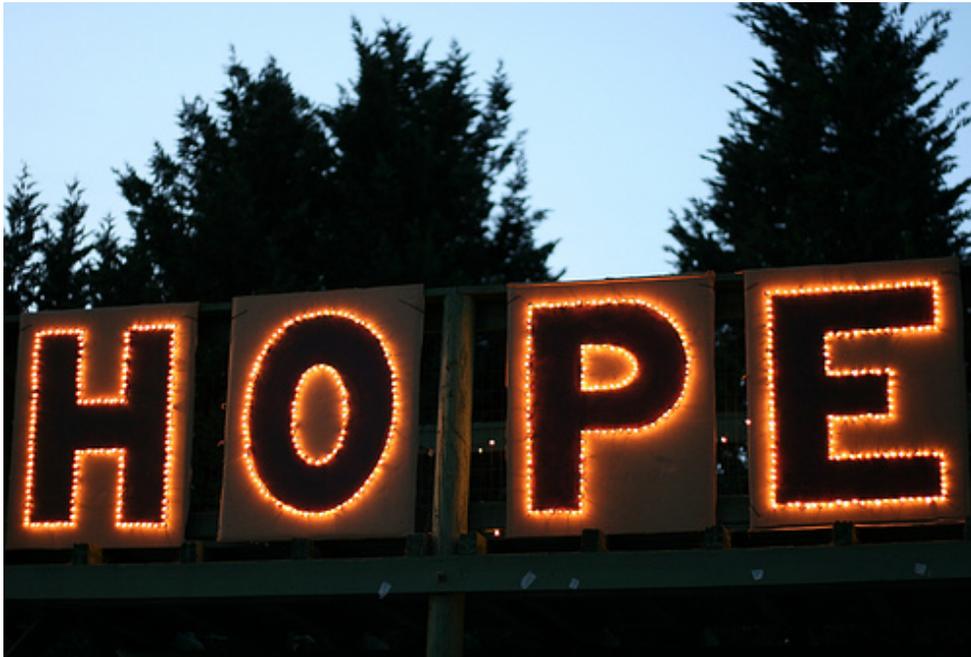


Consumer Survey 2012 Annual Report



January 2013

Connecticut Department of Mental Health and Addiction Services



410 Capitol Avenue
Hartford, CT 06134
www.ct.gov/dmhas

Table of Contents

Table of Contents	ii
Tables	iv
Figures	iv
Note from the Director	v
Acknowledgements	vi
Executive Summary	vii
<i>Survey Process</i>	<i>vii</i>
<i>Quality of Life</i>	<i>vii</i>
<i>Health Outcomes</i>	<i>vii</i>
<i>Findings</i>	<i>vii</i>
<i>Survey Demographics</i>	<i>viii</i>
<i>Statewide Satisfaction by MHSIP Domains</i>	<i>viii</i>
<i>Demographic Characteristics and Satisfaction on MHSIP Domains</i>	<i>ix</i>
Gender	<i>ix</i>
Race	<i>ix</i>
Ethnicity	<i>ix</i>
Age Range	<i>x</i>
Level of Care	<i>x</i>
Length of Stay	<i>x</i>
Region	<i>xi</i>
Introduction	1
<i>Purpose</i>	<i>1</i>
<i>Organization of the Report</i>	<i>1</i>
<i>Contact Information</i>	<i>1</i>
Methodology	2
<i>Measures</i>	<i>2</i>
<i>Administration</i>	<i>3</i>
<i>Sample Selection</i>	<i>3</i>
<i>Data Entry</i>	<i>4</i>
<i>Analysis</i>	<i>4</i>
Consumer Survey Results	5
<i>Demographics of Statewide Sample</i>	<i>7</i>
<i>Satisfaction with Services</i>	<i>8</i>
<i>Trends over Time</i>	<i>9</i>
Statewide Satisfaction Trends by Domain	<i>9</i>
General Satisfaction	18

- Access..... 21**
- Participation in Treatment..... 24**
- Quality and Appropriateness..... 27**
- Respect 30**
- Outcome..... 33**
- Recovery 36**
- Consumer Survey Differences between Groups 39**
 - Consumer Satisfaction across Program Type..... 39
 - Consumer Satisfaction across Gender..... 39
 - Consumer Satisfaction across Race 40
 - Consumer Satisfaction across Ethnicity 41
 - Consumer Satisfaction across Age Groups 42
 - Consumer Satisfaction across Levels of Care 43
 - Consumer Satisfaction by Length of Service 45
 - Consumer Satisfaction across Regions 46
 - Summary by Domains 47*
 - General Satisfaction 47
 - Access 47
 - Participation in Treatment..... 48
 - Quality and Appropriateness 48
 - Respect 49
 - Outcome 49
 - Recovery 50
- Feedback from the DMHAS Community 51**
 - Consumer Feedback 51*
 - Methodology 51*
 - Data Collection 51
 - Analysis 51
 - Findings 51
- Quality of Life Results 58**
 - QOL Group Differences 58*
 - Quality of Life across Program Type 58
 - Quality of Life across Gender 59
 - Quality of Life across Race 59
 - Quality of Life across Ethnicity 60
 - Quality of Life across Age Groups..... 61
 - Quality of Life across Levels of Care..... 62
 - Quality of Life by Length of Service..... 63
 - Quality of Life across Regions..... 64
 - Quality of Life Summary by Domains 65
- Health Outcomes Survey Results 67**
 - Demographic Information 67*
 - Physical Health 69*
 - Mental Health..... 71*
- Discussion 73**

Using Results for Local Evaluation and Planning	73
Adjusting Benchmarks.....	73

Appendices 75

Appendix 1.1: DMHAS Consumer Survey Memorandum FY 2012	75
Appendix 1.2: DMHAS Consumer Survey Cover Letter to Consumers FY 2012	76
Appendix 1.3: DMHAS Consumer Survey Instrument FY 2012.....	77
Appendix 1.4: DMHAS Quality of Life Instrument FY 2012.....	79
Appendix 2: Survey Sample Size and Number of Surveys Submitted by Provider, FY 2012.....	82

Tables

Table 1: Statewide Demographic Trends, SFY 2008 - 2012	5
Table 2: Comparison of Survey Demographics to DMHAS Demographics.....	7
Table 3: Statewide Trends (2003-2012) by Domain	10
Table 4: Statewide Trends (2007-2012) by Question	12
Table 5: General Satisfaction Domain by Provider.....	18
Table 6: Access Domain by Provider.....	21
Table 7: "I felt comfortable asking questions about my services, treatment or medication" by Provider.....	24
Table 8: Quality and Appropriateness Domain by Provider.....	27
Table 9: "My wishes are respected about the amount of family involvement I want in my treatment" by Provider	30
Table 10: Outcome Domain by Provider.....	33
Table 11: Recovery Domain by Provider	36
Table 12: Providers Participating in the Health Outcomes survey, FY2012.....	67
Table 13: Health Outcomes Survey Demographic Information	68
Table 14: Health Outcomes Summary Data by Gender	71
Table 15: Health Outcomes Summary Data, Non-Smoker vs. Smoker.....	72

Figures

Figure 1: Comparison of Connecticut and National Domain Scores	8
Figure 2: Trends (2008 - 2012) in Consumer Satisfaction.....	9
Figure 3: Body Mass Index for 1124 DMHAS Clients.....	69
Figure 4: Reported Medical Conditions.....	70
Figure 5: Sample from Provider Quality Dashboard Report	73

Note from the Director

2012 has seen some notable improvements in the DMHAS Consumer Satisfaction Survey process as well as in our overall quality and performance measurement and reporting. We have now integrated our annual consumer satisfaction survey into the DMHAS Data Performance System (DDaP) for a more streamlined data entry and reporting experience. Additionally, consumer satisfaction survey results have been incorporated into DMHAS' newly developed dashboard-style provider quality reports, which are now produced every fiscal quarter. These reports present performance, process, and outcome measures visually and are currently distributed internally through a continuous quality improvement cycle in collaboration with DMHAS funded and operated providers. DMHAS plans to publish these provider level quality reports on the internet within the next year.

The 2012 Consumer Satisfaction Survey received over 22,000 responses, which amounts to about 20% of DMHAS' annual client population. It offers our clients the ability to give us critical, anonymous feedback, which provides us with information not only about the service program or provider, but also about the system as a whole.

In addition to results from the core satisfaction instrument, DMHAS also collected data from two optional instruments: the WHOQOL-BREF quality of life tool, as well as a selection of health status questions taken from the Center for Disease Control's Behavioral Risk Factor Surveillance System (BRFSS). We are grateful to the providers who have collected this additional information, as it is providing us valuable data about consumers' health and well being in areas other than within the context of service provision. This information will inform planning decisions as we further integrate behavioral health care into primary care systems. You can read more about these quality of life and health status results, starting on page 58.

We are committed to the continuous quality improvement of our service system, and consumer input is an extremely valuable tool. Please consider using the information contained in this report when planning your own quality improvement initiatives.

As always, we truly appreciate everyone who has made our survey a success. Thank you for your dedication, participation, and support.

Jim Siemianowski
Director, EQMI

January 2013

Acknowledgements

The Connecticut Department of Mental Health and Addiction Services (DMHAS) thanks everyone who completed the survey and provided their insights regarding the quality of our service system. Additionally, we would also like to recognize the work of the provider community and their continuing assistance with the implementation of this survey project.

This year, several Evaluation, Quality Management and Improvement (EQMI) staff assisted with the Survey Report. Karin Haberlin managed the survey process and liaised with providers over the course of the year. Jeffrey Johnson analyzed the data and produced numerous tables and provider level reports. Kristen Miller analyzed the quantitative data and edited most of the narrative, and Ken Cunningham performed and wrote up the qualitative analysis.

Cover photo: "HOPE" © 2009 [DieselDemon](http://diesel-demon.com/), used under a Creative Commons Attribution-ShareAlike license: <http://creativecommons.org/licenses/by/2.0>

Executive Summary

Survey Process

The Connecticut Department of Mental Health and Addiction Services (DMHAS) conducts an annual survey in order to better understand people's experiences with our public state-operated and community-funded service delivery system. The 23-item version of the Consumer Survey developed as the Mental Health Statistics Improvement Program's (MHSIP) Consumer-Oriented Mental Health Report Card has now been used for eight years. The survey was offered to consumers/individuals in recovery within the context of their mental health and substance abuse treatment.

- The MHSIP consumer survey was designed to measure consumer satisfaction with services in the following domains:
- The **General Satisfaction** domain contains three items, and measures consumers' satisfaction with services received.
- The **Access** domain contains four items, and measures consumers' perception of service accessibility.
- The **Quality and Appropriateness** domain contains seven items, and measures consumers' perception of the quality and appropriateness of services.
- The **Outcome** domain contains seven items, and measures consumers' perception of treatment outcomes as a result of receiving services.
- An item on consumers' perception of **participating in treatment**.
- An item on consumer experience of **being respected by staff**.

In 2005, DMHAS added the **Recovery** domain to the MHSIP survey. The Recovery domain is composed of five questions which assess consumers' perception of "recovery oriented services." This addition provides DMHAS with valuable information regarding our success in implementing a recovery-oriented service system.

Quality of Life

Fiscal Year 2012 is the fifth year that DMHAS has encouraged the use of the WHOQOL-BREF Quality of Life (hereafter QOL) instrument, which is a widely used, standardized quality of life tool developed by the World Health Organization. The QOL is a 26 question tool that measures consumer satisfaction with the quality of his/her life in the following domains: physical, psychological, social relationships, and environment. DMHAS received 2,055 QOL responses during Fiscal Year 2012. Results may be found on page 58 of this report.

Health Outcomes

In SFY2011, DMHAS piloted a Health Outcomes survey that contained eight questions taken from the Behavioral Risk Factor Surveillance System (BRFSS). The BRFSS is the world's largest, on-going telephone health survey system, tracking health conditions and risk behaviors in all fifty states.¹ In SFY2012, DMHAS made the Health Outcomes survey available to all providers who wished to administer it. The survey was available in English and Spanish. The questions addressed the topics of body mass index (BMI), cardiovascular/respiratory/diabetes disease, overall health from physical and psychological perspectives, and drinking habits. A total of 1304 surveys were completed. Results may be found starting on page 67 of this report.

Findings

Most of our consumers were satisfied with the treatment services that were being provided to them through our provider network. Connecticut respondents reported levels of satisfaction higher than the U.S. national averages in all Consumer Satisfaction Survey domains.²

¹ See <http://www.cdc.gov/brfss/> for more information on this instrument.

² 2011 CMHS Uniform Reporting System Output Tables. *CMHS Uniform Reporting System - 2011 State Mental Health Measures*. Retrieved on September 20, 2012 from <<http://www.samhsa.gov/data/outcomes/urs/2011/Connecticut.pdf>>.

Survey Demographics

Statewide, a total of 22,571 surveys were returned by 113 providers within the DMHAS network of care.

- Slightly more than half (54.6%) of the respondents were men and 42.6% were women. Fewer than 3% percent of the respondents did not identify their gender.
- Most (61.5%) of the respondents were White and almost 18% were African-American/Black. Approximately 10% fell into the “Other” category, which rolled up several less frequent racial categories. Fewer than 10% did not identify their race.
- Nearly 20% of the respondents identified themselves as Hispanic, and 20% chose not to identify whether or not they were of Latino/a origin (called Ethnicity in the survey).
- The largest number of survey respondents fell between the ages of 35-54 (approximately 47%); as the average age of a DMHAS client is 38 years old, this is not surprising.
- One third (33%) of the survey sample responded to the survey within the outpatient setting; 11% from medication assisted treatment programs; 13% from residential programs; 6% from intensive outpatient programs; 8% from case management services; 14% in employment or social rehabilitation programs; and 5% from ACT/CSP/RP programs. The remaining 11% of respondents responded to the survey from other levels of care or reported from agencies that did not indicate the level of care in the survey data.
- More surveys were collected from people receiving services from Mental Health programs (47%) than from people receiving services from Substance Use programs (38%). The remaining portion of surveys did not contain enough program information to categorize.
- Additionally, this was the fourth year in which respondents were asked to self-report their length of stay in treatment. Forty percent reported a stay of less than a year, and just over 14% reported a stay of more than one, but less than two years. Seventeen percent reported more than two years but less than 5 years and about 22% reported stays of more than five years (up 3% from SFY11).

Statewide Satisfaction by MHSIP Domains

DMHAS measures satisfaction by the MHSIP Consumer Survey domains. The percentage of consumers satisfied with services has remained relatively constant over the past six years and in FY 2012, satisfaction increased slightly (+1%) in the Access domain and remained stable in the other domains, except for Outcome, where satisfaction decreased slightly (-1%). Over the last five years, consumers have consistently reported being most satisfied with the level of family participation in treatment, and with quality and appropriateness in care.

- Over 92% of consumers responded positively in the **Participation in Treatment** and **Quality and Appropriateness** domains. Additionally, approximately 92% of consumers indicated a positive response in the **General Satisfaction** domain.
- Approximately 91% agreed with the statement, “My wishes are respected about the amount of family involvement I want in my treatment.” (This question comprises the **Respect** Domain.)
- In FY 2012, 89% expressed satisfaction with **Access** to services. Eighty-two percent (82%) of consumers were satisfied with perceived **Outcomes**.
- The lowest degree of satisfaction was reported in the **Recovery** domain, where approximately 79% of respondents indicated satisfaction.

Demographic Characteristics and Satisfaction on MHSIP Domains

DMHAS investigated differences in MHSIP Domains for key demographics to determine if there were higher degrees of satisfaction for various subgroups. Results are summarized below.

Gender

All Respondents	
Significantly Better	Women in Access, Quality and Appropriateness, General Satisfaction, Respect, Participation in Treatment domains Men in Outcome, Recovery domains

Respondents in Substance Use Programs	
Significantly Better	Women in Access, Quality and Appropriateness, General Satisfaction, Respect, Participation in Treatment domains

Respondents in Mental Health Programs	
Significantly Better	Women in Access, Quality and Appropriateness, General Satisfaction, Participation in Treatment, Respect domains

Race

All Respondents	
Significantly Better	Non-White respondents in the Recovery domain

Respondents in Substance Use Programs	
Significantly Better	Any race other than Black in Respect domain Any race other than White in Recovery domain

Respondents in Mental Health Programs	
Significantly Better	Black respondents in the Outcome, Recovery domains

Ethnicity

All Respondents	
Significantly Better	Respondents who identify as Hispanic/Latino in Access, Quality and Appropriateness, Outcome, General Satisfaction, Recovery domains

Respondents in Substance Use Programs	
Significantly Better	Respondents of Hispanic/Latino origin in the Outcome, General Satisfaction, Recovery domains

Respondents in Mental Health Programs	
Significantly Better	Hispanic/Latino respondents in Access, Quality and Appropriateness, Outcome, General Satisfaction, Respect, Participation in Treatment domains

Age Range

All Respondents	
Significantly Better	<p>Respondents who are 25 and older in Participation in Treatment domain</p> <p>Respondents who are 55 and older in Access, General Satisfaction domains</p>

Respondents in Substance Use Programs	
Significantly Better	<p>Respondents who are 55 and older in Access domain</p> <p>Respondents who are 35 and older in General Satisfaction domain</p>

Respondents in Mental Health Programs	
Significantly Better	<p>Respondents who are 35 and older in General Satisfaction domain</p> <p>Respondents who are 55 and older in Outcome domain</p>

Level of Care

All Respondents	
Significantly Better	<p>People who received employment services in Access, Quality and Appropriateness, Outcome, General Satisfaction, Respect, Participation in Treatment, and Recovery domains</p> <p>People who received social rehabilitation or medication assisted treatment services in Outcome domain</p>

Respondents in Substance Use Programs	
Significantly Better	<p>People who received case management services in Access, Quality and Appropriateness, General Satisfaction Respect, Participation in Treatment domains</p>

Respondents in Mental Health Programs	
Significantly Better	<p>Respondents who received employment services in Access, Quality and Appropriateness, Outcome, General Satisfaction, Respect, and Recovery domains</p> <p>Respondents who received social rehabilitation services in Outcome, Recovery domains</p>

Length of Stay

All Respondents	
Significantly Better	<p>People receiving services for more than one year in the Access, General Satisfaction domains</p>

Respondents in Substance Use Programs	
Significantly Better	<p>People who have received services for 1+ years, in the Outcome domain</p> <p>People who have received services for 5+ years, in the Recovery domain</p>

Respondents in Mental Health Programs	
Significantly Better	<p>People receiving services for more than one year in Outcome domain</p> <p>People receiving services for less than 5 years in the Quality and Appropriateness domain</p>

Region

All Respondents	
Significantly Better	Respondents from Regions 1 and 5 in Outcome, Recovery domains

Respondents in Substance Use Programs	
Significantly Better	Respondents from Region 4 in Access domain

Respondents in Mental Health Programs	
Significantly Better	Nothing to report

Despite DMHAS' attempt to provide anonymity to its consumers as they express their opinions regarding their satisfaction with DMHAS' services, we have been unable to provide a totally anonymous survey setting.

Introduction

Consumer Satisfaction Survey SFY 2012 (July 1, 2011 – June 30, 2012)

Purpose

The purpose of the consumer satisfaction survey is to assess consumers' satisfaction with the services being provided in Connecticut's system of care for people living with Mental Health and Substance Use disorders.

Organization of the Report

In this report, we endeavor to document the views of people served in both Mental Health (MH) and Substance Use (SU) treatment programs within DMHAS' statewide provider network.

Contained within are the customary annual survey results, which include survey demographics and statewide satisfaction by MHSIP domains, as well as additional analyses of the optional Quality of Life data and consumer comments.

Contact Information

If you have any questions, concerns, and suggestions/recommendations please contact:

Jim Siemianowski
Director, Evaluation, Quality Management and Improvement
Connecticut Department of Mental Health and Addiction Services
410 Capitol Avenue, 4th Floor,
Hartford, CT 06134
(860) 418-6810
james.siemianowski@ct.gov

Methodology

Measures

The 2012³ consumer survey consists of 28 items, rated on a 5-point Likert scale. A score of “1” represents strong agreement with an item; “5” strong disagreement; and “3” is a neutral response. The responses are labeled: Strongly Agree, Agree, Neutral, Disagree, Strongly Disagree, and Not Applicable.

- The Mental Health Statistics Improvement Program (MHSIP) consumer satisfaction survey measures consumer satisfaction with services in the following domains:
- The **General Satisfaction** domain consists of items 1-3, and measures consumers’ satisfaction with services received. A consumer had to complete at least 2 items for the domain score to be calculated.
- The **Access** domain consists of items 4-7, and measures consumers’ perceptions about how easily accessible services were. A consumer had to complete at least 2 items for the domain score to be calculated.
- The **Quality and Appropriateness** domain consists of items 8 and 10-15, and measures consumers’ perceptions of the quality and appropriateness of services. A consumer had to complete at least 4 items for the domain score to be calculated.
- The **Outcome** domain consists of items 17-23, and measures consumers’ perceptions about treatment outcomes as a result of receiving services. A consumer had to complete at least 4 items for the domain score to be calculated.
- One item covering consumers’ perceptions of his/her **Participation in Treatment**.
- One item covering consumers’ experiences with staff **Respect**.

In addition to the MHSIP’s 23 items, the Connecticut Department of Mental Health and Addiction Services added the following:

- A **Recovery** domain consisting of five questions (24-28) that assess consumers’ perceptions of “recovery oriented services”. A consumer had to answer at least 3 items for the domain score to be calculated.
- Demographic questions, where respondents indicate their gender, race, age, and ethnicity. Two new questions were added in FY 2007; they ask respondents to self-report their reason for receiving services (Mental Health only, Substance Use only, both Mental Health and Substance Use), and their length of time in service (less than one year, 12 months to two years, more than two years, and more than five years).
- Space for consumers to add optional additional comments.

³ Similar to previous years, the survey contains 23 items from the MHSIP consumer satisfaction survey. Please refer to Appendix 1.5 for a copy of the MHSIP survey.

Administration

DMHAS provided agencies with guidelines for survey implementation. Generally, provider staff administered the consumer survey, but in some cases, consumers, peers, or other neutral parties assisted with the data collection. Providers administered the survey to people who received either Mental Health or Substance Use treatment services between July 1, 2011 and June 30, 2012. Surveys were collected between February 2012 and June 2012.

The survey was administered in the following levels of care:

- Mental Health Case Management, except Homeless Outreach
- Mental Health Outpatient (Clinical)
- Mental Health Partial Hospitalization
- Mental Health Residential, including Group Residential, Supervised Apts., Supported Apts., Supportive Housing, Transitional Residential
- Mental Health Social Rehabilitation
- Mental Health or Substance Abuse Employment Services
- Substance Use Medication Assisted Treatment (Methadone Maintenance and Buprenorphine)
- Substance Abuse Intensive Outpatient
- Substance Abuse Partial Hospitalization
- Substance Abuse Outpatient including Gambling
- Substance Abuse Residential including Intensive, Intermediate, Long-Term Treatment, Long-Term Care, Transitional Residential/Halfway House
- Substance Abuse Recovery House
- Substance Abuse Case Management

Sample Selection

DMHAS asked providers to calculate survey sample sizes according to the number of unduplicated consumers served by the provider during the first quarter of Fiscal Year 2011 (July 1, 2010 through September 30, 2010).⁴ The sample size calculation was based on a 95% confidence level and 7% confidence interval.⁵ The table of expected versus actual surveys submitted for SFY2012 can be found in Appendix 2. DMHAS provided agencies with a guide and as-needed technical assistance for determining correct sample sizes.⁶

⁴ The unduplicated counts were obtained from the Unduplicated Clients report in the DDaP Data Warehouse.

⁵ Explanation taken from <http://williamgodden.com/tutorial.pdf> and used with permission:

The confidence **interval** is the plus-or-minus figure usually reported in newspaper or television opinion poll results. For example, if you use a confidence interval of 4 and 47% percent of your sample picks a certain answer you can be "sure" that if you had asked the question of the entire relevant population, between 43% (47-4) and 51% (47+4) would have picked that answer.

The confidence **level** tells you how sure you can be. It is expressed as a percentage and represents how often the true percentage of the population (those who would pick that certain answer if you asked everyone) would lie within the confidence interval. The 95% confidence level means you can be 95% certain; that is, in 95 out of 100 situations, you would find that the true whole-population percentage fell within the confidence interval. Most researchers use the 95% confidence level. When you put the confidence level and the confidence interval together, you can say that you are 95% sure that the true percentage of the population is between 43% and 51%.

There is a trade-off between confidence interval and confidence level. For a given sample size (number of survey respondents), the wider the confidence interval, the more certain you can be that the whole population's answers would be within that range. On the other hand the narrower the confidence interval, the less sure you would be of having bracketed the "real" whole-population percentage. For example, if you asked a sample of 1000 people in a city which brand of cola they preferred, and 60% said Brand A, you can be very certain that between 40 and 80% of all the people in the city actually do prefer that brand, but you would be far less sure that the actual Brand-A-preference % for all residents would fall between 59 and 61%.

⁶ The guide may be found on the DMHAS Consumer Survey web page: <http://www.ct.gov/dmhas/consumersurvey>

Data Entry

For SFY2012, DMHAS updated the process for entering data from the consumer survey. The new data entry application is now part of the DMHAS Data Performance System (DDaP) portal and allows providers to enter their survey data directly into the DDaP system. As the surveys are anonymous, they are not connected to other client data in the system, however, if the agency identifies which program the survey comes from, some program related information (program type, level of care, region, etc) that is in DDaP can now be connected to each survey. This could reduce the data entry burden on the agency while at the same time increasing the accuracy of identifying this information for each survey.

Analysis

Demographic and other simple frequency analyses were performed in both VB.NET and SPSS v 20.0 by two staff, and compared for accuracy.

