2012 Arkansas’ CMHCs Consumer Survey Report Card

ARKANSAS DEPARTMENT OF HUMAN SERVICES,
DIVISION OF BEHAVIORAL HEALTH SERVICES

DATA COLLECTION AND ANALYSIS BY

Arkansas Foundation for Medical Care™
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ARKANSAS DEPARTMENT OF HUMAN SERVICES
In 2012, the Arkansas Foundation for Medical Care (AFMC) conducted a survey to evaluate beneficiaries’ satisfaction with the services they received from Arkansas’ Community Mental Health Centers and Clinics (CMHCs). The survey was conducted on behalf of the Arkansas Department of Human Services’ (DHS) Divisions of Behavioral Health Services (DBHS) and Medical Services (Medicaid). The CMHCs were also active partners in this project. The major areas of interest were satisfaction with access, outcomes, participation in treatment planning, social connectedness, improved functioning and overall satisfaction with services. The adult version of the survey also measured satisfaction with quality and appropriateness of services, while the child/adolescent version also measured satisfaction with staff cultural sensitivity.

DBHS certifies and monitors the performance of the state’s CMHCs and contracts with them to provide services. Medicaid pays for a substantial portion of the services provided by CMHCs. CMHCs provide a wide variety of behavioral health services for Arkansas citizens, including emergency services, traditional outpatient clinic services, and psychosocial rehabilitative services. CMHCs also serve as the point of entry for the public mental health system. The purpose of the survey was to identify areas of accomplishment and opportunities for improvement in the delivery of services.

The survey was conducted using the adult and child/adolescent versions of the Mental Health Statistics Improvement Program (MHSIP) consumer satisfaction surveys. The MHSIP adult survey contains 44 items and the child/adolescent survey contains 46 items. The adult version is completed by the adult beneficiary of service, while the child/adolescent version is completed by the parent (or other caretaker) of the child/adolescent beneficiary of service who are ages 17 or younger. A number of items of local interest were added to both the adult and child/adolescent MHSIP surveys. These additional items brought the final adult version to 64 items, and the child/adolescent version to 61 items. Since this same survey was also conducted in 2011, comparisons were made between domain scores achieved in 2012 and those achieved in 2011.

This report card gives the highlights of the survey findings. A more detailed report is available through a link at DBHS’ website, [http://humanservices.arkansas.gov/dbhs/Pages/dbhs_docs.aspx](http://humanservices.arkansas.gov/dbhs/Pages/dbhs_docs.aspx).
### Survey response rates

<table>
<thead>
<tr>
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<th>2012 Adult</th>
<th>2012 Child</th>
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</thead>
<tbody>
<tr>
<td>Survey sample size</td>
<td>1,315</td>
<td>1,375</td>
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<tr>
<td>Total surveys returned</td>
<td>428</td>
<td>444</td>
</tr>
<tr>
<td>Cooperation rate</td>
<td>33%</td>
<td>32%</td>
</tr>
<tr>
<td>Analyzable surveys</td>
<td>427</td>
<td>439</td>
</tr>
<tr>
<td>Response rate</td>
<td>32%</td>
<td>32%</td>
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</tbody>
</table>
Survey participants were asked to rate the treatment and counseling received from their clinic during the past 12 months on a scale from 0 (worst possible) to 10 (best possible). The graphic (right) shows the percentages of participants from both surveys who indicated a high degree of satisfaction (8 or higher). There were no significant changes in these ratings for 2012 as compared to 2011 ratings.

Survey participants were asked to rate the treatment and counseling received from any clinic during the past 12 months on a scale from 0 (worst possible) to 10 (best possible). The graphic (right) shows the percentages of participants from both surveys who indicated a high degree of satisfaction (8 or higher). There were no significant changes in these ratings for 2012 as compared to 2011 ratings.
Responses from certain related questions were combined to form domains of various aspects of beneficiary satisfaction. The domains reflect respondents’ perceptions of areas related to their care at CMHCs, and include overall satisfaction with services, access to services, participation in treatment planning, outcomes, social connectedness and improved functioning. The adult survey version also measured satisfaction with quality and appropriateness, while the child/adolescent survey version also measured satisfaction with staff cultural sensitivity. Federal guidelines used to score the survey domains specify that only respondents who answered at least two-thirds of the questions comprising that domain were to be included in the domain calculation.

The percent of respondents “reporting positively” for each of the surveys is the percent of respondents included in the domain calculation with an average score from all answered questions indicating that he or she, on average, “Agreed” or “Strongly Agreed” with the questions in that domain. The 2011 results have been provided for comparison. The percentage of adult respondents responding positively in the overall and outcomes domains increased significantly in 2012 as compared with 2011.

