

Sacramento County



Adult System of Care Performance Outcomes Report May 2011 Consumer Survey Administration

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Mental Health Report

EXECUTIVE SUMMARY

The following document reports data collected in May 2011 for the Sacramento County Division of Behavioral Health Services, Mental Health Performance Outcome System. This report details response rate information and focuses on satisfaction with services received within the Sacramento County Adult Mental Health System of Care.

Major Findings

- As a whole, the Adult System of Care achieved a response rate of 53%, lower than the previous rate of 59%; the percentage of consumers reflected is very low, with less than half of consumers (41%) reflected in the satisfaction data.
- 78% of the 1603 surveys submitted contained responses to survey items. Approximately 59% of those without responses were due to refusal to complete the survey.
- 60% of clients completed the survey by themselves. Other staff, family members, and advocates/volunteers helped the majority of those who did need help.
- Of the consumers who responded, 65% had been receiving services for at least 6 months.
- Overall, adult clients are satisfied with services received from the Sacramento County Mental Health System of Care, and mean satisfaction scores continue to remain stable.
- Satisfaction is highest in Quality and Appropriateness, Participation in Treatment Planning and General Satisfaction.
- Average satisfaction scores for the seven domains were analyzed by ethnicity, race and language. The following significant differences were found:
 - Hispanic consumers reported significantly higher satisfaction in Outcomes in Services, Functioning and Social Connectedness, compared to Non-Hispanic consumers.
 - Other Race consumers were significantly less satisfied in Quality and Appropriateness and Participation in Treatment Planning than White and Black consumers and were significantly less satisfied Overall than Black consumers.
 - Non-English speaking consumers were significantly more satisfied with Access and significantly less satisfied with Quality and Appropriateness, Outcomes of Services, Functioning and Social Connectedness than English speaking consumers.
- The Division of Behavioral Health Services, Mental Health has targeted three items on the satisfaction survey as on-going performance improvement goals within the Quality Management Improvement Plan. The items are listed below, along with the data from previous sampling periods.

Item #	May-11 (N=1244)		May-09 (N=1206)		Nov-08 (N=1558)		May-08 (N=1413)	
	Percent Agree	Average Score						
6	79	4.25	71	4.00	70	3.97	68	4.02
17	77	4.21	71	4.06	69	4.01	65	4.00
20	79	4.27	71	4.10	71	4.08	67	4.09

Definition of Items

6: Staff returned my calls within 24 hours.

17: I, not staff, decided my treatment goals.

20: I was encouraged to use consumer run programs.

SACRAMENTO COUNTY ADULT SYSTEM OF CARE

The Division of Behavioral Health Services, Mental Health encourages providers to reach a response rate of at least 75%. Response rate (B/A) is calculated by dividing the number of surveys received (whether or not they were fully completed) by the unduplicated number of clients receiving face-to-face services during the collection period. The number of clients receiving face-to-face services is determined by the number of clients who received at least one of the several Treatment Codes (TX Code) listed in the appendix and did not have "Phone" or "Telehealth" in Place of Service.

As the data in the tables below illustrates, the system wide response rate decreased from 59% to 53% between May 2009 and May 2011.

The completion rate (C/B) is determined by dividing the number of surveys completed by the total number of surveys received. The percentage of surveys completed increased by 17 percentage points since the last data collection period.

