

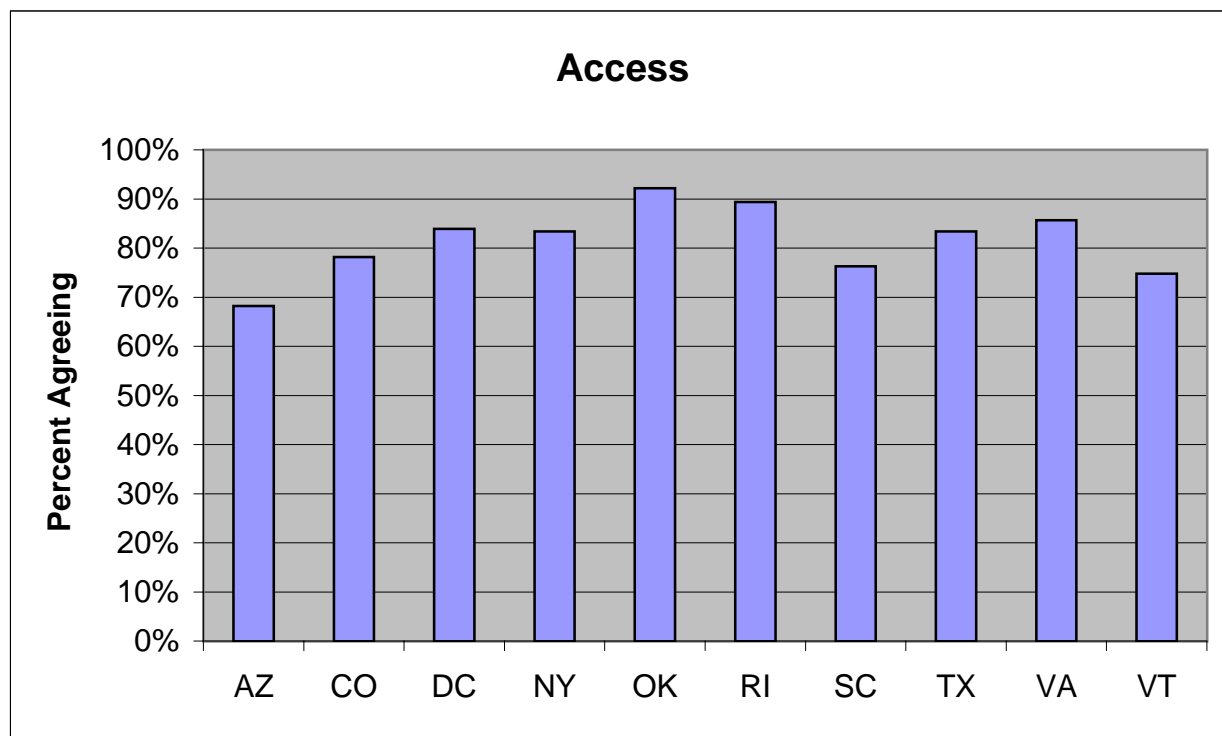
A2. Consumer Perception of Good Access

Timely and convenient access to services are major values of the public mental health system and are major factors in ensuring that persons receive needed services.

The MHSIP Consumer Survey measures perceptions of access with the questions:

- The location of services was convenient.
- Staff were willing to see me as often as I felt it was necessary.
- Staff returned my calls within 24 hours.
- Services were available at times that were good for me.

Measure: Numerator: Total number of respondents agreeing with the items (scale score less than 2.5)
 Denominator: Total number of respondents with scores on the access domain



