

Making Meaningful the Measurement of Clients' Perceptions of Care Within Drug Medi-Cal Organized Delivery Systems (DMC-ODS)

Behavioral Health Informatics Conference

May 3, 2018

Client Treatment Perceptions Survey (TPS)

Cheryl Teruya, PhD, Darren Urada, PhD,
David Huang, PhD, Vandana Joshi, PhD

UCLA Integrated Substance Abuse Programs

TPS - Purposes

- Fulfill External Quality Review Organization (EQRO) requirement
- Collect data for the CMS-required evaluation of the DMC-ODS waiver
- Support DMC-ODS quality improvement

TPS – Development & TA

- Reviewed existing client satisfaction/perceptions of care surveys – validated or in wide use (e.g., MHSIP/CPS, CAHPS/ECHO, PoC)
- Stakeholder input (e.g., single-page, wording)
- Based on San Francisco County’s model; adapted to address DMC-ODS waiver evaluation domains
- TPS website: MHSUDS IN, forms (13 languages, 2 formats), FAQs, Instructions

TPS – Administration

- Counties coordinate administration
 - Submit paper forms or electronic data files to UCLA
- UCLA prepares county- and program-level summary reports for counties

TPS Preliminary Results

Marin, Riverside, San Mateo, Santa Clara, Contra Costa, San Francisco, and Los Angeles Counties

Number of Completed TPS Forms: Survey Period - November 2017 (and January 2018)

OP/IOP	Residential	OTP/NTP	Detox/WM	Total
3,556 (39.5%)	2,064 (22.9%)	3,275 (36.4%)	107 (1.2%)	9,002 (100%)

Note: Partial hospitalization (N=4) and Other/missing (N=30) not included in analysis due to small Ns.

% of Survey Forms with All 14 Questions Answered

Marin	Riverside	San Mateo	Santa Clara	Contra Costa	San Francisco	Los Angeles	Total
86.1	93.6	94.6	76.0	90.5	92.2	82.6	85.9

Overall Average Client Satisfaction Ratings by Treatment Setting

OP/IOP		Residential		OTP/NTP		Detox/WM		Total	
N	Avg (SD)	N	Avg (SD)	N	Avg (SD)	N	Avg (SD)	N	Avg (SD)
3,078	4.5 (0.6)	1,827	4.3 (0.7)	2,722	4.5 (0.6)	101	4.5 (0.6)	7,728	4.4 (0.6)

% of Clients w/ Overall Positive Ratings by Demographics

Demographics	OP/IOP	Residential	OTP/NTP	Detox/WM	Total
Gender Identity*					
Female	95.5	89.6	94.5	94.9	93.7
Male	95.2	89.6	94.2	87.7	93.4
Transgender	86.7	100.0	94.4	100.0	91.2
Other	71.0	64.0	79.2	100.0	73.3
Age					
18-25	94.0	86.1	95.8	80.0	91.6
26-35	95.4	87.7	94.6	93.3	92.9
36-45	96.9	91.3	94.1	96.0	94.5
46-55	93.5	90.5	92.3	84.0	92.2
56+	94.1	94.1	94.9	100.0	94.6
Race/ethnicity*					
American Indian/Alaskan Native	94.2	92.6	91.9	--	92.9
Asian	97.7	93.8	93.6	66.7	95.6
Black/African American	93.1	93.3	94.3	100.0	93.7
Latino	96.1	89.5	95.5	92.3	94.2
Native Hawaiian/Pacific Islander	96.7	93.8	81.8	100.0	93.4
White/Caucasian	95.0	88.0	94.2	89.5	92.9
Other	93.9	90.3	92.2	87.5	92.5