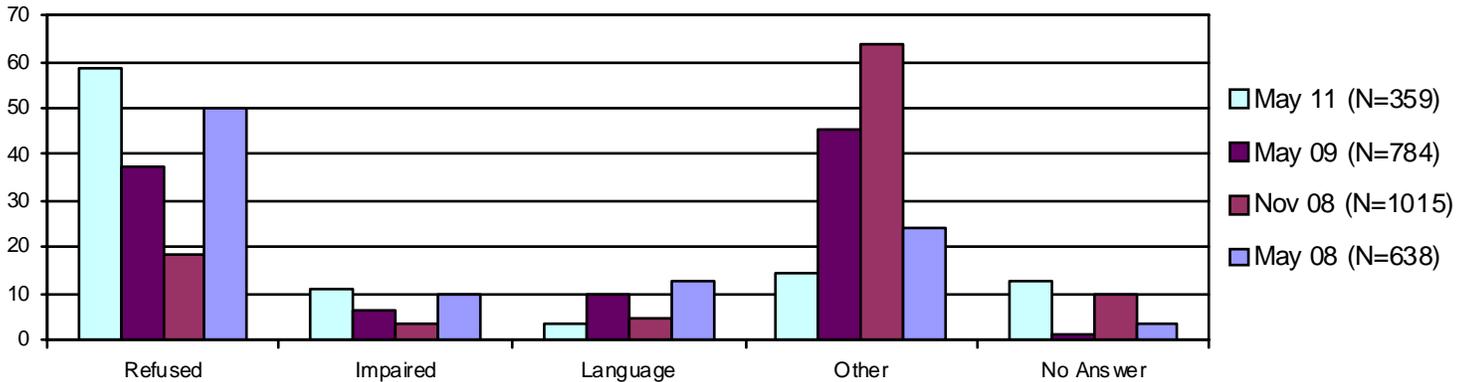
The percentage of consumers reflected (C/A) is determined by dividing the number of surveys completed by the total number of consumers served. The percentage of consumers reflected increased by 5 percentage points since the last data collection period.

	A	B	C	B/A	C/B	C/A
	Consumers Served (N)	Surveys Received (N)	Completed Surveys (N)	Response Rate (%)	Completion Rate (%)	Consumers Reflected (%)
May 2011	3001	1603	1244	53	78	41
May 2009	3389	1990	1206	59	61	36
November 2008	3951	2573	1558	65	61	39
May 2008	3770	2051	1413	54	69	38

- Taking into account both the response rate and the completion rate, the satisfaction data in the following report reflects 41% of adult consumers served during the May 2011 data collection time frame.

Agency staff was expected to complete the “reason” section if a consumer did not complete a survey. The figure on the below illustrates the reasons given by staff for incomplete surveys. 3.3% percent of respondents said that surveys were not available in their preferred language; down from 9.7% from the last sampling period.

Reason for Incomplete Surveys: Historical View



For respondents who reported not having a survey available in their preferred language, the next table indicates their preferred language according to the MH information system, Avatar. The data supports the need for additional survey translations (such as Mien, Farsi and Korean). Consumers whose primary language is Russian or Hmong also reported not having the survey available in their preferred language. Since these translations were available, providers should ensure surveys are offered in the appropriate language to consumers. The number of consumers not completing a survey due to lack of surveys in their language decreased this reporting period.

Primary Language for Consumers with Incomplete Surveys due to Lack of Surveys in their Language				
LANGUAGE	May 11 (N=12)		May 09 (N=76)	
	N	%	N	%
English	0	0	6	7.9
Spanish	0	0	2	2.6
Russian	1	8.3	19	25.0
Hmong	6	50.0	2	2.6
Vietnamese	0	0	1	1.3
Farsi	1	8.3	0	0
Mien	2	16.7	11	14.5
Korean	1	8.3	0	0
Armenian	0	0	3	3.9
Cambodian	0	0	4	5.3
Lao	0	0	3	3.9
Other	0	0	19	25.0
Unknown/Not Reported	1	8.3	6	7.9