The statistical analyses used the domain score (an average of the response values for the questions that comprise that domain. The domain score is a number between 1 and 5). The domain score then gets converted to a satisfaction score: domain scores that are less than 2.5 fall into the "Satisfied" category, scores between 2.5 – 3.5 fall into the "Neutral" category, and scores greater than 3.5 fall into the "Unsatisfied" category. The value that is the focus of this report is the percentage of clients who fall into the "Satisfied" category.

For example, it is reported that 90.5% of clients in MH programs were satisfied with Access to services (Access Domain), compared to 86.7% of clients in SU programs. The statistics that indicate that clients in the MH programs were more satisfied are based on the average domain scores for each group (MH program domain score was 1.60 and SU program domain score was 1.71; lower = more satisfied).

The domain scores are not reported in the Group Differences section. The above explanation is provided to explain why, in a few instances, the reader may see equal percentages reported as significantly different. In this case, equal numbers of consumers were in the "Satisfied" category, but the average domain score of one group was significantly lower than the other(s). Thus, the percentages that are reported indicate how many consumers fell into the "Satisfied" category, while the statistics (and the narrative) address the degree to which they were satisfied (lower score = more satisfied).

All analyses of difference were evaluated at alpha = .01. This means that there is a 1 in 100 chance that a difference is identified as a significant difference when in fact it is not. SPSS was used for these analyses.

Consumer Survey Results

Statewide, a total of 22,571 surveys were returned by 113 providers within the DMHAS network of care; 20,485 (91%) of all surveys were collected at the program level, rather than at the agency level. (In SFY2011 only 85% of the surveys were submitted with program information.) DMHAS has historically encouraged this manner of distribution, to ensure the most meaningful and useful information. See Table 1 for a summary of statewide demographic trends over the past five years.

Table 1: Statewide Demographic Trends, SFY 2008 - 2012

	2012		2011		2010		2009		2008	
	N	%	N	%	N	%	N	%	N	%
<i>Gender</i>										
Female	9611	42.6	10414	41.5	11383	41.0	10453	41.5	9775	40.4
Male	12331	54.6	13436	53.5	14978	54.0	13461	53.4	13023	53.8
Unknown	629	2.8	1250	5.0	1375	5.0	1284	5.1	1390	5.8
<i>Race</i>										
American Indian/Alaskan Native	210	0.9	226	0.9	261	0.9	215	0.9	240	1.0
Asian	139	0.6	176	0.7	151	0.5	147	0.6	136	0.6
Black	3942	17.5	4407	17.6	4910	17.7	4421	17.6	4116	17.0
More Than One Race	158	0.7	865	3.5	1024	3.7	963	3.8	962	4.0
Native Hawaiian/Pacific Islander	58	0.3	66	0.3	84	0.3	82	0.3	70	0.3
Other	2538	11.2	2240	8.9	2594	9.4	2026	8.0	1907	7.9
Unknown	1651	7.3	2461	9.8	2692	9.7	2534	10.1	2609	10.8
White	13875	61.5	14659	58.4	16020	57.8	14810	58.8	14148	58.5
<i>Ethnicity</i>										
Mexican	141	0.6	173	0.7	176	0.6	168	0.7	170	0.7
Non-Hispanic	13596	60.2	13668	54.5	14791	53.3	13529	53.7	12007	49.6
Other Hispanic/Latino	989	4.4	1022	4.1	1092	3.9	1018	4.0	1025	4.2
Puerto Rican	3296	14.6	3704	14.8	4469	16.1	3441	13.7	3296	13.6
Unknown	4549	20.2	6533	26.0	7208	26.0	7042	28.0	7690	31.8
<i>Age Range</i>										
Unknown	768	3.4	1399	5.6	1413	5.1	1400	5.6	1433	5.9
20 and Under	675	3.0	781	3.1	915	3.3	903	3.6	921	3.8
21-24	1619	7.2	1759	7.0	1996	7.2	1903	7.6	1770	7.3
25-34	4708	20.9	5015	20.0	5663	20.4	4913	19.5	4699	19.4
35-54	10648	47.2	11829	47.1	13494	48.7	12425	49.3	12193	50.4
55-64	3480	15.4	3654	14.6	3555	12.8	3024	12.0	2615	10.8
65 and older	673	3.0	663	2.6	700	2.5	630	2.5	557	2.3
<i>Service Duration</i>										
12 month to 2 years	3208	14.2	3622	14.4	3762	13.6	3525	14.0	3414	14.1
Less than 1 year	9009	39.9	9896	39.4	12065	43.5	10340	41.0	9872	40.8
2 to 5 years	3897	17.3	3988	15.9	3914	14.1	3684	14.6	3275	13.5
More than 5 years	4996	22.1	4958	19.8	5348	19.3	5223	20.7	4685	19.4
Unknown	1461	6.5	2636	10.5	2647	9.5	2426	9.6	2942	12.2
<i>Program Type</i>										
MH	10969	46.6	12501	49.8	11462	41.2	11776	46.6	10781	44.4
SA	9045	38.4	9062	36.1	11646	41.9	10025	39.6	10440	43.0
Unknown	2557	10.9	3537	14.1	4628	16.6	3397	13.4	2967	12.2

	2012		2011		2010		2009		2008	
	N	%	N	%	N	%	N	%	N	%
<i>Level Of Care</i>										
MH Assertive Community Treatment	491	2.1	418	1.7	356	1.3	366	1.5	462	1.9
MH Case Management	895	3.9	904	3.6	1370	4.9	1282	5.1	1158	4.8
MH Clinical Outpatient	4160	18.0	5129	20.4	4179	15.0	4023	15.9	3506	14.5
MH Crisis Intervention	71	0.3	92	0.4	33	0.1	87	0.3	67	0.3
MH Group Home	221	1.0	212	0.8	201	0.7	235	0.9	218	0.9
MH Other	1547	6.7	1547	6.2	1467	5.3	1607	6.4	1390	5.7
MH Partial Hospital	355	1.5	166	0.7	18	0.1	100	0.4	26	0.1
MH Psychiatric Inpatient	15	0.1	0		0		1	0.0	57	0.2
MH Social Rehab	1601	6.9	1791	7.1	1789	6.4	1914	7.6	1795	7.4
MH Supervised Residential	383	1.7	404	1.6	379	1.4	402	1.6	358	1.5
MH Supportive Residential	596	2.6	643	2.6	753	2.7	761	3.0	787	3.2
MH Vocational Rehab	1084	4.7	1194	4.8	979	3.5	1086	4.3	1021	4.2
SA Case Management	179	0.8	0		224	0.8	212	0.8	145	0.6
SA Inpatient Detox	396	1.7	610	2.4	232	0.8	272	1.1	718	3.0
SA Intake/Evaluation	26	0.1	9	0.0	73	0.3	28	0.1	41	0.2
SA Intensive Residential	523	2.3	767	3.1	967	3.5	451	1.8	586	2.4
SA Intermediate/Long Term Treatment	725	3.1	494	2.0	1256	4.5	1004	4.0	1292	5.3
SA Long Term Care Residential	35	0.2	40	0.2	22	0.1	11	0.0	151	0.6
SA Methadone Maintenance	2443	10.6	3161	12.6	3461	12.4	3715	14.7	3229	13.3
SA Other	245	1.1	169	0.7	352	1.3	178	0.7	446	1.8
SA Outpatient	3137	13.6	2385	9.5	3179	11.4	2729	10.8	2720	11.2
SA Outpatient Detox	100	0.4	62	0.3	87	0.3	106	0.4	48	0.2
SA Partial Hospitalization	1172	5.1	1183	4.7	1696	6.1	1248	4.9	936	3.9
SA Transitional Care/Halfway House Resident	123	0.5	182	0.7	97	0.4	71	0.3	128	0.5
Unknown	2557	11.1	3537	14.1	4628	16.6	3397	13.4	2967	12.2

Demographics of Statewide Sample

In order to evaluate whether the sample of consumers who completed a survey was representative of the overall DMHAS population, we compared the consumer survey demographic information to the DMHAS demographic data for SFY2012.

Table 2: Comparison of Survey Demographics to DMHAS Demographics

Gender	CS 2012	DMHAS 2012	Difference
Female	42.6	39.8	2.8
Male	54.6	60.1	-5.5
Unknown	2.8	0.1	2.7
Race			
American Indian/Native Alaskan	0.9	0.5	0.4
Asian	0.6	0.7	-0.1
Black/African American	17.5	15.8	1.7
Native Hawaiian/Other Pacific Islander	0.3	0.2	0.1
White/Caucasian	61.5	64.1	-2.6
More Than One Race	0.7	0.5	0.2
Other	11.2	15.7	-4.5
Unknown	7.3	2.5	4.8
Ethnicity			
Hispanic-Cuban	0.0	0.3	-0.3
Hispanic-Mexican	0.6	0.6	0.0
Hispanic-Other	4.4	8.2	-3.8
Hispanic-Puerto Rican	14.6	11.0	3.6
Non-Hispanic	60.2	72.3	-12.1
Unknown	20.2	7.7	12.5
Age			
18-24	7.5	17.1	-9.6
25-34	20.9	21.4	-0.5
35-54	47.2	42.7	4.5
55-64	15.4	13.1	2.3
65+	3.0	4.4	-1.4
Other/Unknown	3.4	1.3	2.1

A positive number in the Difference column indicates the number of percentage points by which the Consumer Satisfaction Survey sample exceeds the overall DMHAS population. A negative number indicates that the overall DMHAS population is larger than the Consumer Survey sample for a particular category.

Examination of Tables 1 and 2 shows that the proportion of males and females responding to the consumer survey has remained relatively stable over the years with slightly more males than females responding. The consumer survey is still slightly under sampling males (up to 5.5%) and oversampling females (up to 2.8%).

Racial composition of the respondents to the consumer survey is fairly consistent with the overall DMHAS population. If anything, the consumer survey slightly oversampled minorities in SFY2012.

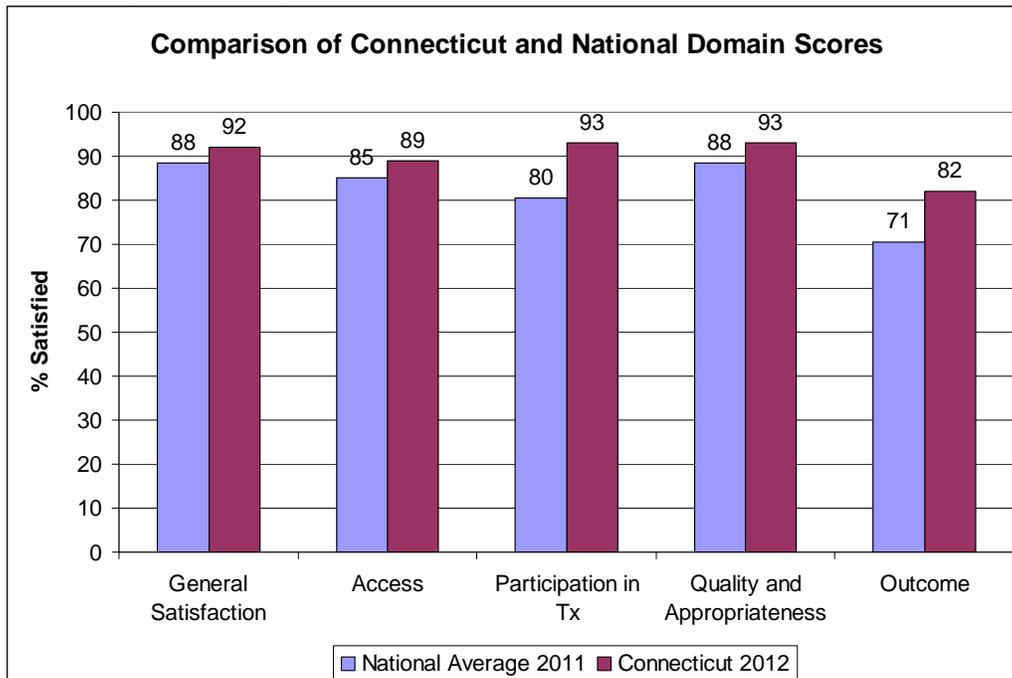
Over the last five years, the percentage of respondents to the consumer survey who have identified themselves as Caucasian has increased approximately 12 percentage points. There has been a comparable decrease over the same time in the percentage of consumers who decline to identify their race, while other racial categories have remained stable.

With regard to ethnicity, at first glance, the consumer survey appears to sample a smaller proportion of non-Hispanic consumers; however, 20% of the survey respondents declined to identify his or her ethnicity. In the age category, the youngest age group (18-24) is under sampled, while the middle (and largest) age group (35-54) is slightly oversampled. Increased effort is being made to encourage consumer satisfaction survey participation within the Young Adult Services programs. In general, the proportions of clients in each age category have remained fairly stable over the past five years; the 55-64 year old group had the biggest gain in terms of percentage of consumers submitting surveys (about 5%).

In conclusion, the demographics of the group of consumers who answered the survey in SFY2012 are generally representative of the larger DMHAS population of clients.

Satisfaction with Services

Figure 1: Comparison of Connecticut and National Domain Scores

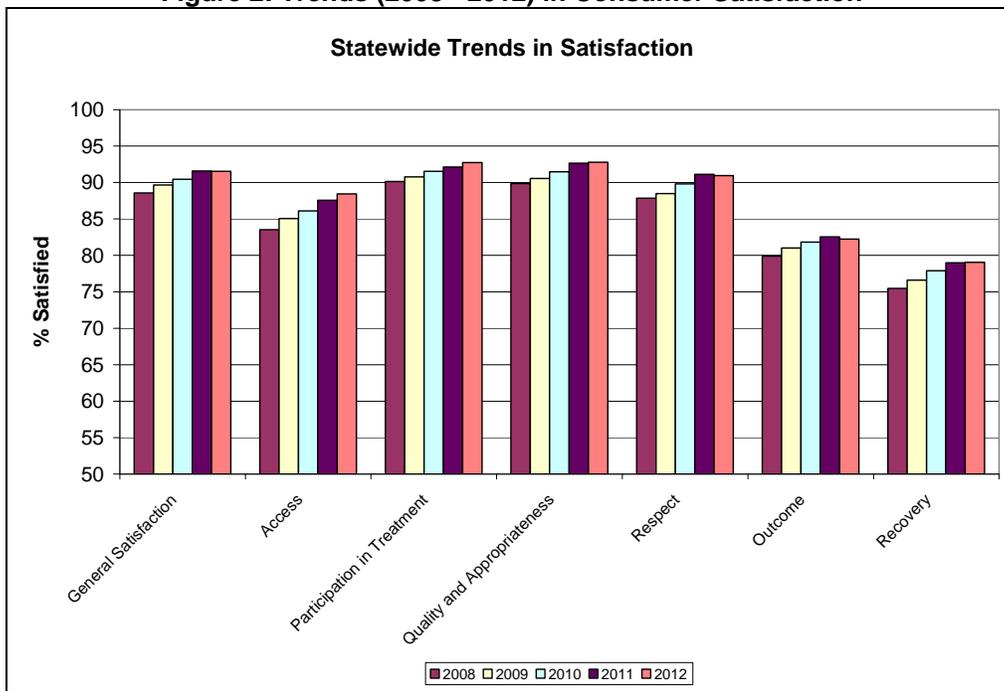


When compared to the latest MHSIP national survey results available (2011 CMHS Uniform Reporting System Output Tables), Connecticut consumers report higher levels of satisfaction in all domains: General Satisfaction, Access, Participation in Treatment, Quality and Appropriateness, and Outcome. Connecticut scores were 4%-13% higher than the national average in each domain.

Trends over Time

Statewide Satisfaction Trends by Domain

Figure 2: Trends (2008 - 2012) in Consumer Satisfaction



The percentage of consumers satisfied with services has remained relatively steady for over 5 years. Within each domain, however, the number of clients who have been satisfied with services has generally increased in small increments. During the last five years, consumers have reported being most satisfied with the level of family Participation in Treatment and with the Quality and Appropriateness domain. In FY 2012, 93% of respondents felt they received appropriate services, 92% were generally satisfied, and 89% expressed satisfaction with access to services. About 82% of respondents were satisfied with perceived outcomes. Almost 80% of respondents were satisfied with their progress toward recovery.

Table 3: Statewide Trends (2003-2012) by Domain

Domain	Year	Satisfied		Neutral		Dissatisfied	
		N	%	N	%	N	%
General Satisfaction							
	2012	20511	91.53	1566	6.99	333	1.49
	2011	22121	91.59	1660	6.87	371	1.54
	2010	23351	90.43	1998	7.74	474	1.84
	2009	21718	89.67	2009	8.29	493	2.04
	2008	20692	88.57	2144	9.18	527	2.26
	2007	21483	89.53	1985	8.27	528	2.20
	2006	19640	88.82	1911	8.64	561	2.54
	2005	18935	88.63	1932	9.04	498	2.33
	2004	13664	88.27	1405	9.08	410	2.65
	2003	10277	89.42	955	8.31	261	2.27
Access							
	2012	19527	88.45	2366	10.72	183	0.83
	2011	20897	87.57	2706	11.34	259	1.09
	2010	21911	86.11	3226	12.68	308	1.21
	2009	20320	85.06	3260	13.65	310	1.30
	2008	19161	83.53	3379	14.73	399	1.74
	2007	19801	84.62	3232	13.81	366	1.56
	2006	18098	83.22	3257	14.98	393	1.81
	2005	17303	82.73	3232	15.45	381	1.82
	2004	12707	83.72	2155	14.20	316	2.08
	2003	9409	83.70	1637	14.56	196	1.74
Participation in Treatment							
	2012	20496	92.75	1198	5.42	404	1.83
	2011	21934	92.13	1417	5.95	456	1.92
	2010	23242	91.53	1595	6.28	556	2.19
	2009	21605	90.78	1642	6.90	553	2.32
	2008	20755	90.14	1654	7.18	617	2.68
	2007	21364	90.44	1588	6.72	669	2.83
	2006	19483	89.54	1632	7.50	645	2.96
	2005	18748	89.36	1603	7.64	629	3.00
	2004	13425	88.47	1243	8.19	506	3.33
	2003	9575	88.49	863	7.98	382	3.53
Quality and Appropriateness							
	2012	20332	92.79	1440	6.57	140	0.64
	2011	21948	92.64	1570	6.63	174	0.73
	2010	23183	91.49	1930	7.62	227	0.90
	2009	21490	90.56	1978	8.34	262	1.10
	2008	20558	89.87	2034	8.89	282	1.23
	2007	21264	90.40	1972	8.38	286	1.22
	2006	19295	89.20	2003	9.26	332	1.53
	2005	18584	89.14	1987	9.53	277	1.33
	2004	13336	88.42	1452	9.63	295	1.96
	2003	9779	88.15	1147	10.34	167	1.51

Domain	Year	Satisfied		Neutral		Dissatisfied	
		N	%	N	%	N	%
Respect							
	2012	18137	90.94	1465	7.35	343	1.72
	2011	19522	91.13	1558	7.27	342	1.60
	2010	20568	89.81	1824	7.96	509	2.22
	2009	18829	88.47	1907	8.96	548	2.57
	2008	17763	87.84	1951	9.65	507	2.51
	2007	19117	88.99	1818	8.46	546	2.54
	2006	17784	87.96	1921	9.50	513	2.54
	2005	17620	87.95	1890	9.43	523	2.61
	2004	12433	86.01	1519	10.51	504	3.49
	2003	9208	86.31	1116	10.46	344	3.22
Outcome							
	2012	17610	82.23	3410	15.92	396	1.85
	2011	18999	82.55	3543	15.39	474	2.06
	2010	20303	81.82	3976	16.02	536	2.16
	2009	18703	81.02	3883	16.82	499	2.16
	2008	17764	79.92	3932	17.69	530	2.38
	2007	18654	81.47	3681	16.08	562	2.45
	2006	16948	80.75	3511	16.73	530	2.53
	2005	16087	81.18	3255	16.43	475	2.40
	2004	11969	80.18	2511	16.82	447	2.99
	2003	8815	80.09	1888	17.15	304	2.76
Recovery							
	2012	17029	79.06	3785	17.57	726	3.37
	2011	18269	79.00	4052	17.52	803	3.47
	2010	19435	77.89	4603	18.45	915	3.67
	2009	17798	76.61	4525	19.48	908	3.91
	2008	16864	75.47	4567	20.44	914	4.09
	2007	17706	77.20	4318	18.83	912	3.98
	2006	16194	77.07	3931	18.71	888	4.23
	2005	15356	76.30	3966	19.71	804	3.99
	2004	0		0		0	
	2003	0		0		0	

Since the inception of the Consumer Satisfaction Survey, the various domain scores have increased between 2% to 5%.

Table 4: Statewide Trends (2007-2012) by Question

Year	Satisfied		Neutral		Dissatisfied		Mean	Median	Std. Deviation
	N	%	N	%	N	%			
General Satisfaction									
<i>I like the services that I received here.</i>									
2012	20819	93.1	1263	5.6	273	1.2	1.5	1	0.68
2011	22419	93.1	1336	5.5	328	1.4	1.5	1	0.69
2010	23718	92.0	1654	6.4	404	1.6	1.6	1	0.71
2009	22045	91.2	1694	7.0	443	1.8	1.6	1	0.73
2008	21021	90.1	1813	7.8	496	2.1	1.6	2	0.75
2007	21779	91.0	1691	7.1	463	1.9	1.6	1	0.73
<i>If I had other choices, I would still get services from this agency.</i>									
2012	19593	88.2	1818	8.2	803	3.6	1.7	1	0.82
2011	21218	88.6	1868	7.8	867	3.6	1.7	2	0.82
2010	22239	86.9	2303	9.0	1041	4.1	1.7	2	0.85
2009	20773	86.6	2178	9.1	1039	4.3	1.7	2	0.86
2008	19583	84.8	2346	10.2	1176	5.1	1.8	2	0.89
2007	20487	86.3	2160	9.1	1105	4.7	1.8	2	0.86
<i>I would recommend this agency to a friend or family member.</i>									
2012	20295	91.4	1364	6.1	535	2.4	1.6	1	0.75
2011	21851	91.4	1473	6.2	571	2.4	1.6	1	0.75
2010	23142	90.6	1688	6.6	719	2.8	1.6	1	0.77
2009	21573	90.0	1678	7.0	718	3.0	1.6	1	0.79
2008	20541	89.1	1751	7.6	763	3.3	1.7	2	0.80
2007	21303	89.7	1626	6.9	807	3.4	1.7	2	0.80
Access									
<i>The location of services was convenient.</i>									
2012	19020	86.7	1934	8.8	989	4.5	1.7	2	0.85
2011	20128	85.0	2301	9.7	1255	5.3	1.8	2	0.89
2010	21355	84.4	2546	10.1	1401	5.5	1.8	2	0.90
2009	19832	83.5	2511	10.6	1408	5.9	1.8	2	0.92
2008	18785	82.3	2512	11.0	1532	6.7	1.9	2	0.94
2007	19403	83.3	2442	10.5	1454	6.2	1.8	2	0.92
<i>Staff was willing to see me as often as I felt was necessary.</i>									
2012	20186	90.9	1483	6.7	527	2.4	1.6	1	0.74
2011	21694	90.5	1631	6.8	644	2.7	1.6	1	0.76
2010	22823	89.2	1972	7.7	788	3.1	1.7	2	0.79
2009	21242	88.4	1977	8.2	798	3.3	1.7	2	0.80
2008	20201	87.6	1988	8.6	881	3.8	1.7	2	0.82
2007	20796	88.0	1931	8.2	900	3.8	1.7	2	0.82
<i>Staff returned my calls within 24 hours.</i>									
2012	18207	86.6	2044	9.7	769	3.7	1.7	2	0.82
2011	19619	86.2	2266	10.0	885	3.9	1.7	2	0.84
2010	20366	84.3	2658	11.0	1132	4.7	1.8	2	0.87
2009	19138	84.1	2604	11.4	1003	4.4	1.8	2	0.86
2008	17896	82.5	2660	12.3	1139	5.3	1.8	2	0.89
2007	18365	83.4	2549	11.6	1108	5.0	1.8	2	0.88

Year	Satisfied		Neutral		Dissatisfied		Mean	Median	Std. Deviation
	N	%	N	%	N	%			
Services were available at times that were good for me.									
2012	20160	90.9	1491	6.7	517	2.3	1.6	2	0.74
2011	21662	90.5	1647	6.9	625	2.6	1.6	2	0.75
2010	22815	89.4	2016	7.9	698	2.7	1.7	2	0.77
2009	21231	88.6	2010	8.4	715	3.0	1.7	2	0.78
2008	20195	87.4	2052	8.9	850	3.7	1.7	2	0.81
2007	20771	88.3	1935	8.2	817	3.5	1.7	2	0.80
Participation in Treatment									
<i>I felt comfortable asking questions about my services, treatment, or medication.</i>									
2012	20496	92.8	1198	5.4	404	1.8	1.6	1	0.70
2011	21934	92.1	1417	6.0	456	1.9	1.6	1	0.72
2010	23242	91.5	1595	6.3	556	2.2	1.6	1	0.74
2009	21605	90.8	1642	6.9	553	2.3	1.6	1	0.75
2008	20755	90.1	1654	7.2	617	2.7	1.7	2	0.76
2007	21364	90.4	1588	6.7	669	2.8	1.6	2	0.77
Quality and Appropriateness									
<i>Staff here believes that I can grow, change, and recover.</i>									
2012	20820	93.9	1121	5.1	228	1.0	1.5	1	0.66
2011	22400	93.8	1213	5.1	275	1.2	1.5	1	0.67
2010	23743	92.9	1496	5.9	322	1.3	1.5	1	0.68
2009	22034	92.1	1538	6.4	344	1.4	1.6	1	0.70
2008	21098	91.5	1528	6.6	425	1.8	1.6	1	0.73
2007	21713	91.7	1551	6.6	411	1.7	1.6	1	0.72
<i>I felt free to complain.</i>									
2012	19228	87.3	2031	9.2	758	3.4	1.7	2	0.81
2011	20668	87.2	2156	9.1	891	3.8	1.7	2	0.82
2010	21802	86.0	2448	9.7	1109	4.4	1.7	2	0.85
2009	20150	84.8	2523	10.6	1097	4.6	1.8	2	0.86
2008	19140	83.7	2517	11.0	1215	5.3	1.8	2	0.89
2007	19790	84.2	2483	10.6	1243	5.3	1.8	2	0.89
<i>I was given information about my rights.</i>									
2012	20134	91.2	1379	6.2	553	2.5	1.6	1	0.74
2011	21749	91.6	1434	6.0	567	2.4	1.6	2	0.74
2010	22947	90.4	1705	6.7	738	2.9	1.7	2	0.77
2009	21280	89.3	1798	7.5	745	3.1	1.7	2	0.79
2008	20431	89.0	1779	7.7	752	3.3	1.7	2	0.79
2007	21070	89.4	1681	7.1	827	3.5	1.7	2	0.79
<i>Staff told me what side effects to watch out for.</i>									
2012	16671	83.9	2194	11.0	1007	5.1	1.8	2	0.87
2011	18156	84.1	2346	10.9	1098	5.1	1.8	2	0.87
2010	19222	82.8	2733	11.8	1250	5.4	1.8	2	0.88
2009	17843	81.4	2800	12.8	1278	5.8	1.9	2	0.91
2008	16973	80.4	2759	13.1	1391	6.6	1.9	2	0.92
2007	17630	81.9	2543	11.8	1349	6.3	1.9	2	0.91

