



Southwest Michigan Behavioral Health 2018 Customer Satisfaction Survey Analysis

January 18, 2019



Results and Analysis of Each Survey Identified are Presented in this Report

1. Mental Health Statistics Improvement Program (MSHIP)
2. Youth Services Survey (YSS)
3. MI Health Link Member Satisfaction Survey (MHL)

To access the survey results listed
above on the SWMBH Portal go to:
SWMBH→QAPI→2018 Consumer
Satisfaction Survey Results and
Analysis (MHSIP,YSS, & RSA-r)
Or
[Click Here.](#)



Survey Process and Preparation



SWMBH begins preparing for the annual consumer satisfaction survey process in September, with the goal of completing 2,000 surveys by the end of the year. To ensure the survey process is valid, SWMBH selects a vendor to administer the surveys and collect feedback from consumers who have received 3 or more services within the measurement period (April – August 2018). Barnes Research was selected as the vendor for the 2018 consumer satisfaction survey project. Barnes Research brings over 25 years of experience to the table, working with a variety of healthcare organizations to gain feedback from consumers using a variety of methods including: surveys, focus groups, mystery shopping and other types of consumer engagement techniques.

The 2018 consumer satisfaction surveys were completed using a telephonic process. The survey tools that were used include the Mental Health Statistics Improvement Program (MHSIP) survey for consumers 18 years of age and older and the Youth Services Survey (YSS) for consumers under the age of 18 years old. SWMBH is contractually obligated to utilize the MHSIP and the YSS survey tools, as they are required for use by the Michigan Department of Health and Human Services (MDHHS). The MHSIP and YSS survey tools offer a wide range of flexibility in capturing feedback from members with a variety of Mental Health disorders. The MHSIP and the YSS survey tools also offer comparisons against other State and National results. Currently the MHSIP and YSS surveys are being implemented in 55 States/Territories, so comparison data is easily obtainable. You will notice throughout the presentation, SWMBH provides comparisons against State and National results and has out performed both State and National results in every category of its 2018 survey results.

The primary goal in completing the annual consumer satisfaction surveys is to gain valuable feedback from consumers on the services they have received. After the analysis of the survey scores and consumer feedback is completed, the SWMBH Quality Team presents the data to the primary Regional Committees including the: Regional Consumer Advisory Committee, Regional Utilization Management Committee, Regional Operations Committee, Regional Compliance Committee and the Regional Quality Management Committee, for review and feedback. SWMBH takes the consumer feedback they receive very seriously and works directly with providers and Community Mental Health Service Providers (CMHSP) to help improve Mental Health and Substance Abuse services and programs throughout the 8-county service region. SWMBH's survey preparation and processes have improved tremendously over the past 5 years and that can be directly attributed to the feedback received from the Regional Committees and Consumers we serve.

If you would like further information on the annual consumer satisfaction survey projects, please don't hesitate to contact the SWMBH Quality Assurance Department at: 269-488-8922 or via email at: jonathan.gardner@swmbh.org



MHSIP Survey Information



- The Mental Health Statistics Improvement Program (MHSIP) Consumer Surveys measure concerns that are important to consumers of publicly funded mental health services in (7) different areas including:
 1. Access
 2. Quality/Appropriateness
 3. Outcomes
 4. General Satisfaction
 5. Social Connectedness
 6. Participation in Treatment Planning
 7. Functioning
- The MHSIP consists of 44 questions.
- Use of the MHSIP survey tool is a contractual requirement by MDHHS (42 CFR 438.230).