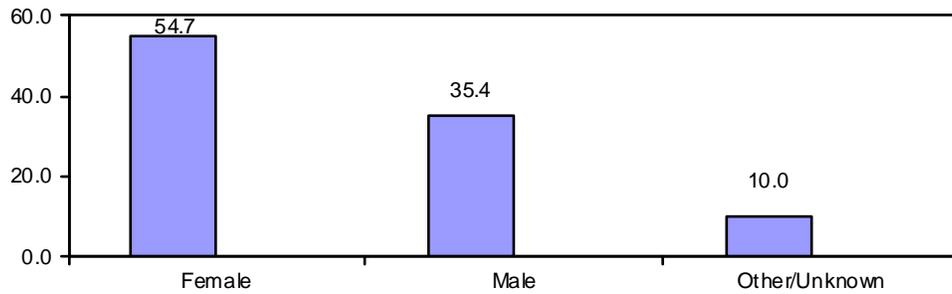
The table below summarizes the amount of help consumers reported needing and receiving assistance with the survey. Sixty percent of consumers reported that they did not need help completing the survey, which is similar to last period's reporting of 63%. The most utilized source of help was the consumer's clinician or case manager and care should be taken to ensure that clinicians do not assist consumers with the survey whenever possible. It should also be noted that for consumers needing help with the survey, the second and third most utilized sources of help were a family member or a mental health advocate/volunteer, which are encouraged methods of providing assistance.

WHO HELPED CONSUMER COMPLETE SURVEY				
	MAY 2011 (N=1244)		MAY 2009 (N=1206)	
Domain	N	Percent	N	Percent
Clients who indicated they did NOT need help.	746	60%	759	63%
Clients who indicated they need help.	476	38%	327	27%
Of those who indicated needing help, they noted the following help source: (Note: Consumers were permitted to choose more than one response or may not have selected a source, so total percent may not equal 100 %.)				
A mental health advocate/volunteer helped me.	77	16%	67	20%
A mental health consumer helped me.	41	9%	21	6%
A member of my family helped me.	80	17%	76	23%
A professional interviewer helped me.	57	12%	25	5%
My clinician/case manager helped me.	100	21%	48	15%
A staff member other than my clinician or case manager helped me.	54	11%	49	15%
Someone else helped me.	67	14%	41	13%

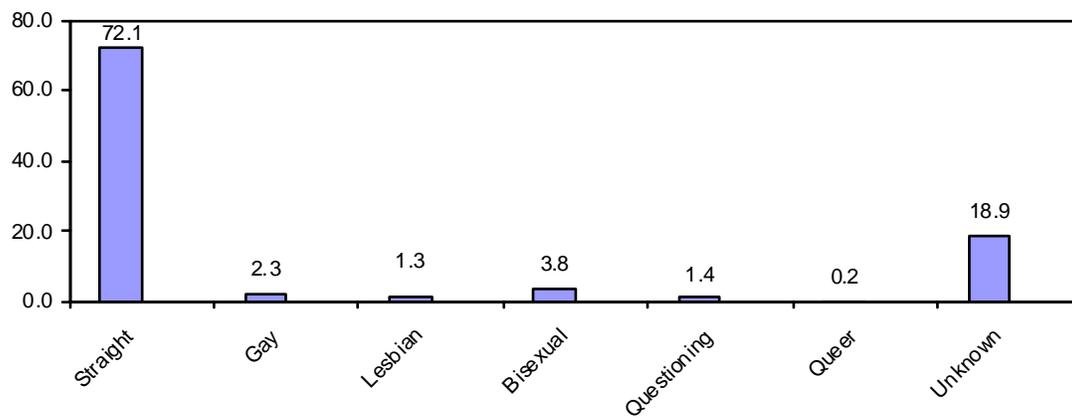
DEMOGRAPHICS

The next four figures illustrate the Gender, Sexual Orientation, Latino Origin and Race of adult consumers who participated in the survey.

