## Massachusetts Department of Mental Health

## Consumer Satisfaction Survey Report ACCS, PACT & CYF Findings 2022



Prepared by:

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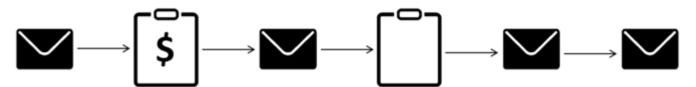


## **Survey Purpose**

- Since 2015, the Massachusetts Department of Mental Health (MA DMH) has contracted with JSI of Boston, MA to conduct the Consumer Satisfaction Surveys.
- Adult clients and family members of child/youth clients receiving mental health services were surveyed.
- Evaluated client satisfaction in various domains, such as service access, quality,
   participation with treatment, and perception of impact of services on outcomes.
- Results can be used to identify areas for quality improvement.

## **Survey Design and Data Collection**

- SAMHSA's Mental Health Statistical Improvement Program (MHSIP) tool items and state-added questions
- Survey languages
  - Adult (7): English, Spanish, Chinese Simplified, Chinese Traditional, Haitian Creole, Khmer, and Vietnamese
  - Family (2): English and Spanish
- Data collection (mail and online survey)
  - Incentive: up-front \$5 cash incentive included with the first survey
  - Schedule: pre-notification letters are mailed in April 2022, and the survey was closed end of September
  - 6 contacts: pre-notification letter, first survey packet, first reminder letter, second survey packet,
     second reminder letter, third reminder letter



#### **Satisfaction Domains: ACCS & PACT**

#### 2022 Adult Consumer Survey Domains (\*57 items)

- Access (6)
- Person-centered Planning (8)
- Quality and Appropriateness (9)
- Social Connectedness (6)
- Functioning (7)
- Outcomes (7)
- General Satisfaction (3)
- Health and Wellness (5)
- Self-Determination (6)
- +demographics and behavioral outcome questions

In parentheses () are the number of items in the domain. Cluster analyses were conducted to determine items in each domain.

#### Example of **items** within domains

#### Access

Staff returned my call in 24 hours

#### Person-Centered Planning

 My beliefs were respected in my treatment and treatment plan.

#### Social Connectedness

I feel I belong to my community

#### Outcomes

I am better able to deal with crisis



#### **Satisfaction Domains: CYF**

#### 2022 Family Member Consumer Survey Domains (\*54 items)

- Availability of Outpatient Clinicians (2)
- Availability of DMH Services (5)
- Family Involvement in Treatment Planning (5)
- Post-DMH Service Care and Planning (5)
- Respect Perceived during Service Delivery (5)
- Safety Perceived during Service Delivery (3)
- Sensitivity and Flexibility of Services (6)
- Outcomes Symptoms & Functioning (9)
- General Outcomes & Satisfaction (10)
- Parent Social Connectedness (4)
- +demographics & behavioral outcome questions

In parentheses () are the number of items in the domain. Cluster analyses were conducted to determine items in each domain.

#### Example of **items** within domains

#### Availability of DMH Services

 My child was able to get all the services I thought they needed

#### Family Involvement...

 Staff and I worked together to develop a plan that best met my child's needs

#### Respect Perceived...

Staff treated my child with respect

#### Outcomes

 My child's symptoms are not bothering them as much

Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A
0	0	0	0	0	0

## **Survey Populations & Response Rates**

## **Adult Community Clinical Services**

 Stratified random sample of 75% of adult clients receiving services from one of 36 DMH contracted ACCS service providers

## Program of Assertive Community Treatment

 100% of adult clients receiving services from one of 19 DMH contracted PACT service providers

## Children, Youth and Family (CYF) Services

- 100% of parent/guardian of children/youth clients receiving:
  - ■Case Management
  - ■Flex Teams
  - IntensiveCommunity Services