Access

State	Percent Agreeing	By Age					By Gender		By Ethnicity	
		18-22	23-59	60-64	65-74	75+	male	female	white	non-white
AZ	68.2%	53.7%	67.5%	80.4%	74.6%	82.1%	67.0%	69.3%	68.2%	68.4%
CO	78.2%	87.0%	76.9%	81.3%	87.5%	#	80.1%	77.2%	77.5%	79.8%
DC	83.9%	#	82.4%	93.1%	92.3%	#	84.2%	83.9%	86.2%	82.4%
NY	83.4%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
OK	92.2%	#	91.9%	#	#	#	92.1%	92.5%	92.1%	92.6%
RI	89.4%	84.4%	89.2%	92.4%	89.9%	92.4%	89.8%	89.1%	89.7%	88.5%
SC	76.3%	#	76.7%	#	#	#	73.4%	80.0%	78.3%	74.7%
TX	83.4%	#	81.1%	85.6%	89.2%	91.4%	82.7%	83.8%	81.2%	87.2%
VA	85.7%	75.0%	86.0%	88.1%	93.3%	92.3%	83.6%	87.0%	86.8%	83.9%
VT	74.8%	58.3%	73.8%	87.3%	85.9%	81.8%	76.0%	73.3%	74.8%	N/A

less than 30 respondents

Q4. Consumer Perception of the Quality and Appropriateness of Services

Research suggests that a positive therapeutic relationship results in positive outcomes. Sensitivity to and respect for the consumer, as well as the consumer's perception of the competency of staff and the quality of care are factors which will determine the consumer's willingness to remain in treatment.

The MHSIP Consumer Survey measures perceptions of quality/appropriateness with the questions:

Staff believed I could grow, change and recover.

I felt free to complain.

Staff told me what side effects to watch for.

Staff respected my wishes about who is and is not to be given information about my treatment.

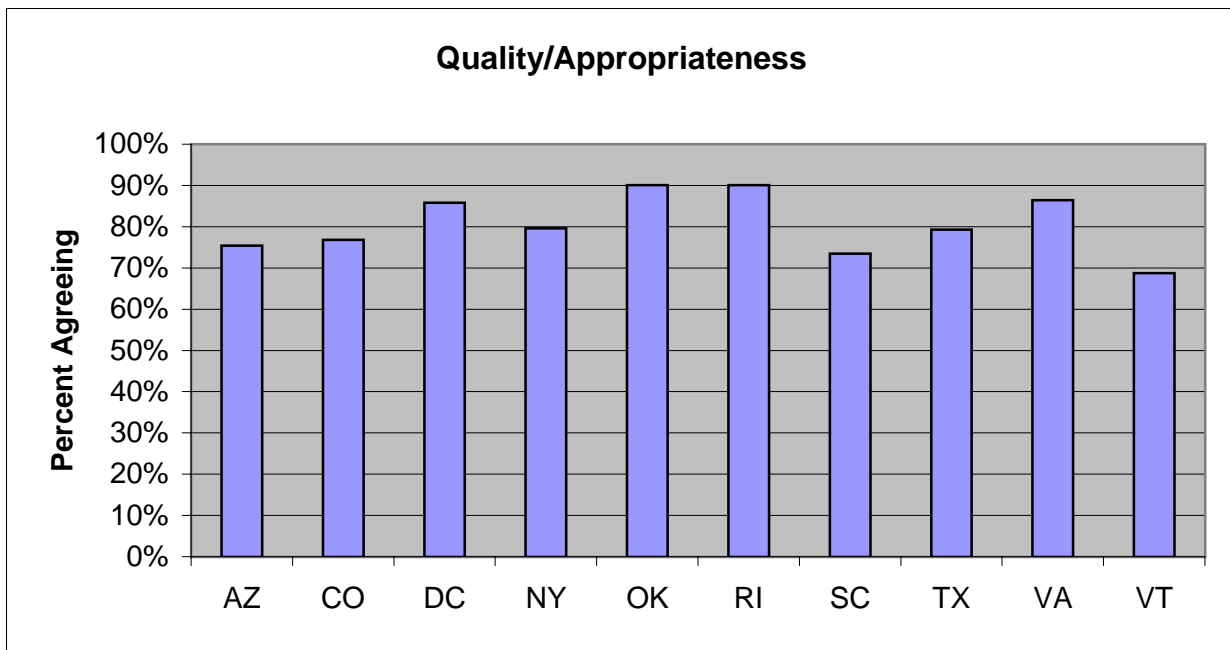
Staff were sensitive to my cultural/ethnic background.