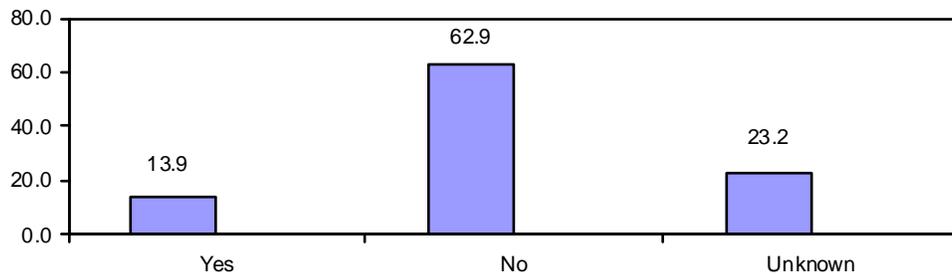
Gender (N=1244)



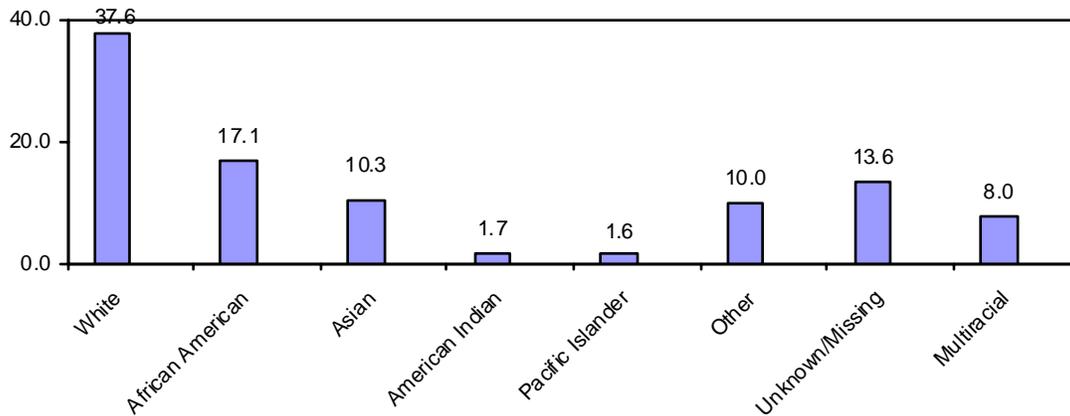
Sexual Orientation (N=1244)



Mexican/Hispanic/Latino Origin (N=1244)



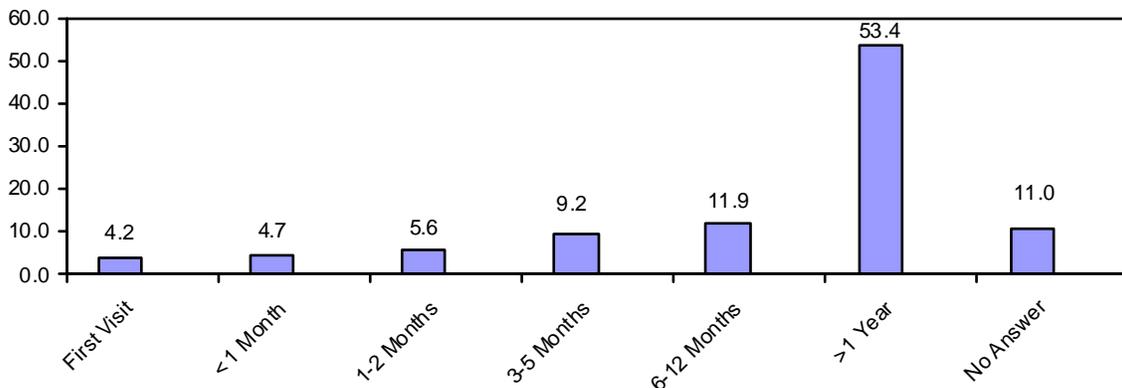
Race (N=1244)



LENGTH OF TIME IN SERVICES

Of the consumers that responded, 65% had received services for at least six months.