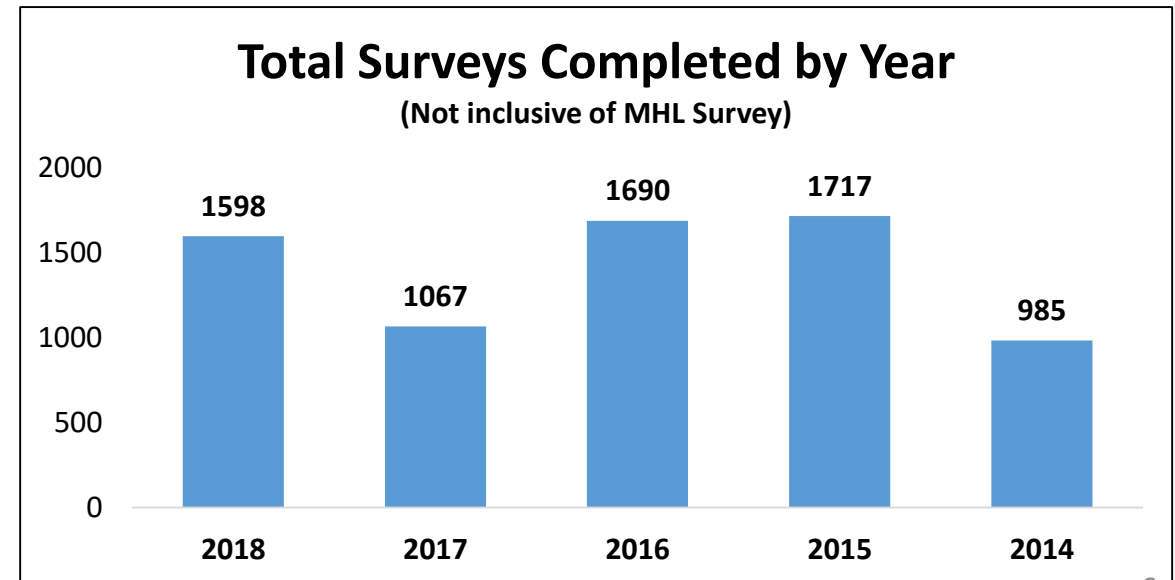
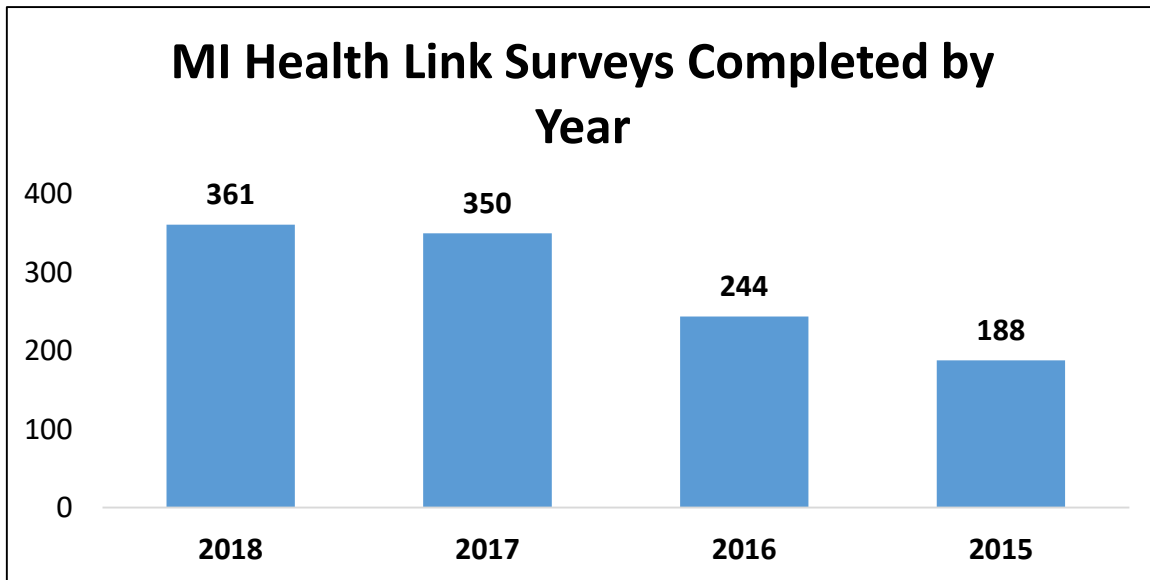
