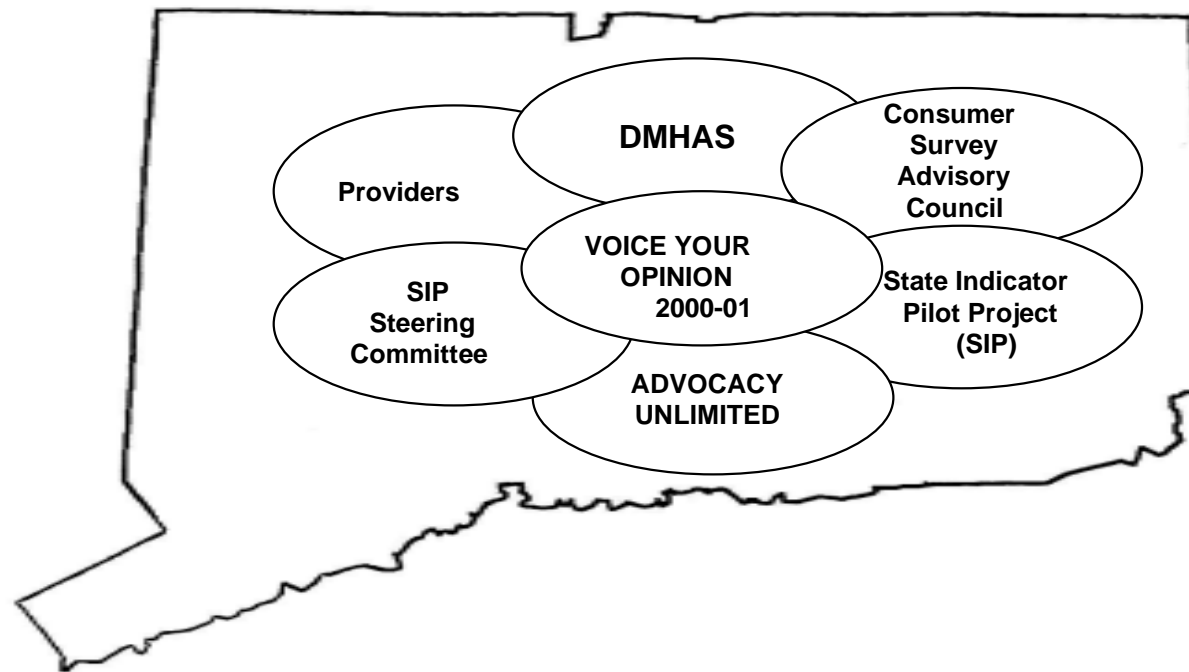


The Connecticut Consumer Survey

Building A Partnership



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The Connecticut Consumer Survey

Building A Partnership



50th National MHSIP Conference, May 31 2001

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*“Voice Your
Opinion 2000-01”*

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PEER
ADMINISTERED

(with a Mail-in
request
component)

Vision and Early Decisions



- Fund the project with State Indicator Pilot Project dollars
- Statewide sampling (MH services)
- Incorporate Consumer Workgroup's recommendations
- Use a consumer agency to implement the project
- Enlist provider network to provide the structure and the environment
- Build partnership, coordinate, provide support
- Assure dissemination of results

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December 1999:

- State Indicator Pilot Project funds
- Statewide Consumer Council's recommendations
- Providers, each doing their own survey
- Advocacy Unlimited

May 2001:

- Completed first statewide consumer survey
- Have a blueprint for continuing survey process in future

Ongoing Role for DMHAS



- Build and nurture partnership
- Coordinate, provide organizational support
 - Enlist providers' participation
 - | Select providers and sites
 - | Inform providers' leadership about the project
 - | Negotiate with providers use of their facilities
 - | Feedback from providers
- Respond to mail-in requests -
Mail invitations to a random 20% clients (State-operated LMHAS)

Initial Role for People in Recovery



- Through Consumer Council involvement in the SIP project help to build a coalition and agreement
- Develop a tool that reviews state-wide services
- Expand the MHSIP tool to include questions that are relevant to the CT consumers and reflect their concerns
- Involve advocates from both MH and SA

Tasks for People in Recovery



- Help to develop the instrument
- Help to develop the process design involving peer surveyors
- Become a peer surveyor
- Promote the survey among other peers
- Advise about sites
- Help with recruitment on location
- Help with Spanish interpretation and recruitment of Latino clients


The Result:

The Survey Tool



- 28 questions, MHSIP version 2.0
 - participation in treatment planning
 - perception of quality & appropriateness
 - perception of outcomes
 - perception of access

The Result: The Survey Tool



- Connecticut questions
 - linkages to primary care (physical and dental)
 - employment
 - living situation
 - help in crisis situations
 - knowledge and use of grievance procedures
 - need for and/or participation in substance abuse treatment
 - space for additional text comments

The Result:

Survey Process and Implementation

A thick, horizontal yellow brushstroke underline that spans the width of the text above it, with a slightly textured, painterly appearance.

Role for Advocacy Unlimited



- Involved in the design of the tool
- Developed surveyor training and manual
- AU staff recruited, trained and supervised surveyors
- Advertised and encouraged survey participation via website, flyer distribution and advocate network
- Coordinated, supported and supervised surveyors
- Coordinated site activity with DMHAS
- Collected over 1000 surveys in multiple statewide locations



Surveyor Training

- AU advocates
- History and explanation of the project
- Expectations of surveyors
- How to administer actual survey
- Neutral language responses
- Role Play



Surveyor Retention

- Solid training process
- Support from AU Coordinator and Team Leaders
- Leadership opportunity and experience
- Ability to use and demonstrate advocacy skills
- Help the Consumer's Voice Be Heard

Work at the survey site



- Surveyors worked in teams of 3-4, a designated team leader
- The team was on site for 2-4 hours
- The survey takes about 20 minutes to complete
- The teams covered 5 regions, 10-15 sites per region
- Use of individual and group interviews as needed
- Engage consumers
- Provide refreshments
- Distribute souvenirs

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- Provide help,
but not
answers

The Connecticut Consumer Survey



- Build mutual support and encouragement

Role for the Providers



- Involve Provider Leadership
- Establish a welcoming environment
- Encourage clients to participate
- Post flyers throughout the agencies
- Distribute invitations using agency staff.
- Provide transportation

One Provider's Experience



- Turnout poor on the initial survey date
- Weather
- Lack of commitment from management
- Staff ambivalence; low priority
- Getting the word out to all areas
- Transportation problems

One Provider's Experience - Enhanced Effort



- Assured commitment from management
- Set goals for each program
- Appealed to competitive spirit
- Made it an "event" with other activities, food, and entertainment
- Increased participation
- Recognized success

Current Status of Implementation



- Field work complete
 - 42 providers
 - 63 sites/visits
 - 6 months
 - Over 1000 surveys collected by peer surveyors
- Mail-in requests:
 - 145 requests received
 - 60% completion rate
- Starting analysis
- Planning for dissemination

Dissemination of information



- Feedback to consumers
 - WHY?
 - | Fairness
 - | Community
 - | Ownership
 - | Power
 - HOW?
 - | Non-technical presentation of data, tied to policy questions
 - | Inspirational speakers
 - | Small, issue oriented groups

Thank you

