

Genesee County CMH
FY2011 consumer satisfaction findings

PROCEDURE

Surveys were offered to adults and children seen by primary providers in the MI/DD and SUD networks, between October 17 and October 28, 2011. The whole-network survey was synchronized with the survey of ACT and home-based providers required by the Michigan Department of Community Health (MDCH). Because MDCH's mandated survey timeframe was delayed, CMH's network survey was also delayed from its usual spring schedule. As in previous years, MDCH mandated the use of the MHSIP (Mental Health Statistics Improvement Program) and YSS (Youth Satisfaction Survey) tools for ACT and home-based providers, respectively.

Providers were instructed to offer surveys to each consumer they served during the survey period, for whom they were the primary program. As noted above, MDCH required full versions of the MHSIP and YSS for recipients of ACT and children's home-based services, respectively. However, these instruments are quite long. Abbreviated versions of the surveys were used for all other providers. The Appendix contains the survey questions.

The YSS tools were offered to parents / caregivers of children receiving mental health services. MHSIP tools were offered to adult consumers in the CMH system, and all consumers receiving Substance Use Disorder services. Assistance was offered to respondents where needed. Providers were instructed in survey administration methods designed to avoid influencing consumer ratings.

As noted above, there were longer, MDCH-required measures, and abbreviated versions. The abbreviated and long measures shared items, which are analyzed here, so that providers can be measured on the same scale. The additional required items on the ACT and home-based surveys do not add substantial value to the analysis and are not reported here. The detailed case- and item-level data were provided to MDCH per requirements.

FINDINGS

Return rates and other procedural findings

A total of 2787 surveys were returned from 30 providers / programs. This represents about 48% of eligible consumers served during the survey period. Providers were asked to track the number of surveys declined, as well as to count any that they mailed to consumers. The total number of surveys submitted was then compared to the number of consumers served during the period, for each provider.

While tracking procedures were specified in written instructions and reviewed in a meeting and teleconference with providers, a number of providers did not submit the required tracking data,

or submitted incomplete data. Compliance with survey procedures was coded as noncompliant, where no data was submitted beyond questionnaires, or as partially or fully compliant, depending on what other information was provided. Table 1, on page 5, summarizes providers' return rates and compliance with survey procedures.

Reported survey decline rates ranged from 0% to 51%. However, some staff members at certain providers appeared to mark every single consumer who did not receive a survey as declined, even if they had not been seen and therefore not offered a survey. Thus actual survey decline rates cannot be formally analyzed.

A few providers' submissions led to calculated response rates greater than 100%. This may be due to data issues in tracking case assignments, incomplete claim / encounter submission, and/or offering surveys to multiple parents, guardians, or other stakeholders.

Survey findings

The MHSIP survey content (Appendix, page 12) can be divided into three scales: satisfaction, important service attributes, and outcomes. The second of these requires some explanation. MHSIP items on this scale include content around staff's respect for, sensitivity to, and support of consumers.

While the measure is written with a response of 1 indicating greatest satisfaction and 5 the least, for ease of interpretation and consistency with the YSS, the MHSIP scales are transformed here so that **higher numbers represent the greatest satisfaction and positive evaluation**.

In general, consumers reported high levels of satisfaction and quality, with slightly lower ratings on the Outcomes scale:

Scale	Mean score (1-5 scale)
Satisfaction	4.47
Important service attributes	4.21
Outcomes	3.94

Given that the consumers surveyed are still in service, and have thus by definition not achieved their desired outcomes, it is not surprising that the Outcomes scale is rated lower than the others. These findings are very consistent with those of previous years' surveys.

YSS scales were Satisfaction, Person-family focus, and Outcomes. The second of these reflects respondents' assessment of services as tailored to families' goals, cultural background, and desired outcomes. YSS findings were similar to MHSIP findings:

Scale	Mean score (1-5)
Satisfaction	4.54
Person-family focus	4.49
Outcomes	3.81

Program-level findings are reported in Figures 1 through 6, pages 8-11.