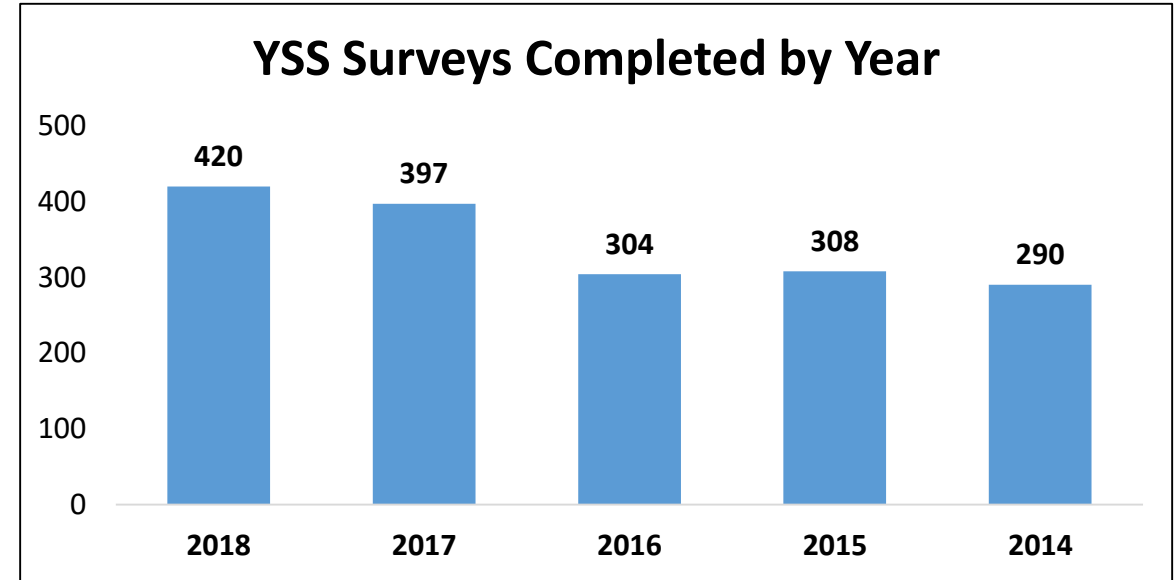
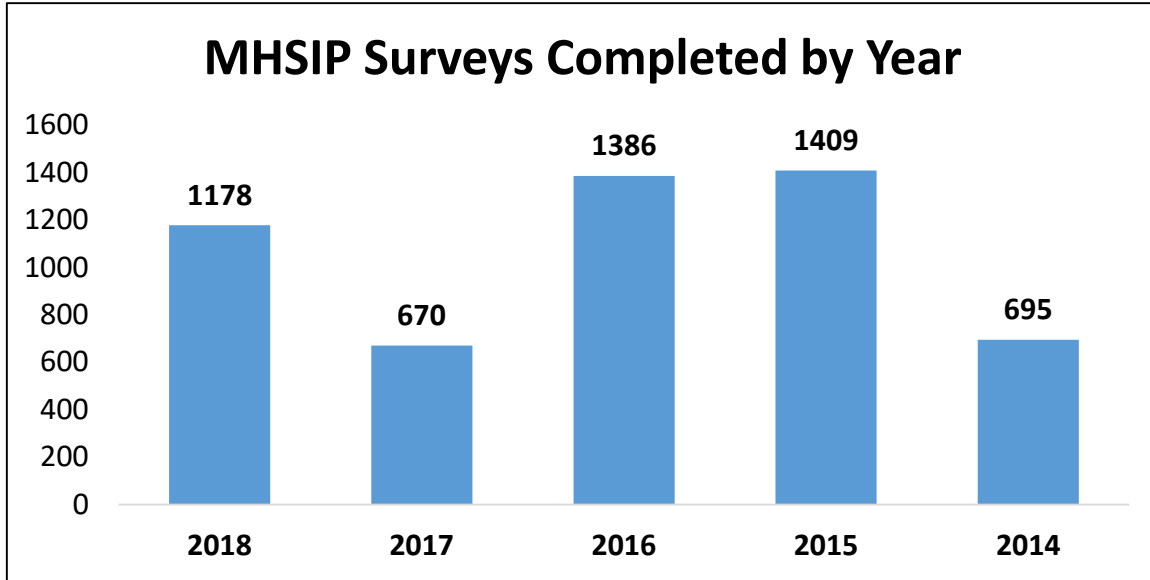
YSS-F Survey Information