* Multiple responses allowed

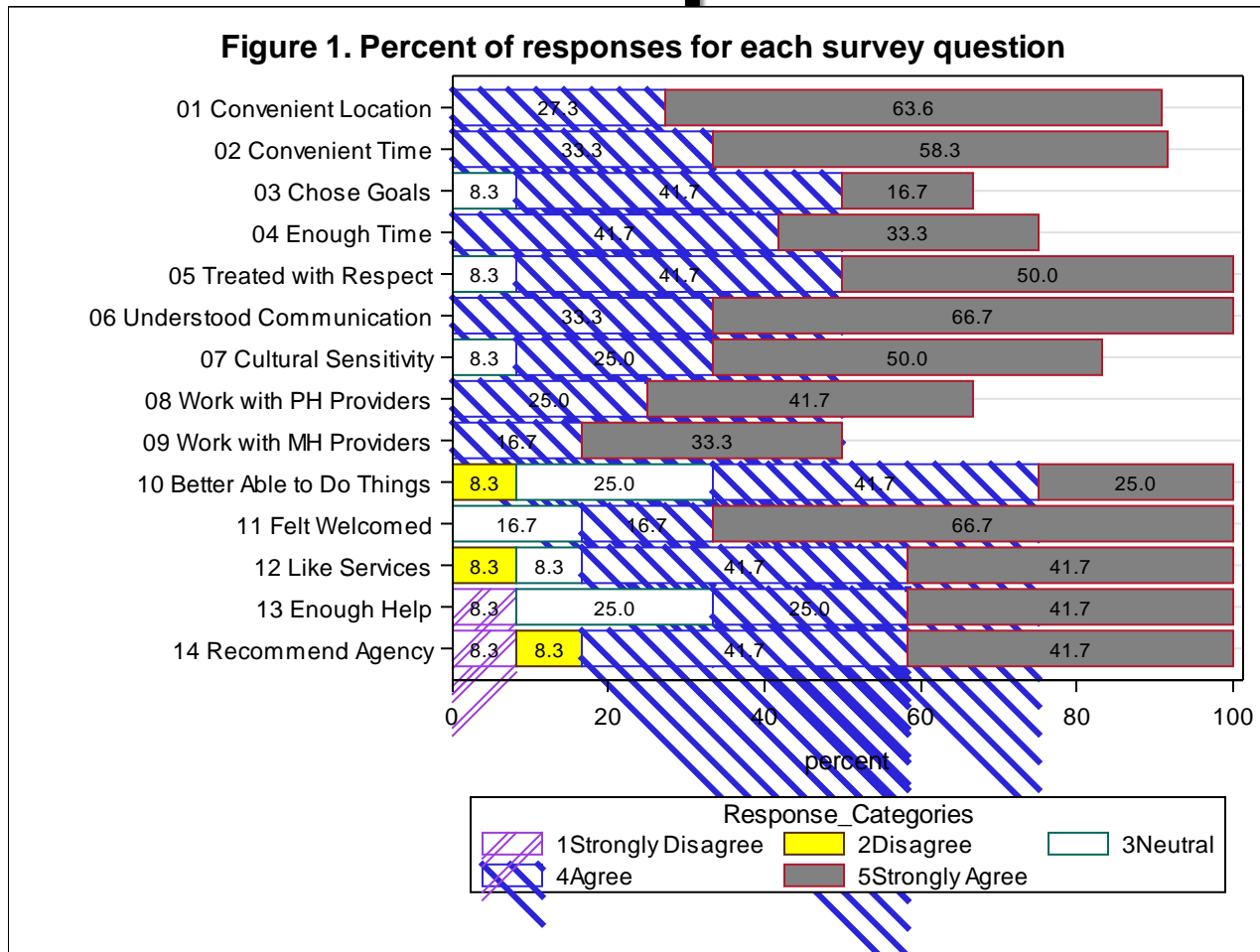
Individual Survey Questions – Mean Scores

Survey Question	Domain	Average Score
1 Convenient Location	Access	4.3
2 Convenient Time	Access	4.3
3 Chose Goals	Quality	4.3
4 Enough Time	Quality	4.4
5 Treated with Respect	Quality	4.5
6 Understood Communication	Quality	4.5
7 Cultural Sensitivity	Quality	4.4
8 Work with PH Providers	Care Coordination	4.3
9 Work with MH Providers	Care Coordination	4.3
10 Better Able to Do Things	Outcome	4.3
11 Felt Welcomed	General Satisfaction	4.5
12 Like Services	General Satisfaction	4.5
13 Enough Help	General Satisfaction	4.3
14 Recommend Agency	General Satisfaction	4.5