Year	Satisfied		Neutral		Dissatisfied		Mean	Median	Std. Deviation
	N	%	N	%	N	%			
<i>Staff respected my wishes about who is, and who is not, to be given information about my treatment and/or services.</i>									
2012	20267	92.7	1217	5.6	389	1.8	1.6	1	0.70
2011	21858	92.5	1338	5.7	439	1.9	1.6	1	0.71
2010	23223	91.6	1578	6.2	544	2.1	1.6	1	0.74
2009	21501	90.7	1652	7.0	551	2.3	1.6	1	0.75
2008	20690	90.4	1599	7.0	606	2.6	1.6	2	0.77
2007	21378	91.1	1493	6.4	600	2.6	1.6	2	0.75
<i>Staff was sensitive to my cultural/ethnic background.</i>									
2012	19029	90.3	1711	8.1	342	1.6	1.6	1	0.73
2011	20595	89.9	1885	8.2	417	1.8	1.6	1	0.74
2010	21713	89.0	2220	9.1	463	1.9	1.7	2	0.75
2009	20207	88.1	2271	9.9	457	2.0	1.7	2	0.76
2008	19137	87.0	2283	10.4	564	2.6	1.7	2	0.79
2007	20016	88.0	2198	9.7	541	2.4	1.7	2	0.78
<i>Staff helped me to obtain information I needed so that I could take charge of managing my illness.</i>									
2012	19528	90.8	1576	7.3	410	1.9	1.6	1	0.73
2011	20937	90.8	1691	7.3	432	1.9	1.6	1	0.73
2010	22184	89.5	2001	8.1	589	2.4	1.7	2	0.76
2009	20626	88.7	1994	8.6	624	2.7	1.7	2	0.78
2008	19615	87.7	2088	9.3	662	3.0	1.7	2	0.79
2007	20160	88.6	1931	8.5	655	2.9	1.7	2	0.78
Respect									
<i>My wishes are respected about the amount of family involvement I want in my treatment.</i>									
2012	18137	90.9	1465	7.3	343	1.7	1.6	1	0.72
2011	19522	91.1	1558	7.3	342	1.6	1.6	1	0.71
2010	20568	89.8	1824	8.0	509	2.2	1.6	2	0.75
2009	18829	88.5	1907	9.0	548	2.6	1.7	2	0.78
2008	17763	87.8	1951	9.6	507	2.5	1.7	2	0.78
2007	19117	89.0	1818	8.5	546	2.5	1.7	2	0.76
Outcome									
<i>As a result of services I have received from this agency, I deal more effectively with daily problems.</i>									
2012	18626	86.4	2362	11.0	567	2.6	1.8	2	0.77
2011	19934	86.2	2600	11.2	603	2.6	1.8	2	0.78
2010	21289	85.3	2920	11.7	748	3.0	1.8	2	0.79
2009	19714	84.8	2875	12.4	665	2.9	1.8	2	0.79
2008	18701	83.6	2941	13.2	720	3.2	1.9	2	0.79
2007	19602	84.9	2716	11.8	763	3.3	1.8	2	0.80
<i>As a result of services I have received from this agency, I am better able to control my life.</i>									
2012	18313	85.0	2680	12.4	556	2.6	1.8	2	0.78
2011	19711	85.1	2781	12.0	664	2.9	1.8	2	0.79
2010	21016	84.2	3200	12.8	752	3.0	1.8	2	0.80
2009	19398	83.4	3130	13.5	728	3.1	1.8	2	0.80
2008	18429	82.3	3204	14.3	771	3.4	1.9	2	0.81
2007	19273	83.5	3000	13.0	809	3.5	1.8	2	0.81

Year	Satisfied		Neutral		Dissatisfied		Mean	Median	Std. Deviation
	N	%	N	%	N	%			
<i>As a result of services I have received from this agency, I am better able to deal with crisis.</i>									
2012	17739	82.5	3017	14.0	738	3.4	1.8	2	0.82
2011	18996	82.4	3209	13.9	838	3.6	1.8	2	0.82
2010	20352	81.9	3541	14.2	966	3.9	1.9	2	0.83
2009	18741	80.9	3552	15.3	866	3.7	1.9	2	0.83
2008	17774	79.7	3597	16.1	926	4.2	1.9	2	0.84
2007	18567	80.8	3447	15.0	958	4.2	1.9	2	0.84
<i>As a result of services I have received from this agency, I am getting along better with my family.</i>									
2012	16622	79.7	3289	15.8	939	4.5	1.9	2	0.88
2011	17863	79.8	3480	15.5	1047	4.7	1.9	2	0.89
2010	19269	79.6	3770	15.6	1161	4.8	1.9	2	0.90
2009	17660	78.6	3712	16.5	1103	4.9	1.9	2	0.90
2008	16700	77.5	3727	17.3	1118	5.2	1.9	2	0.90
2007	17564	78.8	3602	16.2	1137	5.1	1.9	2	0.90
<i>As a result of services I have received from this agency, I do better in social situations.</i>									
2012	16910	79.4	3487	16.4	899	4.2	1.9	2	0.86
2011	18154	79.3	3715	16.2	1023	4.5	1.9	2	0.87
2010	19426	78.7	4090	16.6	1180	4.8	1.9	2	0.87
2009	18024	78.4	3894	16.9	1071	4.7	1.9	2	0.86
2008	17011	77.1	3921	17.8	1123	5.1	2.0	2	0.87
2007	17792	78.4	3790	16.7	1107	4.9	1.9	2	0.87
<i>As a result of services I have received from this agency, I do better in school and/or work.</i>									
2012	13086	75.3	3510	20.2	779	4.5	1.9	2	0.89
2011	14351	75.7	3673	19.4	924	4.9	1.9	2	0.90
2010	15228	74.4	4231	20.7	1006	4.9	2.0	2	0.91
2009	14117	73.9	4063	21.3	930	4.9	2.0	2	0.90
2008	13442	72.9	4053	22.0	933	5.1	2.0	2	0.90
2007	14091	74.4	3835	20.2	1017	5.4	2.0	2	0.91
<i>As a result of services I have received from this agency, My symptoms are not bothering me as much.</i>									
2012	15934	75.7	3480	16.5	1642	7.8	2.0	2	0.97
2011	17313	76.9	3570	15.9	1625	7.2	2.0	2	0.95
2010	18436	75.7	4008	16.5	1910	7.8	2.0	2	0.96
2009	17070	75.0	3964	17.4	1725	7.6	2.0	2	0.95
2008	16283	74.2	3924	17.9	1740	7.9	2.1	2	0.96
2007	17102	75.8	3695	16.4	1778	7.9	2.0	2	0.96
Recovery									
<i>In general, I am involved in my community.</i>									
2012	13958	70.7	3668	18.6	2119	10.7	2.1	2	1.03
2011	14889	70.2	4049	19.1	2284	10.8	2.1	2	1.04
2010	15981	69.9	4409	19.3	2471	10.8	2.1	2	1.04
2009	14790	69.1	4263	19.9	2338	10.9	2.1	2	1.04
2008	13974	68.2	4160	20.3	2369	11.6	2.2	2	1.05
2007	14850	70.0	4001	18.9	2351	11.1	2.1	2	1.04

Year	Satisfied		Neutral		Dissatisfied		Mean	Median	Std. Deviation
	N	%	N	%	N	%			
<i>In general, I am able to pursue my interests.</i>									
2012	17101	79.9	3113	14.5	1193	5.6	1.9	2	0.88
2011	18359	79.9	3276	14.3	1329	5.8	1.9	2	0.88
2010	19498	79.1	3678	14.9	1486	6.0	2.0	2	0.89
2009	17950	78.0	3649	15.8	1425	6.2	2.0	2	0.90
2008	16992	76.7	3672	16.6	1486	6.7	2.0	2	0.91
2007	17813	78.4	3438	15.1	1480	6.5	2.0	2	0.91
<i>In general, I can have the life I want, despite my disease/disorder.</i>									
2012	16585	77.7	3155	14.8	1592	7.5	2.0	2	0.95
2011	17805	77.8	3371	14.7	1724	7.5	2.0	2	0.96
2010	19001	76.9	3752	15.2	1945	7.9	2.0	2	0.97
2009	17438	75.7	3734	16.2	1875	8.1	2.0	2	0.97
2008	16618	74.9	3654	16.5	1910	8.6	2.0	2	0.98
2007	17432	76.3	3484	15.2	1936	8.5	2.0	2	0.98
<i>In general, I feel like I am in control of my treatment.</i>									
2012	17563	82.1	2762	12.9	1070	5.0	1.9	2	0.86
2011	18850	81.9	3024	13.1	1136	4.9	1.9	2	0.86
2010	20087	80.8	3409	13.7	1357	5.5	1.9	2	0.88
2009	18376	79.5	3421	14.8	1329	5.7	1.9	2	0.89
2008	17492	78.6	3335	15.0	1429	6.4	2.0	2	0.91
2007	18156	79.4	3270	14.3	1433	6.3	2.0	2	0.91
<i>In general, I give back to my family and/or community.</i>									
2012	16556	80.1	3160	15.3	950	4.6	1.9	2	0.87
2011	17833	79.8	3481	15.6	1023	4.6	1.9	2	0.87
2010	19265	79.7	3784	15.6	1138	4.7	1.9	2	0.87
2009	17646	78.2	3795	16.8	1124	5.0	1.9	2	0.88
2008	16567	77.0	3798	17.6	1163	5.4	2.0	2	0.89
2007	17568	78.9	3587	16.1	1120	5.0	1.9	2	0.88

The five questions that received the highest satisfaction ratings (i.e., had lowest average response on the 1-5 scale (1=strongly agree)) are as follows:

- (Q16) My wishes are respected about the amount of family involvement I want in my treatment.
- (Q8) Staff here believes that I can grow, change, and recover.
- (Q9) I felt comfortable asking questions about my services, treatment or medication
- (Q1) I like the services that I received here.
- (Q13) Staff respected my wishes about who is, and who is not, to be given information about my treatment and/or services.

These questions had the highest satisfaction ratings with the average ratings in the “Strongly Agree” category (#1 on the scale of 1-5). The percentage of clients who indicated satisfaction in these areas ranged from 90.9% - 93.9%, while the percentage who indicated dissatisfaction ranged from 1.0% - 1.8%.

The five questions that received the lowest satisfaction ratings (i.e., had highest average response on the 1-5 scale (5=strongly disagree)) are as follows:

- (Q25) I am able to pursue my interests.
- (Q22) I do better in school and/or work.
- (Q26) I can have the life I want, despite my disease/disorder.
- (Q23) My symptoms are not bothering me as much.
- (Q24) I am involved in my community (for example, church, volunteering, sports, support groups, or work).

Although these questions had the lowest satisfaction ratings, the average ratings still fell into the “Agree” category (#2 on the scale of 1-5). The percentage of clients who indicated satisfaction in these areas ranged from 70.7% - 79.9%, while the percentage who indicated dissatisfaction ranged from 4.5% - 10.7%. These questions all come from the Outcome or Recovery domain.

The next set of tables document how consumers tended to rate satisfaction with services from DMHAS providers within each of the various survey domains.

General Satisfaction

Table 5: General Satisfaction Domain by Provider

<u>Provider</u>	<u>Total Surveys</u>	<u>Satisfied</u>	<u>Percent Satisfied</u>
Midwestern CT Council on Alcoholism (MCCA)	309	309	100.00%
Backus Hospital	166	166	100.00%
Goodwill Industries of Western CT Inc.	126	126	100.00%
Dixwell/Newhallville Community MHS Inc.	103	103	100.00%
Artreach Inc.	77	77	100.00%
Community Enterprises Inc.	69	69	100.00%
Easter Seals of Greater Hartford Rehab Center Inc.	67	67	100.00%
Farrell Treatment Center	40	40	100.00%
Advanced Behavioral Health	149	148	99.33%
Family Intervention Center	132	131	99.24%
Hartford Hospital	94	93	98.94%
Yale University - WAGE	82	81	98.78%
New Milford Hospital	135	133	98.52%
Danbury Hospital	123	121	98.37%
Connecticut Valley Hospital (SA Div)	119	117	98.32%
Kuhn Employment Opportunities Inc.	52	51	98.08%
Catholic Charities- Waterbury	141	138	97.87%
St. Vincent DePaul Place Middletown, Inc.	46	45	97.83%
St. Mary's Hospital Corporation	201	196	97.51%
Stafford Family Services	70	68	97.14%
Yale University-Behavioral Health	118	114	96.61%
Catholic Charities of Fairfield County Inc.	206	199	96.60%
Kennedy Center Inc.	88	85	96.59%
Liberty Community Services	29	28	96.55%
John J. Driscoll United Labor Agency Inc.	29	28	96.55%
Leeway, Inc.	29	28	96.55%
Bristol Hospital	147	141	95.92%
Middlesex Hospital Mental Health Clinic	97	93	95.88%
Norwalk Hospital	241	231	95.85%
Hospital of St. Raphael	152	145	95.39%
St. Vincent DePaul Mission of Waterbury, Inc.	63	60	95.24%
Prime Time House Inc.	124	118	95.16%
Fellowship Inc.	260	247	95.00%
Pathways Inc.	99	94	94.95%
Center for Human Development	157	149	94.90%
CommuniCare, Inc.	78	74	94.87%
Chrysalis Center Inc.	256	242	94.53%
My Sisters' Place	36	34	94.44%
Keystone House Inc.	122	115	94.26%
Waterbury Hospital Health Center	139	131	94.24%
Connecticut Mental Health Center	773	728	94.18%
InterCommunity Inc.	205	193	94.15%
Supportive Environmental Living Facility Inc-SELF	34	32	94.12%
New Directions Inc of North Central Conn.	370	348	94.05%
Hartford Dispensary	1255	1179	93.94%

Table 5, General Satisfaction, continued

<u>Provider</u>	<u>Total Surveys</u>	<u>Satisfied</u>	<u>Percent Satisfied</u>
United Community and Family Services	178	167	93.82%
Optimus Health Care-Bennett Behavioral Health	155	145	93.55%
Chemical Abuse Services Agency (CASA)	492	460	93.50%
SW CT MH Network	378	353	93.39%
Charlotte Hungerford Hospital	191	178	93.19%
Laurel House	173	161	93.06%
Easter Seal Goodwill Ind. Rehab. Center Inc.	43	40	93.02%
River Valley Services	272	253	93.01%
Sound Community Services Inc.	324	301	92.90%
Bridge House	221	205	92.76%
Community Mental Health Affiliates	566	523	92.40%
Marrakech Day Services	105	97	92.38%
Family & Children's Agency Inc	143	132	92.31%
Community Health Resources Inc.	905	835	92.27%
United Services Inc.	457	421	92.12%
Catholic Charities-Hartford Inst Hispanic Studies	135	124	91.85%
Reliance House	154	141	91.56%
FSW Inc.	59	54	91.53%
Continuum of Care	159	145	91.19%
Mental Health Association of CT Inc.	488	445	91.19%
Mercy Housing and Shelter Corporation	121	110	90.91%
W. CT MH Network	722	650	90.03%
Capitol Region Mental Health Center	189	170	89.95%
Hartford Behavioral Health	89	80	89.89%
Liberation Programs	246	221	89.84%
SE Mental Health Authority	144	129	89.58%
Natchaug Hospital	158	141	89.24%
Connecticut Counseling Centers Inc.	426	380	89.20%
Human Resource Development Agency	129	115	89.15%
BRIDGES	276	246	89.13%
Connection Inc	633	564	89.10%
Gilead Community Services Inc.	137	122	89.05%
Hall Brooke Foundation Inc.	62	55	88.71%
Columbus House	141	125	88.65%
Guardian Ad Litem	88	78	88.64%
New Haven Home Recovery	35	31	88.57%
Harbor Health Services	538	475	88.29%
Alcohol & Drug Recovery Center-ADRC	259	228	88.03%
Perception Programs Inc	243	213	87.65%
Regional Network of Programs	1030	901	87.48%
SCADD	263	230	87.45%
Immaculate Conception Inc.	46	40	86.96%
Ability Beyond Disability Institute	106	92	86.79%
Rushford Center	316	273	86.39%
Morris Foundation Inc	894	768	85.91%
St Luke's Community Services Inc.	70	60	85.71%
Birmingham Group Health Services, Inc.	121	103	85.12%
APT Foundation Inc	541	458	84.66%
Cornell Scott-Hill Health Corporation	133	112	84.21%

Table 5, General Satisfaction, continued

<u>Provider</u>	<u>Total Surveys</u>	<u>Satisfied</u>	<u>Percent Satisfied</u>
Connecticut Renaissance Inc.	139	117	84.17%
Hogar Crea Inc	25	21	84.00%
Central Naugatuck Valley (CNV) Help Inc.	146	122	83.56%
McCall Foundation Inc	170	142	83.53%
Crossroads Inc	84	70	83.33%
Wheeler Clinic	269	222	82.53%
Community Renewal Team (CRT)	117	96	82.05%
Community Prevention and Addiction Services-CPAS	75	61	81.33%
Shelter for the Homeless Inc.	81	60	74.07%
CTE Inc. Viewpoint Recovery Program	24	22	-
Interlude Inc.	23	22	-
Operation Hope of Fairfield Inc.	19	18	-
Fairfield Community Services Inc.	18	16	-
Community Health Center Inc.	13	13	-
Coordinating Council for Children in Crisis	13	13	-
Positive Directions-The Center for Prev & Recov.	12	12	-
Hands on Hartford	8	7	-
Day Kimball Hospital	7	7	-
ACCESS Agency	4	4	-
Evergreen Family Oriented Tree, Inc.	1	1	-

Access

Table 6: Access Domain by Provider

<u>Provider</u>	<u>Total Surveys</u>	<u>Satisfied</u>	<u>Percent Satisfied</u>
Midwestern CT Council on Alcoholism (MCCA)	309	309	100.00%
Goodwill Industries of Western CT Inc.	126	126	100.00%
Easter Seals of Greater Hartford Rehab Center Inc.	67	67	100.00%
New Haven Home Recovery	35	35	100.00%
Leeway, Inc.	29	29	100.00%
John J. Driscoll United Labor Agency Inc.	26	26	100.00%
Artreach Inc.	76	75	98.68%
Marrakech Day Services	105	103	98.10%
Dixwell/Newhallville Community MHS Inc.	103	101	98.06%
Hartford Hospital	91	89	97.80%
New Milford Hospital	135	132	97.78%
St. Vincent DePaul Place Middletown, Inc.	45	44	97.78%
Yale University - WAGE	81	79	97.53%
Farrell Treatment Center	37	36	97.30%
Stafford Family Services	70	68	97.14%
Catholic Charities- Waterbury	140	135	96.43%
Backus Hospital	166	160	96.39%
Kuhn Employment Opportunities Inc.	52	50	96.15%
Advanced Behavioral Health	148	142	95.95%
Family Intervention Center	129	123	95.35%
Middlesex Hospital Mental Health Clinic	97	92	94.85%
Catholic Charities of Fairfield County Inc.	201	190	94.53%
St. Mary's Hospital Corporation	198	187	94.44%
My Sisters' Place	36	34	94.44%
Kennedy Center Inc.	88	83	94.32%
Danbury Hospital	123	115	93.50%
United Community and Family Services	178	166	93.26%
FSW Inc.	59	55	93.22%
Yale University-Behavioral Health	117	109	93.16%
Keystone House Inc.	114	106	92.98%
Connecticut Valley Hospital (SA Div)	107	99	92.52%
New Directions Inc of North Central Conn.	366	336	91.80%
Bristol Hospital	146	134	91.78%
Inter-Community Mental Health Group Inc.	205	188	91.71%
Bridge House	215	196	91.16%
Connecticut Mental Health Center	769	701	91.16%
CommuniCare, Inc.	78	71	91.03%
Central Naugatuck Valley (CNV) Help Inc.	142	129	90.85%
Fellowship Inc.	255	231	90.59%
Community Health Resources Inc.	894	808	90.38%
Optimus Health Care-Bennett Behavioral Health	155	140	90.32%
Hall Brooke Foundation Inc.	62	56	90.32%
W. CT MH Network	720	649	90.14%
Hospital of St. Raphael	152	137	90.13%
Community Mental Health Affiliates	561	505	90.02%
Mental Health Association of CT Inc.	490	441	90.00%

Table 6, Access, continued

<u>Provider</u>	<u>Total Surveys</u>	<u>Satisfied</u>	<u>Percent Satisfied</u>
Human Resource Development Agency	129	116	89.92%
Mercy Housing and Shelter Corporation	119	107	89.92%
Connecticut Renaissance Inc.	109	98	89.91%
Family & Children's Agency Inc	138	124	89.86%
Community Enterprises Inc.	69	62	89.86%
Liberty Community Services	29	26	89.66%
Hartford Dispensary	1252	1120	89.46%
Prime Time House Inc.	119	106	89.08%
Charlotte Hungerford Hospital	191	170	89.01%
Center for Human Development	154	137	88.96%
Hartford Behavioral Health	90	80	88.89%
St. Vincent DePaul Mission of Waterbury, Inc.	62	55	88.71%
River Valley Services	272	241	88.60%
Chemical Abuse Services Agency (CASA)	491	435	88.59%
Connection Inc	607	536	88.30%
Chrysalis Center Inc.	255	225	88.24%
Supportive Environmental Living Facility Inc-SELF	34	30	88.24%
United Services Inc.	454	400	88.11%
Columbus House	141	124	87.94%
Laurel House	172	151	87.79%
Norwalk Hospital	237	208	87.76%
Sound Community Services Inc.	321	281	87.54%
Natchaug Hospital	154	134	87.01%
Continuum of Care	161	140	86.96%
SW CT MH Network	372	323	86.83%
Liberation Programs (LMG)	240	208	86.67%
Pathways Inc.	97	84	86.60%
Catholic Charities-Hartford Inst Hispanic Studies	131	113	86.26%
Regional Network of Programs	1016	876	86.22%
Capitol Region Mental Health Center	186	160	86.02%
BRIDGES	274	235	85.77%
St Luke's Community Services Inc.	69	59	85.51%
Perception Programs Inc	240	205	85.42%
Birmingham Group Health Services, Inc.	122	104	85.25%
Morris Foundation Inc	862	733	85.03%
Rushford Center	307	261	85.02%
Ability Beyond Disability Institute	99	84	84.85%
Alcohol & Drug Recovery Center-ADRC	254	214	84.25%
Reliance House	150	126	84.00%
Community Prevention and Addiction Services-CPAS	74	62	83.78%
Easter Seal Goodwill Ind. Rehab. Center Inc.	43	36	83.72%
Gilead Community Services Inc.	132	110	83.33%
SE Mental Health Authority	141	117	82.98%
Guardian Ad Litem	88	73	82.95%
McCall Foundation Inc	161	133	82.61%
Waterbury Hospital Health Center	137	113	82.48%
Connecticut Counseling Centers Inc.	425	349	82.12%
Harbor Health Services	535	438	81.87%
Wheeler Clinic	260	210	80.77%

Table 6, Access, continued

<u>Provider</u>	<u>Total Surveys</u>	<u>Satisfied</u>	<u>Percent Satisfied</u>
APT Foundation Inc	533	417	78.24%
Community Renewal Team (CRT)	112	87	77.68%
Cornell Scott-Hill Health Corporation	131	101	77.10%
SCADD	255	196	76.86%
Shelter for the Homeless Inc.	81	60	74.07%
Crossroad Inc	81	60	74.07%
Immaculate Conception Inc.	46	33	71.74%
Hogar Crea Inc	24	20	-
Interlude Inc.	23	23	-
CTE Inc. Viewpoint Recovery Program	22	22	-
Operation Hope of Fairfield Inc.	19	19	-
Fairfield Community Services Inc.	18	18	-
Community Health Center Inc.	13	11	-
Coordinating Council for Children in Crisis	13	13	-
Positive Directions-The Center for Prev & Recov.	12	12	-
Hands on Hartford	8	8	-
Day Kimball Hospital	7	3	-
ACCESS Agency	4	4	-
Evergreen Family Oriented Tree, Inc.	1	1	-

Providers with dashes in their 'Percent Satisfied' cells had less than 25 surveys for which the Domain was calculated

Participation in Treatment

Table 7: “I felt comfortable asking questions about my services, treatment or medication” by Provider