Open-ended responses

The survey was published in concert with a second survey regarding another topic (which is reported separately as part of one of the PIHP's Performance Improvement Projects). The survey structure and the presence of additional questions unfortunately discouraged respondents from providing open-ended responses. Thirty-two open-ended responses were obtained relative to the MHSIP and YSS, and they were categorized as follows:

Response content	Examples (transcribed as written, except that staff and consumer names are removed)	% of open-ended responses
Positive comments about staff and/or services	<ul style="list-style-type: none"> _____ is a wonderful case manager, we just love her and _____ was a great therapist. Thank you for help with my mental health wellbeing. 	47%
Idiosyncratic / unclassifiable comments	<ul style="list-style-type: none"> Medication, I feel so dog gone depressed Holy Bible yes. Have a nice day. 	22%
Access to medical services	<ul style="list-style-type: none"> Can't get meds. Cancelling appointments on the doctor behave. 	16%
Other response content	<ul style="list-style-type: none"> Some of the med clinic workers speak with negativity and bad attitudes rather than positively and polite mainly "our" nurse practioner. Counselor is over booked. 	16%

Grievances as indicators of consumer dissatisfaction

The PIHP gathers detailed data about every consumer grievance, or complaint. FY 2011 grievances were categorized based on the text entered by Customer Services staff as the consumer's expressed concern. It is recognized that grievances do not represent *all* consumer evaluations, but rather tend to reflect negative evaluations by highly dissatisfied and/or verbal and/or engaged consumers. However, they do tend to provide some insight into overall satisfaction.

The grievances reported here have all been addressed by Customer Services and the PIHP's Due Process office, where appropriate. The intent here is not to provide an overall report on grievances; that is done separately, via the relevant departments. Rather, the content of grievances is used here as a window into domains of consumer satisfaction. The information below should be taken as a rough indication of some areas of dissatisfaction, but *not* as a reflection of overall service quality, which is evaluated quite highly as noted above. Grievance categories and some representative examples of grievance text are presented in Table 2, pages 6-7.

The most common grievances were requests for changes in the staff or programs assigned to a consumer's case. This should be held in perspective: the 47 consumers making such requests represent 0.3% of almost 15,000 consumers served by the CMH and Substance Abuse Coordinating Agency arms of the GCCMH network during FY 2011. In some cases, explicit dissatisfaction with current services was evident. In others, factors such as scheduling or location appeared to play a role, rather than service quality.

Next most common were requests for assistance with specific issues, for consumers who already had services and staff assigned who could help with those requests. It is not always clear to what extent consumers chose to make requests through Customer Services because of actual difficulty with their case managers, as opposed to other reasons. For example, a consumer might have a need and call the well-publicized Customer Services phone number, rather than looking up his/her case manager's number.

Requests for assistance in accessing services were the next most frequent content. Some of these appeared to represent a need for help in coping with changes in healthcare coverage; others seemed to reflect difficulty in getting desired appointments. Systems issues, such as difficulty starting services because an old provider failed to close a case in the computer system, were fourth most common. A few concerns, representing fewer than 10% of grievance content, were identified in other areas; these are reported in Table 2.

Open-ended and grievance content, taken together, then, suggest that, while not common, there is occasional dissatisfaction with providers, particularly with medical services. This is consistent with the fact that during FY 2011 there were staffing shortages particularly in the large CMH provider's medication clinic. Given that staffing levels have stabilized, it will be useful to compare FY 2012 responses to those reported here.

TABLE 1: Survey process compliance by provider / program

Program / provider	Survey procedure compliance rating*	% of consumers served who were surveyed†
Catholic Charities (MI and SUD)	Fully compliant	35%
CMH ACT	Noncompliant	33%
CMH adult CM and SC	Noncompliant	46%
CMH Child and Family Services MI and DD	Fully compliant	59%
CMH Home-based	Noncompliant	79%
CMH Med Clinic	Fully compliant	44%
CMH MST	Partially compliant	88%
Case Management of Michigan	Partially compliant	100%
CRS @ Salvation Army	Fully compliant	58%
CRS @ Jail	Fully compliant	84%
CSI	Partially compliant	51%
E.S Home-based	Fully compliant	76%
E.S. case management	Fully compliant	129%
Flint Odyssey House	Partially compliant	86%
Hope Network New Passages ACT	Fully compliant	70%
Hope Network New Passages adult services	Fully compliant	48%
Hope Network New Passages children's program	Fully compliant	38%
Hope Network Insight	Fully compliant	57%
New Century	Partially compliant	88%
New Paths Men's program	Fully compliant	31%
CRS @ New Paths	Partially compliant	30%
Oakland Psychological	Noncompliant	51%
Sacred Heart	Fully compliant	19%
TTI OP and CM	Partially compliant	62%
TTI ACT	Partially compliant	54%
VIP	Fully compliant	128%
Woodward	Fully compliant	70%
Turning Point	Noncompliant	167%

