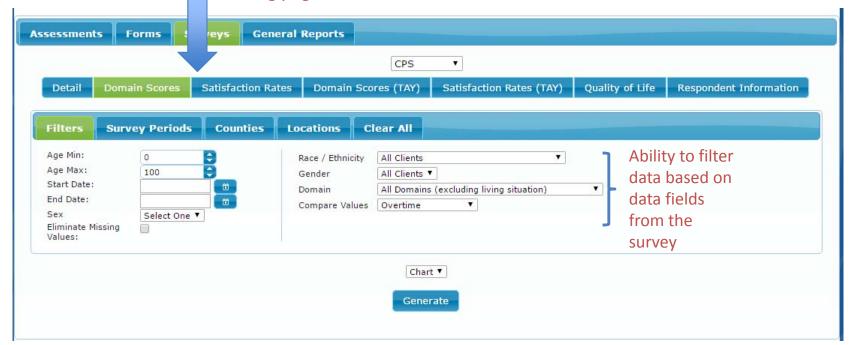
Services and Survey Accommodations

· · · · · · · · · · · · · · · · · · ·					
12. Were the services you received provided in the land	nguage you prefer? O Yes O No				
· · · · · · · · · · · · · · · · · · ·	. Was written information (e.g., brochures describing available services, your rights as a consumer, and mental health education materials) available to you in the language you prefer? OYes ONo				
 14. What was the primary reason you became involve O I decided to come in on my own. O Someone else recommended that I come in. O I came in against my will. 	ed with this program? (Mark one):				
 15. Please identify who helped you complete any par I did not need any help. A mental health advocate / volunteer helped me. Another mental health consumer helped me. A member of my family helped me. 	O A professional interviewer helped me.				
negative feedback. Also, if there are areas which	ck of this form, if needed. We are interested in both positive and were not covered by this questionnaire which you feel should have time and cooperation in completing this questionnaire.				



CPS Data – Demonstration

Two different types of analyses 1) Domain scores (Likert scale), 2) Percentage of clients who answered 'agree' or 'strongly agree'





CPS Survey Pilot

- Step 1: Build basic analytics in eBHS
 - ✓ Likert Scale average scores
 - ✓ Satisfaction rates
- Step 2: Solicit county to assist in developing meaningful report templates
- Step 3: Open up system to interested counties for feedback and testing



Goal of CPS Pilot

- To use every piece of data collected
- Collect feedback from counties on system and analyses
- To continually improve the way data is reported based on given feedback
- To make data easily accessible to counties



CPS Pilot Feedback	
Please rate the overall look of eBHS	Excellent 13% Fair 13% Good 75%

- For the most part the software is easy to use.
- Very user friendly and reacted quickly when forms were submitted/updated during the live demo.
- had some problems with the print feature.
- The web service provided by CIBHS runs very quickly considering the amount of data that must be processed. The information that is presented is color coded, which makes deciphering the data simple.

How user friendly eBHS?	Somewhat 38%
	Very 63%

- Enjoyed the direct-entry aspect for clients and clinicians.
- Learning how to navigate through the different menus of eBHS was straightforward. The webinars available allowed me to better understand the purpose of certain filters and tabs.
- it would be nice if errors were explained or not allowed.

Please rate the usefulness of the CPS data	Not very useful 13%
in eBHs	Somewhat useful 25%
	Very useful 63%

• The sub-tabs take a little understanding to set up each piece of the data pull, it would be nice for it to default with all sessions of the survey then be able to filter down from there.



If applicable, please let us know what external reporting requirements the CPS analyses in eBHS can help meet

- Beneficiary satisfaction (EQRO, DHCS, Title 9, etc.).
- The CPS analyses in eBHS can help our department better understand external issues regarding clients. They may have barriers such as their living situations that may prevent them from reaching their goals. The results of the CPS provided by eBHS will help us analyze what those barriers may be in order to further help in their recovery.
- DHCS Audits, EQRO.
- We will use the data/reports both internally and externally results shared with staff, stakeholders, community, auditors, etc.



If applicable, please let us know what internal reporting requirements the CPS analyses in eBHS can help meet

- Goal setting around low client scores. Program planning around team success and needs.
- The CPS analyses in eBHS can help identify internal issues in our organization that can be improved in order to help clients receive the best level of care. The eBHS results could reveal that clients may be unhappy that staff members are not returning their calls within a certain time frame. This gives our organization the opportunity to discover why this is occurring and improve the process of returning calls.
- Contract Compliance, reporting of CPS data to clinics and contractors.
- We will be reviewing the data in our QIC meeting next week.



Data Use Example Napa County

- Reviewed data and found lower scores in the 'Perception of Social Connectedness' domain
- Initiated a Performance Improvement Project (PIP) based on the results
- Conducted focus groups with stakeholders to better understand the data



electronic Behavioral Health Solutions (eBHS)

 eBHS is a flexible web-based platform that enables custom development to support unique organizational needs for data gathering, data management, and organizational work flow application development, individual and aggregate statistical reports with dynamic graphing and custom reporting

 Platform developed by Steve Weatherbee, Ph. D., founder of eCenter Research, Inc. – specializing exclusively in Software as a Service for mental health and addictions treatment providers



Discussion – what do you think?

✓ How do or should we use satisfaction data?

✓ What role does satisfaction data play in outcomes tracking?

√What are barriers/challenges with gathering satisfaction data?





For More Information:

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