Provider	Total Surveys	Satisfied	Percent Satisfied
Midwestern CT Council on Alcoholism (MCCA)	308	308	100.00%
New Milford Hospital	134	134	100.00%
Artreach Inc.	75	75	100.00%
Easter Seals of Greater Hartford Rehab Center Inc.	67	67	100.00%
New Haven Home Recovery	34	34	100.00%
Dixwell/Newhallville Community MHS Inc.	102	101	99.02%
Advanced Behavioral Health	145	143	98.62%
Connecticut Renaissance Inc.	139	137	98.56%
Stafford Family Services	69	68	98.55%
Catholic Charities- Waterbury	136	134	98.53%
Family Intervention Center	130	128	98.46%
Danbury Hospital	120	118	98.33%
United Community and Family Services	178	175	98.31%
Yale University-Behavioral Health	118	116	98.31%
Backus Hospital	166	163	98.19%
Yale University - WAGE	80	78	97.50%
Farrell Treatment Center	40	39	97.50%
New Directions Inc of North Central Conn.	368	357	97.01%
Middlesex Hospital Mental Health Clinic	94	91	96.81%
Goodwill Industries of Western CT Inc.	124	120	96.77%
Liberty Community Services	29	28	96.55%
Leeway, Inc.	29	28	96.55%
Hartford Dispensary	1250	1206	96.48%
Kuhn Employment Opportunities Inc.	52	50	96.15%
Hospital of St. Raphael	151	145	96.03%
St. Mary's Hospital Corporation	200	192	96.00%
Bristol Hospital	147	141	95.92%
Hartford Hospital	92	88	95.65%
Connecticut Counseling Centers Inc.	425	406	95.53%
Marrakech Day Services	102	97	95.10%
Kennedy Center Inc.	80	76	95.00%
CommuniCare, Inc.	77	73	94.81%
St Luke's Community Services Inc.	69	65	94.20%
Charlotte Hungerford Hospital	189	178	94.18%
Norwalk Hospital	240	226	94.17%
Catholic Charities of Fairfield County Inc.	184	173	94.02%
Connecticut Mental Health Center	770	723	93.90%
Sound Community Services Inc.	319	299	93.73%
Perception Programs Inc	239	224	93.72%
Optimus Health Care-Bennett Behavioral Health	155	145	93.55%
APT Foundation Inc	540	504	93.33%
Community Prevention and Addiction Services-CPAS	75	70	93.33%
Connecticut Valley Hospital (SA Div)	118	110	93.22%
FSW Inc.	59	55	93.22%
Central Naugatuck Valley (CNV) Help Inc.	142	132	92.96%

Table 7, Participation in Treatment, continued

<u>Provider</u>	<u>Total Surveys</u>	<u>Satisfied</u>	<u>Percent Satisfied</u>
Connection Inc	630	585	92.86%
SCADD	260	241	92.69%
InterCommunity Inc.	204	189	92.65%
Mental Health Association of CT Inc.	486	450	92.59%
Family & Children's Agency Inc	135	125	92.59%
Chrysalis Center Inc.	252	233	92.46%
Cornell Scott-Hill Health Corporation	132	122	92.42%
St. Vincent DePaul Place Middletown, Inc.	39	36	92.31%
Columbus House	140	129	92.14%
Chemical Abuse Services Agency (CASA)	490	451	92.04%
W. CT MH Network	702	646	92.02%
SW CT MH Network	373	343	91.96%
Community Mental Health Affiliates	559	514	91.95%
River Valley Services	272	250	91.91%
Community Health Resources Inc.	899	826	91.88%
Keystone House Inc.	122	112	91.80%
Crossroads Inc	84	77	91.67%
Morris Foundation Inc	887	812	91.54%
Mercy Housing and Shelter Corporation	117	107	91.45%
Hartford Behavioral Health	91	83	91.21%
Rushford Center	311	283	91.00%
Regional Network of Programs	1023	930	90.91%
BRIDGES	274	249	90.88%
Liberation Programs	240	218	90.83%
Bridge House	217	197	90.78%
SE Mental Health Authority	140	127	90.71%
Waterbury Hospital Health Center	139	126	90.65%
United Services Inc.	448	406	90.63%
Community Renewal Team (CRT)	117	106	90.60%
St. Vincent DePaul Mission of Waterbury, Inc.	63	57	90.48%
Natchaug Hospital	156	141	90.38%
Alcohol & Drug Recovery Center-ADRC	258	233	90.31%
Reliance House	152	137	90.13%
Fellowship Inc.	233	210	90.13%
McCall Foundation Inc	170	153	90.00%
Human Resource Development Agency	130	117	90.00%
Capitol Region Mental Health Center	186	167	89.78%
Center for Human Development	156	140	89.74%
Prime Time House Inc.	117	105	89.74%
Continuum of Care	162	145	89.51%
My Sisters' Place	35	31	88.57%
Guardian Ad Litem	87	77	88.51%
Laurel House	162	143	88.27%
Supportive Environmental Living Facility Inc-SELF	34	30	88.24%
Hogar Crea Inc	25	22	88.00%
Gilead Community Services Inc.	133	117	87.97%
Wheeler Clinic	264	231	87.50%
Ability Beyond Disability Institute	103	90	87.38%
Harbor Health Services	533	464	87.05%

Table 7, Participation in Treatment, continued

<u>Provider</u>	<u>Total Surveys</u>	<u>Satisfied</u>	<u>Percent Satisfied</u>
Pathways Inc.	96	83	86.46%
Immaculate Conception Inc.	44	38	86.36%
Community Enterprises Inc.	64	55	85.94%
Catholic Charities-Hartford Inst Hispanic Studies	126	108	85.71%
Easter Seal Goodwill Ind. Rehab. Center Inc.	42	36	85.71%
Hall Brooke Foundation Inc.	62	53	85.48%
Birmingham Group Health Services, Inc.	119	98	82.35%
Shelter for the Homeless Inc.	78	59	75.64%
CTE Inc. Viewpoint Recovery Program	24	24	-
John J. Driscoll United Labor Agency Inc.	24	23	-
Interlude Inc.	23	23	-
Fairfield Community Services Inc.	18	18	-
Operation Hope of Fairfield Inc.	18	17	-
Community Health Center Inc.	13	13	-
Coordinating Council for Children in Crisis	13	13	-
Positive Directions-The Center for Prev & Recov.	12	12	-
Hands on Hartford	8	8	-
Day Kimball Hospital	7	7	-
ACCESS Agency	4	4	-
Evergreen Family Oriented Tree, Inc.	1	1	-

Providers with dashes in their 'Percent Satisfied' cells had less than 25 surveys for which the Domain was calculated

Quality and Appropriateness

Table 8: Quality and Appropriateness Domain by Provider

<u>Provider</u>	<u>Total Surveys</u>	<u>Satisfied</u>	<u>Percent Satisfied</u>
Midwestern CT Council on Alcoholism (MCCA)	309	309	100.00%
Goodwill Industries of Western CT Inc.	121	121	100.00%
Yale University-Behavioral Health	116	116	100.00%
Dixwell/Newhallville Community MHS Inc.	103	103	100.00%
Artreach Inc.	76	76	100.00%
Easter Seals of Greater Hartford Rehab Center Inc.	67	67	100.00%
Farrell Treatment Center	40	40	100.00%
New Haven Home Recovery	34	34	100.00%
Leeway, Inc.	29	29	100.00%
St. Mary's Hospital Corporation	200	199	99.50%
New Milford Hospital	134	133	99.25%
Family Intervention Center	123	122	99.19%
Bristol Hospital	147	145	98.64%
Advanced Behavioral Health	144	142	98.61%
Stafford Family Services	62	61	98.39%
Community Enterprises Inc.	57	56	98.25%
Backus Hospital	166	163	98.19%
Marrakech Day Services	102	100	98.04%
Middlesex Hospital Mental Health Clinic	95	93	97.89%
Hartford Hospital	93	91	97.85%
Catholic Charities- Waterbury	137	134	97.81%
Danbury Hospital	121	118	97.52%
Connecticut Valley Hospital (SA Div)	118	115	97.46%
New Directions Inc of North Central Conn.	361	351	97.23%
United Community and Family Services	173	168	97.11%
Yale University - WAGE	68	66	97.06%
Kennedy Center Inc.	67	65	97.01%
Liberty Community Services	29	28	96.55%
Hartford Dispensary	1256	1211	96.42%
Kuhn Employment Opportunities Inc.	52	50	96.15%
Connecticut Renaissance Inc.	140	134	95.71%
Waterbury Hospital Health Center	137	131	95.62%
Catholic Charities-Hartford Inst Hispanic Studies	128	122	95.31%
St. Vincent DePaul Mission of Waterbury, Inc.	63	60	95.24%
St. Vincent DePaul Place Middletown, Inc.	41	39	95.12%
Perception Programs Inc	240	228	95.00%
CommuniCare, Inc.	79	75	94.94%
Chrysalis Center Inc.	252	239	94.84%
Family & Children's Agency Inc	134	127	94.78%
Hospital of St. Raphael	150	142	94.67%
Catholic Charities of Fairfield County Inc.	196	185	94.39%
My Sisters' Place	35	33	94.29%
Charlotte Hungerford Hospital	182	171	93.96%
Connecticut Mental Health Center	765	716	93.59%
SE Mental Health Authority	140	131	93.57%
Community Mental Health Affiliates	559	523	93.56%

Table 8, Quality and Appropriateness, continued

<u>Provider</u>	<u>Total Surveys</u>	<u>Satisfied</u>	<u>Percent Satisfied</u>
Connecticut Counseling Centers Inc.	422	394	93.36%
W. CT MH Network	709	661	93.23%
Liberation Programs (LMG)	242	225	92.98%
Center for Human Development	155	144	92.90%
Natchaug Hospital	152	141	92.76%
Chemical Abuse Services Agency (CASA)	493	457	92.70%
Easter Seal Goodwill Ind. Rehab. Center Inc.	41	38	92.68%
Sound Community Services Inc.	312	289	92.63%
United Services Inc.	443	410	92.55%
Prime Time House Inc.	119	110	92.44%
Connection Inc	624	576	92.31%
Regional Network of Programs	1022	943	92.27%
Inter-Community Mental Health Group Inc.	202	186	92.08%
Morris Foundation Inc	871	800	91.85%
Community Health Resources Inc.	883	811	91.85%
Keystone House Inc.	119	109	91.60%
Columbus House	140	128	91.43%
Norwalk Hospital	233	213	91.42%
Mental Health Association of CT Inc.	485	443	91.34%
Reliance House	150	137	91.33%
Optimus Health Care-Bennett Behavioral Health	149	136	91.28%
Fellowship Inc.	244	222	90.98%
Continuum of Care	161	146	90.68%
Bridge House	210	190	90.48%
Community Prevention and Addiction Services-CPAS	72	65	90.28%
Rushford Center	307	277	90.23%
SW CT MH Network	373	336	90.08%
Alcohol & Drug Recovery Center-ADRC	252	227	90.08%
River Valley Services	268	241	89.93%
APT Foundation Inc	538	483	89.78%
Immaculate Conception Inc.	38	34	89.47%
Human Resource Development Agency	130	116	89.23%
Central Naugatuck Valley (CNV) Help Inc.	139	124	89.21%
Harbor Health Services	525	466	88.76%
Community Renewal Team (CRT)	115	102	88.70%
Wheeler Clinic	260	230	88.46%
BRIDGES	268	236	88.06%
Hogar Crea Inc	25	22	88.00%
Crossroad Inc	83	73	87.95%
FSW Inc.	58	51	87.93%
Mercy Housing and Shelter Corporation	115	101	87.83%
SCADD	260	228	87.69%
Ability Beyond Disability Institute	97	85	87.63%
Gilead Community Services Inc.	135	118	87.41%
Guardian Ad Litem	87	76	87.36%
St Luke's Community Services Inc.	70	61	87.14%
McCall Foundation Inc	166	144	86.75%
Laurel House	165	143	86.67%
Capitol Region Mental Health Center	184	159	86.41%

Table 8, Quality and Appropriateness, continued

<u>Provider</u>	<u>Total Surveys</u>	<u>Satisfied</u>	<u>Percent Satisfied</u>
Cornell Scott-Hill Health Corporation	131	113	86.26%
Birmingham Group Health Services, Inc.	121	104	85.95%
Supportive Environmental Living Facility Inc-SELF	34	29	85.29%
Hall Brooke Foundation Inc.	60	51	85.00%
Hartford Behavioral Health	90	76	84.44%
Pathways Inc.	93	78	83.87%
Shelter for the Homeless Inc.	77	59	76.62%
CTE Inc. Viewpoint Recovery Program	24	24	-
Interlude Inc.	23	23	-
Fairfield Community Services Inc.	18	18	-
Operation Hope of Fairfield Inc.	18	18	-
John J. Driscoll United Labor Agency Inc.	18	17	-
Coordinating Council for Children in Crisis	13	13	-
Community Health Center Inc.	12	12	-
Positive Directions-The Center for Prev & Recov.	10	10	-
Hands on Hartford	8	8	-
Day Kimball Hospital	5	5	-
ACCESS Agency	4	4	-
Evergreen Family Oriented Tree, Inc.	1	1	-

Providers with dashes in their 'Percent Satisfied' cells had less than 25 surveys for which the Domain was calculated

Respect

Table 9: “My wishes are respected about the amount of family involvement I want in my treatment” by Provider

Provider	Total Surveys	Satisfied	Percent Satisfied
Family Intervention Center	132	132	100.00%
Artreach Inc.	73	73	100.00%
Easter Seals of Greater Hartford Rehab Center Inc.	67	67	100.00%
Leeway, Inc.	27	27	100.00%
Midwestern CT Council on Alcoholism (MCCA)	300	299	99.67%
Yale University - WAGE	71	70	98.59%
New Milford Hospital	127	125	98.43%
Dixwell/Newhallville Community MHS Inc.	97	95	97.94%
Kuhn Employment Opportunities Inc.	48	47	97.92%
Bristol Hospital	136	133	97.79%
Advanced Behavioral Health	131	128	97.71%
Farrell Treatment Center	38	37	97.37%
Yale University-Behavioral Health	99	96	96.97%
Community Enterprises Inc.	64	62	96.88%
Connecticut Valley Hospital (SA Div)	114	110	96.49%
Catholic Charities- Waterbury	131	126	96.18%
Continuum of Care	147	141	95.92%
Marrakech Day Services	98	94	95.92%
Backus Hospital	159	152	95.60%
Ability Beyond Disability Institute	67	64	95.52%
United Community and Family Services	152	145	95.39%
Hospital of St. Raphael	148	141	95.27%
St. Mary's Hospital Corporation	188	179	95.21%
Hartford Dispensary	1130	1067	94.42%
Danbury Hospital	107	101	94.39%
Hartford Hospital	87	82	94.25%
Family & Children's Agency Inc	114	107	93.86%
Guardian Ad Litem	80	75	93.75%
Charlotte Hungerford Hospital	156	146	93.59%
My Sisters' Place	31	29	93.55%
W. CT MH Network	648	606	93.52%
Goodwill Industries of Western CT Inc.	107	100	93.46%
Stafford Family Services	58	54	93.10%
New Directions Inc of North Central Conn.	339	315	92.92%
Connecticut Renaissance Inc.	124	115	92.74%
Sound Community Services Inc.	275	255	92.73%
Chrysalis Center Inc.	219	203	92.69%
Norwalk Hospital	202	187	92.57%
Connecticut Mental Health Center	738	681	92.28%
Catholic Charities of Fairfield County Inc.	178	164	92.13%
St. Vincent DePaul Place Middletown, Inc.	38	35	92.11%
Community Prevention and Addiction Services-CPAS	63	58	92.06%
Human Resource Development Agency	122	112	91.80%
Middlesex Hospital Mental Health Clinic	84	77	91.67%
Laurel House	154	141	91.56%
Connecticut Counseling Centers Inc.	387	354	91.47%

Table 9, Respect, continued

<u>Provider</u>	<u>Total Surveys</u>	<u>Satisfied</u>	<u>Percent Satisfied</u>
Kennedy Center Inc.	70	64	91.43%
Community Mental Health Affiliates	521	476	91.36%
Community Health Resources Inc.	739	672	90.93%
APT Foundation Inc	482	438	90.87%
Central Naugatuck Valley (CNV) Help Inc.	130	118	90.77%
Connection Inc	576	522	90.63%
New Haven Home Recovery	32	29	90.63%
Community Renewal Team (CRT)	105	95	90.48%
Prime Time House Inc.	105	95	90.48%
United Services Inc.	405	366	90.37%
St. Vincent DePaul Mission of Waterbury, Inc.	62	56	90.32%
Harbor Health Services	475	429	90.32%
Fellowship Inc.	206	186	90.29%
Chemical Abuse Services Agency (CASA)	451	407	90.24%
Optimus Health Care-Bennett Behavioral Health	109	98	89.91%
St Luke's Community Services Inc.	59	53	89.83%
CommuniCare, Inc.	78	70	89.74%
Regional Network of Programs	916	822	89.74%
Catholic Charities-Hartford Inst Hispanic Studies	106	95	89.62%
SW CT MH Network	360	322	89.44%
Hartford Behavioral Health	84	75	89.29%
Mental Health Association of CT Inc.	437	389	89.02%
Liberty Community Services	27	24	88.89%
Center for Human Development	134	119	88.81%
InterCommunity Inc.	187	166	88.77%
Crossroads Inc	79	70	88.61%
Keystone House Inc.	105	93	88.57%
Bridge House	207	183	88.41%
Alcohol & Drug Recovery Center-ADRC	206	182	88.35%
Natchaug Hospital	135	119	88.15%
Hall Brooke Foundation Inc.	59	52	88.14%
River Valley Services	268	236	88.06%
FSW Inc.	50	44	88.00%
BRIDGES	223	196	87.89%
Waterbury Hospital Health Center	114	100	87.72%
Morris Foundation Inc	796	698	87.69%
Birmingham Group Health Services, Inc.	105	92	87.62%
Easter Seal Goodwill Ind. Rehab. Center Inc.	40	35	87.50%
Mercy Housing and Shelter Corporation	101	88	87.13%
Reliance House	137	119	86.86%
Pathways Inc.	80	69	86.25%
Columbus House	129	111	86.05%
SCADD	249	214	85.94%
Cornell Scott-Hill Health Corporation	120	103	85.83%
Gilead Community Services Inc.	127	109	85.83%
Immaculate Conception Inc.	42	36	85.71%
McCall Foundation Inc	148	126	85.14%
Perception Programs Inc	232	197	84.91%
Wheeler Clinic	244	206	84.43%
SE Mental Health Authority	131	110	83.97%

Table 9, Respect, continued

Provider	Total Surveys	Satisfied	Percent Satisfied
Capitol Region Mental Health Center	181	151	83.43%
Rushford Center	262	218	83.21%
Liberation Programs	207	165	79.71%
Supportive Environmental Living Facility Inc-SELF	33	26	78.79%
Shelter for the Homeless Inc.	65	43	66.15%
CTE Inc. Viewpoint Recovery Program	23	22	-
Interlude Inc.	22	21	-
Hogar Crea Inc	17	17	-
Fairfield Community Services Inc.	16	16	-
John J. Driscoll United Labor Agency Inc.	16	12	-
Operation Hope of Fairfield Inc.	15	15	-
Community Health Center Inc.	13	13	-
Coordinating Council for Children in Crisis	12	12	-
Positive Directions-The Center for Prev & Recov.	10	10	-
Hands on Hartford	7	7	-
Day Kimball Hospital	4	4	-
ACCESS Agency	4	4	-

Providers with dashes in their 'Percent Satisfied' cells had less than 25 surveys for which the Domain was calculated

Outcome

Table 10: Outcome Domain by Provider

<u>Provider</u>	<u>Total Surveys</u>	<u>Satisfied</u>	<u>Percent Satisfied</u>
Midwestern CT Council on Alcoholism (MCCA)	305	305	100.00%
Liberty Community Services	28	28	100.00%
Family Intervention Center	132	131	99.24%
Leeway, Inc.	29	28	96.55%
Artreach Inc.	77	74	96.10%
Goodwill Industries of Western CT Inc.	118	113	95.76%
Dixwell/Newhallville Community MHS Inc.	103	98	95.15%
Connecticut Renaissance Inc.	138	128	92.75%
Hartford Dispensary	1234	1142	92.54%
New Directions Inc of North Central Conn.	359	331	92.20%
Farrell Treatment Center	38	35	92.11%
New Haven Home Recovery	32	29	90.63%
Connecticut Valley Hospital (SA Div)	117	106	90.60%
Connecticut Counseling Centers Inc.	404	365	90.35%
Kuhn Employment Opportunities Inc.	50	45	90.00%
Marrakech Day Services	97	87	89.69%
Bristol Hospital	145	130	89.66%
Easter Seals of Greater Hartford Rehab Center Inc.	67	60	89.55%
SW CT MH Network	353	315	89.24%
Continuum of Care	154	137	88.96%
Perception Programs Inc	242	215	88.84%
My Sisters' Place	35	31	88.57%
Human Resource Development Agency	130	115	88.46%
Danbury Hospital	117	103	88.03%
Yale University - WAGE	74	65	87.84%
Family & Children's Agency Inc	136	118	86.76%
Mercy Housing and Shelter Corporation	113	98	86.73%
APT Foundation Inc	532	460	86.47%
Chemical Abuse Services Agency (CASA)	487	420	86.24%
Catholic Charities-Hartford Inst Hispanic Studies	121	104	85.95%
Keystone House Inc.	118	101	85.59%
Stafford Family Services	67	57	85.07%
Prime Time House Inc.	119	101	84.87%
Community Enterprises Inc.	66	56	84.85%
Kennedy Center Inc.	72	61	84.72%
Fellowship Inc.	235	199	84.68%
Alcohol & Drug Recovery Center-ADRC	241	204	84.65%
Cornell Scott-Hill Health Corporation	130	110	84.62%
Crossroad Inc	84	71	84.52%
Regional Network of Programs	1005	849	84.48%
W. CT MH Network	694	586	84.44%
Central Naugatuck Valley (CNV) Help Inc.	141	119	84.40%
Backus Hospital	165	139	84.24%
New Milford Hospital	133	112	84.21%

Table 10, Outcome, continued

<u>Provider</u>	<u>Total Surveys</u>	<u>Satisfied</u>	<u>Percent Satisfied</u>
Hogar Crea Inc	25	21	84.00%
Connection Inc	602	504	83.72%
Catholic Charities of Fairfield County Inc.	196	164	83.67%
Pathways Inc.	91	76	83.52%
Morris Foundation Inc	858	714	83.22%
Yale University-Behavioral Health	113	94	83.19%
Laurel House	163	134	82.21%
Advanced Behavioral Health	144	118	81.94%
Mental Health Association of CT Inc.	480	393	81.88%
Immaculate Conception Inc.	44	36	81.82%
St. Vincent DePaul Mission of Waterbury, Inc.	60	49	81.67%
Community Mental Health Affiliates	548	447	81.57%
Ability Beyond Disability Institute	70	57	81.43%
Connecticut Mental Health Center	744	604	81.18%
Guardian Ad Litem	85	69	81.18%
Liberation Programs (LMG)	211	171	81.04%
River Valley Services	269	218	81.04%
Easter Seal Goodwill Ind. Rehab. Center Inc.	42	34	80.95%
Hartford Hospital	89	72	80.90%
Chrysalis Center Inc.	250	202	80.80%
Gilead Community Services Inc.	130	105	80.77%
SCADD	254	205	80.71%
CommuniCare, Inc.	77	62	80.52%
SE Mental Health Authority	140	112	80.00%
Community Prevention and Addiction Services-CPAS	74	59	79.73%
Optimus Health Care-Bennett Behavioral Health	118	94	79.66%
Center for Human Development	151	120	79.47%
McCall Foundation Inc	157	124	78.98%
Norwalk Hospital	233	184	78.97%
Hall Brooke Foundation Inc.	61	48	78.69%
Birmingham Group Health Services, Inc.	120	94	78.33%
Capitol Region Mental Health Center	179	139	77.65%
Natchaug Hospital	147	114	77.55%
United Community and Family Services	173	134	77.46%
St. Vincent DePaul Place Middletown, Inc.	44	34	77.27%
Bridge House	211	163	77.25%
Catholic Charities- Waterbury	131	101	77.10%
Charlotte Hungerford Hospital	170	131	77.06%
Hartford Behavioral Health	85	65	76.47%
Reliance House	143	109	76.22%
Wheeler Clinic	263	199	75.67%
St Luke's Community Services Inc.	65	49	75.38%
Middlesex Hospital Mental Health Clinic	91	67	73.63%
BRIDGES	255	187	73.33%
Inter-Community Mental Health Group Inc.	198	145	73.23%
St. Mary's Hospital Corporation	195	142	72.82%
Community Renewal Team (CRT)	114	81	71.05%

Table 10, Outcome, continued

<u>Provider</u>	<u>Total Surveys</u>	<u>Satisfied</u>	<u>Percent Satisfied</u>
Rushford Center	296	210	70.95%
Supportive Environmental Living Facility Inc-SELF	34	24	70.59%
Community Health Resources Inc.	848	598	70.52%
Sound Community Services Inc.	299	207	69.23%
Waterbury Hospital Health Center	125	86	68.80%
United Services Inc.	433	297	68.59%
Hospital of St. Raphael	149	102	68.46%
Columbus House	133	91	68.42%
Harbor Health Services	520	354	68.08%
Shelter for the Homeless Inc.	67	43	64.18%
FSW Inc.	56	33	58.93%
CTE Inc. Viewpoint Recovery Program	24	23	-
Interlude Inc.	23	22	-
Fairfield Community Services Inc.	18	17	-
Operation Hope of Fairfield Inc.	18	17	-
John J. Driscoll United Labor Agency Inc.	16	10	-
Community Health Center Inc.	13	11	-
Coordinating Council for Children in Crisis	13	13	-
Positive Directions-The Center for Prev & Recov.	12	11	-
Hands on Hartford	8	6	-
Day Kimball Hospital	7	6	-
ACCESS Agency	4	4	-