* Compliance ratings based on

- Face sheet submission
- Face sheet completeness
- Tally sheet submission

† Completion rates > 100% may be due to one or more of the following:

- Surveys given to multiple siblings, guardians, other stakeholders
- Incomplete encounter / claim submission
- Consumers' primary programs not being correctly identified

Table 2: Summary of grievance categories with examples

Grievance category	N grievances	%¹	Examples as entered by Customer Services staff
Request staff / provider change	47	34%	<p>“You would like your case manager to be switched back to _____.”</p> <p>“You told me that you want a new case manager because the present case manager you have is in her 20's and you would like someone older.”</p>
Help getting specific services or interventions for an open consumer	33	24%	<p>“You would like for _____ to discuss your concerns about housing, how your medications are effecting you and resources you want.”</p> <p>“req. assistance with locating resources to pay bills.”</p>
Service access issue	20	15%	<p>“Your son lost his MI-Child insurance because you and your husband make too much money. Your Case Manager referred you to Customer Services.”</p> <p>“Request assistance with getting an appointment to follow up with the doctor about your medication.”</p>
Systems issue	16	12%	<p>“Request new access screen, but case still open at _____.”</p> <p>“_____ told you that your case had been closed. She referred you to GCCMH Access Center. GCCMH Access told you that your case is still open and referred you to customer Services for clarification of your services.”</p>

¹ Percentages add to greater than 100% because some grievances fell under multiple categories.

Grievance category	N grievances	% ¹	Examples as entered by Customer Services staff
Uncategorized	8	6%	<p>“1.son has been diagnosed with Asperger’s Syndrome, and the color of the waiting room (forest green) is apparently a problem for her son 2. There are “dueling noise machines” in the waiting room as well – one making static and other making wave noises.”</p> <p>“Req. assistance with getting treatment records from _____.”</p> <p>“You did not understand process of second opinion when it was explained to you. You would like Customer Services to find out more information and assist you with getting a second opinion for your grandson.”</p>
Concerns about service quality	7	5%	<p>“You report that you have called your Case Manager, _____, several times over past two weeks and she has not returned your call.”</p> <p>“You report that your appointment with the Psychiatrist at _____ has been cancelled 4 times and you would like to get an appointment you can keep.”</p>
Other concerns	7	5%	<p>“Req. assistance with getting services reestablished with _____ for her son.”</p> <p>“You would like your brother to participate in a day Program three days per week instead of five days.”</p>