Staff helped me obtain the information I needed so I could take charge of managing my illness.

Measure:

Numerator: Total number of respondents agreeing with the items (scale score less than 2.5)

Denominator: Total number of respondents with scores on the Quality/Appropriateness domain



Appropriateness/ Quality

State	Percent Agreeing	By Age					By Gender		By Ethnicity	
		18-22	23-59	60-64	65-74	75+	male	female	white	non-white
AZ	75.4%	60.0%	74.8%	80.4%	86.4%	88.9%	77.0%	74.6%	76.8%	75.4%
CO	76.8%	81.8%	76.3%	81.8%	75.0%	#	75.2%	78.0%	73.5%	84.1%
DC	85.8%	#	85.1%	93.1%	97.4%	#	84.8%	88.2%	84.4%	84.8%
NY	79.6%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
OK	90.1%	#	89.5%	#	#	#	88.6%	91.1%	89.0%	93.6%
RI	90.1%	91.9%	90.0%	89.9%	91.0%	88.2%	88.0%	91.8%	89.7%	91.2%
SC	73.5%	#	73.4%	#	#	#	76.1%	70.2%	73.3%	73.6%
TX	79.3%	#	78.1%	82.6%	82.3%	83.4%	77.6%	80.4%	79.1%	79.6%
VA	86.4%	79.3%	86.3%	94.7%	93.3%	84.0%	87.5%	84.7%	87.3%	85.2%
VT	68.7%	65.7%	67.3%	88.2%	76.4%	68.8%	70.7%	66.2%	68.7%	N/A

less than 30 respondents

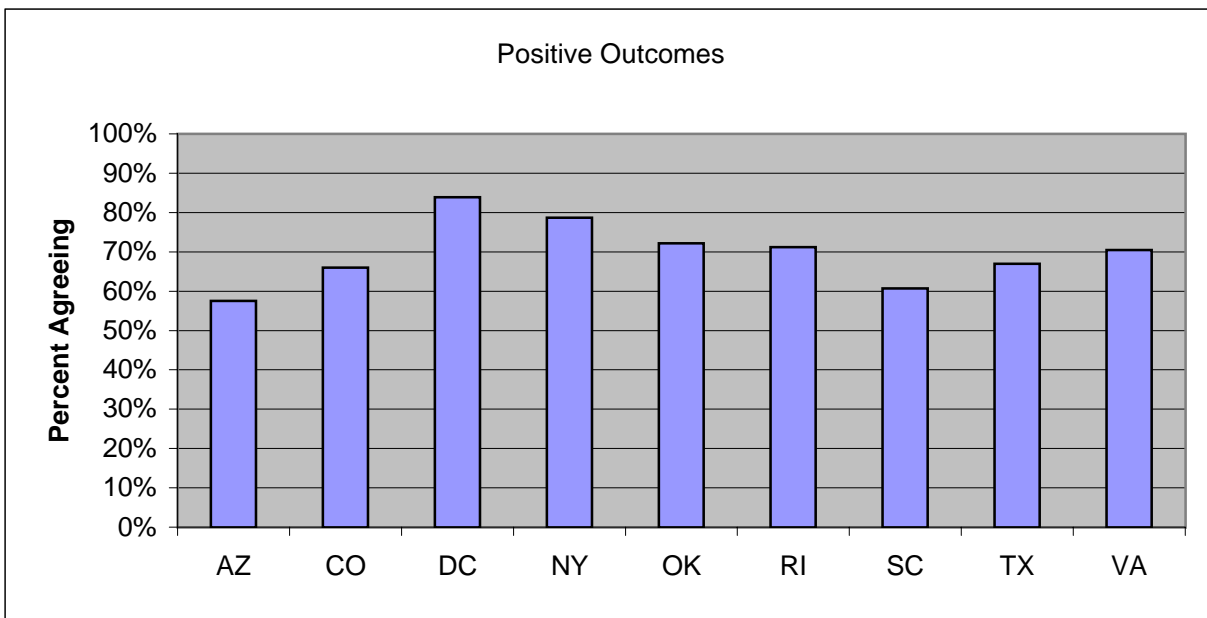
O1. Consumer Perception of Positive Change