Mean Satisfaction Score in Five Domains

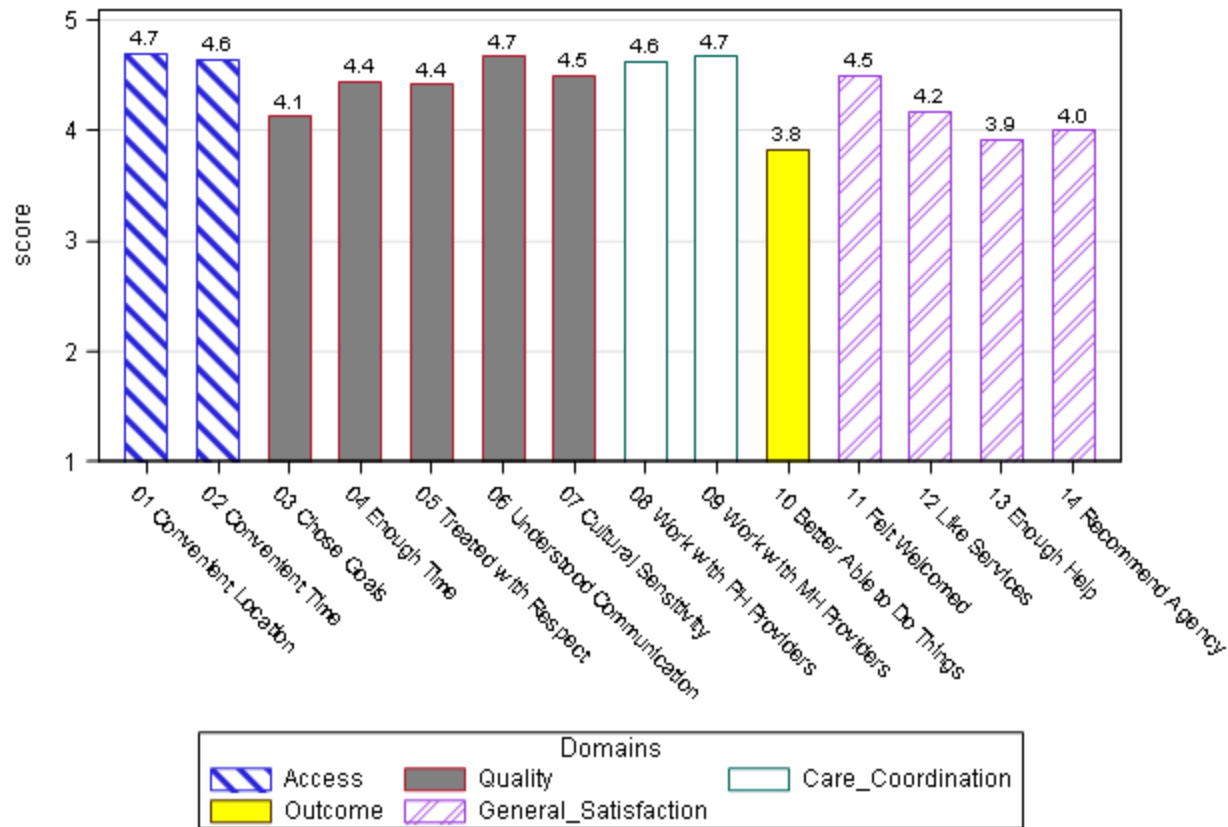
Domain	Average Score
Access	4.3
Quality	4.5
Care Coordination	4.3
Outcome	4.3
General Satisfaction	4.5