Figure 1: Mean quality rating by provider / program

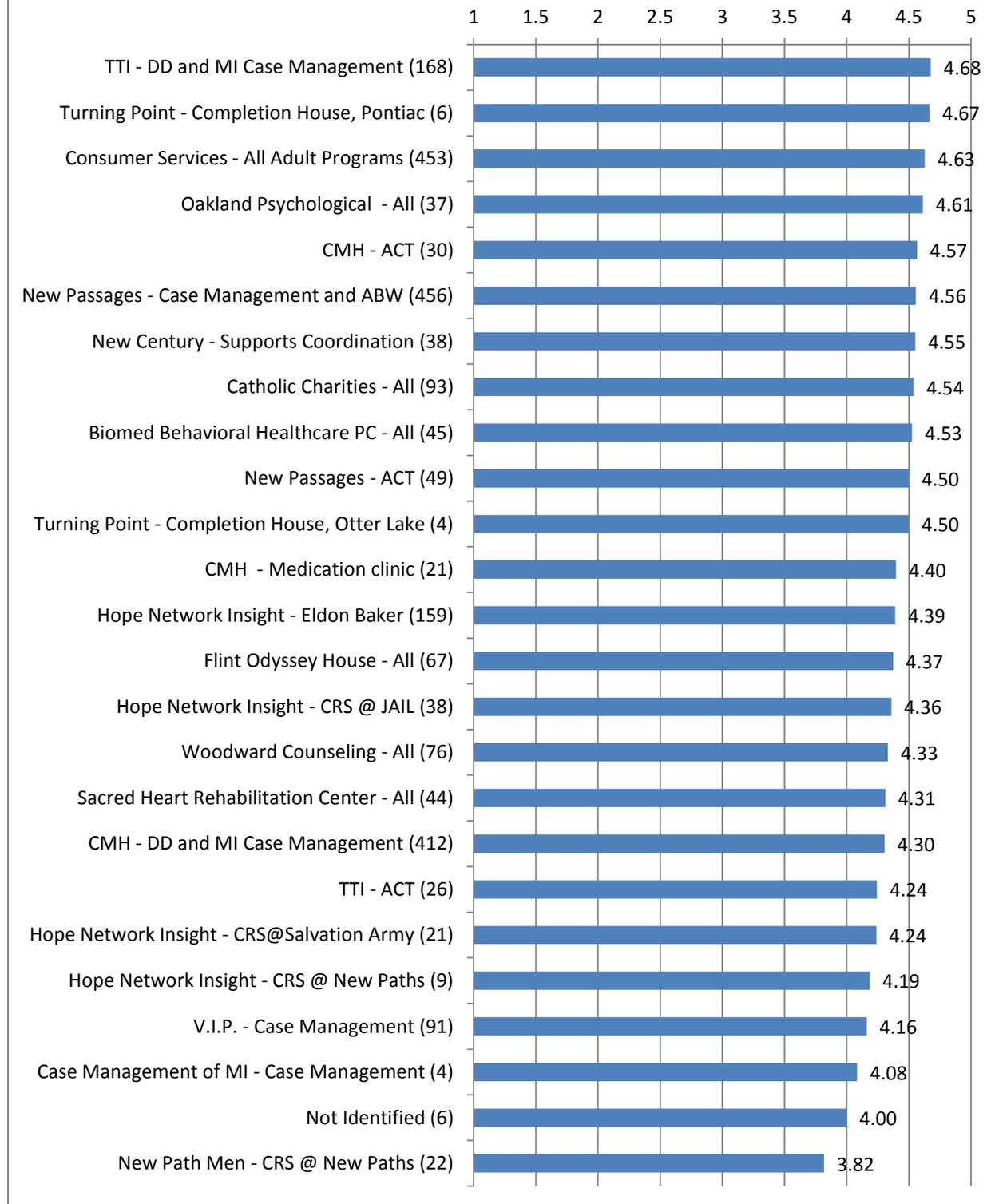
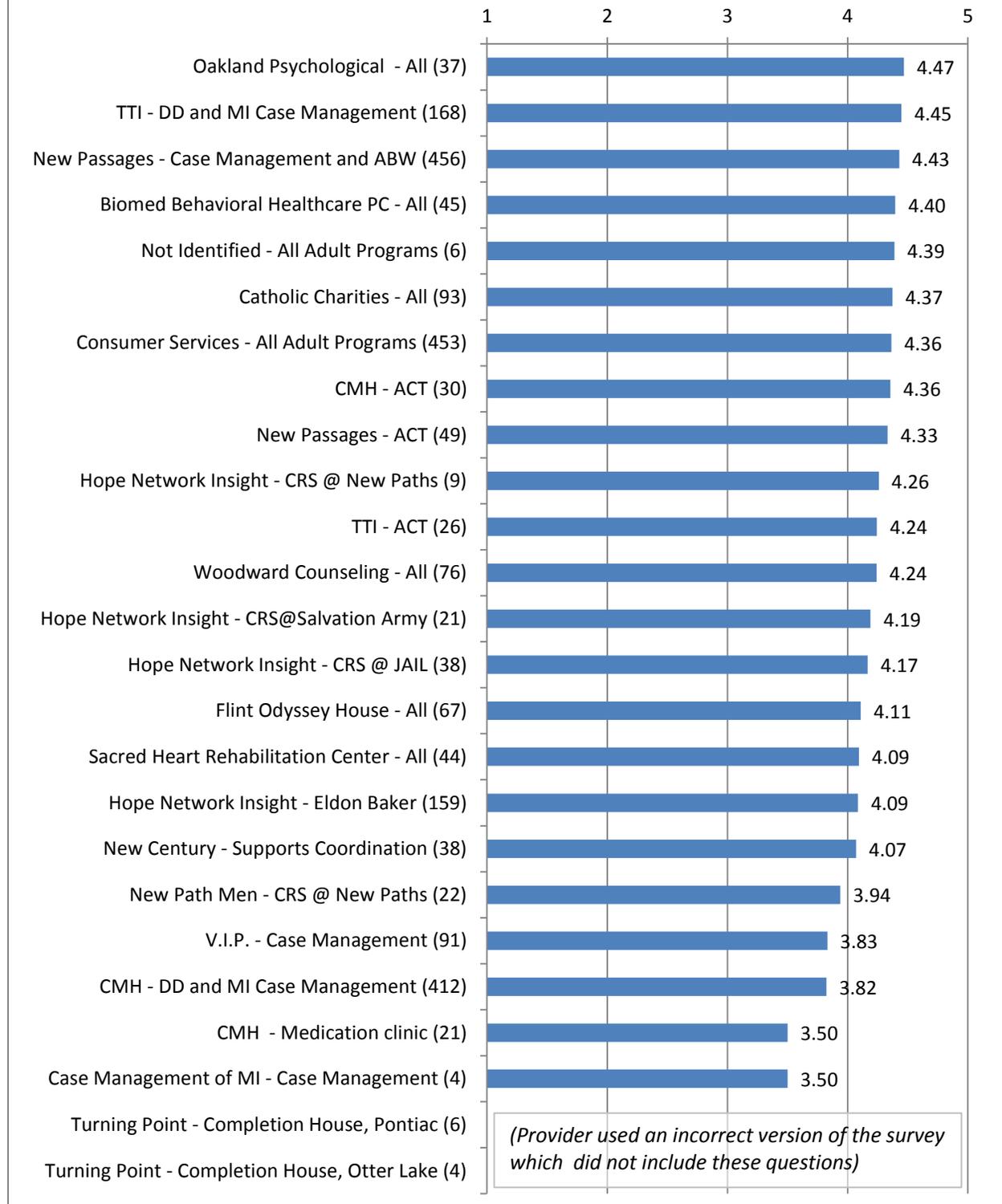