- A modification of the MHSIP survey for adults, the Youth Services Survey for Family (YSS-F) assesses caregivers' perceptions of behavioral health services for their children aged 17 and under.
- The YSS creates (6) domains that are used to measure different aspects of customer satisfaction with public behavioral health services including:
 1. Access
 2. Appropriateness
 3. Outcomes
 4. Social Connectedness
 5. Cultural Sensitivity
 6. Participation in Treatment
- The YSS-F consists of 46 questions.



How Many Surveys Were Completed

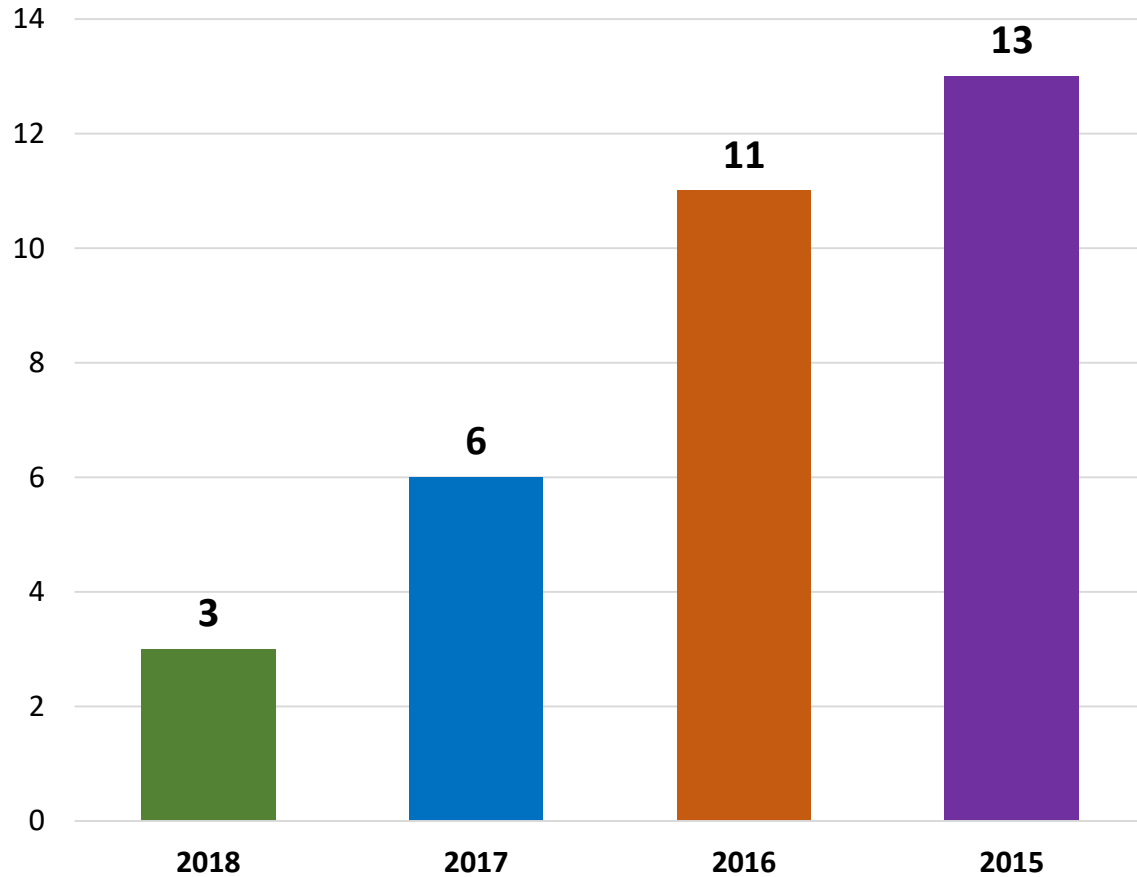




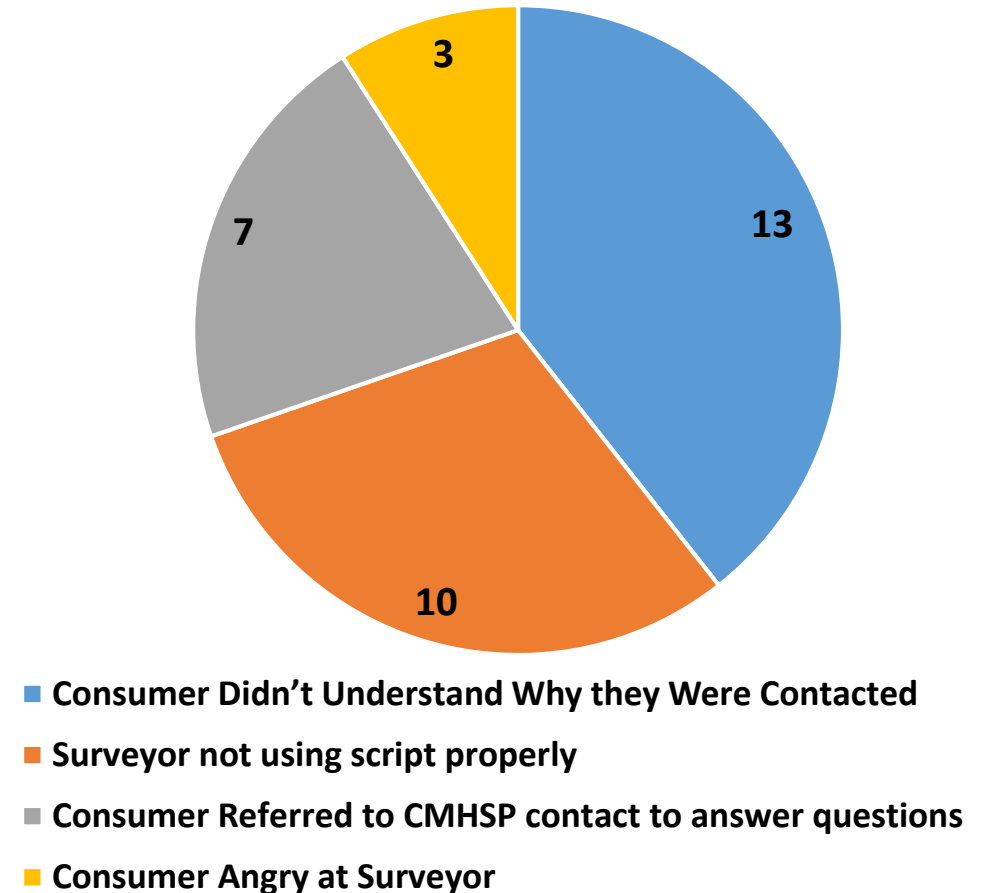
Consumer Issues and Complaints



Total Issues/Complaints By Year



Reasons For Consumer Complaints or Confusion



33 Total Across All Year's



Questions asked on the MHSIP Survey (44 Questions Total)