Providers with dashes in their 'Percent Satisfied' cells had less than 25 surveys for which the Domain was calculated

Recovery

Table 11: Recovery Domain by Provider

<u>Provider</u>	<u>Total Surveys</u>	<u>Satisfied</u>	<u>Percent Satisfied</u>
Family Intervention Center	132	132	100.00%
Liberty Community Services	29	29	100.00%
Midwestern CT Council on Alcoholism (MCCA)	304	302	99.34%
Leeway, Inc.	29	28	96.55%
Artreach Inc.	77	74	96.10%
Goodwill Industries of Western CT Inc.	121	114	94.21%
New Directions Inc of North Central Conn.	364	337	92.58%
Easter Seals of Greater Hartford Rehab Center Inc.	66	61	92.42%
Farrell Treatment Center	39	36	92.31%
My Sisters' Place	36	33	91.67%
Bristol Hospital	143	131	91.61%
Connecticut Renaissance Inc.	134	122	91.04%
Hartford Dispensary	1235	1105	89.47%
Marrakech Day Services	102	91	89.22%
Crossroads Inc	82	73	89.02%
Kennedy Center Inc.	81	72	88.89%
Family & Children's Agency Inc	132	117	88.64%
Connecticut Valley Hospital (SA Div)	114	101	88.60%
Human Resource Development Agency	130	115	88.46%
Kuhn Employment Opportunities Inc.	51	45	88.24%
Hall Brooke Foundation Inc.	59	52	88.14%
Chemical Abuse Services Agency (CASA)	491	429	87.37%
SW CT MH Network	353	308	87.25%
New Haven Home Recovery	31	27	87.10%
Prime Time House Inc.	121	105	86.78%
St. Vincent DePaul Mission of Waterbury, Inc.	60	52	86.67%
Fellowship Inc.	247	214	86.64%
Connecticut Counseling Centers Inc.	405	349	86.17%
Central Naugatuck Valley (CNV) Help Inc.	144	124	86.11%
Keystone House Inc.	118	100	84.75%
Continuum of Care	157	133	84.71%
Perception Programs Inc	240	203	84.58%
Stafford Family Services	69	58	84.06%
Mercy Housing and Shelter Corporation	117	98	83.76%
Morris Foundation Inc	870	724	83.22%
Regional Network of Programs	999	829	82.98%
Danbury Hospital	117	97	82.91%
Yale University - WAGE	81	67	82.72%
Catholic Charities-Hartford Inst Hispanic Studies	119	98	82.35%
Dixwell/Newhallville Community MHS Inc.	102	84	82.35%
APT Foundation Inc	529	435	82.23%
SCADD	258	212	82.17%
Advanced Behavioral Health	144	118	81.94%
Pathways Inc.	93	76	81.72%
Community Enterprises Inc.	65	53	81.54%
W. CT MH Network	705	573	81.28%

Table 11, Recovery, continued

<u>Provider</u>	<u>Total Surveys</u>	<u>Satisfied</u>	<u>Percent Satisfied</u>
Connection Inc	602	489	81.23%
Ability Beyond Disability Institute	74	60	81.08%
Easter Seal Goodwill Ind. Rehab. Center Inc.	42	34	80.95%
Yale University-Behavioral Health	113	91	80.53%
Alcohol & Drug Recovery Center-ADRC	241	194	80.50%
Guardian Ad Litem	84	67	79.76%
CommuniCare, Inc.	78	62	79.49%
Community Prevention and Addiction Services-CPAS	73	58	79.45%
Laurel House	170	135	79.41%
Backus Hospital	162	128	79.01%
McCall Foundation Inc	161	127	78.88%
Gilead Community Services Inc.	134	105	78.36%
Bridge House	212	166	78.30%
Catholic Charities of Fairfield County Inc.	198	155	78.28%
Catholic Charities- Waterbury	132	103	78.03%
Cornell Scott-Hill Health Corporation	130	101	77.69%
Hartford Hospital	88	68	77.27%
Reliance House	145	112	77.24%
Birmingham Group Health Services, Inc.	120	92	76.67%
Capitol Region Mental Health Center	187	143	76.47%
Chrysalis Center Inc.	254	193	75.98%
Mental Health Association of CT Inc.	475	360	75.79%
Wheeler Clinic	263	199	75.67%
St. Vincent DePaul Place Middletown, Inc.	45	34	75.56%
Liberation Programs	212	160	75.47%
Community Mental Health Affiliates	554	418	75.45%
New Milford Hospital	132	98	74.24%
Columbus House	138	102	73.91%
Natchaug Hospital	149	108	72.48%
Connecticut Mental Health Center	753	545	72.38%
River Valley Services	270	195	72.22%
Center for Human Development	151	109	72.19%
Immaculate Conception Inc.	43	31	72.09%
Hospital of St. Raphael	148	106	71.62%
Norwalk Hospital	237	169	71.31%
Sound Community Services Inc.	296	209	70.61%
InterCommunity Inc.	198	139	70.20%
Charlotte Hungerford Hospital	167	117	70.06%
SE Mental Health Authority	143	100	69.93%
United Community and Family Services	172	120	69.77%
St. Mary's Hospital Corporation	190	131	68.95%
Optimus Health Care-Bennett Behavioral Health	120	81	67.50%
Rushford Center	299	201	67.22%
St Luke's Community Services Inc.	70	47	67.14%
Community Renewal Team (CRT)	116	77	66.38%
Community Health Resources Inc.	857	566	66.04%
Shelter for the Homeless Inc.	70	46	65.71%
Supportive Environmental Living Facility Inc-SELF	34	22	64.71%
BRIDGES	253	163	64.43%

Table 11, Recovery, continued

<u>Provider</u>	<u>Total Surveys</u>	<u>Satisfied</u>	<u>Percent Satisfied</u>
United Services Inc.	430	277	64.42%
Middlesex Hospital Mental Health Clinic	90	55	61.11%
Harbor Health Services	519	316	60.89%
Waterbury Hospital Health Center	127	75	59.06%
FSW Inc.	56	33	58.93%
Hartford Behavioral Health	84	49	58.33%
Hogar Crea Inc	24	20	-
CTE Inc. Viewpoint Recovery Program	23	20	-
John J. Driscoll United Labor Agency Inc.	23	20	-
Interlude Inc.	23	19	-
Fairfield Community Services Inc.	18	12	-
Operation Hope of Fairfield Inc.	16	13	-
Community Health Center Inc.	13	9	-
Coordinating Council for Children in Crisis	13	13	-
Positive Directions-The Center for Prev & Recov.	12	10	-
Hands on Hartford	8	7	-
Day Kimball Hospital	7	6	-
ACCESS Agency	4	3	-

Providers with dashes in their 'Percent Satisfied' cells had less than 25 surveys for which the Domain was calculated

Consumer Survey Differences between Groups

Consumer Satisfaction across Program Type

	Access	Appropriateness	Outcome	General Satisfaction	Participation in Tx	Respect	Recovery
SU Programs	86.7	93.2	86.0	89.8	93.6	90.7	84.2
MH Programs	90.5	93.0	79.7	93.2	92.7	91.4	75.3
Significance	*	*	*	*	*	*	*

Values represent % of consumers who indicated that they were satisfied with services

* identifies a significant difference at the .01 level (ns = difference is not significant)

BOLD values identify the higher value when a difference is significant

- Clients in MH programs reported greater satisfaction in the **Access, Appropriateness, General Satisfaction, Participation in Treatment, and Respect** domains.
- Clients in SU programs reported greater satisfaction in the **Outcome** and **Recovery** domains.

Consumer Satisfaction across Gender

	Access	Appropriateness	Outcome	General Satisfaction	Participation in Tx	Respect	Recovery
Men	87.7	92.1	83.3	90.6	92.3	89.7	79.9
Women	89.6	93.8	80.7	93.0	93.5	92.7	77.4
Significance	*	*	*	*	*	*	*
SU Programs							
Men	86.5	92.8	86.3	89.0	92.3	89.8	83.9
Women	87.3	94.2	85.6	91.5	94.6	92.3	84.9
Significance	*	*	ns	*	*	*	ns
MH Programs							
Men	89.7	91.9	81.0	92.4	92.0	89.8	76.7
Women	91.3	94.2	78.3	94.1	93.4	93.2	74.0
Significance	*	*	ns	*	*	*	ns

Values represent % of consumers who indicated that they were satisfied with services

* identifies a significant difference at the .01 level (ns = difference is not significant)

BOLD values identify the higher value when a difference is significant

Across All Programs:

- Women reported greater satisfaction with services in the **Access, Appropriateness, General Satisfaction, Participation in Treatment, and Respect** domains.
- Men reported greater satisfaction with services in the **Outcome** and **Recovery** domains.
- This is the same pattern that was reported in 2010 and 2011.

In SU Programs:

- Women reported greater satisfaction in the **Access, Appropriateness, General Satisfaction, Participation in Treatment, and Respect** domains.

In MH Programs:

- Women reported greater satisfaction in the **Access, Appropriateness, General Satisfaction, Participation in Treatment, and Respect** domains.

Consumer Satisfaction across Race

	Access	Appropriateness	Outcome	General Satisfaction	Participation in Tx	Respect	Recovery
White	88.3	92.9	81.2	91.3	91.3	91.4	77.7
Black	89.6	92.3	84.7	92.1	92.4	89.8	82.0
Other	88.1	92.8	83.1	92.2	91.6	90.5	80.4
Significance	ns	ns	*	ns	*	*	*
SU Programs							
White	86.5	93.3	85.7	89.4	94.1	91.3	83.9
Black	86.9	92.9	86.9	89.9	92.3	88.2	85.1
Other	86.8	93.2	86.8	91.3	92.6	90.3	85.2
Significance	ns	ns	ns	ns	*	*	*
MH Programs							
White	90.5	93.1	78.4	93.1	92.9	91.8	73.7
Black	91.0	92.3	83.5	93.2	92.7	90.8	80.4
Other	90.5	93.1	80.1	93.3	91.5	90.9	76.2
Significance	ns	ns	*	ns	ns	ns	*

Values represent % of consumers who indicated that they were satisfied with services

* identifies a significant difference at the .01 level (ns = difference is not significant)

BOLD values identify the higher value(s) when a difference is significant

Across All Programs:

- In the **Outcome** and **Recovery** domains, consumers who identified themselves the Black or Other category were more satisfied than those who identified themselves in the White category.
- In the **Participation in Treatment** and **Respect** domains, consumers who identified themselves in the White category were more satisfied than those who identified themselves in the Black category.

In SU Programs:

- With regard to **Participation in Treatment**, consumers in the White racial category reported greater satisfaction with services than consumers in the Black category.
- In the **Respect** domain, consumers in the White or Other racial categories were more satisfied with services than those in the Black category.
- In the **Recovery** domain, consumers in the Black or Other racial categories were more satisfied with services than those in the White category.

In MH Programs:

- In the **Outcome** domain, consumers who identified themselves in the Black category were more satisfied than those who identified themselves in the White category.
- In the **Recovery** domain, satisfaction levels across the racial categories were all significantly different from each other in the following order: consumers who identified themselves in the Black category were more satisfied than those who identified themselves in the Other category, who were in turn more satisfied than those who identified themselves in the White category.

Consumer Satisfaction across Ethnicity

	Access	Appropriateness	Outcome	General Satisfaction	Participation in Tx	Respect	Recovery
Hispanic	89.7	94.5	84.1	93.4	92.6	91.8	81.5
Non Hispanic	88.4	92.7	81.9	91.5	93.0	91.1	78.5
Significance	*	*	*	*	ns	ns	*
SU Programs							
Hispanic	87.4	94.4	87.6	92.6	92.8	91.1	86.3
Non Hispanic	86.6	93.5	86.0	89.4	94.2	91.0	84.0
Significance	ns	ns	*	*	ns	ns	*
MH Programs							
Hispanic	91.9	94.8	80.9	94.2	92.8	92.5	76.8
Non Hispanic	90.3	92.7	79.5	93.2	92.6	91.3	75.3
Significance	*	*	*	*	*	*	ns

Values represent % of consumers who indicated that they were satisfied with services

* identifies a significant difference at the .01 level (ns = difference is not significant)

BOLD values identify the higher value when a difference is significant

Across All Programs:

- In each of the significant domains (**Access, Appropriateness, Outcome, General Satisfaction, and Recovery**), consumers who identified themselves as Hispanic were more satisfied with services than those who identified themselves as non-Hispanic.
- This is the same pattern that was reported in 2010 and 2011.

In SU Programs:

- In each significant domain, consumers who identified themselves as Hispanic were more satisfied with services than those who identified themselves as non-Hispanic.

In MH Programs:

- In each significant domain, consumers who identified themselves as Hispanic were more satisfied with services than those who identified themselves as non-Hispanic.

Consumer Satisfaction across Age Groups

	Access	Appropriateness	Outcome	General Satisfaction	Participation in Tx	Respect	Recovery
24 & Under	85.5	92.0	81.5	88.9	91.1	90.1	81.2
25-34	86.9	93.5	83.0	90.0	92.9	91.4	81.0
35-54	88.9	92.5	81.4	92.2	92.9	90.7	78.0
55 & Older	91.5	93.6	83.6	93.7	93.5	91.9	77.0
Significance	*	ns	*	*	*	ns	*
SU Programs							
24 & Under	84.3	91.8	83.9	87.9	91.9	89.7	84.5
25-34	85.0	93.6	84.8	88.2	93.4	90.4	83.3
35-54	87.4	93.2	86.8	91.1	94.2	90.8	84.2
55 & Older	92.5	96.5	88.9	92.2	95.0	92.3	86.1
Significance	*	ns	ns	*	ns	ns	ns
MH Programs							
24 & Under	89.0	93.4	78.4	91.6	91.1	92.1	76.7
25-34	89.9	93.5	80.4	92.4	92.9	92.8	77.7
35-54	90.6	92.7	78.0	93.5	92.6	90.9	74.3
55 & Older	91.9	93.3	82.8	94.3	93.5	92.0	75.1
Significance	ns	ns	*	*	ns	ns	*

Values represent % of consumers who indicated that they were satisfied with services

* identifies a significant difference at the .01 level (ns = difference is not significant)

BOLD values identify the higher value(s) when a difference is significant

Across All Programs:

- In the **Access** domain, consumers who were 35 years old or older were more satisfied with services than those who were younger than 34. In the **Recovery** domain, the opposite was true: the younger consumers were more satisfied with services than the older consumers.
- In the **Outcome** domain, clients who were 25-34 years old were more satisfied with services than clients who were 35-54 years old.
- In the **General Satisfaction** domain, each older age group was more satisfied than younger age groups.
- Regarding **Participation in Treatment**, clients who were 25 years old or older were more satisfied with services than clients who were 24 years old or younger.

In SU Programs:

- In the **Access** domain, consumers who identified themselves being 35 years old or older were more satisfied with services than those who identified themselves as younger than 35. Additionally, consumers who were 55 years old or older were more satisfied with services than consumers who were between 35 and 54 years old.
- In the **General Satisfaction** domain, clients who were 35 years old or older were more satisfied than clients who were 34 years old or younger.

In MH Programs:

- In the **Outcome** domain, clients who were 55 years or older were more satisfied than those who were 35-54 years old and those who were 24 years or younger.
- In the **General Satisfaction** domain, consumers who identified themselves being 35 years old or older were more satisfied with services than those who identified themselves as 24 years or younger.
- In the **Recovery** domain, clients who were 25 to 34 years old were more satisfied than clients who were 35 to 54 years old.

Consumer Satisfaction across Levels of Care

	Access	Appropriateness	Outcome	General Satisfaction	Participation in Tx	Respect	Recovery
Outpatient	89.6	93.8	80.3	92.3	93.9	91.5	76.0
Residential	86.3	90.9	83.4	87.9	92.1	90.2	81.3
Case Management	91.8	93.5	79.2	94.2	94.1	91.7	76.7
Social Rehab	88.0	90.1	84.4	92.1	88.5	89.4	83.7
Employment	95.0	96.7	87.7	97.5	94.2	94.1	86.6
Med Assist Tx	84.3	93.0	88.5	89.9	94.2	91.1	84.7
ACT/CSP/RP	89.2	93.2	80.0	91.8	92.4	91.1	73.5
IOP	88.1	93.3	81.5	91.3	92.7	90.1	78.9
Significance	*	*	*	*	*	*	*
SU Programs							
Outpatient	88.9	94.0	86.5	89.8	93.7	90.4	85.2
Residential	85.2	91.5	84.6	87.7	93.3	90.6	83.6
Case Management	96.2	98.3	80.8	98.4	97.8	95.1	80.8
Employment	95.0	93.9	78.1	97.7	97.4	87.1	89.5
Med Assist Tx	84.3	93.0	88.5	89.9	94.2	91.1	84.7
IOP	86.2	93.3	83.2	90.3	92.4	90.3	82.9
Significance	*	*	*	*	*	*	ns
MH Programs							
Outpatient	90.6	93.6	76.0	93.9	94.0	92.2	69.7
Residential	88.0	90.0	81.5	88.2	90.3	89.4	77.7
Case Management	91.4	93.0	79.1	93.8	93.7	91.4	76.3
Social Rehab	88.0	90.1	84.4	92.1	88.5	89.4	83.7
Employment	95.0	96.8	87.9	97.5	94.1	94.3	86.5
ACT/CSP/RP	89.2	93.2	80.0	91.8	92.4	91.1	73.5
IOP	93.7	93.6	75.8	94.3	93.7	89.7	65.5
Significance	*	*	*	*	*	*	*

Values represent % of consumers who indicated that they were satisfied with services

* identifies a significant difference at the .01 level (ns = difference is not significant)

BOLD values identify the higher value(s) when a difference is significant

Across All Programs:

- **Access:** Clients who received employment services were more satisfied than clients who received all other types of services listed.
- **Appropriateness:** Clients who received employment services were more satisfied than clients who received all other types of services.
- **Outcome:** Clients who received employment, social rehabilitation or medication assisted treatment were more satisfied than those who received all other services.
- **General Satisfaction:** Clients who received employment services were more satisfied than clients who received all other types of services listed. Those who received residential or medication assisted treatment were less satisfied than clients who received other levels of care.
- **Participation in Treatment:** Clients who received employment services were more satisfied than clients who received all other types of services.
- **Respect:** Clients who received employment services were more satisfied than clients who received all other types of services.
- **Recovery:** Clients who received employment or social rehabilitation services were more satisfied than those who received all other services.

In SU Programs:

- **Access:** Clients who received case management services were more satisfied than clients who received all other types of services except employment services.

- **Appropriateness:** Clients who received case management services were more satisfied than clients who received all other types of services.
- **Outcome:** Clients who received medication assisted treatment were more satisfied than those who received residential, outpatient, or intensive outpatient services.
- **General Satisfaction:** Clients who received case management services were more satisfied than clients who received all other types of services except employment services.
- **Participation in Treatment:** Clients who received case management services were more satisfied than clients who received all other types of services except employment services.
- **Respect:** Clients who received case management services were more satisfied than clients who received all other types of services.

In MH Programs:

- **Access:** Clients who received employment services were more satisfied than clients who received all other types of services except intensive outpatient. Clients who received residential services were less satisfied than clients who received all other types of services except social rehabilitation services.
- **Appropriateness:** Clients who received employment services were more satisfied than clients who received all other types of services except intensive outpatient. Clients who received residential services were less satisfied than clients who received all other types of services.
- **Outcome:** Clients who received employment or social rehabilitation were more satisfied than those who received all other types of services.
- **General Satisfaction:** Clients who received employment services were more satisfied than clients who received all other types of services except intensive outpatient. Clients who received residential services were less satisfied than clients who received all other types of services.
- **Participation in Treatment:** Clients who received employment services were more satisfied than clients who received all other types of services except intensive outpatient or outpatient services. Clients who received residential services were less satisfied than clients who received all other types of services except social rehabilitation services.
- **Respect:** Clients who received outpatient services were more satisfied with services than clients who received all other types of services except employment or intensive outpatient services.
- **Recovery:** Clients who received employment or social rehabilitation were more satisfied than those who received all other types of services. Clients who received intensive outpatient services were less satisfied than clients who received all other types of services except outpatient services.

Consumer Satisfaction by Length of Service

	Access	Appropriateness	Outcome	General Satisfaction	Participation in Tx	Respect	Recovery
< 1 Year	86.6	92.5	82.0	90.2	92.1	90.2	80.0
1-2 Years	87.9	92.9	83.5	92.6	92.4	92.2	78.1
2-5 Years	89.0	93.6	83.3	92.7	93.0	92.8	78.3
> 5 Years	88.2	92.6	82.9	92.7	92.2	91.0	78.6
Significance	*	*	ns	*	ns	*	ns
SU Programs							
< 1 Year	85.5	92.7	84.4	90.0	92.8	90.1	82.5
1-2 Years	84.1	92.9	88.3	91.1	92.3	93.1	83.5
2-5 Years	85.0	93.5	88.6	90.3	93.2	91.8	84.6
> 5 Years	84.5	91.7	91.7	91.4	94.6	92.8	87.9
Significance	ns	ns	*	ns	ns	*	*
MH Programs							
< 1 Year	89.4	92.9	76.8	91.8	91.4	92.1	73.9
1-2 Years	90.0	93.1	80.5	93.7	92.6	91.9	74.7
2-5 Years	90.6	93.9	81.5	93.7	93.3	93.4	76.6
> 5 Years	88.8	92.6	80.7	92.9	91.3	90.5	76.1
Significance	ns	*	*	*	*	ns	ns

Values represent % of consumers who indicated that they were satisfied with services

* identifies a significant difference at the .01 level (ns = difference is not significant)

BOLD values identify the higher value(s) when a difference is significant

Across All Programs:

- Across the **Access** and **General Satisfaction** domains, consumers who had been receiving services for 1 year or more were more satisfied than those who were receiving services for less than a year.
- In the **Appropriateness** domain, those who had been receiving services for 1 to 5 years were more satisfied than those who had been receiving services for 5 years or more.
- In the **Respect** domain, clients who had been receiving services for 1 to 5 years were more satisfied than those who had been receiving services for less than one year.

In SU Programs:

- In the **Outcome** domain, consumers who had been receiving services for 1 year or more were more satisfied than those who were receiving services for less than a year.
- In the **Respect** domain, clients who received services for 1 to 2 years were more satisfied than those who had received services for less than 1 year.
- In the **Recovery** domain, those who had been receiving services for 5 years or more were more satisfied than those who had been receiving services less than 5 years.

In MH Programs:

- With regard to **Participation in Treatment**, clients who had been receiving services for 1 to 5 years were more satisfied than those who had been receiving services for 5 years or more.
- In the **Appropriateness** domain, clients who had been receiving services less than 5 years were more satisfied than those who received services for 5 or more years.
- In the **Outcome** domain, clients who received services for 1 or more years were more satisfied than those who had received services for less than one year.
- In the **General Satisfaction** domain, clients who had been receiving services for 1 to 5 years were more satisfied with those services than those who had been receiving services for less than one year.

Consumer Satisfaction across Regions

	Access	Appropriateness	Outcome	General Satisfaction	Participation in Tx	Respect	Recovery
Region 1 (South Western)	88.6	92.4	83.6	91.4	92.3	89.9	80.4
Region 2 (South Central)	88.6	92.5	81.7	91.5	93.2	91.0	77.9
Region 3 (South Eastern)	88.1	94.3	80.0	92.2	93.8	91.3	76.7
Region 4 (North Central)	89.3	92.9	81.2	92.2	92.7	91.0	77.5
Region 5 (Western)	89.8	93.7	84.4	91.4	93.6	92.1	81.8
Significance	ns	ns	*	ns	ns	ns	*
SU Programs							
Region 1 (South Western)	86.4	93.4	85.1	89.8	92.5	89.5	83.1
Region 2 (South Central)	83.7	90.9	84.1	87.8	92.9	89.6	82.4
Region 3 (South Eastern)	86.0	93.8	84.2	89.1	93.9	90.0	81.2
Region 4 (North Central)	88.7	94.0	85.9	91.9	93.9	91.5	83.9
Region 5 (Western)	87.3	92.8	88.4	88.1	94.0	91.1	88.2
Significance	*	*	ns	*	ns	ns	*
MH Programs							
Region 1 (South Western)	90.7	91.4	82.2	93.0	92.1	90.3	77.8
Region 2 (South Central)	91.0	93.2	80.4	93.3	93.4	91.7	75.8
Region 3 (South Eastern)	90.1	94.8	76.2	95.0	93.8	92.5	72.7
Region 4 (North Central)	89.8	92.0	77.0	92.6	91.7	90.6	71.9
Region 5 (Western)	91.3	94.2	81.8	93.6	93.4	92.7	77.5
Significance	ns	*	*	*	*	*	*

Values represent % of consumers who indicated that they were satisfied with services

* identifies a significant difference at the .01 level (ns = difference is not significant)

BOLD values identify the higher value(s) when a difference is significant

Across All Programs:

- **Outcome:** Clients in Region 1 were more satisfied than clients in Regions 2, 3 & 4.
- **Recovery:** Clients in Regions 1 & 5 were more satisfied with services than those from Regions 2, 3, & 4.

In SU Programs:

- **Access:** Clients from Regions 3, 4, & 5 were more satisfied than clients from Region 2. Also, clients from Region 4 were more satisfied than clients from Regions 1 & 5.
- **Appropriateness:** Clients from Regions 1, 3, & 4 were more satisfied than clients in Region 2.
- **General Satisfaction:** Clients from Region 4 were more satisfied than clients from Regions 2 & 5.
- **Recovery:** Clients in Regions 4 & 5 were more satisfied than clients from Region 3.

