



DELAWARE HEALTH AND SOCIAL SERVICES

Division of Substance Abuse and Mental Health

2010 CONSUMER/CLIENT SATISFACTION SURVEY

RESULTS BY TREATMENT PROVIDER

JULY, 2011

Introduction

This report summarizes the findings by treatment provider from a statewide satisfaction survey of 1,823 consumers and clients of the Delaware Division of Substance Abuse and Mental Health (DSAMH), which was conducted between June and November, 2010. The purpose of the survey was to collect information on consumer/client satisfaction with treatment in order to assess the extent to which these programs provided high quality services to Delaware consumers and clients. Consumer satisfaction with services, access, and outcomes are an important part of the management information used by the DSAMH Executive staff and constituents to measure the success of the service delivery system. The consumer/client satisfaction survey was originally piloted in 1998, and was repeated with larger samples in 2002 and annually thereafter.

METHODOLOGY

Sampling Plan

The findings in this report are based on a written survey administered to a sample of 1,823 consumers who were receiving mental health and substance abuse treatment services in Delaware-funded programs between June and November of 2010. The sample was stratified according to the type of treatment program and the number of persons seen annually. Programs were sampled at a 10% rate, except for Community Continuum of Care programs which were over sampled at a rate of 30%, and programs with less than 50 clients annually, which were assigned a sample of 10 clients per site to include sufficient cases for analysis. This plan resulted in a sample of 1,981 cases. Of these, 1,823 interviews (92.0%) were completed. The margin of error for the survey is plus or minus 2%, meaning that one can be sure 95% of the time that results for the entire population would be within plus or minus 2% of sample results. However, the ability to generalize results from the survey sample to the entire population of consumers in Delaware may be limited because a convenience sample was used instead of a random sample. A random sample would be more difficult to implement, as only clients who were present at the agency at the time that the survey was being conducted could be interviewed.

Survey Instrument

The 47-item survey instrument is based on a 28-item satisfaction survey developed by the U.S. Substance Abuse and Mental Health Services Administration, Center for Mental Health Services, Mental Health Statistics Improvement Program (MHSIP). The MHSIP consumer survey was developed and proposed as one of several instruments to measure the indicators of the MHSIP Consumer-Oriented Report Card, which was developed by a task force of consumers, family members, researchers, and federal, state, and local mental health agency representatives. The consumer survey was specifically designed to measure concerns that were important to consumers in the

areas of Access, Quality/Appropriateness, Outcomes, Overall Satisfaction, and Participation in Treatment Planning.

The final version of the survey contained the original 28 questions and 4 Delaware-specific questions measuring the ease with which a case manager can be contacted in time of crisis, how staff treat people of different races and sexual orientations, and whether consumers were helped with job skills. In 2008, CMHS added two more domains to the survey, Functioning and Social Connectedness, which increased the number of survey questions to 40. DSAMH added the questions for these domains to its 2008 survey. In 2010, DSAMH added an additional 3 questions regarding recovery and history of trauma, bringing the total number of questions to 43. There are four additional demographic questions.

The DSAMH survey employs a five-point scale to measure agreement with 43 statements regarding the consumer's perception of the treatment program the consumer or client is currently attending, with a score of 1 indicating "strongly agree" and 5 indicating "strongly disagree." The 40 MHSIP questions are used to construct the seven "domains," or important aspects of consumer perceptions of treatment which have been identified by MHSIP as being correlated with positive treatment outcomes: access to care, quality and appropriateness of services, outcomes, consumer participation in treatment planning, overall satisfaction, functioning and social connectedness. Positive consumer perceptions in these seven areas were measured by calculating the percentage of consumers agreeing with the following 40 statements:

Access:

- The location of services was convenient (parking, public transportation, distance, etc.).
- Staff were willing to see me as often as I felt it was necessary.
- Staff returned my call in 24 hours.
- Services were available at times that were good for me.
- I was able to get all the services I thought I needed.
- I was able to see a psychiatrist when I wanted to.
- In a time of crisis my case manager or counselor can be easily contacted.

Quality and Appropriateness of Services:

- Staff here believe that I can grow, change and recover.
- I felt free to complain.
- I was given information about my rights.
- Staff encouraged me to take responsibility for how I live my life.
- Staff told me what side effects to watch out for.
- Staff respected my wishes about who is and who is not to be given information about my treatment.
- Staff were sensitive to my cultural background (race, religion, language, etc.)
- Staff helped me obtain the information I needed so that I could take charge of managing my illness.
- I was encouraged to use consumer-run programs (support groups,

drop-in centers, crisis phone line, etc.).
The Staff treat people of my race with dignity.
The Staff treat people who may be gay or lesbian with dignity.

Outcomes:

I deal 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 housing situation has improved.
I am better able to get and keep a job.
My symptoms are not bothering me as much.

Consumer Participation in Treatment Planning:

I, not staff, decided my treatment goals.
I felt comfortable asking questions about my treatment and medication.

Overall Satisfaction:

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

Functioning:

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.
I am better able to do things that I want to do.
My symptoms are not bothering me as much.¹

Social Connectedness:

I am happy with the friendships I have.
I have people with whom I can do enjoyable things.
I feel I belong in my community.
In a crisis, I would have the support I need from family or friends.

The surveys are scored according to the following rules:

1. Ratings of “not applicable” are recoded as missing values.
2. Respondents with more than 1/3 of the items missing in a particular domain are excluded.

¹ This question is included in both the Outcomes and Functioning domains.

3. The mean of the items for each domain for each respondent is calculated.
4. The percent of scores less than 2.5 (percent agree and strongly agree) are then calculated.

Survey Administration

This survey was administered to a sample of consumers from all DSAMH treatment programs by trained consumer interviewers who distributed the surveys to a convenience sample of consumers at each treatment site and assisted them with their responses as necessary. The questionnaire was available in both English and Spanish. Written, informed consent to participate was obtained from each consumer and survey responses were anonymous and confidential.

Of the total of 1,823 consumers who participated in the survey, 1,023 (57.1%) attended programs providing substance abuse treatment and 799 (42.9%) attended programs providing mental health treatment. One survey did not indicate the treatment provider.