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.	SA	A	N	D	SD	NA
2.	If I had other choices, I would still choose to get services from this mental healthcare provider.	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.	SA	A	N	D	SD	NA
5.	Staff were willing to see me as often as I felt it 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.	I was able to get all the services I thought I needed.	SA	A	N	D	SD	NA
9.	I was able to see a psychiatrist when I wanted to.	SA	A	N	D	SD	NA
10.	Staff believed that I could grow, change and recover.	SA	A	N	D	SD	NA
11.	I felt free to complain.	SA	A	N	D	SD	NA
12.	I was given information about my rights.	SA	A	N	D	SD	NA
13.	Staff encouraged me to take responsibility for how I live my life.	SA	A	N	D	SD	NA

14.	Staff told me what side effects to watch for.	SA	A	N	D	SD	NA
15.	Staff respected my wishes about who is and who is not to be given information about my treatment services.	SA	A	N	D	SD	NA
16.	Staff were sensitive to my cultural/ ethnic background (e.g., race, religion, language, etc.).	SA	A	N	D	SD	NA
17.	Staff helped me obtain the information I needed so that I could take charge of managing my illness or disability.	SA	A	N	D	SD	NA
18.	I was encouraged to use consumer-run programs (support groups, drop-in centers, crisis phone line, etc.)	SA	A	N	D	SD	NA
19.	I felt comfortable asking questions about my treatment, services, and medication.	SA	A	N	D	SD	NA
20.	I, not staff, decided my treatment goals.	SA	A	N	D	SD	NA



Questions asked on the YSS-F Survey (46 Questions Total)



YOUTH SERVICES SURVEY FOR FAMILIES (YSS-F) DRAFT URS/DIG Revised Version: February 17, 2006

Please help our agency make services better by answering some questions about the services your child received **OVER THE LAST 6 MONTHS**. Your answers are confidential and will not influence the services you or your child receive. Please indicate if you **Strongly Disagree, Disagree, Are Undecided, Agree, or Strongly Agree** with each of the statements below. Put a cross (X) in the box that best describes your answer. Thank you!!!

	Strongly Disagree (1)	Disagree (2)	Undecided (3)	Agree (4)	Strongly Agree (5)
1. Overall, I am satisfied with the services my child received-----					
2. I helped to choose my child's services-----					
3. I helped to choose my child's treatment goals-----					
4. The people helping my child stuck with us no matter what-----					
5. I felt my child had someone to talk to when he/she was troubled-----					
6. I participated in my child's treatment-----					
7. The services my child and/or family received were right for us-----					
8. The location of services was convenient for us-----					
9. Services were available at times that were convenient for us-----					
10. My family got the help we wanted for my child-----					
11. My family got as much help as we needed for my child-----					
12. Staff treated me with respect-----					
13. Staff respected my family's religious/spiritual beliefs-----					
14. Staff spoke with me in a way that I understood-----					
15. Staff were sensitive to my cultural/ethnic background-----					
As a result of the services my child and/or family received:					
16. My child is better at handling daily life-----					
17. My child gets along better with family members-----					
18. My child gets along better with friends and other people-----					
19. My child is doing better in school and/or work-----					
20. My child is better able to cope when things go wrong-----					
21. I am satisfied with our family life right now-----					
22. My child is better able to do things he or she wants to do-----					
As a result of the services my child and/or family received: please answer for relationships with persons other than your mental health provider(s)					
23. I know people who will listen and understand me when I need to talk-----					
24. I have people that I am comfortable talking with about my child's problems-----					
25. In a crisis, I would have the support I need from family or friends.-----					
26. I have people with whom I can do enjoyable things-----					

27. What has been the most helpful thing about the services you and your child received over the last 6 months?

28. What would improve the services here? _____

Answer the following questions to let us know how your child is doing.