Figure 2: Mean rating of important service attributes by provider / program



**Figure 3: Mean outcomes rating
by provider / program**

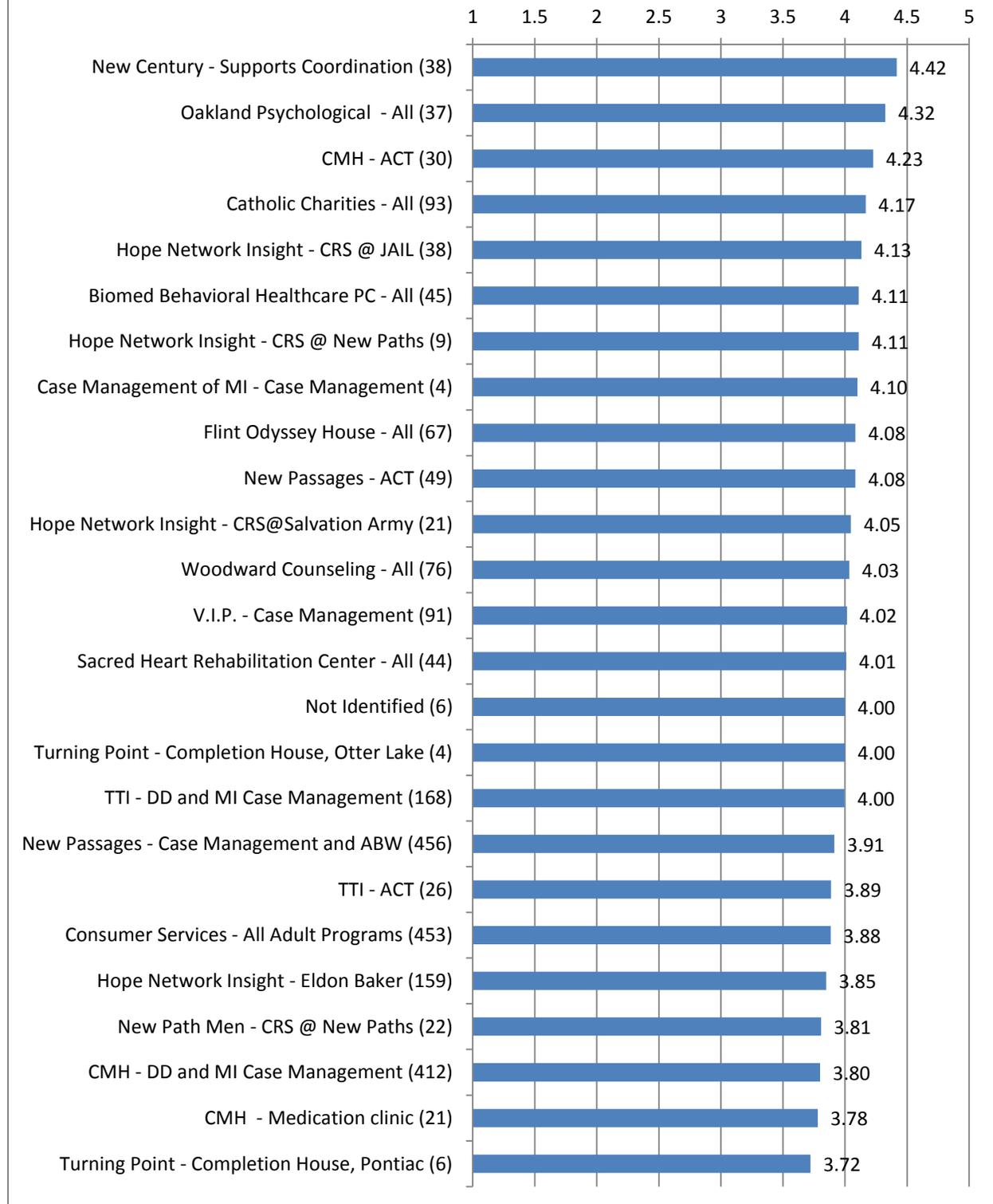
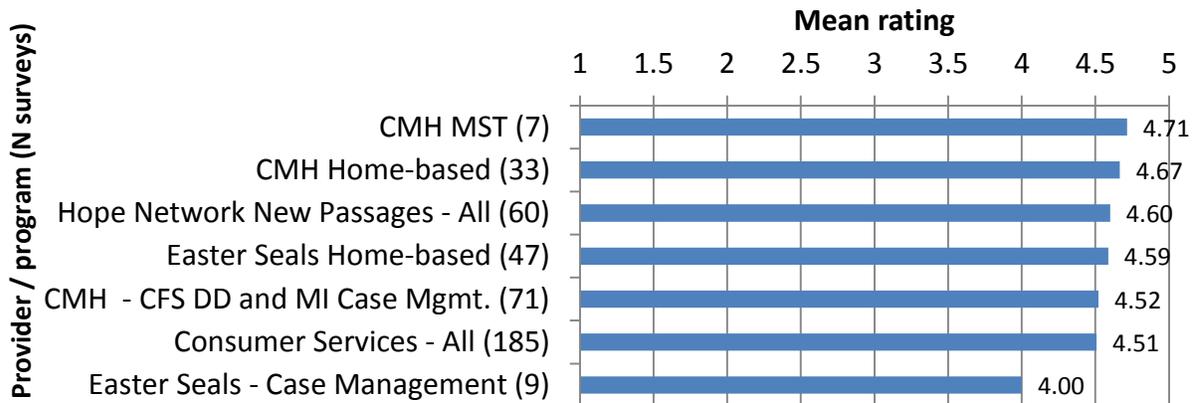
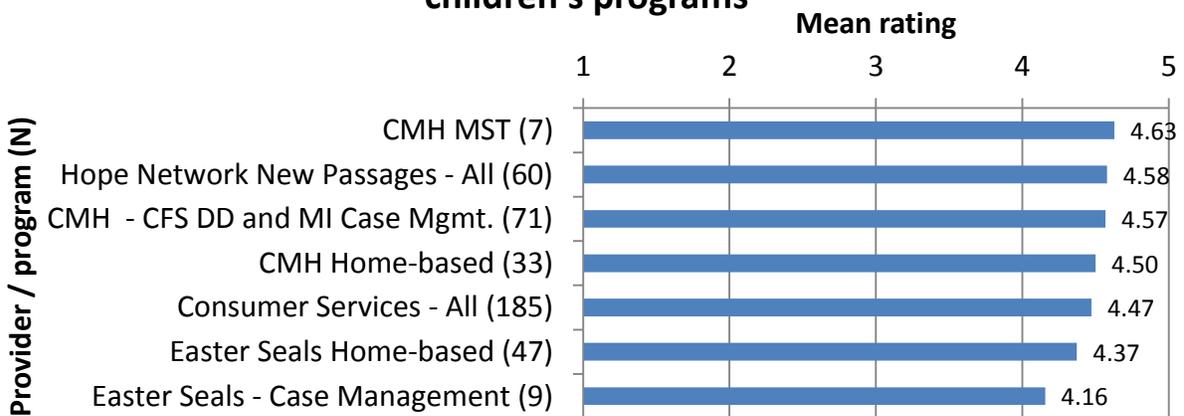
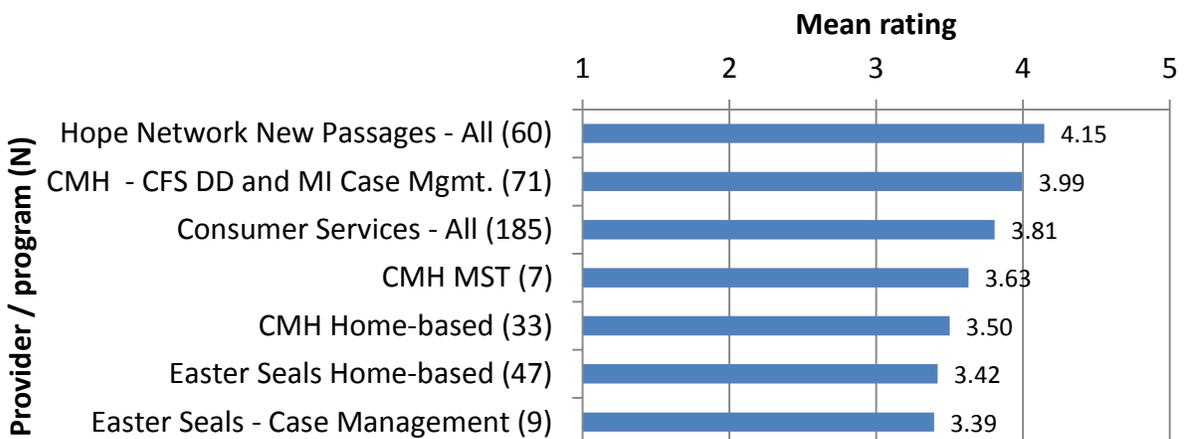