In MH Programs:

- **Appropriateness:** Clients from Regions 2, 3, & 5 were more satisfied than clients from Region 4. Outcome: Clients in Region 1 & 5 were more satisfied than clients in Regions 3 & 4.
- **General Satisfaction:** Clients from Regions 2, 3, & 5 were more satisfied than clients from Region 4. Participation in Treatment: Clients from Regions 2 & 3 were more satisfied than clients from Region 4.
- **Respect:** Clients in Regions 3 & 5 were more satisfied with services than those from Region 1.
- **Recovery:** Clients in Region 1 were more satisfied with services than those from Regions 2, 3 & 4. Clients in Regions 2 & 5 were more satisfied than clients from Regions 3 & 4.

Summary by Domains

General Satisfaction

Ninety-two percent (92%) of respondents reported satisfaction on the General Satisfaction domain. The following reported significantly higher levels of satisfaction in this domain:

- Respondents receiving treatment from Mental Health programs
- Women
- Respondents of Hispanic/Latino origin
- Respondents aged 55 years and older
- Respondents receiving employment services
- Respondents receiving services for more than 1 year

For respondents receiving services in Substance Use treatment programs, the following reported significantly higher levels of satisfaction in the General Satisfaction domain:

- Women
- Respondents of Hispanic/Latino origin
- Respondents aged 35 years and older
- Respondents receiving case management services

For respondents receiving services in Mental Health treatment programs, the following reported significantly higher levels of satisfaction in the General Satisfaction domain:

- Women
- Respondents of Hispanic/Latino origin
- Respondents aged 35 years or older
- Respondents in employment programs

Access

Eighty-nine percent (89%) of respondents reported satisfaction on the Access domain. The following reported significantly higher levels of satisfaction in this domain:

- Respondents who were receiving treatment for Mental Health disorders
- Women
- Respondents of Hispanic/Latino origin
- Respondents aged 55 years or older
- Respondents receiving employment services
- Respondents receiving services for more than one year

For respondents receiving services for Substance Use treatment, the following reported significantly higher levels of satisfaction in the Access domain:

- Women
- Respondents over the age of 55
- Respondents receiving case management services
- Respondents from Planning Region 4 (North Central)

For respondents receiving services in Mental Health treatment programs, the following reported significantly higher levels of satisfaction in the Access domain:

- Women
- Respondents of Hispanic/Latino origin
- Respondents receiving employment services

Participation in Treatment

Ninety-three percent (93%) of respondents agreed with the statement, "I felt comfortable asking questions about my services, treatment or medication." The following reported significantly higher levels of satisfaction with this item:

- Respondents receiving treatment for Mental Health disorders
- Women
- Respondents aged 25 years or older
- Respondents in employment programs

For respondents receiving services in Substance Use treatment programs, the following reported significantly higher levels of satisfaction with this item:

- Women
- Respondents in case management programs

For respondents receiving services in Mental Health treatment programs, the following reported significantly higher levels of satisfaction with this item:

- Women
- Respondents of Hispanic/Latino origin

Quality and Appropriateness

Ninety-three percent (93%) of respondents reported satisfaction on the Quality and Appropriateness domain. The following reported significantly higher levels of satisfaction in this domain:

- Respondents who were receiving treatment for Mental Health disorders
- Women
- Respondents of Hispanic/Latino origin
- Respondents receiving employment services

For respondents receiving services in Substance Use treatment programs, the following reported significantly higher levels of satisfaction in the Quality and Appropriateness domain:

- Women
- Respondents receiving case management services

For respondents receiving services in Mental Health treatment programs, the following reported significantly higher levels of satisfaction in the Quality and Appropriateness domain:

- Women
- Respondents of Hispanic/Latino origin
- Respondents receiving employment services
- Respondents receiving services for less than five years

Respect

Ninety-one percent (91%) of respondents agreed with the statement, “My wishes are respected about the amount of family involvement I want in my treatment.” The following reported significantly higher levels of satisfaction with this item:

- Respondents receiving treatment for Mental Health disorders
- Women
- Respondents in employment programs

For respondents receiving services in Substance Use treatment programs, the following reported significantly higher levels of satisfaction with this item:

- Women
- Respondents in the Caucasian (White) or Other racial categories
- Respondents in case management programs

For respondents receiving services in Mental Health treatment programs, the following reported significantly higher levels of satisfaction with this item:

- Women
- Respondents of Hispanic/Latino origin
- Respondents in employment programs

Outcome

Eighty-two percent (82%) of respondents reported satisfaction on the Outcome domain. The following reported significantly higher levels of satisfaction in this domain:

- Respondents receiving treatment for Substance Use disorders
- Men
- Respondents in the Black or Other (non-white and non-black) racial categories
- Respondents of Hispanic/Latino origin
- Respondents in social rehabilitation, employment, or medication assisted treatment programs
- Respondents from Planning Regions 1 (South Western) or 5 (Western)

For respondents receiving services in Substance Use treatment programs, the following reported significantly higher levels of satisfaction in the Outcomes domain:

- Respondents of Hispanic/Latino origin
- Respondents who have been receiving services for more than one year

For respondents receiving services in Mental Health treatment programs, the following reported significantly higher levels of satisfaction in the Outcomes domain:

- Respondents in the African-American (Black) racial category
- Respondents of Hispanic/Latino origin
- Respondents aged 55 years or older
- Respondents receiving employment or social rehabilitation services
- Respondents who have been receiving services for more than one year

Recovery

Seventy-nine percent (79%) of respondents reported satisfaction in the Recovery domain. The following reported significantly higher levels of satisfaction in this domain:

- Respondents receiving treatment for Substance Use disorders
- Men
- Respondents in the African-American (Black) or Other racial categories
- Respondents of Hispanic/Latino origin
- Respondents aged 34 years or younger
- Respondents receiving employment or social rehabilitation services
- Respondents from Planning Regions 1 (South Western) or 5 (Western)

For respondents receiving services in Substance Use treatment programs, the following reported significantly higher levels of satisfaction in the Recovery domain:

- Respondents in the African American (Black) or Other (non-white and non-black) racial categories
- Respondents of Hispanic/Latino origin
- Respondents in services for five or more years

For respondents receiving services in Mental Health treatment programs, the following reported significantly higher levels of satisfaction in the Recovery domain:

- Respondents in the African American (Black) racial category
- Respondents receiving employment or social rehabilitation services

Feedback from the DMHAS Community

Consumer Feedback

At the end of each Consumer Survey, consumers are asked to answer the following open-ended question: “Is there anything else that you would like to tell us about your services here?” This year DMHAS received 4,777 comments. These comments highlight the strengths and challenges of service delivery and can help provide an important feedback loop to the provider agencies in the DMHAS system of care. An essential characteristic of a recovery-oriented system of care is the emphasis it places on the participation of consumers in all aspects of service delivery. As with previous years, most comments were positive and highlighted the ways that providers in our network have assisted in recovery from mental illness and/or addiction. In addition to commenting on our existing strengths, some consumers used this as an opportunity to express concerns or make suggestions about ways to improve the quality of their care.

Methodology

Data Collection

Consumers’ responses to the open-ended question were entered into the DDaP Consumer Survey System and subsequently extracted with other Consumer Survey data. Records with text comments were isolated from the rest of the Consumer Survey dataset and exported to a text file that was then imported into ATLAS.ti, which is a qualitative analysis software package that allows the user to code as well as query the data for common words or phrases.

Analysis

A summative approach to content analysis was used to connect the consumers’ responses to the various domains of consumer satisfaction. The summative approach to content analysis involves identifying the words or phrases that are congruent with words and phrases that define each of the consumer satisfaction domains and prioritizing those that occur with the most frequency. Because some comments contained words or phrases that were relevant to more than one domain, the comments that were most salient to a domain’s conceptual definition were selected for inclusion in this report. Next, the comments were categorized in accordance with their respective domains and exported to a Word document for formatting and further organization. We hope that this analysis will add some depth to quantitative measures of consumer satisfaction by giving the consumers’ a voice and adding another layer of meaning to the numbers.

The analysis of textual data presents certain challenges. Data entry personnel might have difficulty understanding someone’s handwriting or interpret a written word in different ways. Also, database queries can cut long strings of text short. Inevitably, there is some data loss between the initial sharing of the comment and analysis. When necessary, the comments included in this report were lightly edited for subject-verb agreement and spelling.

Findings

What follows is a sample of comments that correspond to each of the consumer satisfaction domains. The comments were further categorized by those that reflect strengths in service delivery and those that suggest the need for improvement.

Access

The Access domain is measured by the degree to which consumers perceive the services at their agency to be accessible and/or available. Behavioral health practitioners are facilitating access when they promote swift and uncomplicated entry to care and responding to clients’ request for assistance in a timely and responsive manner. This includes providing services at locations and times that are convenient for consumers and don’t interfere with other recovery activities (e.g. work, school). Consumer comments that corresponded with the Access domain contained phrases that pertained to:

- Convenient location of services
- Willingness to see clients as often as they felt was necessary
- Timely response to phone calls or requests for assistance
- Staff being available at times that are convenient for clients

"I felt that my counselor was very helpful. She made time for me when I needed it and always listened."

"Staff makes things very convenient. For example, working out transportation, talking, helping us with homework, and they show great respect towards me and the other people that come to our door. They do a real good job of being open to help us with whatever we need. They help us de-escalate our issues if needed; they help everybody they can..."

"The managers have an open door policy and they make themselves available to the clients. They entertain and do an excellent job at helping clients to explore all aspects of an issue."

"This place has helped me during many crises, such as eviction, loss of employment, meltdowns due to family issues, and so much more. They have been there to listen, guide me, help me, refer me, give me tools, take me to appointments, encourage me, and SO much more. If I didn't have them helping me these past three years, who knows what would have happened to me. They are all amazing, and if your worker isn't there when you call or come in and you are in distress, someone else will immediately jump in to help and find out what you are going through. I truly cannot say enough about this place and all they have done."

"The receptionist is very personable and helpful. Everyone employed here has helped me greatly at some point. The atmosphere is very calming and open. I consider my time here safe and constructive due to the availability of various services."

Access - Suggestions and Concerns

"I wish it was easier to get appointments; sometimes it takes 2 weeks before you can see your doctor."

"The services here are very helpful, however because I can only work with my therapist for 50 minutes once a week, I feel that it will take a very, very long time for me to overcome the difficulties my mental illness brings to my every day life. I wish I could work with my therapist two or three times a week, rather than just once."

"I wish the program had more funding so that it was able to return to the 12 month program. I came when it was a six month program, now it has been shortened to four months, and I feel some people might not get the fullest opportunity to recover."

"I don't like the location and I don't like how the offices look inside. It looks like an old-fashioned insurance building; it is very cold & unfriendly. There is no warmth to the building and the lighting is harsh. The cubicles are too close together and the length of time it takes to get there on the bus is why I don't go to the agency."

"Services are unavailable during late hours (4 pm and later) and it takes too long to be seen."

"There have been times where I have had to reschedule appointments because the person at the front desk did not notify the therapist of my presence. I find that unacceptable. My time is as precious as any one else's. To drive here, sit for more than 30 minutes and then not have a session is just wrong on all levels"

"There are a lot of people here that don't get up early in the morning, because we have a hard time sleeping at night. I feel they need to have a doctor who can see patients at night. I also don't like that you can't get a hold of your therapist after hours, if it is truly necessary. You have to go through the warm line. Some people don't like talking to someone they don't know or trust. I also don't like talking the fact that we can't get a hold of our case workers."

Quality and Appropriateness

The Quality and Appropriateness domain refers to the degree to which respondents are satisfied with the quality and appropriateness of the care they receive. Words and phrases that corresponded with the quality and appropriateness domain were consistent with following items:

- Staff beliefs about their clients' ability to grow, change, and recover
- Viewing each client as a whole person rather than as a diagnosis.
- Providing information about clients rights and grievance procedures
- Educating clients about potential adverse side effects of medication
- Respecting confidentiality

- Providing services that are sensitive to cultural and ethnic diversity
- Assisting clients with obtaining information useful in managing their illness/condition

“The staff member I see has been able to treat me as a whole person, not just as a clinical identification. She is a gem.”

“My clinician is so conscientious of getting to the root of the issue. She listens intently and it is obvious she is committed to therapy with her clients.”

“My clinical case manager is very helpful and willing to do whatever it takes to meet my needs in a real way, day to day & week to week & for that, I am thankful.”

“I like the handouts. When I would reread them things would come together for me. Journaling helps me a lot and the therapist was able to help me really understand things I was stuck on.”

“I feel very blessed to have these services. They are true professionals, they respect me, accommodate, make me feel I matter in this word with all my frailties, past baggage, and wrong choices I have made. They are positive, respectful; this is very important and a blessing to me.”

“My present counselor is patient and able to communicate with me about all the necessary things, including medications and daily living.”

“My counselor offered me more education on services than I had ever imagined. She was efficient and extremely supportive in all situations. She never seemed stressed and was never discouraged if short staffed. Always made the best out of every situation...very organized as well, if she was asked to run a group at the last minute and had nothing planned she always made the very best out of it and usually it was one of the best groups of the day! She was the best at multitasking.”

Quality and Appropriateness - Suggestions and Concerns

“The new “notes” at the end of sessions does take away from therapeutic time if we need to discuss something. If we have to end the session early because we have to complete the form - although I understand the problem of therapists having to stay late to complete paperwork - it does cut into our therapy session if we need those extra minutes to discuss something we’re working on.”

“I get disappointed in the frequent changes in staff. Although it is out of my control, it makes it a little harder as far as getting the right medication or doses. Also, it’s hard to establish a close relationship with so many different psychiatrists or whoever is prescribing medication. I understand how busy it is sometimes; however, my problems can’t be addressed as effectively as I would like them to.”

“I just wish that a list of potential services appeared some where. Sometimes I get more info from other clients.”

“A few times my confidentiality was not respected. My doctor/psychiatrist told my family things they were not supposed to know.”

“The food is lacking in nutrition and over half of the food comes from the food bank which is outdated and we are expected to eat it. Also, I feel that there is not enough floor staff and responsibilities that should be overseen by the staff are put on the patients.”

“The doctor I was assigned is incorrectly presumptive, offensive and has not been of benefit to me. I’ve had better care from doctors elsewhere.”

“I felt belittled, rushed and treated as a non person. I felt the clinician is rushed and doesn't think I know what I'm talking about; I'm bi-polar, not stupid.”

“The problem is care management doesn't advocate for you like they say they do. They talk down to you and only will help you when you're nice to them.”

Outcome

The Outcome domain measures consumers' perceptions about various functional outcomes because of receiving services. Consumer comments that corresponded with the Outcome domain contained words or phrases that were consistent with the following items:

- Capacity to resolve daily problems effectively
- Ability to control one's life
- Increased ability to deal with crisis
- Improved family relationships
- Improved social, academic or occupational functioning
- Reduction in symptoms

"The staff are great people. They believe in me and motivate me to believe in myself. They are the ones who helped me find the courage to go to college."

"I feel better about myself. I will have better relationship with my family and better work relationships. I'm going to get back into A.A. I'm going to get back into sports. Life is going to get better."

"I am very grateful for the services I'm receiving from my case manager. She has worked hard on my behalf and has showed me strengths I did not know I had. She also taught me that I could change and do things for myself. I am getting my independence back."

"I practice what I've learned every day. I am more motivated and willing to go through with day-to-day obligations and willing to take on other tasks to better my life and help others. I am more understanding of other people's feelings and emotions."

"The staff was so wonderful and helpful. Thank you for helping me to take more responsibility for my life, my disease, and coping with my problems. I feel more able to handle life."

"Seeing where I was when I began and where I am now ...it's empowering to know and realize that there's hope for a better life regardless of one's situation. I've gotten a lot better at managing my emotions and it feels good to come and talk with my therapist and I feel blessed to have the opportunity to share my story without being judged."

"I am so grateful for the treatment I have received here; it has helped me so much. I have made so much progress with my social phobia, my depression and have even been able to forgive my parents and my mentally ill brother for the way he used to abuse me. I have found resolution."

Outcome - Suggestions/Concerns

"Unfortunately, I feel like I am falling deeper and deeper into a hole with glass sides so that any attempt to get out is confounded by my not being able to get a purchase on hope. I am sad."

"As for med management, I was very disappointed. My needs were not met. I am on Adderall, which I have been on since I was 12 and it is prescribed by my M.D. far away in Bolton. The doctor here was not willing to help so it went unmanaged and unadjusted for months which really hindered my progress."

"I have been to this facility eight times and spent a lot of wasted time in the waiting area due to meeting being cancelled or starting late - or watching a movie for the whole session with little to no discussion and switches in meeting leaders."

"...the IOP program felt like a waste of time and no issues were addressed. The teachers were never in the room and were unwilling to talk. They need to focus more on the mental health part of dual- IOP. In my opinion, I wasted time and was put down for struggling."

Recovery

The Recovery domain measures consumers' perceptions of "recovery oriented services" and the degree to which they are able to recover from their condition. Consumer comments that corresponded with the Recovery domain contained phrases that were consistent with the following items:

- Community involvement
- An ability to pursue one's interests and goals
- Generally having a desirable life despite one's condition
- Feeling in control of one's treatment
- Giving back to one's family and/or community

"The staff has been so wonderfully supportive to me over the years. They have encouraged and inspired me to better my life and formulate a sense of love within myself that I would not have been able to obtain on my own."

"The Clubhouse has really helped me along in my recovery process. It is a very welcoming place and has many groups and activities going on all the time."

"This organization has changed my life completely. I am able to function at a capacity I thought was unattainable due to my illness. Work, home life, relationships, and most challenges that come into my life."

"The treatment was real good they helped be recognize my weaknesses as well as my strengths in order to have better insight to my recovery and decision making."

"They help me believe that I can be whoever or whatever I want to be and never stopped encouraging me to persevere, believe in myself, and follow my dreams."

"If not for the center, I would be isolated at home and the symptoms would get worse."

"They please me by putting me in the social activities. Also, I may pursue my interest in my education."

"My severe chronic physical problems overwrite my ability to accomplish as much as I would like but this program helps me and others have more access, as well as promotes and encourages, community involvement."

Recovery - Suggestions/Concerns

"My doctor does not listen to my concerns as to the right medication."

"I would like to have consultations with a psychiatrist like those who have their own private office."

"I am not able to get the help I need to continue physical therapy on a daily basis. Due to the lack of help, I haven't been able to find other means of transportation. My health is suffering because of it. I have issues dealing with getting back and forth on my own."

"There is a high turn over of personnel. I have worked with four different people. It makes it hard with the change of personnel."

"I feel staff are overworked & have too many clients to care for, because if one client has an emergency a lot can go wrong. I feel there isn't many places in the community to go & meet people."

"The only problem I had here was that I had to leave on Thursday after I planned on Friday being my discharge date. I had already made plans for that date. She informed me that too many people were leaving on that date and it was inconvenient for her - disregarding my plans that were already set. Her approach was intimidating and I was embarrassed because she went off in front of everyone."

Participation in Treatment Planning

The participation domain refers to the degree to which consumers are satisfied with their ability to participate in all aspects of the treatment process. Participation of people in recovery and their loved ones goes beyond the initial framing of the problems to be addressed in treatment to include them in all aspects and phases of the treatment process. Consumer comments that corresponded with this domain contained phrases that pertained to their ability to ask questions and/or provide input about their services, treatment or medication.

"It seems as if this time around, there was more of a variety of groups and more feedback was asked of the group members as to what the subject matter of the groups."

"Whenever I have anything to say about my treatment, they always listen. They're very flexible to get me the correct treatment and they're very understanding."

"Not only are the services excellent, they keep you in touch with your treatment plan. They listen to your input on the treatment plan."

"I really appreciate the use of individualized treatment plans that are made of small goals. It is a very open environment and it is easy to communicate with the people who run this group."

Participation in Treatment Planning - Suggestions/Concerns

"When I raise a concern, nothing happens until it becomes a crisis."

"I would like to see Zumba classes more often and the drum circle at least 2x a month. And I would like my visitors to be able to stay longer than 20 minutes as I let staff know ahead of time and it is permitted."

"I don't agree with the counseling technique of only cognitive behavior therapy. As someone who was not allowed to 'talk' and still feels the need to talk about my past and how much it hurt me, I believe first in psychoanalysis then in cognitive therapy to learn how to deal with that pain. If you don't get the pain out first how can you cope better?"

"I would like to express disappointment in the automated phone notification system. My personal preference would be 24-48 hours prior to the appointment, not three business days. (e.g., If you have an appointment on a Monday, you receive the automated phone notification on the previous Wednesday.) I was also unhappy with the answering service. There were a number of times where the phone wasn't answered or I was hung up on."

"I feel my disease (drug abuse, mood) holds me back from life. Sometimes I feel my doctor does not listen to me, or care about controlling my symptoms. The doctors are more in control than I am."

Respect for Family Involvement

The Respect for Family Involvement domain is measured by consumers' perceptions of the degree to which behavioral health practitioners respect their desire to incorporate family members and/or other significant people in every phase of the treatment process. Given the growing emphasis on maximizing the use of natural supports to facilitate the recovery process, the support of family members and important others may point to existing, but overlooked resources and opportunities.

"This program has been very helpful to my family so we can get back on our feet; I feel like I have support while I pursue my goals."

"My counselor worked with me and my family and I feel that the family sessions, were the biggest things I needed. We touched on several issues with my counselor and it was suggested we continue family therapy when I leave. My family wished we could do it with my counselor because she was always willing to be there and goes above and beyond."

"I am really trying to get myself together I have my family support."

"My stay here was great for my family and me. I feel I can live my life to the fullest. I was able to address issues that I never had before."

“Hard issues with family problems can cause a vast array of issues; the staff are awe-inspiring in their support. They listen, offer suggestions, or sometimes just are there - being a stable, positive, reinforcement in our lives.”

Respect for Family Involvement - Suggestions/Concerns

“I need one-on-one time with someone because I’m going through a lot of family and relationship issues.”

“I think there should be more programs we can do with our kids.”

“I want more involvement with my family.”

“I want to recover and reconnect with my estranged family members but have had minimal success thus far”

Quality of Life Results

During Fiscal Year 2012, DMHAS suggested that providers voluntarily administer the WHOQOL-BREF Quality of Life (QOL) instrument, which is a widely used, standardized quality of life tool developed by the World Health Organization. The Quality of Life Survey is located in Appendix 1.4.

The QOL is a 26 question tool that measures consumer satisfaction with the quality of his or her life in the following domains: physical, psychological, social relationships, and environment. Individual questions are scored on a scale from 1-5, with 1 being the lowest score and 5 being the highest score possible. Domain scores are transformed to a scale of 1-100, with higher scores indicating more satisfaction with quality of life.

This year, DMHAS received 2,055 individual responses to the Quality of Life instrument (defined as the number of clients who answered at least one question). The consumers who responded to the QOL survey are a subset of those who responded to the Consumer Survey.

The following sections summarize the key findings from this year's QOL administration. Table 12 lists Quality of Life results by domain from the last three fiscal years.

QOL Group Differences

Quality of Life across Program Type

	Physical Health	Psychological	Social	Environment	General QOL
All Programs	63.5	63.7	61.3	63.2	66.8
SU Programs	66.3	65.5	63.2	62.7	68.2
MH Programs	61.5	62.4	59.4	63.4	65.7
Significance	*	*	*	ns	*

Values represent an average transformed score (scale 0-100) with higher values indicating better Quality of Life (QOL)

* identifies a significant difference at the .01 level (ns = difference is not significant)

BOLD values identify the higher value when a difference is significant

- Clients in SU programs reported better QOL in the **Physical Health, Psychological, Social, and General QOL** domains when compared to clients in MH programs.
- These are the same results that were observed in FY2010 and SFY2011.

Quality of Life across Gender

	Physical Health	Psychological	Social	Environment	General QOL
Men	65.4	65.6	61.4	62.9	67.3
Women	61.0	61.2	60.7	63.5	66.2
Significance	*	*	ns	ns	ns
SU Programs					
Men	67.8	67.2	64.6	63.0	68.6
Women	63.9	63.1	61.2	62.7	67.8
Significance	ns	*	ns	ns	ns
MH Programs					
Men	63.2	64.3	58.5	62.7	66.2
Women	56.7	55.0	56.0	60.3	60.3
Significance	*	*	ns	ns	ns

Values represent an average transformed score (scale 0-100) with higher values indicating better Quality of Life (QOL)

* identifies a significant difference at the .01 level (ns = difference is not significant)

BOLD values identify the higher value(s) when a difference is significant

Across All Programs:

- In the **Physical Health** and **Psychological** domains, men reported better QOL than did women.

In SU Programs:

- Men reported better QOL in the **Psychological** domain.

In MH Programs:

- Men reported better QOL in the **Physical Health**, and **Psychological** domains.

Quality of Life across Race

	Physical Health	Psychological	Social	Environment	General QOL
White	63.4	61.8	60.1	63.6	66.2
Black	65.0	67.7	62.7	63.5	68.3
Other	61.3	65.5	62.4	62.4	66.9
Significance	ns	*	ns	ns	ns
SU Programs					
White	66.4	64.2	62.4	63.8	68.4
Black	68.2	72.1	68.7	63.1	69.6
Other	64.9	68.6	64.0	59.3	66.9
Significance	ns	*	ns	ns	ns
MH Programs					
White	60.9	59.9	58.1	63.4	64.1
Black	63.9	66.6	60.7	63.6	67.5
Other	58.0	62.9	60.1	62.3	67.5
Significance	*	*	ns	ns	ns

Values represent an average transformed score (scale 0-100) with higher values indicating better Quality of Life (QOL)

* identifies a significant difference at the .01 level (ns = difference is not significant)

BOLD values identify the higher value(s) when a difference is significant

Across All Programs:

- In the **Psychological** domain, consumers who identified themselves in the Black or Other (non-Black and non-White) categories reported better QOL than those who identified themselves in the White category.

In SU Programs:

- In the **Psychological** domain, consumers who identified themselves in the Black category reported better QOL than those who identified themselves in the White category.

In MH Programs:

- In the **Physical Health** domain, consumers who identified themselves in the Black category reported better QOL than those who identified themselves in the Other category.
- In the **Psychological** domain, consumers who identified themselves in the Black category reported better QOL than those who identified themselves in the White category.