29. Is your child currently living with you? Yes No
30. Has your child lived in any of the following places in the last 6 months? (CHECK ALL THAT APPLY)
- | | |
|--|--|
| <input type="checkbox"/> a. With one or both parents | <input type="checkbox"/> g. Group home |
| <input type="checkbox"/> b. With another family member | <input type="checkbox"/> h. Residential treatment center |
| <input type="checkbox"/> c. Foster home | <input type="checkbox"/> i. Hospital |
| <input type="checkbox"/> d. Therapeutic foster home | <input type="checkbox"/> j. Local jail or detention facility |
| <input type="checkbox"/> e. Crisis Shelter | <input type="checkbox"/> k. State correctional facility |
| <input type="checkbox"/> f. Homeless shelter | <input type="checkbox"/> l. Runaway/homeless/on the streets |
| | <input type="checkbox"/> m. Other (describe): _____ |
31. In the last year, did your child see a medical doctor (or nurse) for a health check up or because he/she was sick? (Check one)
 Yes, in a clinic or office Yes, but only in a hospital emergency room No Do not remember
32. Is your child on medication for emotional/behavioral problems? Yes No
32a. If yes, did the doctor or nurse tell you and/or your child what side effects to watch for? Yes No
33. Is your child still getting services from this Center? Yes No
34. How long did your child receive services from this Center?
 a. Less than 1 month
 b. 1 -5 months
 c. 6 months to 1 year
 d. More than 1 year (skip to questions 41)

Please answer the following questions to let us know a little about your child.

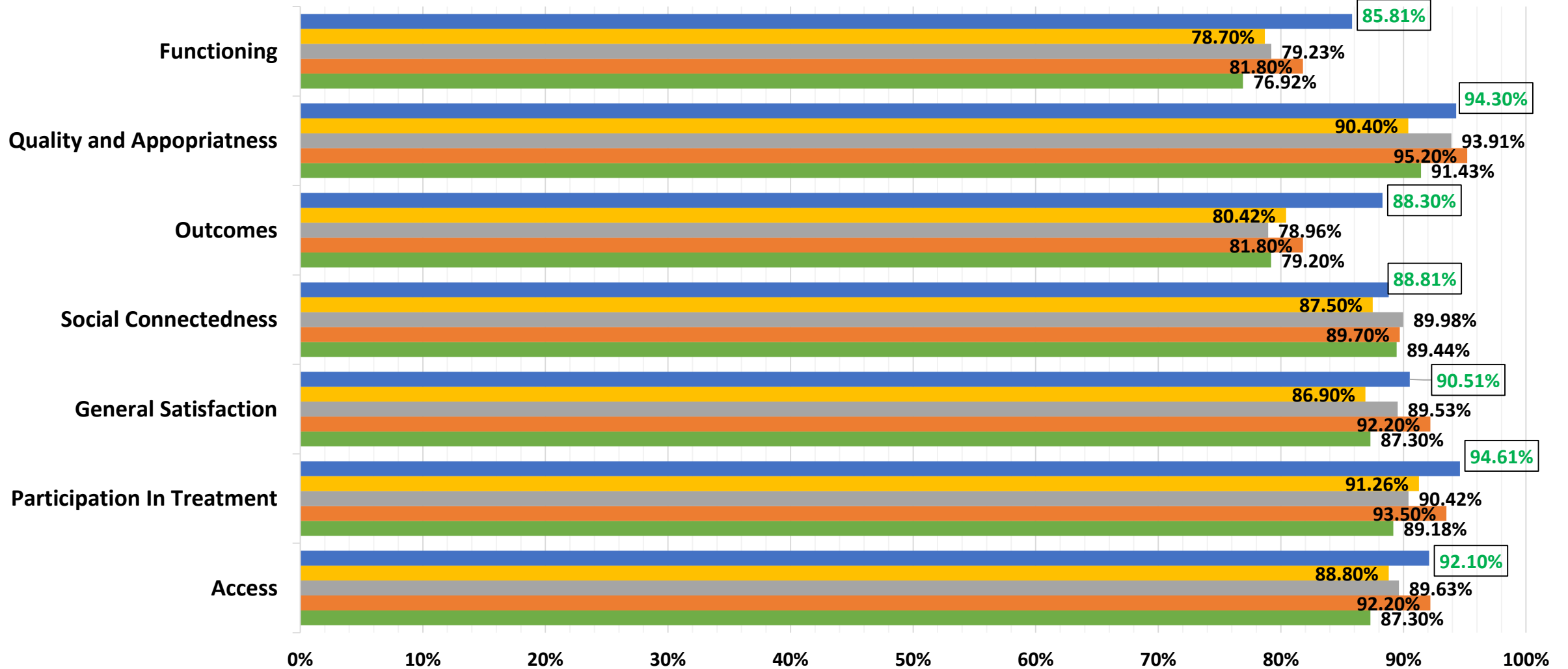
41. Was your child arrested during the last 12 months? Yes No
42. Was your child arrested during the 12 months prior to that? Yes No
43. Over the last year, have your child's encounters with the police...
 a. been reduced (for example, they have not been arrested, hassled by police, taken by police to a shelter or crisis program)
 b. stayed the same
 c. increased
 d. not applicable (They had no police encounters this year or last year)
44. Was your child expelled or suspended during the last 12 months? Yes No
45. Was your child expelled or suspended during the 12 months prior to that? Yes No
46. Over the last year, the number of days my child was in school is
a. Greater
b. About the same
c. Less
d. Does not apply (please select why this does not apply)
i. child did not have a problem with attendance before starting services
ii. child is too young to be in school
iii. child was expelled from school
iv. child is home schooled
v. Child dropped out of school
vi. Other: _____
35. Was your child arrested since beginning to receive mental health services? Yes No
36. Was your child arrested during the 12 months prior to that? Yes No
37. Since your child began to receive mental health services, have their encounters with the police...
 a. been reduced (for example, they have not been arrested, hassled by police, taken by police to a shelter or crisis program)
 b. stayed the same
 c. increased
 d. not applicable (They had no police encounters this year or last year)
38. Was your child expelled or suspended during since beginning services? Yes No
39. Was your child expelled or suspended during the 12 months prior to that? Yes No
40. Since starting to receive services, the number of days my child was in school is
a. Greater
b. About the same
c. Less
d. Does not apply (please select why this does not apply)
i. child did not have a problem with attendance before starting services
ii. child is too young to be in school
iii. child was expelled from school
iv. child is home schooled
v. Child dropped out of school
vi. Other: _____
- A. Are either of the child's parents of Spanish/Hispanic/Latino?
 Hispanic or Latino Origin Not of Hispanic or Latino Origin