Figure 4: Mean satisfaction rating - children's programs**Figure 5: Mean rating of person/family focus - children's programs****Figure 6: Mean outcomes rating - children's programs**

Appendix: Survey questions

Adult survey (MHSIP)

Scoring on the MHSIP response form is inverted from the intuitive direction, with 1 representing Strongly Agree and 5 Strongly Disagree. Results presented in this report are reversed, so that in the present analysis **higher numbers represent more positive evaluations.**

Item	Scale
1. I like the services that I received.	Satisfaction
2. I would recommend this agency to a friend or family member.	Satisfaction
3. I was able to get all the services I thought I needed.	Satisfaction
4. Staff believed that I could grow, change and recover.	Important service attributes
5. Staff were sensitive to my cultural/ethnic background (e.g., race, religion, language, etc.).	Important service attributes
6. I was encouraged to use consumer-run programs (support groups, drop-in centers, crisis phone line, etc.).	Important service attributes
<u>As a direct result of the services my child and family received:</u>	
7. I deal more effectively with daily problems.	Outcomes
8. I am better able to control my life.	Outcomes
9. I do better in social situations.	Outcomes
10. My symptoms are not bothering me as much.	Outcomes
11. I do things that are more meaningful to me.	Outcomes

Youth Service Survey (YSS)

Each question is scored from 1 (Strongly Disagree) to 5 (Strongly Agree), so that **higher numbers represent more positive evaluations**. Note that the parent or guardian completes this survey.

Item	Scale
1. Overall, I am satisfied with the services my child received.	Satisfaction
2. The people helping my child stuck with us no matter what.	Person-family centered focus
3. I participated in my child's treatment/services.	Person-family centered focus
4. The services my child and/or family received were right for us.	Person-family centered focus
5. My family got as much help as we needed for my child.	Person-family centered focus
6. Staff were sensitive to my cultural/ethnic background (e.g., race, religion, language)	Person-family centered focus
<u>As a direct result of the services my child and family received:</u>	
7. My child is better at handling daily life.	Outcomes
8. My child gets along better with family members.	Outcomes
9. My child gets along better with friends and other people.	Outcomes
10. I am satisfied with our family life right now.	Outcomes
11. My child is better able to do things he or she wants to do.	Outcomes