Response Rates 1,582

29%

297

41%

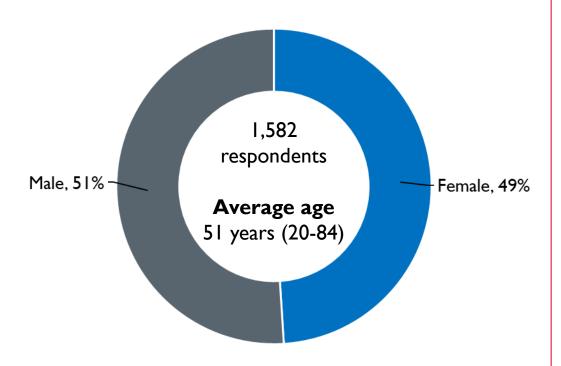
386

# Adult Community Clinical Services Adult Consumer Survey 2022

1,582 Respondents

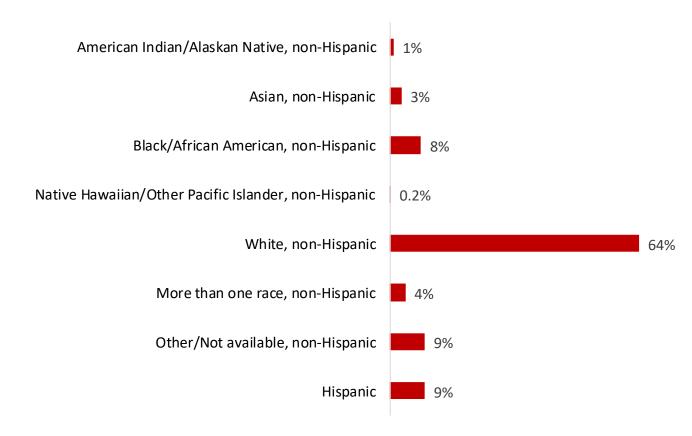
## 2022 Adult ACCS: Demographics

#### Gender



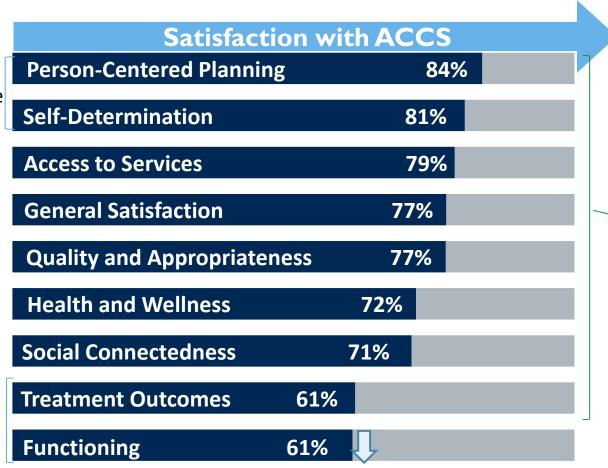
- Males and females were equally represented.
- Respondents were 51 years old on average (males, 50; females, 52).

#### Race/Ethnicity



#### 2022 Adult ACCS: Domain Results

**80% or more** of clients responded positively in 2 of the nine areas of satisfaction



**6 out of 10** clients were satisfied with functioning and treatment outcomes

No change from 2020 & 2021

Lower than 2021

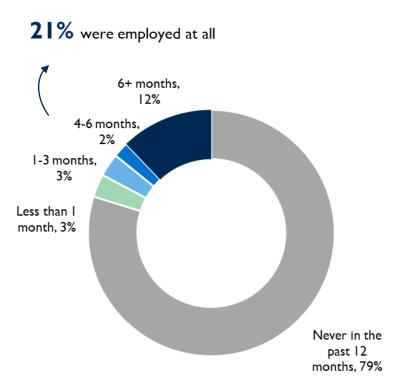
## 2022 Adult ACCS: Domain Results by DMH Area

Area of Satisfaction	Statewide % N=1,582	BAO n=229	CAO n=308	NAO n=397	SAO n=343	WAO n=305
Access*	78.7	78.9	78.2	72.4	85.9	<b>79.</b> I
Person-Centered Planning	83.6	83.6	83.2	81.1	88.4	81.6
Quality and Appropriateness*	<b>77.</b> I	78.8	75.6	75.4	83.4	72.4
Health and Wellness	71.8	74.4	72.6	70.2	72.6	70
Social Connectedness	71.0	72.9	69.5	69	<b>73.</b> I	71.4
Self-Determination	80.5	81.8	80.6	79.4	83.5	77.4
Functioning*	60.5	68.6	59	53.7	63.8	61
Treatment Outcomes*	61.0	67.3	61.3	53.8	63.6	61.8
General Satisfaction*	77.2	77.7	78	72.5	83.8	74.8

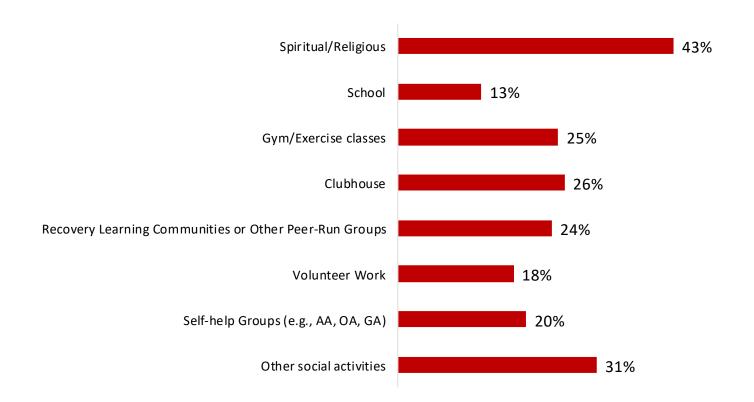
<sup>\*</sup>Statistically significant differences in domain scores across DMH Areas: p<0.05