MHSIP Score Comparison By Year Analysis



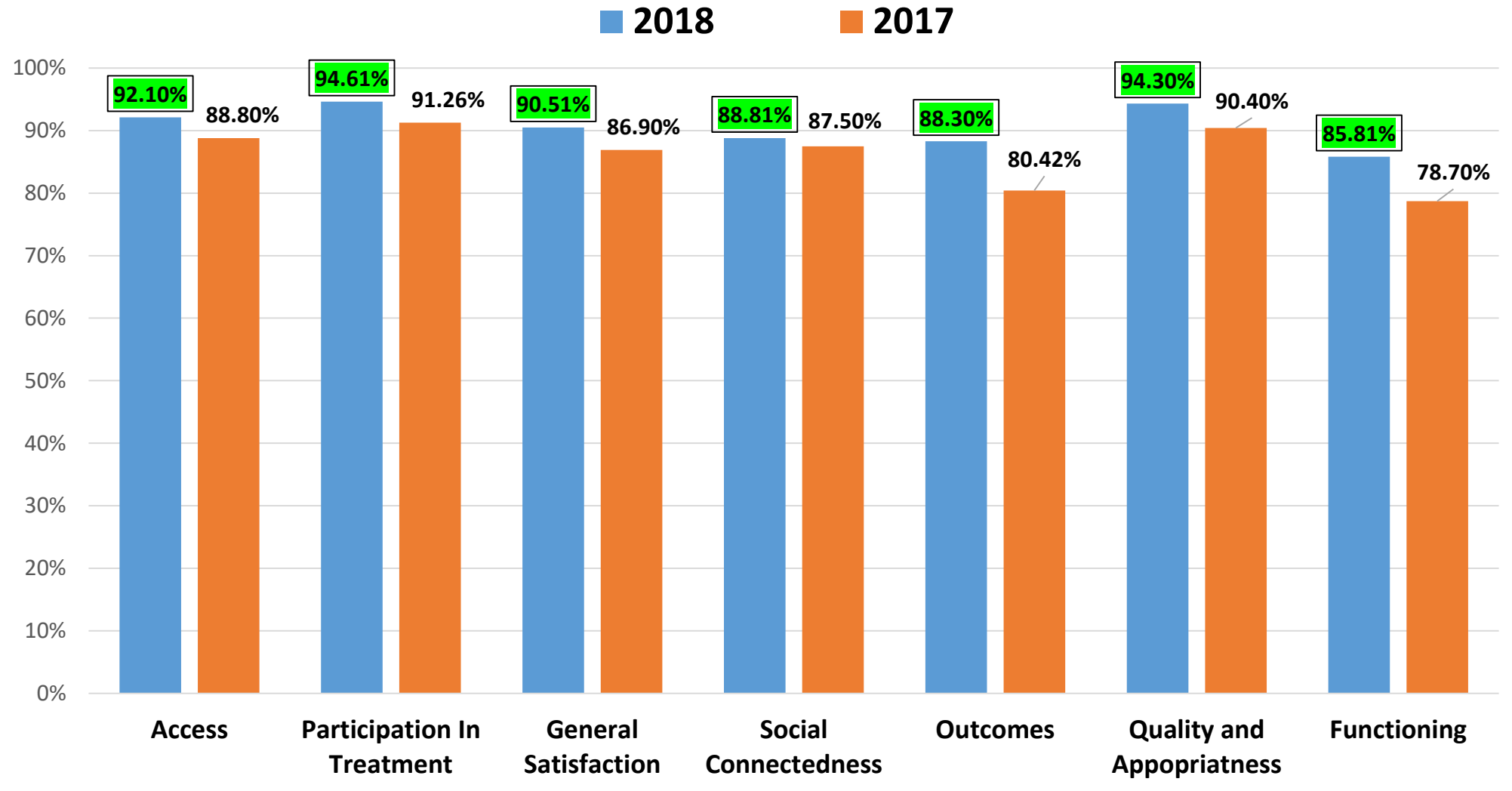
2018 2017 2016 2015 2014



Green = Improvement in score compared to previous years results



MHSIP Score Comparison 2018 vs. 2017



2018 Ave. Score = 90.63%