This indicator is the most direct measure of the consumer's perception of the effectiveness of services

The MHSIP Consumer Survey measures perceptions of positive change with the questions:

- I am dealing more effectively with daily problems.
- I am better able to control my life.
- I am better able to deal with crisis
- I am getting along better with my family.
- I do better in social situations.
- I do better in school and/or work.
- My symptoms are not bothering me as much.

Measure Numerator: Total number of respondents agreeing with the items (scale score less than 2.5)
 Denominator: Total number of respondents with scores on the Outcomes domain



Positive Outcomes

State	Percent Agreeing	By Age					By Gender		By Ethnicity	
		18-22	23-59	60-64	65-74	75+	male	female	white	non-white
AZ	57.5%	56.8%	55.9%	71.4%	66.7%	71.4%	61.2%	55.2%	56.2%	61.0%
CO	66.0%	65.2%	65.0%	74.5%	#	69.6%	68.5%	64.5%	64.3%	69.7%
DC	83.9%	#	82.4%	89.7%	97.4%	#	84.0%	84.0%	86.2%	81.5%
NY	78.7%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
OK	72.2%	#	70.1%	#	#	#	71.9%	72.7%	71.4%	74.6%
RI	71.2%	70.3%	68.7%	79.5%	81.0%	77.3%	72.2%	70.3%	71.7%	69.9%
SC	60.7%	#	59.6%	#	#	#	62.2%	58.8%	61.4%	60.2%
TX	67.0%	#	63.7%	70.6%	73.8%	85.5%	69.4%	65.6%	66.7%	67.5%
VA	70.5%	70.6%	69.9%	83.5%	82.5%	70.8%	72.6%	68.7%	69.0%	74.7%
VT	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

less than 30 respondents

Q1. Consumer Participation in Treatment Planning

Participation by consumers in decisions regarding treatment fosters a collaborative, trusting relationship, and supports the consumer's ability to make decisions and act responsibly. For both health and mental health services, research indicates that such involvement is correlated with positive outcomes.

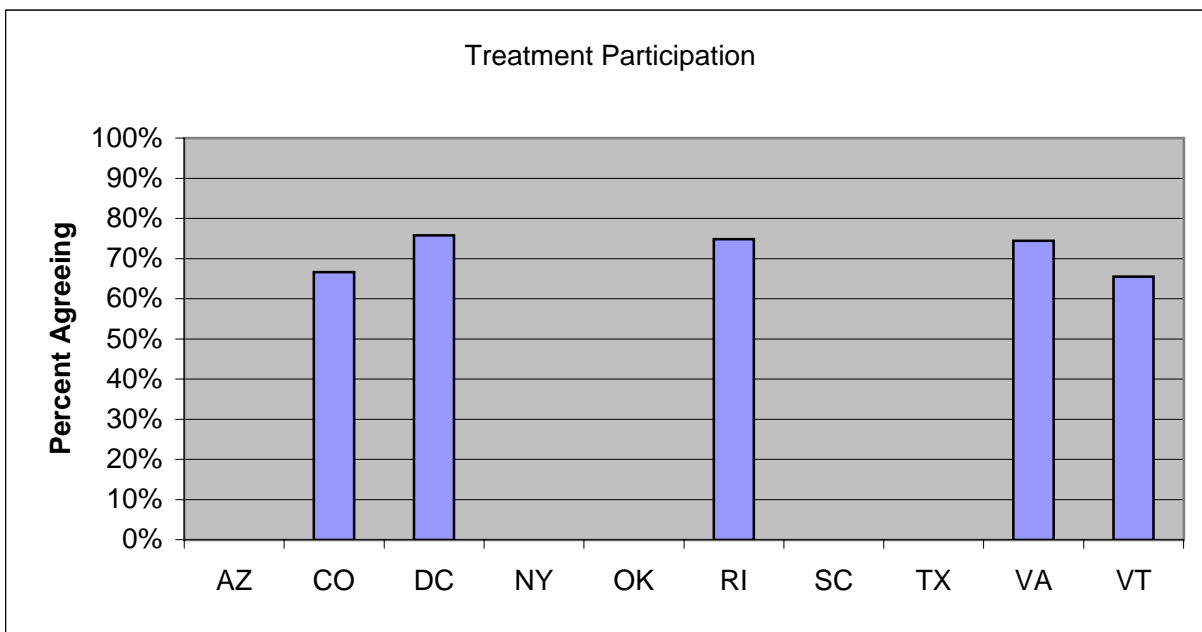
The MHSIP Consumer Survey measures perceptions of access with the questions:

I, not staff, decided my treatment goals.

I felt comfortable asking questions about my treatment and medication.

Measure: Numerator: Total number of respondents agreeing with the items (scale score less than 2.5)

Denominator: Total number of respondents with scores on the treatment planning domain



Participation in Treatment Planning

State	Percent Agreeing	By Age					By Gender		By Ethnicity	
		18-22	23-59	60-64	65-74	75+	male	female	white	non-white
AZ	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
CO	66.6%	63.0%	66.3%	66.7%	73.2%	#	65.1%	67.4%	64.4%	71.1%
DC	75.8%	#	74.6%	77.8%	85.7%	#	74.2%	76.9%	82.0%	73.9%
NY	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
OK	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
RI	74.8%	79.4%	74.3%	75.3%	78.6%	78.3%	72.2%	77.1%	74.3%	76.4%
SC	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
TX	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
VA	74.4%	69.5%	74.2%	81.7%	80.9%	80.0%	71.0%	76.8%	75.7%	72.3%
VT	65.5%	58.8%	64.6%	80.0%	71.2%	66.7%	67.0%	63.5%	65.5%	#

less than 30 respondents

The MHSIP Consumer Survey has been adopted by most of the states in the 16 state project. The following table lists the year of administration, number of respondents, survey method and sample for each of the states who have submitted survey information

State	Survey Year	Number of Completed Surveys	Survey Method	Sampling Used
AZ	1999	1182	Statewide sample of Medicaid clients, mailing survey done by regional managed care entities	Statewide sample
CO	1999	1119	Statewide Sample - Mail & Consumer Administered.	Statewide stratified sample
DC	2000	667	5 sites- local agencies conduct own survey. Surveyed all consumers presenting during one week, used various methods ranging from consumer administered to drop-box.	Convenience sample, targeted 10% per site.
NY	1998	250	Pilot at one site - surveyed all consumers presenting during one week - Staff handed out, drop box in waiting area.	Convenience Sample
OK	1999	562	Pilot at 5 provider agencies- Surveyed consumers presenting for services in one-week period. Staff hand-out, mail return.	Convenience Sample
RI	1999	3548	Statewide-Conducted on all individuals with SMI during treatment planning.	All SMI Served
SC	1998	310	Statewide- mail survey random sample.	Statewide sample
TX	1999	3443	Statewide- local agencies conduct own survey, submit data to SMHA. Collection method mostly drop box, but some mail.	Statewide stratified sample
VA	1999	4358	Statewide- all consumers presenting for services during a 1-week period. Staff handed out survey, drop box in waiting area.	Convenience Sample
VT	1998	2300	Statewide mail survey of all Medicaid consumers.	All Medicaid served

- Scoring Algorithm:
- 1) Recode ratings of "not applicable" as missing values.
 - 2) For each performance measure, exclude respondents with more than 1/3rd of the items missing.
 - 3) Calculate the mean of the items for each respondent.
 - 4) Calculate the percent of scores less than 2.5 (percent agree and strongly agree).
(Denominator is number of respondents who have the domain score calculated)