#### 2022 Adult ACCS: Select Behavioral Outcomes

#### **Employment**

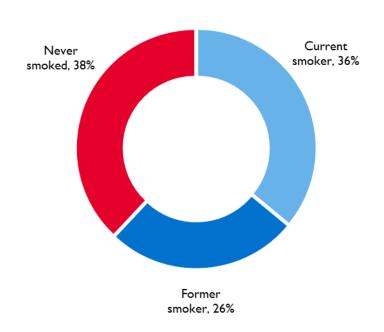


#### **Activity Involvement**



#### 2022 Adult ACCS: Select Behavioral Outcomes

#### **Smoking Status**

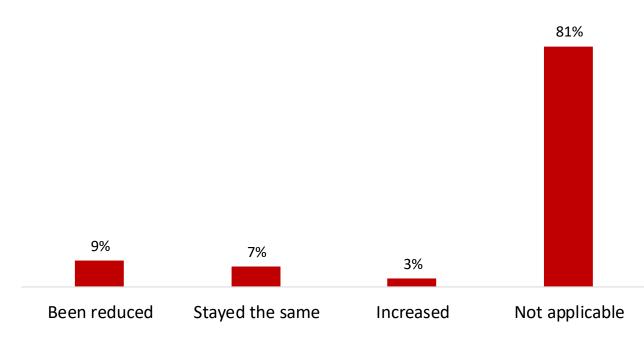


- 10% have used an e-cigarette or electronic "vaping" products in the past 30 days.
- Of current smokers or e-cigarette users, **46**% were thinking of quitting within the next 6 months.

#### **Police Arrests**

- **2**% arrested in the past 12 months
- 3% arrested in the 12 months prior to that
- 5% arrested in either of the last 2 years

Over the past 12 months, encounters with police have:



#### STAFF/SERVICES: GENERAL (29.4%)

- Having a person available to assist, answer questions, talk to, or give advice.
   Having someone to come see me every week.
- The staff who visit my house brighten my day.

## PROGRAMS (21.2%)

- The program has been exactly what I needed as an adult with mental health issues. They help me navigate through a problem or issue with no stress.
- The program saves lives

## CARE (14.2%)

- Having access to a therapist and a contact counselor. It creates more than one person to reach out to when in need of help.
- Workers are able to come to me or use Zoom, so I am not in dangerous, possibly triggering areas of my city. This has helped tremendously in my recovery.

## WELLNESS (11.2%)

- Assistance in encouraging and making it possible to be more engaged in my self-care.
- My ACCS provider
   was helpful using
   different mediums to
   connect with me like
   music and art.

#### QUALITY OF CARE (10.8%)

• My case manager has been utmost helpful in my recovery. He is always there and always willing to help even if it's not exactly his job. He's willing to do whatever he can whenever he can to help me.

#### NONE (22.9%)

- I don't know that the services I get aren't of help. I feel like I get good services.
- All of my services are helpful and none are least helpful.

#### STAFF/SERVICES: GENERAL (22.2%)

- The team model has been wildly ineffective for me versus having a single person to go to with all my questions and requests for support.
- The ACCS model. I am in need of more clinical services.

#### QUALITY OF CARE (19.7%)

- The program is run like a business and doesn't care about people like me.
- Staff is unprofessional and not trained properly to deal with mental health patients. I was treated very poorly from the people who I asked for help from. I am not better.

#### ACCESS TO CARE (16.4%)

- I can only see the social worker every 4-5 weeks at most. If I need some extra help with something, she is just too busy.
- We need more housing specialists.

## OF CARE (9.5%)

- High staff turnover makes it hard to build trust and relationships. Pay staff more so they stay.
- Not being able to see someone regularly and consistently.

#### ACCESS TO CARE (30.2%)

- More staff per client.
   I have been on a waiting list for several months. I hope I can get one soon.
- Don't overload the social worker so she is too busy to help! This became a big problem just this year.
- More flexible times.

#### QUALITY OF CARE (19.0%)

- Train staff on sensitivity and how to handle patients as equals and humans.
- Staff need DEI training so they can be more accepting and less racist.
   They also need a reminder on confidentiality.
- Having staff talk to all residents about realistic goals!