Length of Service (N=1244)



SACRAMENTO COUNTY CONSUMER SATISFACTION OUTCOMES

Overall, adult consumers are satisfied with the services they receive in the Sacramento County Mental Health System. The data represented in the table illustrates average scores for the seven domains measured. Each domain has several items scored on a five-point scale: 1=Strongly Disagree, 2=Disagree, 3=Neutral, 4=Agree, 5=Strongly Agree. Higher scores reflect higher levels of satisfaction, and consumers are considered “Satisfied” in a domain if their average scores were greater than 3.50. On average, consumers are satisfied in all domains, with the highest satisfaction in Quality, Participation in Treatment Planning, and General Satisfaction.

OVERALL SATISFACTION OUTCOMES: ADULT PROVIDERS		
	MAY 2011 (N=1244)	MAY 2009 (N=1206)
Domain	Avg. Score	Avg. Score
Access	4.28	4.12
Quality & Appropriateness	4.33	4.21
Participation in Treatment Planning (PIT)	4.31	4.18
Outcomes of Services	3.90	3.79
Functioning	3.86	3.74
Social Connectedness	3.86	3.81
General Satisfaction	4.44	4.34
Overall Average	4.14	4.03

The table below investigates the effects of ethnicity (whether the client identifies as Hispanic/Latino), race and language on average satisfaction scores. Results were analyzed via independent T-Tests (ethnicity and language) or ANOVA (race); averages found to be significantly different between groups are marked with superscripts (p<.05).

Adult Satisfaction by Demographics (N=1244)								
	Access	Quality & Approp.	PIT	Outcomes of Services	Functioning	Social	General Satisfaction	Overall Average
ETHNICITY (Hispanic or Latino)								
Hispanic	4.24	4.34	4.34	3.98	3.95	3.92	4.44	4.16
Non-Hispanic	4.30	4.37	4.34	3.90 ^o	3.85 ^o	3.83 ^o	4.46	4.15
RACE								
White	4.30	4.38	4.35	3.89	3.84	3.81	4.47	4.14
Black	4.35	4.41	4.36	3.94	3.95	3.96	4.48	4.21 ^o
Other*	4.25	4.27 ^o	4.26 ^o	3.90	3.84	3.85	4.40	4.11 ^o
LANGUAGE								
English	4.29 ^o	4.37	4.33	3.95	3.93	3.89	4.46	4.17
Non-English**	4.39	4.30 ^o	4.31	3.89 ^o	3.74 ^o	3.82 ^o	4.48	4.14

Categories combined due to low individual cohort size in order to increase data validity:

* Other (Race) includes: Hmong, Vietnamese, Chinese, Other Asian, Former Soviet, Multi, and Other.

** Non-English (Language) includes: Spanish, Former Soviet, Hmong, Vietnamese, Cantonese, Lao, Mien and Other.

The significances found in an analysis of mean domain scores within groups for Adults were as follows: Hispanic consumers were more satisfied in Outcomes of Services, Functioning and Social Connectedness than Non-Hispanic consumers; Other Race consumers were less satisfied in Quality and Appropriateness and Participation in Treatment Planning than White and Black consumers and were less satisfied overall than Black consumers; Non-English speaking consumers were more satisfied with Access and less satisfied with Quality and Appropriateness, Outcomes of Services, Functioning and Social Connectedness than English speaking consumers.

SATISFACTION WITH SERVICES

The table below shows consumer satisfaction across the seven domains (i.e., Access, Quality and Appropriateness, Participation in Treatment, Outcomes, Functioning, Social Connectedness and General Satisfaction). Each domain has several items scored on a five-point scale: 1=Strongly Disagree, 2=Disagree, 3=Neutral, 4=Agree, 5=Strongly Agree. Higher scores reflect higher levels of satisfaction. Clients were “Satisfied” in a domain if their average scores were greater than 3.50. Overall, consumers are satisfied in all domains, and satisfaction is higher in three of the seven domains (Quality, Participation in Treatment Planning and General Satisfaction.)