Quality of Life across Ethnicity

	Physical Health	Psychological	Social	Environment	General QOL
Hispanic	62.5	63.8	61.7	60.9	67.1
Non Hispanic	63.9	63.6	61.1	64.2	67.0
Significance	ns	ns	ns	ns	ns
SU Programs					
Hispanic	64.9	64.9	62.6	58.5	67.6
Non Hispanic	66.9	65.3	63.6	64.6	68.4
Significance	ns	ns	ns	ns	ns
MH Programs					
Hispanic	60.5	62.8	60.6	62.4	66.7
Non Hispanic	62.2	62.6	59.3	63.9	65.9
Significance	ns	ns	ns	ns	ns

Values represent an average transformed score (scale 0-100) with higher values indicating better Quality of Life (QOL)

* identifies a significant difference at the .01 level (ns = difference is not significant)

BOLD values identify the higher value when a difference is significant

Across All Programs:

- Ethnicity did not impact QOL ratings in any domain.

Quality of Life across Age Groups

	Physical Health	Psychological	Social	Environment	General QOL
24 & Under	70.3	67.2	68.4	64.1	69.3
25-34	66.4	65.3	62.6	62.6	69.3
35-54	61.9	62.5	59.2	62.5	65.9
55 & Older	60.4	63.1	59.8	64.9	65.2
Significance	*	ns	*	ns	*
SU Programs					
24 & Under	70.4	67.4	66.7	61.5	69.3
25-34	68.4	67.4	63.2	62.2	70.3
35-54	64.1	64.3	61.6	62.1	67.3
55 & Older	63.3	62.8	61.2	65.7	66.3
Significance	ns	ns	ns	ns	ns
MH Programs					
24 & Under	69.9	66.6	71.3	67.4	69.2
25-34	64.1	62.8	61.3	62.8	67.6
35-54	60.5	61.5	57.7	62.6	65.0
55 & Older	59.8	63.5	59.0	64.6	64.9
Significance	*	ns	*	ns	ns

Values represent an average transformed score (scale 0-100) with higher values indicating better Quality of Life (QOL)

* identifies a significant difference at the .01 level (ns = difference is not significant)

BOLD values identify the higher value(s) when a difference is significant

Across All Programs:

- In the **Physical Health** domain, clients who were 34 years or younger reported better QOL than did clients who were 35 years old or older.
- In the **Social** domain, clients who were 24 years old or younger reported better QOL than clients who were 35 years old or older.
- In the **General QOL** domain, clients who were between 25 and 34 years old reported a better QOL than clients who were 35 years or older.

In SU Programs:

- Age did not impact QOL ratings in any domain.

In MH Programs:

- Clients who were 24 years old or younger reported better QOL in the **Physical Health** domain than did clients who were 35 years or older.
- In the **Social** domain, clients who were 24 years old or younger reported better QOL than clients who were 25 years old or older.

Quality of Life across Levels of Care

	Physical Health	Psychological	Social	Environment	General QOL
Outpatient	63.4	62.1	60.9	61.8	66.3
Residential	65.5	65.2	61.5	65.9	68.6
Case Management	59.5	65.3	62.6	66.9	68.1
Social Rehab	63.3	63.9	57.9	61.5	65.3
Employment	68.6	65.6	62.2	64.6	69.3
ACT/CSP/RP	53.1	53.3	41.7	56.0	55.5
IOP	61.7	64.6	64.5	61.8	65.7
Significance	*	ns	*	*	ns
SA Programs					
Outpatient	66.3	64.5	62.2	62.2	67.6
Residential	71.9	73.3	67.0	70.8	73.6
Case Management	55.4	61.1	60.4	66.7	68.8
Employment	70.8	69.4	67.7	56.2	75.0
IOP	61.7	64.6	64.5	61.8	65.8
Significance	*	*	ns	*	ns
MH Programs					
Outpatient	56.4	56.6	57.7	60.7	62.2
Residential	62.1	61.2	58.5	63.6	66.1
Case Management	59.6	65.3	62.6	66.9	68.1
Social Rehab	63.3	63.9	57.9	61.5	65.3
Employment	68.3	65.0	61.3	65.9	68.4
ACT/CSP/RP	53.2	53.3	41.7	56.0	55.5
Significance	*	*	*	*	*

Values represent an average transformed score (scale 0-100) with higher values indicating better Quality of Life (QOL)

* identifies a significant difference at the .01 level (ns = difference is not significant)

BOLD values identify the higher value(s) when a difference is significant

Across All Programs:

- **Physical Health:** Clients who received employment services reported better QOL than clients who received other types of services except residential.
- **Social:** Clients who received ACT/CSP/RP services had worse QOL than clients who received all other services except social rehabilitation services.
- **Environment:** Clients who received residential or case management services reported better QOL than clients who received outpatient or social rehabilitation services.

In SU Programs:

- There was a maximum of four respondents in the case management category.
- **Physical Health:** Clients who received residential services reported better QOL than clients who received intensive outpatient services.
- **Psychological:** Clients who received residential services reported better QOL than clients who received intensive outpatient or outpatient services.
- **Environment:** Clients who received residential services reported better QOL than clients who received all other types of services except case management services.

In MH Programs:

- **Physical Health:** Clients who received employment, residential, or social rehabilitation services reported better QOL than clients who received outpatient services.
- **Psychological:** Clients who received employment, case management, or social rehabilitation services reported better QOL than clients who received outpatient services.

- **Social:** Clients who received employment or case management services reported better QOL than clients who received ACT/CSP/RP services.
- **Environment:** Clients who received employment or case management services reported better QOL than clients who received outpatient services.
- **General QOL:** Clients who received employment or case management services reported better QOL than clients who received outpatient services.

Quality of Life by Length of Service

	Physical Health	Psychological	Social	Environment	General QOL
< 1 Year	65.7	65.1	62.2	61.9	66.9
1-2 Years	62.3	63.4	58.5	62.7	66.0
2-5 Years	60.8	62.5	61.8	65.9	67.3
> 5 Years	62.1	61.7	59.8	64.5	67.1
Significance	*	ns	ns	*	ns
SU Programs					
< 1 Year	67.7	66.9	64.7	63.5	68.7
1-2 Years	59.8	62.3	53.8	59.6	66.3
2-5 Years	61.6	56.8	53.3	59.6	68.1
> 5 Years	59.5	55.0	55.0	58.4	64.6
Significance	*	*	*	ns	ns
MH Programs					
< 1 Year	61.0	60.9	55.6	58.2	62.6
1-2 Years	62.9	63.6	59.1	63.3	65.7
2-5 Years	60.5	63.2	63.0	66.7	66.9
> 5 Years	62.2	62.0	60.0	64.8	67.2
Significance	ns	ns	*	*	ns

Values represent an average transformed score (scale 0-100) with higher values indicating better Quality of Life (QOL)

* identifies a significant difference at the .01 level (ns = difference is not significant)

BOLD values identify the higher value(s) when a difference is significant

Across All Programs:

- In the **Physical Health** domain, clients who had been receiving services for less than one year reported better QOL than those clients who had been receiving services for two or more years.
- In the **Environment** domain, clients who had been receiving services for two to five years reported better QOL than clients who had services for less than one year.

In SU Programs:

- In the **Physical Health** domain, clients who had been receiving services for less than one year reported better QOL than those clients who had been receiving services for one to two years.
- In the **Psychological** and **Social** domain, clients who had been receiving services for less than one year reported better QOL than those clients who had been receiving services for more than two years.
- In the **Social** domain, clients who had been receiving services for less than one year reported better QOL than those clients who had been receiving services for one to five years.

In MH Programs:

- In the **Social** domain, clients who had received services for two to five years reported better QOL than clients who received services for less than one year.
- In the **Environment** domain, clients who had received services for more than one year reported better QOL than clients who received services for less than one year.

Quality of Life across Regions

	Physical Health	Psychological	Social	Environment	General QOL
Region 1 (South Western)	64.2	65.2	63.7	65.7	68.9
Region 2 (South Central)	60.9	63.0	59.3	63.9	66.9
Region 3 (South Eastern)	61.3	59.8	56.6	62.7	61.7
Region 4 (North Central)	66.0	65.4	63.6	62.9	67.3
Region 5 (Western)	60.6	60.3	59.2	63.3	67.6
Significance	*	*	*	ns	*
SU Programs					
Region 1 (South Western)	60.3	67.7	61.7	59.1	63.5
Region 2 (South Central)	67.6	70.7	62.2	63.8	73.7
Region 3 (South Eastern)	62.1	59.9	56.6	62.5	61.8
Region 4 (North Central)	68.1	66.8	65.8	62.6	68.3
Region 5 (Western)	78.6	73.6	69.4	75.4	74.5
Significance	*	*	*	ns	*
MH Programs					
Region 1 (South Western)	61.2	62.9	60.8	67.1	67.2
Region 2 (South Central)	53.9	54.3	54.3	57.1	57.6
Region 3 (South Eastern)	51.9	50.3	50.1	57.5	55.7
Region 4 (North Central)	69.0	62.7	60.0	67.2	67.4
Region 5 (Western)	64.3	62.6	62.4	63.1	67.8
Significance	*	ns	ns	ns	ns

Values represent an average transformed score (scale 0-100) with higher values indicating better Quality of Life (QOL)

* identifies a significant difference at the .01 level (ns = difference is not significant)

BOLD values identify the higher value(s) when a difference is significant

Across All Programs:

- In the **Physical Health** domain, clients from Region 4 reported better QOL than clients from Regions 2, 3 & 5.
- In the **Psychological** domain, clients from Regions 1 & 4 reported better QOL than did clients from Regions 3 & 5.
- In the **Social** domain, clients from Regions 1 & 4 reported better QOL than did clients from Region 3. Additionally, clients from Region 4 reported better QOL than clients from Region 5.
- Across the **General QOL** domain, clients from all Regions consistently reported better QOL than did clients from Region 3.

In SU Programs:

- In the **Physical Health** domain, clients from Region 5 reported better QOL than clients from Regions 1 & 3.
- In the **Psychological** domain, clients from Regions 2 & 4 reported better QOL than clients in Region 3.
- In the **Social** domain, clients from Region 4 reported better QOL than clients from Region 3.
- In the **General QOL** domain, clients from Regions 2, 4, & 5 reported better QOL than clients from Region 3. Additionally, clients in Region 5 reported better QOL than clients in Region 4.

In MH Programs:

- In the **Physical Health** domain, clients from Region 1 reported better QOL than clients from Regions 2 and 5.

Quality of Life Summary by Domains

General Quality of Life (T=66.8)

The following reported significantly better Quality of Life in this domain:

- Respondents who were receiving treatment from Substance Use programs
- Respondents from Planning Regions 1(South Western), 2 (South Central), 4 (North Central) and 5 (Western)

For respondents receiving services for Substance Use disorders, the following reported significantly better QOL in the General QOL domain:

- Respondents from Planning Region 2 (South Central), 4 (North Central) and 5 (Western)

For respondents receiving services in Mental Health treatment programs, the following reported significantly better QOL in the General QOL domain:

- No significant categories

Physical Health (T=63.5)

The following reported significantly better Quality of Life in this domain:

- Respondents who were receiving treatment from Substance Use programs
- Men
- Respondents younger than age 35
- Respondents from Planning Region 4 (North Central)

For respondents receiving services for Substance Use disorders, the following reported significantly better QOL in the Physical Health domain:

- No significant categories

For respondents receiving services in Mental Health disorders programs, the following reported significantly better QOL in the Physical Health domain:

- Men
- Respondents younger than age 25

Psychological (T=63.7)

The following reported significantly better Quality of Life in this domain:

- Respondents who were receiving treatment from Substance Use programs
- Men
- Respondents in the African-American (Black) or Other racial categories

For respondents receiving services in Substance Use treatment programs, the following reported significantly better QOL in the Psychological domain:

- Men
- Respondents receiving services for less than one year

For respondents receiving services in Mental Health treatment programs, the following reported significantly better QOL in the Psychological domain:

- Men

Social (T=61.3)

The following reported significantly better Quality of Life in this domain:

- Respondents who were receiving treatment from Substance Use programs
- Respondents aged 24 years or younger

For respondents receiving services for Substance Use disorders, the following reported significantly better QOL in the Social domain:

- No significant categories

For respondents receiving services in Mental Health programs, the following reported significantly better QOL in the Social domain:

- Respondents aged 24 years or younger

Environment (T=63.2)

The following reported significantly better Quality of Life in this domain:

- No significant categories

For respondents receiving services for Substance Use disorders, the following reported significantly better QOL in the Environment domain:

- No significant categories

For respondents receiving services in Mental Health treatment programs, the following reported significantly better QOL in the Environment domain:

- Respondents receiving services for one year or more

Health Outcomes Survey Results

As part of the SFY2012 Consumer Satisfaction survey process, DMHAS providers had the option to administer an eight question Health Outcomes survey. The questions in this survey were taken from the Behavioral Risk Factor Surveillance System (BRFSS). The BRFSS is the world's largest, on-going telephone health survey system, tracking health conditions and risk behaviors in all fifty states.⁷ The survey was available in English and Spanish. The questions addressed the topics of body mass index (BMI), cardiovascular/respiratory/diabetes disease, overall health from physical and psychological perspectives, and smoking and drinking habits. A total of 1304 surveys were completed; two of these surveys were discarded due to outlier data: one reported height of 180 inches and one reported weight of 782 pounds. Table 1 at the end of this summary provides detailed survey counts for the information presented in this report.

Surveys were submitted by the following DMHAS providers:

Table 12: Providers Participating in the Health Outcomes survey, FY2012

Provider	Frequency	Percent
ACCESS Agency	4	.3
Chrysalis Center Inc.	22	1.7
Columbus House	1	.1
Connecticut Mental Health Center	738	56.7
Connection Inc	15	1.2
Continuum of Care	4	.3
Dixwell/Newhallville Community MHS	102	7.8
Family Intervention Center	1	.1
Hartford Dispensary	1	.1
Hospital of St. Raphael	143	11.0
Southeastern Mental Health Authority	112	8.6
St. Mary's Hospital Corporation	1	.1
Waterbury Hospital Health Center	1	.1
Yale University - WAGE	49	3.8
Yale University-Behavioral Health	106	8.1
Unknown	2	.2
Total	1302	100.0

Demographic Information

- The response rate was fairly even among men and women with 653 females (50.2%) and 618 males (47.5%) responding to the survey. The remaining 31 respondents (2.4%) did not identify their gender.
- Almost half of the respondents (48.6%) fell into the 35-54 years of age group. Over 20% (21.4%) of the respondents were aged 55-64. 7.5 % were under the age of 25.
- The majority of the respondents (46.3%) were White, while 28.4% were black. 11.6% did not identify their race.
- Over half (55.8%) of the respondents were non-Hispanic. 18% were Hispanic-Puerto Rican and 21.9% did not identify their ethnicity.
- 89.8% of respondents were in mental health programs and 5.8% were in substance abuse programs. 4.4% of the respondents were not linked to a specific program.

⁷ See <http://www.cdc.gov/brfss/> for more information on this instrument.

Table 13: Health Outcomes Survey Demographic Information

Gender	ALL Surveys		Women		Men		Non-Smokers		Smokers	
	N	%	N	%	N	%	N	%	N	%
Female	653	50.2	653	100.0	0	0.0	367	56.1	250	43.6
Male	618	47.5	0	0.0	618	100.0	275	42.0	309	53.8
Unknown	31	2.4	0	0.0	0	0.0	12	1.9	15	2.6
Total	1302	100.0	653	100.0	618	100.0	654	100.0	574	100.0
Age										
20 and Under	31	2.4	12	1.8	19	3.1	14	2.1	14	2.4
21-24	67	5.1	31	4.7	36	5.8	36	5.5	29	5.1
25-34	190	14.6	67	10.3	122	19.7	79	12.1	104	18.1
35-54	633	48.6	329	50.4	298	48.2	306	46.8	295	51.4
55-64	278	21.4	164	25.1	111	18.0	154	23.5	104	18.1
65 and older	63	4.8	43	6.6	20	3.2	47	7.2	11	1.9
Unknown	40	3.1	7	1.1	12	1.9	18	2.8	17	3.0
Total	1302	100.0	653	100.0	618	100.0	654	100.0	574	100.0
Race										
American Indian/Alaskan Native	4	.3	4	.6	0	0.0	2	.3	2	.3
Asian	6	.5	3	.5	3	.5	5	.8	1	.2
Black	370	28.4	193	29.6	175	28.3	168	25.7	186	32.4
Mixed	18	1.4	12	1.8	6	1.0	10	1.5	8	1.4
Native Hawaiian/Pacific Islander	4	.3	1	.2	3	.5	1	.2	2	.3
Other	146	11.2	73	11.2	71	11.5	65	9.9	65	11.3
White	603	46.3	294	45.0	304	49.2	315	48.2	267	46.5
Unknown	151	11.6	73	11.2	56	9.1	88	13.5	43	7.5
Total	1302	100.0	653	100.0	618	100.0	654	100.0	574	100.0
Ethnicity										
Mexican	5	.4	1	.2	4	.6	3	.5	2	.3
Non-Hispanic	726	55.8	377	57.7	344	55.7	361	55.2	346	60.3
Other Hispanic/Latino	51	3.9	24	3.7	26	4.2	28	4.3	18	3.1
Puerto Rican	235	18.0	129	19.8	103	16.7	131	20.0	77	13.4
Unknown	285	21.9	122	18.7	141	22.8	131	20.1	131	22.8
Total	1302	100.0	653	100.0	618	100.0	654	100.0	574	100.0
Program Type										
MH	1169	89.8	596	91.3	551	89.2	608	93.0	492	85.7
SA	76	5.8	26	4.0	47	7.6	21	3.2	51	8.9
Unknown	57	4.4	31	4.7	20	3.2	25	3.9	31	5.4
Total	1302	100.0	653	100.0	618	100.0	654	100.0	574	100.0

Physical Health

- The average client height was 66.2 inches (± 4.2) with a range of 48-79 inches. Women reported an average height of 64 inches (± 3.4 , range = 48-74) and men reported an average of 68.5 inches (± 3.7 , range= 54-79).
- The average client weight was calculated to be 194.5 pounds (± 50.7) with a range of 96-494 pounds. Women reported an average weight of 185.8 pounds (± 48.9 , range = 96-467) and men reported an average of 203.7 pounds (± 51.4 , range= 110-494).
- Body Mass Index (BMI) could be calculated for 86% of the respondents. The average BMI for clients was calculated as 31.29 (± 7.8) with a range of 14.9-72.3. Women had an average BMI of 32.0 (± 8.2 , range = 17.0-72.3) and men had an average of 30.6 (± 7.2 , range= 14.9-70.9).
- According to the Centers for Disease Control and Prevention, BMI categories for adults (ages 20 and older) are as follows: Underweight: Below 18.5, Normal: 18.5 – 24.9, Overweight: 25.0 – 29.9, Obese: 30.0 and above. Thus, the averages reported here all fall into the Obese category.
 - 17.2% of respondents fell into the Underweight or Normal BMI categories
 - 32.0% of respondents fell into the Overweight BMI category
 - 50.2% of respondents fell into the Obese BMI category

Figure 3: Body Mass Index for 1124 DMHAS Clients

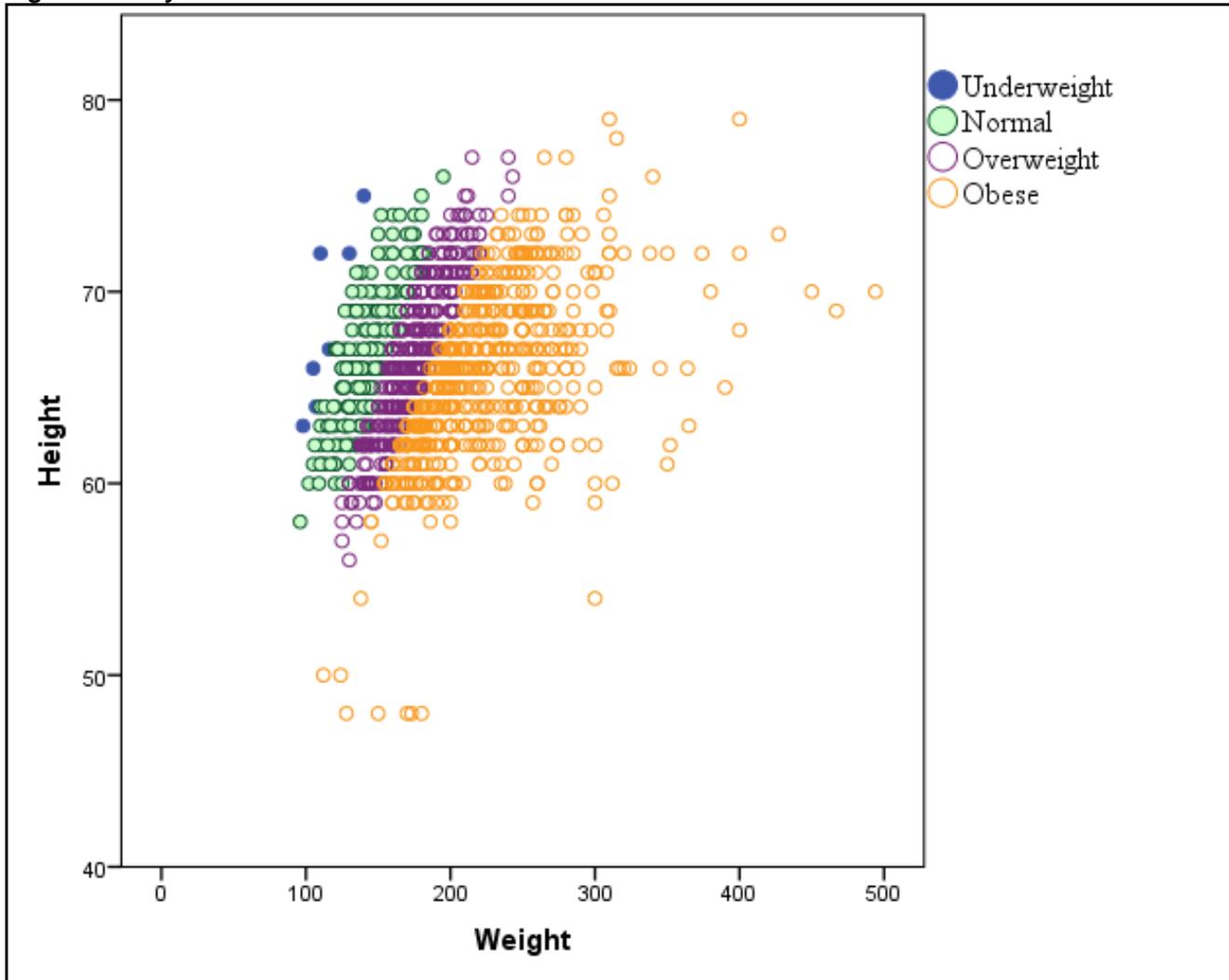
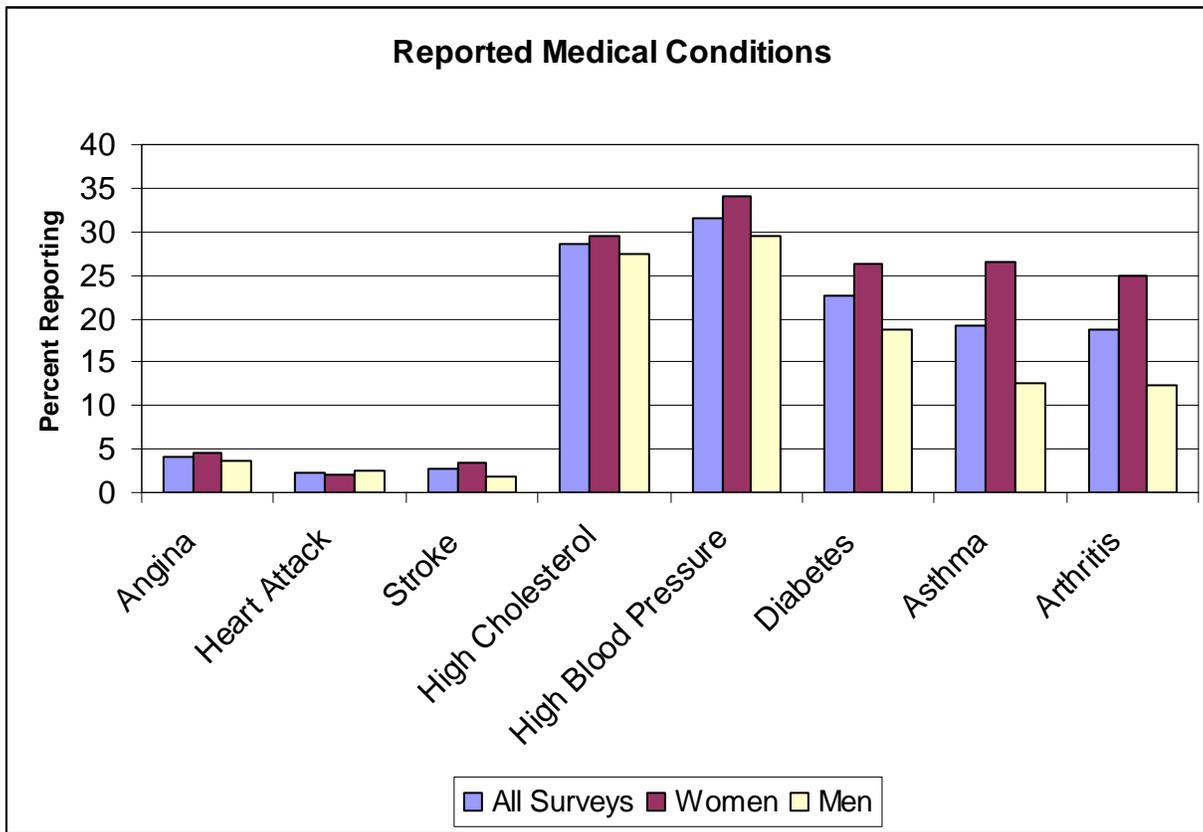


Figure 4: Reported Medical Conditions



- High blood pressure and high cholesterol were reported by more than one quarter of the clients surveyed. Both conditions were reported slightly more frequently by women.
- More than 25% of the women surveyed also reported being told that they had diabetes, asthma, or arthritis.
- Heart attack was the only medical condition for which men reported a diagnosis more frequently than women.
- Angina, heart attack, and stroke were each reported by fewer than 5% of the clients surveyed.
- Just over a third (37%) of the clients surveyed did not report having been told that they had any of the above medical conditions.
 - 27% of clients reported having one of the diagnoses
 - 17% of clients reported having two of the diagnoses
 - 10% of clients reported having three of the diagnoses
 - 6% of clients reported having four of the diagnoses
 - 3% of clients reported having five or more of the diagnoses
- A comparison of smokers versus non-smokers revealed that smokers more frequently reported having asthma compared to non-smokers. For all other medical conditions, smokers reported an equal or lower frequency of diagnosis than non-smokers.
 - Just over half (50.2%) of the clients surveyed indicated that they do not smoke, while 44.1% of the clients indicated that they did smoke.
 - 72% of smokers report smoking every day
 - 28% smokers report smoking some days
- In terms of general health, 35% of clients reported their general health to be 'Excellent' or 'Very Good'; 38% reported their general health as 'Good'; and 28% reported their general health as 'Fair' or 'Poor'.