## NONE (18.3%)

- None. ACCS is an excellent, well managed program with skilled, caring, diligent staff.
- I am happy with the services I have received. There is nothing to improve.

#### STAFF/SERVICES: GENERAL (14.8%)

- To not have so many people meeting with me who have the same job criteria.
- Provide services that are more recovery based and strength based.

## OF CARE (12.8%)

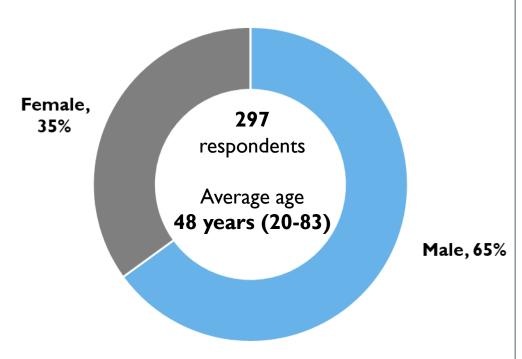
- Make sure that caseworkers are in for the long haul. As clients, we need consistency.
- More stability in DMH and less inconsistency. I've lost all my providers whom I've known for years.

# Program of Assertive Community Treatment Adult Consumer Survey 2022

297 Respondents

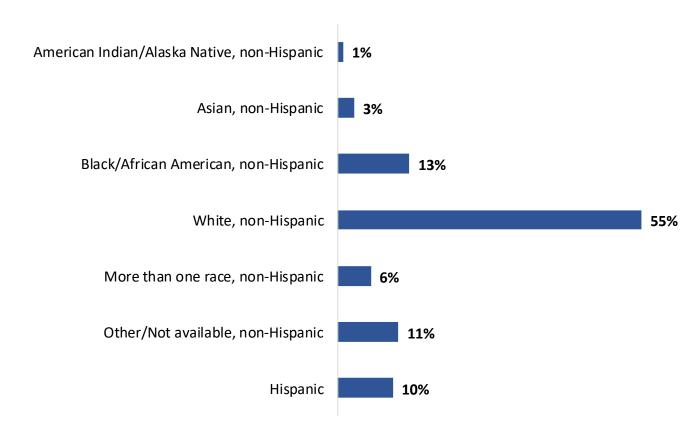
## 2022 Adult PACT: Demographics

#### **Gender**



- There were twice as many males represented compare to females (65% vs 35%).
- Respondents were 48 years old on average (males: 47; females: 51).

#### **Race/Ethnicity**



#### 2022 Adult PACT: Domain Results

**80% or more** of clients responded positively in 5 of the nine areas of satisfaction

Satisfaction	with PACT
Person-Centered Planning	85%
Access to Services	84%
Self-Determination	83%
General Satisfaction	82%
Quality and Appropriateness	80%
Health and Wellness	76%
Social Connectedness	75%
Functioning	71%
Treatment Outcomes	67%

Higher than 2021

#### More than two-thirds

were satisfied with functioning and treatment outcomes

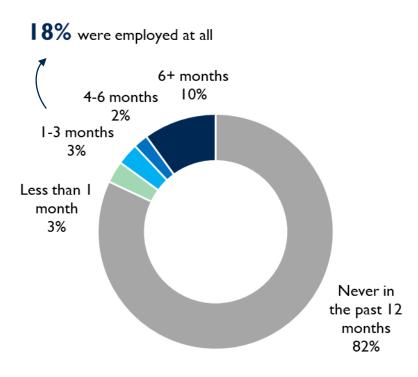
## 2022 Adult PACT: Domain Results by DMH Area

Area of Satisfaction	Statewide % N=297	BAO n=22	CAO n=56	NAO n=87	SAO n=128	WAO n=4
Access	83.6	68.2	81.1	84.7	87.8	-
Person-Centered Planning	85.3	76.2	86.5	85.9	87	-
Quality and Appropriateness	79.6	70	81.1	82. I	80	-
Health and Wellness	76. l	88.9	74	81	72.6	-
Social Connectedness	75.3	75	74. I	75.3	77.6	-
Self-Determination	83.0	76.2	84.9	88.2	80.8	-
Functioning	70.7	81.8	82.4	70	64.2	-
Treatment Outcomes	67.4	66.7	76	73.4	61.3	-
General Satisfaction*	<b>82.</b> I	63.6	83	81.5	86.4	-