ADULT MHSIP CONSUMER SURVEY		May 2011 (N=1244)	
		Percent Agree	Average Score
Question	Perception of Access		
4	The Location of Services was convenient.	80	4.25
5	Staff were willing to see me as often as I felt was necessary.	87	4.38
6	Staff returned my calls within 24 hours.	79	4.25
7	Services were available at times that were good for me.	88	4.38
8	I was able to get all the services I thought I needed.	84	4.32
9	I was able to see a psychiatrist when I wanted to.	78	4.17
	Perception of Access Averages	86	4.28
Question	Perception of Quality and Appropriateness		
10	Staff believed that I could grow, change and recover.	84	4.38
12	I feel free to complain	80	4.26
13	I was given information about my rights.	88	4.41
14	Staff encouraged me to take responsibility for how I live my life.	86	4.36
15	Staff told what side effects to watch for.	79	4.23
16	Staff respected my wishes about who is and is not to be given information about my treatment.	89	4.45
18	Staff were sensitive to my cultural/ethnic background.	82	4.37
19	Staff helped me obtain the information needed so I could take charge of managing my illness.	84	4.34
20	I was encouraged to use consumer-run programs.	79	4.27
	Perception of Quality and Appropriateness Averages	89	4.33
Question	Perception of Participation in Treatment Planning		
11	I felt comfortable asking questions about my treatment and medication	87	4.42
17	I, not staff, decided my treatment goals.	77	4.21
	Perception of Participation in Treatment Planning Averages	80	4.31
Question	Perception of Outcomes of Services		
21	I deal more effectively with daily life problems.	74	4.10
22	I am better able to control my life.	71	4.05
23	I am better able to deal with crisis.	66	3.95
24	I am getting along better with my family.	66	3.97
25	I am better in social situations.	62	3.84
26	I do better in school and/or work.	43	3.70
27	My housing situation has improved.	60	3.88
28	My symptoms are not bothering me as much.	59	3.72
	Perception of Outcomes of Services Averages	67	3.90

Question	Perception of Functioning		
29	I do things that are more meaningful to me.	65	3.97
30	I am better able to take care of my needs.	65	3.94
31	I am better able to handle things when they go wrong.	60	3.82
32	I am better able to do things that I want to do.	60	3.85
28	My symptoms are not bothering me as much.	59	3.72
	Perception of Functioning Averages	61	3.86
Question	Perception of Social Connectedness		
33	I am happy with the friendships I have.	61	3.90
34	I have people with whom I can do enjoyable things.	63	3.89
35	I feel I belong in my community.	57	3.75
36	In a crisis, I would have the support I need from family or friends.	63	3.91
	Perception of Social Connectedness Averages	58	3.86
Question	Perception of General Satisfaction		
1	I liked the services that I received here.	91	4.50
2	If I had other choices, I would still get services at this agency.	85	4.38
3	I would recommend this agency to a friend or family member.	87	4.45
	Perception of General Satisfaction Averages	90	4.44
OVERALL AVERAGE ACROSS ALL DOMAINS		86	4.14

APPENDIX

Treatment Codes Used in Determining Response Rates

Code	Description	Adult/Older Adult	Child/Youth
93010	ASSESSMENT	X	X
94000	REHABILITATION	X	X
96010	EVALUATION	X	X
96510	GROUP THERAPY	X	X
96520	GROUP SESSION	X	X
97010	INDIVIDUAL THERAPY	X	X
97500	MEDICATION SUPPORT	X	X
97530	GROUP SESSION MEDS	X	
97550	MIXED MEDICAL LICENSURE	X	
98010	MEDICATION SUPPORT	X	X
98500	PLAN DEVELOPMENT	X	X
99650	DAY TREATMENT - INTENSIVE - FULL DAY		X
99700	DAY TREATMENT - REHAB - HALF DAY		X
99750	DAY TREATMENT - REHAB - FULL DAY		X

Place of Service Data Elements Eliminated in Determining Response Rates

Code	Description	Adult/Older Adult	Child/Youth
P	PHONE	X	X
T	TELEHEALTH	X	X