County & Provider Reports – Sample



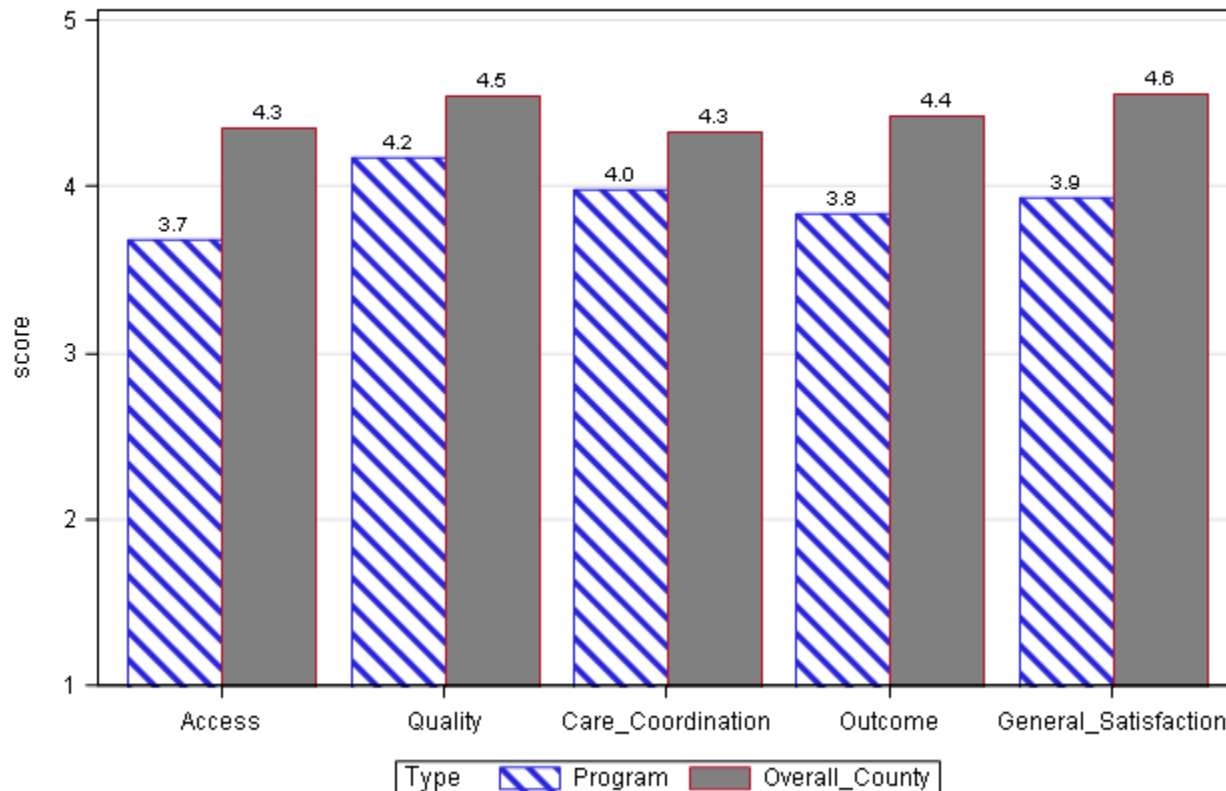
County & Provider Reports – Sample

Figure 2. Average score of survey questions (range 1-5)



Program Report – Sample

Figure 3. Average scores (range 1-5) of the five domains by program and overall county



* Only clients who responded to each question in the domains were included.

Examples of Client Comments

“Please separate windows for take home patients and the regular detox/daily dosers. I feel that would decrease the wait time and satisfy clients.”

“I feel there should be more services for housing resources and transitional housing. I don’t have anywhere for me and my child to go after my treatment.”

“Excellent curriculum – would very much like access to mental health services/support. Would wish for more therapy options.”

County Use of Client Survey Data for Quality Improvement - Examples

- Reviewed TPS reports with the Quality Improvement Committee
- Reviewed/analyzed comments; if negative, visits programs to discuss
- Deeper dive into the data (e.g., low cultural sensitivity scores at program with Spanish speakers)
- Considering including client satisfaction as one metric in individual provider report cards relative to peers
- Regular administration (fourth visit and at discharge) to determine if meeting clients' needs/demands
- Shared report with DMC-ODS providers during onsite reviews



TPS – Next Steps

- Stakeholder feedback
 - Youth TPS Form
 - Electronic TPS Form
- Additional analyses
- Update TPS website:
<http://www.uclaisap.org/ca-policy/html/client-treatment-perceptions-survey.html>
- Next survey period: October 1-5, 2018

Acknowledgements

UCLA DMC-ODS Evaluation Team

Darren Urada (PI), David Huang, Vandana Joshi, Valerie Antonini, Dave Bennet, Anne Lee, Elise Tran, Howard Padwa, Kevin Moino, Eva Vasquez

San Francisco County

Department of Health Care Services

Thank you!

cteruya@mednet.ucla.edu