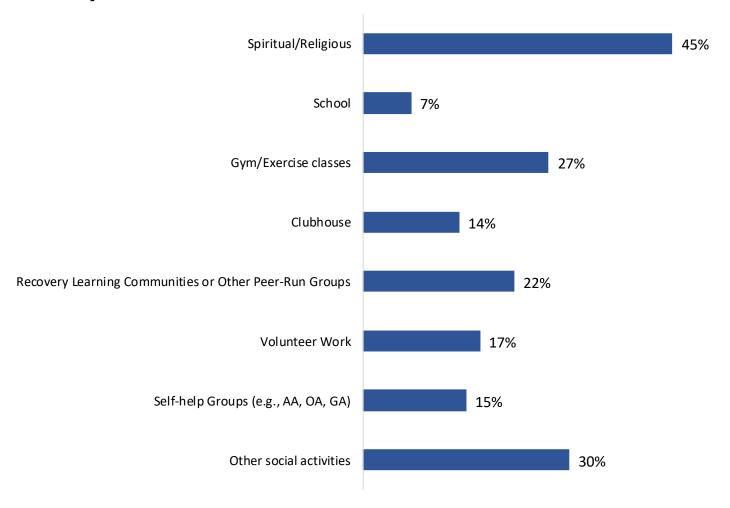
<sup>\*</sup>Statistically significant differences in domain scores across DMH Areas: p<0.05 WAO region not shown due to small sample size.

#### 2022 Adult PACT: Select Behavioral Outcomes

#### **Employment Status**

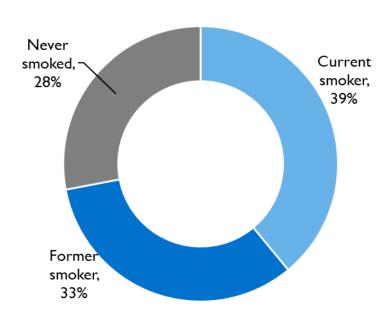


#### **Activity Involvement**



#### 2022 Adult PACT: Select Behavioral Outcomes

#### **Smoking Status**

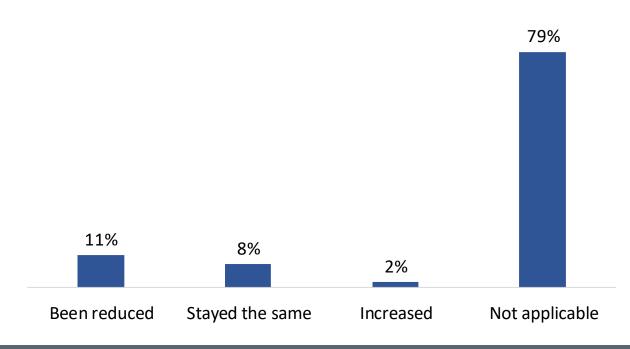


- 8% have used an e-cigarette or electronic "vaping" products in the past 30 days.
- Of current smokers or e-cigarette users, **48**% were thinking of quitting within the next 6 months.

#### **Police Arrests**

- **3**% arrested in the past 12 months
- 4% arrested in the 12 months prior to that
- 5% arrested in either of the last 2 years

Over the past 12 months, encounters with police have:



#### STAFF/SERVICES: GENERAL (38.0%)

- Talking with people and getting advice.
- The PACT team has been enormously helpful. I know that if I'm in crisis I can call them.

#### ACCESS TO CARE (22.7%)

 Being able to have staff reach out on Zoom so I could see them and feel like they were visiting with me when we couldn't meet in person helped me feel still very connected.

## **THERAPY** (15.3%)

- Therapy in the community— meeting with my therapist for social interaction and exposure therapy.
- The weekly visits of my therapist makes all the difference

## PROGRAMS (12.7%)

- I haven't fully recovered, but PACT has helped me.
- The PACT program is a phone call away at any time

## TRANSPORTATION (12.7%)

- Transportation for groceries and household items.
- Providing rides to important appointments with my PCP or psychiatrist.

## NONE (28.0%)

- None of my services have been least helpful. They all help.
- I can't say anything they offer is not helpful.
- All of the services work together for my well-being.

#### QUALITY OF CARE (17.3%)

- I'm extremely disappointed with my house apartment! I feel "forced" to move to where I am.
- The nurse practitioner doesn't listen and thinks I'm okay when I'm doing a lot worse and having suicidal thoughts.

#### ACCESS TO CARE (10.7%)

- The least helpful service has been not being physically possible to go to programs.
- Limited contact with my current peer specialist.

#### STAFF/SERVICES: GENERAL (9.3%)

 Some of the staff not helpful; they are not on my wavelength.

## MEDICATION (9.3%)

- My medication is too strong for me and causes me to drool, stagger, and drag my heels.
- Forced medication.