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<tbody>
<tr>
<td>Overall satisfaction</td>
<td>77%</td>
<td>84%*</td>
<td>71%</td>
<td>75%</td>
</tr>
<tr>
<td>Access</td>
<td>78%</td>
<td>79%</td>
<td>76%</td>
<td>77%</td>
</tr>
<tr>
<td>Outcomes</td>
<td>59%</td>
<td>66%*</td>
<td>58%</td>
<td>62%</td>
</tr>
<tr>
<td>Participation in treatment planning</td>
<td>63%</td>
<td>67%</td>
<td>77%</td>
<td>80%</td>
</tr>
<tr>
<td>Quality and appropriateness</td>
<td>80%</td>
<td>81%</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Cultural sensitivity of staff</td>
<td>N/A</td>
<td>N/A</td>
<td>85%</td>
<td>88%</td>
</tr>
<tr>
<td>Social connectedness</td>
<td>57%</td>
<td>59%</td>
<td>68%</td>
<td>72%</td>
</tr>
<tr>
<td>Improved functioning</td>
<td>59%</td>
<td>64%</td>
<td>61%</td>
<td>66%</td>
</tr>
</tbody>
</table>

*Indicates a statistically significant increase in the percentage responding positively.
Overall, 84 percent of qualifying adult respondents, and 75 percent of child/adolescent respondents reported positively to the satisfaction domain. The percentage of adult respondents responding positively increased significantly in 2012 as compared with 2011.

**Examples of Survey Measures:**

**Adult**
- I liked the services I received here.
- If I had other choices, I would still get services from this agency.
- I would recommend this agency to a friend or family member.

**Child**
- Overall, I am satisfied with the services my child received.
- I felt my child had someone to talk to when he/she was troubled.
- My family got the help we wanted for my child.
- The services my child and/or family received were right for us.
Access to services

Overall, mental health centers (CMHCs) scored relatively high regarding access to services. Of respondents to surveys who qualified to be included in the calculation, 79 percent of adults and 77 percent of children reported positively to this domain measure.

SOME SPECIFIC FINDINGS:

- **76 percent of adults** and **71 percent of children** who indicated they could remember when their first appointment occurred reported that their first appointment was within two weeks of initial contact with the CMHC.

- **83 percent of adults** and **83 percent of the parents or guardians of children served** reported that their first appointment was soon enough to meet their needs.

EXAMPLES OF SURVEY MEASURES:

**Adult**

- 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.
- I was able to get all the services I thought I needed.

**Child**

- The location of services was convenient for us.
- Services were available at times that were convenient for us.
More than 6 out of 10 respondents to both surveys who qualified to be included in the calculation reported positively to the outcomes domain measure. The percentage of adult respondents responding positively increased significantly in 2012 as compared with 2011.

Some Specific Findings:

- Four percent of adults said the services received helped them find or keep employment.
- 68 percent of parents/guardians of children served believe that their child’s grades improved as a result of mental health services received.

Examples of Survey Measures:

**Adult**

- I deal more effectively with daily problems.
- I am better able to control my life.
- I am better able to deal with crisis.
- I do better in social situations.
- I do better in school and/or work.

**Child**

- My child is better at handling daily life.
- My child gets along better with family members.
- My child gets along better with friends and other people.
- My child is better able to cope when things go wrong.
Regarding participation in treatment planning, 67 percent of adult respondents and 80 percent of child/adolescent respondents reported positively in this domain.

**EXAMPLES OF SURVEY MEASURES:**

**Adult**
- I felt comfortable asking questions about my treatment and medications.
- I, not staff, decided my treatment goals.

**Child**
- I helped to choose my child’s services.
- I helped to choose my child’s treatment goals.
- I participated in my child’s treatment.
More than half of qualifying respondents to both surveys reported positively to the social connectedness domain, a measure of the degree to which the respondents feel they have positive, supportive relationships.

**Examples of Survey Measures:**

**Adult**
- I am happy with the friendships I have.
- I have people with whom I can do enjoyable things.
- In a crisis, I would have the support I need from family or friends.

**Child**
- I know people who will listen and understand me when I need to talk.
- I have people that I am comfortable talking with about my child’s problems.
More than half of qualifying respondents to both surveys reported positively to the improved functioning domain.

**Examples of survey measures:**

**Adult**
- I do things that are more meaningful to me.
- I am better able to take care of my needs.
- I am better able to handle things when they go wrong.
- My symptoms are not bothering me as much.

**Child**
- My child is better able to do things he or she wants to do.
- My child is better at handling daily life.
- My child gets along better with family members.
- My child is better able to cope when things go wrong.
Quality and appropriateness

The quality and appropriateness domain measure was calculated only for respondents to the adult mental health survey. Of those adult respondents qualifying for inclusion in the measure, 81 percent reported positively.

Examples of survey measures:

Adult

- Staff believed that I could grow, change and recover.
- Staff told me what side effects to watch out for.
- 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.
The cultural sensitivity domain is unique to the child mental health survey. Eighty-eight percent of qualifying respondents for this measure reported positively to cultural sensitivity.

**EXAMPLES OF SURVEY MEASURES:**

**Child**
- Staff treated me with respect.
- Staff respected my family’s religious/spiritual beliefs.
- Staff spoke with me in a way that I understood.
- Staff were sensitive to my cultural/ethnic background.
The Arkansas Foundation for Medical Care (AFMC) is a federally designated Medicare quality improvement organization (QIO). We offer survey and data management services to the public and private sectors, including in-depth data collection and analysis for Medicare, Medicaid and other payers. Our statisticians, analysts, survey specialists and health care communicators use their skills to make information matter. Reliable information, put to use, makes a difference. AFMC’s other services include utilization review, health care quality improvement, public health education and continuing education for providers.