- When asked about physical health and injuries, 47% of the clients who answered the question indicated that they had zero days in the last 30 days in which their physical health was not good.
 - 25% of clients reported 1-7 physically unhealthy days
 - 8% reported 8-14 physically unhealthy days
 - 8% reported 15-21 physically unhealthy days
 - 12% reported 22-30 physically unhealthy days, including 10% who indicated that every day in the last 30 days was a physically unhealthy day
- 87% of the respondents answered a question about how many alcoholic drinks they have at one sitting.
 - 81% of the clients appeared to indicate that they do not drink alcohol by giving an answer of zero.
 - 10.2% of clients reported that when they drink they have 1-2 drinks
 - 4.1% of clients reported consuming 4-5 drinks on days that they do drink
 - 3.3% of clients report consuming 5-10 drinks
 - 0.9% of clients report drinking more than 10 drinks per day on days that they do drink

Mental Health

When asked about mental health, including stress, depression, and problems with emotions, 34% of the clients who answered the question indicated that they had zero days in the last 30 days in which their mental health was not good.

- 25% of clients reported 1-7 mentally unhealthy days
- 11% reported 8-14 mentally unhealthy days
- 12% reported 15-21 mentally unhealthy days
- 14% reported 22-30 mentally unhealthy days, including 11% who indicated that every day in the last 30 days was a mentally unhealthy day

Table 14: Health Outcomes Summary Data by Gender

	All Surveys					Women					Men				
	N	Min	Max	Mean	Std. Dev	N	Min	Max	Mean	Std. Dev	N	Min	Max	Mean	Std. Dev
Height	1173	48	79	66.2	4.21	594	48	74	64	3.37	553	54	79	68.5	3.74
Weight	1146	96	494	194.5	50.69	577	96	467	185.8	48.88	544	110	494	203.7	51.44
BMI Score	1124	14.9	72.3	31.3	7.75	567	16.9	72.3	32	8.17	532	14.9	70.9	30.6	7.23
Physically unhealthy days	1164	0	30	6.5	9.78	594	0	30	7.6	10.16	542	0	30	5.2	9.05
Mentally unhealthy days	1177	0	30	8.4	10.13	598	0	30	8.9	9.93	552	0	30	7.9	10.4
Activity limitation days	1302	0	30	5.4	8.83	653	0	30	6.3	9.08	618	0	30	4.6	8.53
Drinks per Sitting	1133	0	38	0.7	2.46	578	0	20	0.5	1.87	526	0	38	1	2.98

Women tended to report more unhealthy and activity limitation days than men; however, men tended to report more drinks per sitting than women.

Table 15: Health Outcomes Summary Data, Non-Smoker vs. Smoker

	Non-Smokers					Smokers				
	N	Min	Max	Mean	Std. Dev	N	Min	Max	Mean	Std. Dev
Height	602	48	77	65.8	4.27	507	50	79	66.66	4.1
Weight	581	105	494	195.4	53.12	503	96	400	194.49	48.46
BMI Score	575	14.92	72.33	31.75	8.22	488	17.36	66.12	30.81	7.22
Physically unhealthy days	595	0	30	5.45	8.81	513	0	30	7.79	10.63
Mentally unhealthy days	601	0	30	7.58	9.65	520	0	30	9.46	10.67
Activity limitation days	654	0	30	5.02	8.45	574	0	30	6.08	9.28
Drinks per Sitting	578	0	38	0.43	2.067	501	0	20	1.03	2.766

Smokers tended to report more unhealthy days, whether physical or mental, and also tended to report more limited activity days per month. Additionally, they tended to report more drinks per sitting than non-smokers.

Discussion

Using Results for Local Evaluation and Planning

Veteran readers of the annual DMHAS Consumer Survey Report will note that overall, results remain fairly static from year to year, although generally, satisfaction is trending upward. The Outcomes and Recovery domains remain the most challenging for our system. Future analysis of health status and quality of life and their impact on these domains is needed. We encourage the use of the optional quality of life and health outcomes tools so that we can all benefit from the more nuanced picture they can reveal.

As in previous years, we suggest that providers review not only the domain results, but the results for individual questions, as well. Are there any particular items that seem to be particularly problematic, or satisfactory? Have there been any changes from year to year? Is it possible that results have remained too stable?

Consumer comments can sometimes yield the best feedback, particularly on areas that are not directly addressed by the MHSIP survey – for example, staffing and facilities.

Incorporation of Consumer Survey Results in Provider Quality Dashboard Reports

Over the past five years, DMHAS has made significant strides towards developing an effective continual feedback loop with the provider community. The Provider Quality Dashboard Reports made their debut in the first quarter in FY 2013, incorporating Consumer Survey domain results. An example is provided below, with identifying information redacted.

Figure 5: Sample from Provider Quality Dashboard Report



Note that the information used in the FY 2012 year end report is from the previous year's completed survey cycle. The results from the FY 2012 survey (featured in this document) will serve as the basis for this metric in Provider Quality Dashboards for FY 2013.

Because the Consumer Satisfaction Survey data will remain static for the entire year, it will be essential for providers to carefully plan the Consumer Survey process in order to ensure the collection of high quality, representative information. This is a provider level measure.

Adjusting Benchmarks

As shown in the above figure, the current benchmark for all domains of the Consumer Satisfaction Survey is 80%, but as seen in the figure above, state averages per domain and per level of care do vary. Consequently, it is very likely that DMHAS will be revising satisfaction benchmarks in the near future, with the assistance of community stakeholders. We

feel that in addition to setting realistic, attainable goals, this action will inject some dynamism into this annual process, and look forward to collaborating with our provider partners now and in the future.

Appendices

Appendix 1.1: DMHAS Consumer Survey Memorandum FY 2012



DANNEL P. MALLOY
GOVERNOR

STATE OF CONNECTICUT DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES

A Healthcare Service Agency



PATRICIA A. REHMER, MSN
COMMISSIONER

TO: DMHAS-OPERATED FACILITIES, LOCAL MENTAL HEALTH AUTHORITIES, AND PRIVATE NON-PROFIT PROVIDERS

FROM: JIM SIEMIANOWSKI, LICSW, DIRECTOR, EVALUATION, QUALITY MANAGEMENT, AND IMPROVEMENT DIVISION

SUBJECT: CONSUMER SURVEY FOR FISCAL YEAR 2012

DATE: SEPTEMBER, 2011

The DMHAS Consumer Survey for FY 2012 is ready to begin.

Please read the enclosures carefully, and distribute them to the people in your organization responsible for the Consumer Survey process. You can also find these documents on our website at this address:

<http://tinyurl.com/DMHASConsumerSurvey>.

As in previous years, you should calculate your sample size based upon an unduplicated client count for **3 months**, rather than for an entire fiscal year. Please use the unduplicated count for Quarter 1, FY11 (July 1, 2010 – September 30, 2010). Detailed instructions for calculating sample size may be found here:

<http://www.ct.gov/dmhas/lib/dmhas/consumersurvey/instructions.pdf>.

The final deadline for survey data submission will be June 30, 2012. Please try to begin the survey process as early as possible, so that your agency has a representative sample, as well as to reduce stress and burden. The Consumer Survey Instructions, which may be found at the web link above, offer tips that may assist you.

Please make every effort to ensure that relevant staff are set up to perform data entry well before the survey due date. As in previous years, data is to be entered into the Consumer Survey application, available through the old DPAS system (not the new DDaP system.) Consumer Survey access requests and password reset requests should be directed to Karin Haberlin at Karin.Haberlin@po.state.ct.us.

As in past years, all materials related to the Consumer Survey for FY 2012 will be posted on the DMHAS website at <http://www.ct.gov/dmhas>, with a link under "Featured Links", or by direct link to <http://tinyurl.com/DMHASConsumerSurvey> (link redirects to the Consumer Survey site.)

Please note that the DMHAS Provider Process Summary Form is no longer required. Thank you for your cooperation in past years with supplying this information.

I want to thank you for your ongoing commitment to quality in the services you provide to the people in recovery throughout the state of Connecticut. The Consumer Survey provides us with crucial information, directly from the people we serve. It is an irreplaceable component of our quality improvement efforts.

Appendix 1.2: DMHAS Consumer Survey Cover Letter to Consumers FY 2012



DANNEL P. MALLOY
GOVERNOR

STATE OF CONNECTICUT
DEPARTMENT OF MENTAL HEALTH AND
ADDICTION SERVICES

A Healthcare Service Agency



PATRICIA A. REHMER, MSN
COMMISSIONER

September 1, 2011

Dear Program Participant:

We invite you to join our annual consumer satisfaction survey. **You decide if you want to take part**, and which questions to answer. The survey is anonymous. You will not be asked for your name or anything else that identifies you. Your agency will do its best to keep your answers private.

Please give your honest opinion of services. We appreciate your time and effort, and look forward to using the information to improve services for you.

Thank you!

Jim Siemianowski, LCSW
Director, Evaluation, Quality Management, and Improvement Division
Department of Mental Health and Addiction Services

Appendix 1.3: DMHAS Consumer Survey Instrument FY 2012

Agency	Program	Date Completed
--------	---------	----------------

For each box, put an X in the circle that applies to you.

Gender <input type="radio"/> Male <input type="radio"/> Female	Age <input type="radio"/> 20 and under <input type="radio"/> 21-24 <input type="radio"/> 25-34 <input type="radio"/> 35-54 <input type="radio"/> 55-64 <input type="radio"/> 65 and older	Primary reason for receiving services <input type="radio"/> Emotional/Mental Health <input type="radio"/> Alcohol or Drugs <input type="radio"/> Both Emotional/Mental Health and Alcohol or Drugs
Race <input type="radio"/> White <input type="radio"/> Black/ African American <input type="radio"/> American Indian/Alaskan <input type="radio"/> Native Hawaiian/ Pacific Islander <input type="radio"/> Asian <input type="radio"/> Mixed <input type="radio"/> Other	Ethnicity <input type="radio"/> Puerto Rican <input type="radio"/> Mexican <input type="radio"/> Other Hispanic or Latino <input type="radio"/> Not Hispanic	Length of Service <input type="radio"/> Less than 1 year <input type="radio"/> 12 months to 2 years <input type="radio"/> 2 years to 5 years <input type="radio"/> More than 5 years

For each item, circle the answer that matches your view.		Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Not Applicable
1.	I like the services that I received here.	SA	A	N	D	SD	NA
2.	If I had other choices, I would still get services from this agency.	SA	A	N	D	SD	NA
3.	I would recommend this agency to a friend or family member.	SA	A	N	D	SD	NA
4.	The location of services was convenient (parking, public transportation, distance, etc.)	SA	A	N	D	SD	NA
5.	Staff was willing to see me as often as I felt was necessary.	SA	A	N	D	SD	NA
6.	Staff returned my calls within 24 hours.	SA	A	N	D	SD	NA
7.	Services were available at times that were good for me.	SA	A	N	D	SD	NA
8.	Staff here believes that I can grow, change, and recover.	SA	A	N	D	SD	NA
9.	I felt comfortable asking questions about my services, treatment or medication	SA	A	N	D	SD	NA
10.	I felt free to complain.	SA	A	N	D	SD	NA
11.	I was given information about my rights.	SA	A	N	D	SD	NA
12.	Staff told me what side effects to watch out for.	SA	A	N	D	SD	NA
13.	Staff respected my wishes about who is, and who is not, to be given information about my treatment and/or services.	SA	A	N	D	SD	NA
14.	Staff was sensitive to my cultural/ethnic background (race, religion, language, etc.)	SA	A	N	D	SD	NA
15.	Staff helped me obtain information I needed so that I could take charge of managing my illness.	SA	A	N	D	SD	NA

For each item, circle the answer that matches your view.		Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Not Applicable
16.	My wishes are respected about the amount of family involvement I want in my treatment.	SA	A	N	D	SD	NA
<i>As a result of services I have received from this agency:</i>							
17.	I deal more effectively with daily problems	SA	A	N	D	SD	NA
18.	I am better able to control my life.	SA	A	N	D	SD	NA
19.	I am better able to deal with crisis.	SA	A	N	D	SD	NA
20.	I am getting along better with my family.	SA	A	N	D	SD	NA
21.	I do better in social situations.	SA	A	N	D	SD	NA
22.	I do better in school and/or work.	SA	A	N	D	SD	NA
23.	My symptoms are not bothering me as much.	SA	A	N	D	SD	NA
In general . . .							
24.	I am involved in my community (for example, church, volunteering, sports, support groups, or work).	SA	A	N	D	SD	NA
25.	I am able to pursue my interests.	SA	A	N	D	SD	NA
26.	I can have the life I want, despite my disease/disorder.	SA	A	N	D	SD	NA
27.	I feel like I am in control of my treatment.	SA	A	N	D	SD	NA
28.	I give back to my family and/or community.	SA	A	N	D	SD	NA

Is there anything else that you would like to tell us about your services here?

Appendix 1.4: DMHAS Quality of Life Instrument FY 2012

Agency	Program	Date Completed
---------------	----------------	-----------------------

For each box, put an X in the circle that applies to you.

Gender <input type="radio"/> Male <input type="radio"/> Female	Age <input type="radio"/> 20 and under <input type="radio"/> 21-24 <input type="radio"/> 25-34 <input type="radio"/> 35-54 <input type="radio"/> 55-64 <input type="radio"/> 65 and older	Primary reason for receiving services <input type="radio"/> Emotional/Mental Health <input type="radio"/> Alcohol or Drugs <input type="radio"/> Both Emotional/Mental Health and Alcohol or Drugs
Race <input type="radio"/> White <input type="radio"/> Black/ African American <input type="radio"/> American Indian/Alaskan <input type="radio"/> Native Hawaiian/ Pacific Islander <input type="radio"/> Asian <input type="radio"/> Mixed <input type="radio"/> Other	Ethnicity <input type="radio"/> Puerto Rican <input type="radio"/> Mexican <input type="radio"/> Other Hispanic or Latino <input type="radio"/> Not Hispanic	Length of Service <input type="radio"/> Less than 1 year <input type="radio"/> 12 months to 2 years <input type="radio"/> 2 years to 5 years <input type="radio"/> More than 5 years

Please read each question, assess your feelings, and circle the number on the scale that gives the best answer for you for each question.

<i>(Please circle the number)</i>					
	Very poor	Poor	Neither poor nor good	Good	Very Good
1. How would you rate your quality of life?	1	2	3	4	5

<i>(Please circle the number)</i>					
	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very satisfied
2. How satisfied are you with your health?	1	2	3	4	5

The following questions ask about **how much** you have experienced certain things in the last two weeks.

<i>(Please circle the number)</i>					
	Not at all	A little	A moderate amount	Very much	An extreme amount
3. To what extent do you feel that physical pain prevents you from doing what you need to do?	1	2	3	4	5
4. How much do you need any medical treatment to function in your daily life?	1	2	3	4	5
5. How much do you enjoy life?	1	2	3	4	5

<i>(Please circle the number)</i>					
Not at all	A little	A moderate amount	Very much	An extreme amount	
6. To what extent do you feel your life to be meaningful?	1	2	3	4	5

<i>(Please circle the number)</i>					
Not at all	Slightly	A Moderate amount	Very much	Extremely	
7. How well are you able to concentrate?	1	2	3	4	5
8. How safe do you feel in your daily life?	1	2	3	4	5
9. How healthy is your physical environment?	1	2	3	4	5

The following questions ask about **how completely** you experience or were able to do certain things in the last two weeks.

<i>(Please circle the number)</i>					
Not at all	A little	Moderately	Mostly	Completely	
10. Do you have enough energy for everyday life?	1	2	3	4	5
11. Are you able to accept your bodily appearance?	1	2	3	4	5
12. Have you enough money to meet your needs?	1	2	3	4	5
13. How available to you is the information that you need in your day-to-day life?	1	2	3	4	5
14. To what extent do you have the opportunity for leisure activities?	1	2	3	4	5

<i>(Please circle the number)</i>					
Very poor	Poor	Neither poor nor well	Well	Very well	
15. How well are you able to get around?	1	2	3	4	5

The following questions ask you to say how **good** or **satisfied** you have felt about various aspects of your life over the last two weeks.

		<i>(Please circle the number)</i>				
		Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very satisfied
16.	How satisfied are you with your sleep?	1	2	3	4	5
17.	How satisfied are you with your ability to perform your daily living activities?	1	2	3	4	5
18.	How satisfied are you with your capacity for work?	1	2	3	4	5
19.	How satisfied are you with your abilities?	1	2	3	4	5
20.	How satisfied are you with your personal relationships?	1	2	3	4	5
21.	How satisfied are you with your sex life?	1	2	3	4	5
22.	How satisfied are you with the support you get from your friends?	1	2	3	4	5
23.	How satisfied are you with the conditions of your living place?	1	2	3	4	5
24.	How satisfied are you with your access to health services?	1	2	3	4	5
25.	How satisfied are you with your mode of transportation?	1	2	3	4	5

The following question refers to **how often** you have felt or experienced certain things in the last two weeks.

		<i>(Please circle the number)</i>				
		Never	Seldom	Quite often	Very often	Always
26.	How often do you have negative feelings, such as blue mood, despair, anxiety, depression?	1	2	3	4	5

Did someone help you to fill out this form? *(Please circle Yes or No)*

Yes	No
-----	----

Thank you for your help

Appendix 2: Survey Sample Size and Number of Surveys Submitted by Provider, FY 2012

Provider	Consumers Treated in Surveyed LOCs from 7/1/10-9/30/10	Proposed Sample Size (95% CL, 7% CI)	Surveys Submitted in SFY 2012	Surveys as % of Sample Size
Ability Beyond Disability Institute	161	89	107	121%
Advanced Behavioral Health	1672	176	149	85%
Alcohol & Drug Recovery Center-ADRC	348	126	259	206%
APT Foundation Inc	2664	183	546	299%
Artreach Inc.	27	24	77	323%
Backus Hospital	613	149	325	219%
Birmingham Group Health Services, Inc. ⁸	1071	166	123	74%
Bridge House	202	100	222	223%
BRIDGES	1119	167	276	165%
Bristol Hospital	132	79	147	186%
Capitol Region Mental Health Center	1240	169	189	112%
Catholic Charities of Fairfield County Inc.	245	109	207	190%
Catholic Charities- Waterbury	171	92	141	154%
Catholic Charities-Hartford Inst Hispanic Studies	370	128	159	124%
Center for Human Development	208	101	157	155%
Central Naugatuck Valley (CNV) Help Inc.	92	63	212	337%
Charlotte Hungerford Hospital	1209	169	191	113%
Chemical Abuse Services Agency (CASA)	412	133	493	371%
Chrysalis Center Inc.	760	156	260	167%
Columbus House	108	70	141	202%
Community Enterprises Inc.	59	46	69	152%
Community Health Resources Inc.	2795	183	909	496%
Community Health Services Inc.	310	120	0	0%
Community Mental Health Affiliates	1035	165	571	346%
Community Prevention and Addiction Services-CPAS	344	125	75	60%
Community Renewal Team (CRT)	211	102	117	115%
Connecticut Counseling Centers Inc.	1153	168	426	254%
Connecticut Mental Health Center	2584	182	776	426%
Connecticut Renaissance Inc.	182	95	140	148%
Connecticut Valley Hospital	203	100	119	119%
Connection Inc	893	161	639	397%
Continuum of Care	214	103	162	158%
Cornell Scott-Hill Health Corporation	790	157	133	85%
Crossroad Inc	120	75	84	113%
Danbury Hospital	526	143	123	86%
Day Kimball Hospital	197	99	7	7%
Dixwell/Newhallville Community MHS Inc.	177	93	103	110%
Easter Seal Goodwill Ind. Rehab. Center Inc.	92	63	43	68%
Easter Seals of Greater Hartford Rehab Center Inc.	59	46	69	152%
Fairfield Community Services Inc.	86	60	18	30%
Family & Children's Agency Inc	397	131	143	109%
Farrell Treatment Center	165	90	40	45%

⁸ Birmingham Group Health Services and Harbor Health Services merged in early 2012 and are now known as BHCare. They were analyzed separately for this report; however, this "split" is artificial and is reflected in the differing participation rates. BHCare will be evaluated as one provider in FY2013.

Provider	Consumers Treated in Surveyed LOCs from 7/1/10-9/30/10	Proposed Sample Size (95% CL, 7% CI)	Surveys Submitted in SFY 2012	Surveys as % of Sample Size
Fellowship Inc.	313	121	262	217%
FSW Inc.	69	51	63	123%
Gilead Community Services Inc.	268	113	174	153%
Goodwill Industries of Western CT Inc.	88	61	126	207%
Hall Brooke Foundation Inc.	66	50	62	125%
Harbor Health Services	1196	169	539	320%
Hartford Behavioral Health	603	148	208	140%
Hartford Dispensary	3842	187	1260	675%
Hartford Hospital	200	99	94	95%
Hospital of St. Raphael	426	134	152	113%
Human Resource Development Agency	373	129	131	102%
Inter-Community Mental Health Group Inc.	1182	168	206	122%
Kennedy Center Inc.	212	102	127	124%
Keystone House Inc.	137	81	122	151%
Kuhn Employment Opportunities Inc.	111	71	52	73%
Laurel House	254	111	175	158%
Liberation Programs (LMG)	887	161	246	153%
Marrakech Day Services	135	80	105	131%
McCall Foundation Inc	225	105	170	162%
Mental Health Association of CT Inc.	668	152	494	326%
Mercy Housing and Shelter Corporation	108	70	121	173%
Middlesex Hospital Mental Health Clinic	174	92	97	105%
Midwestern CT Council on Alcoholism (MCCA)	723	154	309	200%
Morris Foundation Inc	861	160	897	561%
My Sisters' Place	105	69	36	52%
Natchaug Hospital	208	101	317	313%
New Directions Inc of North Central Conn.	224	105	371	354%
New Haven Home Recovery	38	32	35	109%
New Milford Hospital	330	123	135	110%
Norwalk Hospital	1140	167	336	201%
Optimus Health Care-Bennett Behavioral Health	941	162	474	292%
Pathways Inc.	75	54	99	182%
Perception Programs Inc	381	130	244	188%
Prime Time House Inc.	220	104	124	119%
Regional Network of Programs	1720	176	1031	586%
Reliance House	424	134	155	115%
River Valley Services	502	141	274	194%
Rushford Center	2165	180	319	177%
SCADD	371	128	267	208%
SE Mental Health Authority	355	127	145	115%
Shelter for the Homeless Inc.	62	47	82	173%
Sound Community Services Inc.	1437	173	325	188%
St Luke's Community Services Inc.	78	56	70	125%
St. Mary's Hospital Corporation	1009	164	201	122%
St. Vincent DePaul Mission of Waterbury, Inc.	86	60	63	105%
St. Vincent DePaul Place Middletown, Inc.	53	42	46	110%
Stafford Family Services	64	48	70	145%
Supportive Environmental Living Facility Inc-SELF	50	40	34	85%

Provider	Consumers Treated in Surveyed LOCs from 7/1/10-9/30/10	Proposed Sample Size (95% CL, 7% CI)	Surveys Submitted in SFY 2012	Surveys as % of Sample Size
SW CT MH Network	2058	179	382	213%
United Community and Family Services	63	48	179	374%
United Services Inc.	2568	182	460	253%
W. CT MH Network	992	164	725	443%
Waterbury Hospital Health Center	1229	169	139	82%
Wheeler Clinic	1364	171	269	157%
Yale University - WAGE	42	35	82	236%
Yale University-Behavioral Health	270	114	120	105%
ACCESS Agency	0	0	4	
Centro Renacer of CT, Inc. (formerly Hogar Crea Inc)	12	0	25	
CommuniCare, Inc.	0	0	79	
Community Health Center Inc.	23	0	13	
Coordinating Council for Children in Crisis	19	0	13	
CTE Inc. Viewpoint Recovery Program	12	0	24	
Evergreen Family Oriented Tree, Inc.	0	0	1	
Family Intervention Center	0	0	133	
Guardian Ad Litem	0	0	89	
Hands on Hartford	0	0	8	
Immaculate Conception Inc.	0	0	46	
Interlude Inc.	20	0	23	
John J. Driscoll United Labor Agency Inc.	0	0	29	
Leeway, Inc.	14	0	29	
Liberty Community Services	25	0	29	
Operation Hope of Fairfield Inc.	24	0	19	