#### ACCESS TO CARE (28.7%)

- When a PACT staff leaves the job, it takes too long for the administration to find replacements. There is a current clinician vacancy for 1.5 years.
- Have more frequent weekly visits.

## NONE (24.5%)

- No changes—
  [PACT] is the best ever program. I've had many and none as caring as this team is for me.
- None, they do a great job already

#### QUALITY OF CARE (17.0%)

 More funding to pay employees better and to thoroughly do employee background checks.
 Some of the new hires think they can get paid just by showing up and not doing their jobs.

#### STAFF/SERVICES: GENERAL (13.8%)

- To be able to speak your opinion more often, even if it is the opposite of what staff thinks.
- Be more encouraging.

## COMMUNICATION (13.8%)

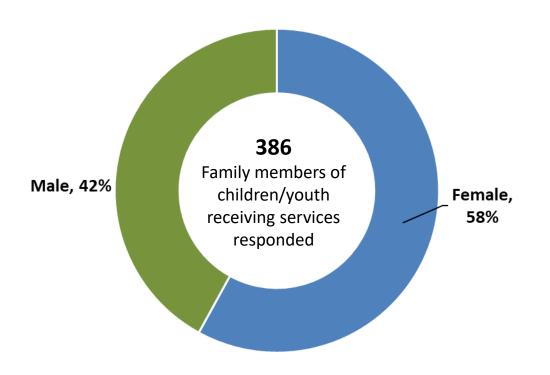
- Provide more information in general in print or through verbal explanation about what is out there to help.
- If staff would call to advise me of arrival ahead of time.

## Division of Children, Youth, and Family Services Family Member Survey 2022

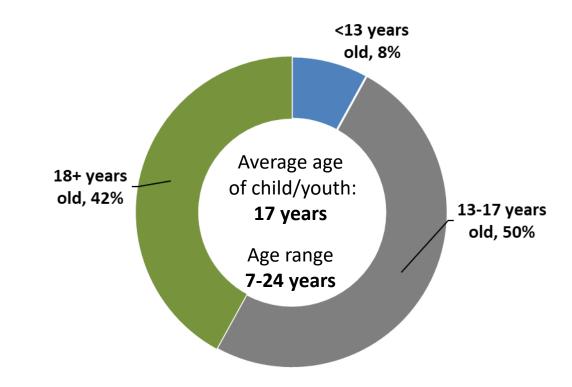
386 Family Member Respondents

## **2022 CYF: Demographics**

#### **G**ender

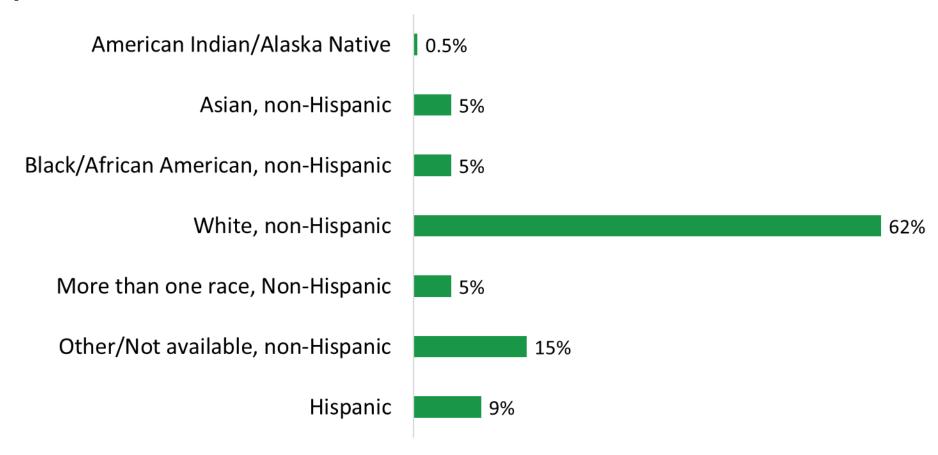


#### Age



## **2022 CYF: Demographics**

#### **Race/Ethnicity**



<sup>\*</sup>Based on DMH records.

### **2022 CYF: Other Background Information**

#### **Living Arrangements**

81% of children live with the respondent at the time of the survey

37% reported their child has lived elsewhere any time in the past 12 months

#### Among those children who have lived elsewhere:

- **62**% residential treatment program
- 43% hospital
- 22% both parents at the same time
- **9**% one parent
- 12% both parents alternating times
- 1% another family member

#### **2022 CYF: Domain Results**

**80% or more** of family members responded positively in 4 of the ten areas of satisfaction



About **two-thirds** were satisfied with post-DMH service care and availability of outpatient clinicians

Note: The safety perceived during service delivery domain is statistically significantly higher in 2022 (87% vs. 79% in 2020). There were no statistically significant differences in other domains, and findings were similar when compared to 2021.

## **2022 CYF: Domain Results by DMH Area**

Area of Satisfaction	Statewide % n=386	Boston (BAO) n=45	Central (CAO) n=97	Northeast (NAO) n=106	Southeast (SAO) n=79	Western (WAO) n=59
Availability of Outpatient Clinicians	62.9	66.7	59.0	66.7	62.2	61.7
Availability of DMH Services~	77.3	77.5	76.3	83.8	79.5	64.3
Family Involvement in Treatment Planning*	81.1	81.0	79.1	91.4	80.6	67.9
Post-DMH Service Care and Planning	64.8	70.7	59.8	61.9	76.0	58.9
Respect Perceived during Service Delivery*	92.0	92.9	91.7	98.0	89.6	84.5
Safety Perceived during Service Delivery	87.2	86.5	88.0	92.4	85.7	78.7
Sensitivity and Flexibility of Services	93.5	97.5	92.0	94.3	92.9	92.6
Symptoms & Functioning	53.9	60.5	48.9	54.5	56.6	52.6
General Outcomes & Satisfaction~	71.6	69.8	67.7	81.2	73.4	59.6
Parent Social Connectedness	74.4	65.1	72.3	80.2	74.0	75.0

<sup>\*</sup>p<0.05 indicates statistically significant differences by DMH Area; ~p<0.10. A DMH Area-specific score in bold indicate a statistically significantly higher (green) or lower (red) score compared to all other areas for that domain.

## 2022 CYF: Domain Results by Primary Service

Area of Satisfaction	Statewide % n=386	Case Management n=75	Flex Teams n=220	ICS n=91
Availability of Outpatient Clinicians	62.9	60.0	63.8	63.5
Availability of DMH Services*	77.3	65.7	83.5	71.8
Family Involvement in Treatment Planning*	81.1	72.1	86.0	76.7
Post-DMH Service Care and Planning	64.8	65.7	67.6	57.1
Respect Perceived during Service Delivery*	92.0	92.9	94.4	85.6
Safety Perceived during Service Delivery*	87.2	72.9	93.2	83.8
Sensitivity and Flexibility of Services	93.5	93.8	94.2	91.8
Symptoms & Functioning	53.9	50.7	56.3	50.6
General Outcomes & Satisfaction*	71.6	61.4	77.7	64.8
Parent Social Connectedness~	74.4	74.3	78.0	65.5

<sup>\*</sup>p<0.05 indicates statistically significant differences by primary service category; ~p<0.10 borderline significance. A service category-specific score in bold indicate a statistically significantly higher (green) or lower (red) score compared to all other service categories for that domain.

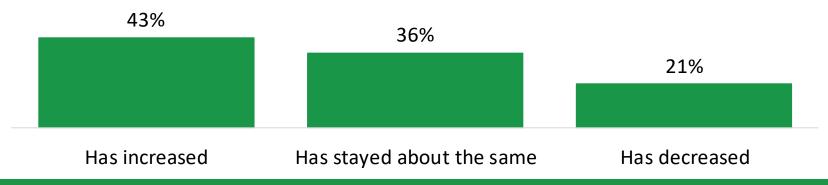
#### **2022 CYF: Behavioral Outcomes**

#### **School Attendance**

89% of children attended school in the past 12 months. Among these:

- 88% had no expulsions or suspensions in the past 12 months
- 91% had no expulsions or suspensions in the 12 months prior
- 84% advanced a grade in the past 12 months
- 46% had no attendance problems in the past 12 months

Since starting to receive services, among those children who had attendance problems, the number of days child was in school...



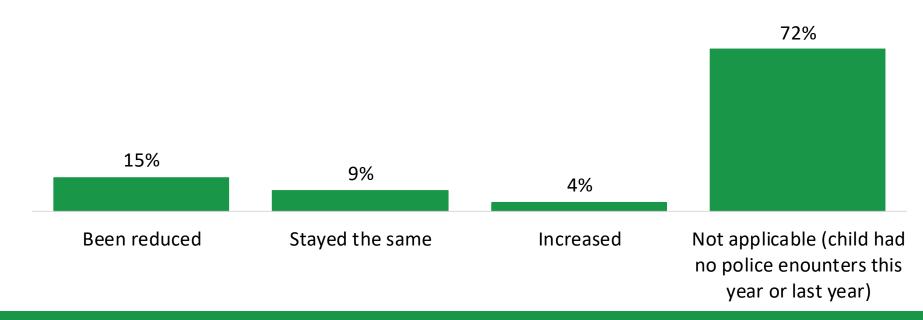
#### **2022 CYF: Behavioral Outcomes**

#### **Police Arrests & Encounters**

#### Among all children and youth:

- 99% had no arrests in the past 12 months
- 99% had no arrests in the 12 months prior to that

Since the child began receiving DMH services, encounters with police have:



## OF ALL OF THE MENTAL HEALTH SERVICES YOUR CHILD RECEIVED IN THE LAST 12 MONTHS, WHICH WERE THE MOST HELPFUL TO YOUR CHILD AND WHY? (68% or 263 clients responded)

#### STAFF/SERVICES: GENERAL (50.6%)

• I was tired doing it all by myself so to have people helping coordinating and finding options has been the best ever.

My stress level has lowered and I feel like I'm on top of things again and that we're making progress.

## ACCESS TO CARE (44.1%)

- Our case worker
   has been a constant
   source of support.
   She's available when
   needed, always able
   to be a sounding
   board and reliable
   resource for
   questions/issues that
   arise.
- The most helpful thing was when we needed an increase in frequency of specific service it was added.

#### ADEQUATE CARE (36.9%)

- Our social worker really made an effort to connect to our child with common interests. She went out of her way to communicate with our child not just the parents.
- Our case manager
  was knowledgeable
  and communicative
  and had a very good
  relationship with
  our daughter.

#### FAMILY INCLUSION (24.7%)

- The variety of services available for us as parents was very helpful.
   Parents, not just the child, need help and DMH recognizes this. Having family sessions has really helped us communicate.
- I really enjoyed having someone to speak with about my child's challenges.

## THERAPY (21.3%)

- The in-home therapist has been amazing, incredibly helpful, and well-trained, She has been a life saver for my daughter and our family.
- Our family therapist was skilled and compassionate. He understood my son on a level that previous therapists didn't.

## OF ALL OF THE MENTAL HEALTH SERVICES YOUR CHILD RECEIVED IN THE LAST 12 MONTHS, WHICH WERE THE LEAST HELPFULTO YOUR CHILD AND WHY? (54% or 209 clients responded)

#### STAFF/SERVICES: GENERAL (35.9%)

- We as a family just could not relate to the people we were paired with.
- Lack of in-person support and services offered to my family.
   Having such stringent requirements for my child to qualify for services and then not having any mandated (even for a short period) services.

#### ACCESS/ AVAILABILITY (34.4%)

- That there was no individual counselor available for my child.
- Wait times for services.
- Our daughter is waiting for a placement and we're constantly told anywhere between 2 weeks to 2 months and she'll be at the top of the list.

#### SUBSTANDARD CARE (33.5%)

- The clinicians did not appear as experienced. Some provided good insight temporarily, but it didn't seemed to be applied and carried out. Goals were made but not completed and then moved on to the next goals.
- His job coach never really did his job.

## OF CARE (20.1%)

- Changing providers is difficult because a new relationship has to be established.
- Shifting providers mid-stream was a challenge.
- Transition to age 18, services simply stopped as if the next day she did not need continued services.

## NONE (12.9%)

- There was nothing that was not helpful or that we would choose to end.
- Every service we utilized was very useful.
- None that I can think of. All services are utilized and appreciated.

## HOW CAN DMH SERVICES IMPROVETHE CASE MANAGEMENT AND/OR CARING TOGETHER SERVICES YOUR CHILD RECEIVED? (51% or 195 clients responded)

#### ACCESS/ AVAILABILITY (38.5%)

- Dramatically reduce lag time between the time of requesting services and actually receiving services.
   Also, would be more helpful if respite was more available.
- More services for children and young adults that are readily available.

## CONSISTENCY (21.0%)

- Better coordination for the transition between youth and adult services. It feels like we are falling into a black hole transiting to adult services.
- Consistency with visits and team members.
- Advocate for pay that can keep quality therapists in the program.

#### ADEQUATE CARE (21.0%)

- I think clinicians and mentor should have lived experience as a parent to truly be able to relate to the parentings challenges of a child with a mental illness.
- More training or skill building on how to deal with children resistant to therapy.

## NONE (13.8%)

- I do not feel there
   were any services
   that could be
   improved upon.
   Our team was
   amazing, top notch
   counselors,
   therapists, and staff
   that truly cared
   about our child's
   well-being.
- It was so helpful I don't think it could improve.

## COMMUNICATION (13.3%)

- They can be more transparent about what they can offer.
- It would have been helpful to have some kind of brochure or outline of what services my child was entitled to. Sometimes I felt unsure of what to ask for.

## THANK YOU Questions?