2017 Ave. Score = 86.20%

2018 = +4.43%

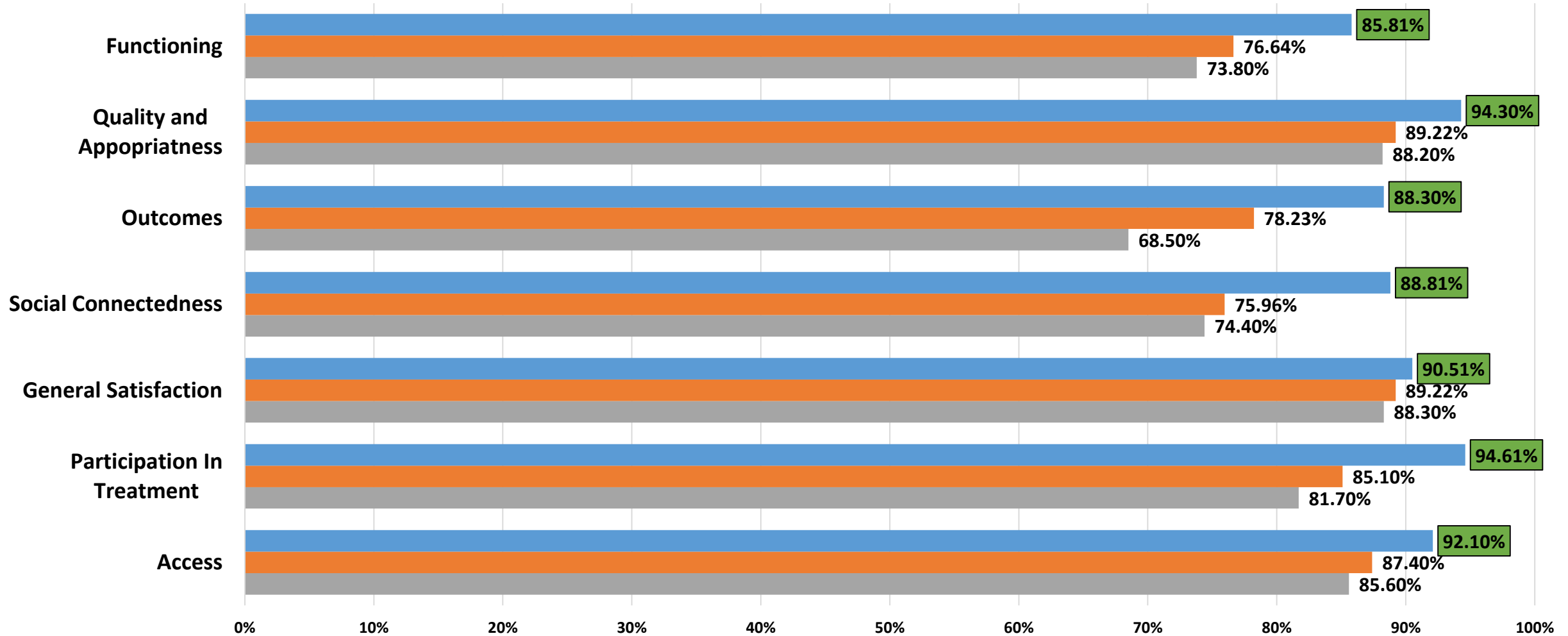
Green Highlighted Values Represent an Improvement Over the Previous Year's Results



2018 MHSIP State and National Score Comparison



■ 2018 ■ State Ave. (2017) ■ National Ave. (2017)

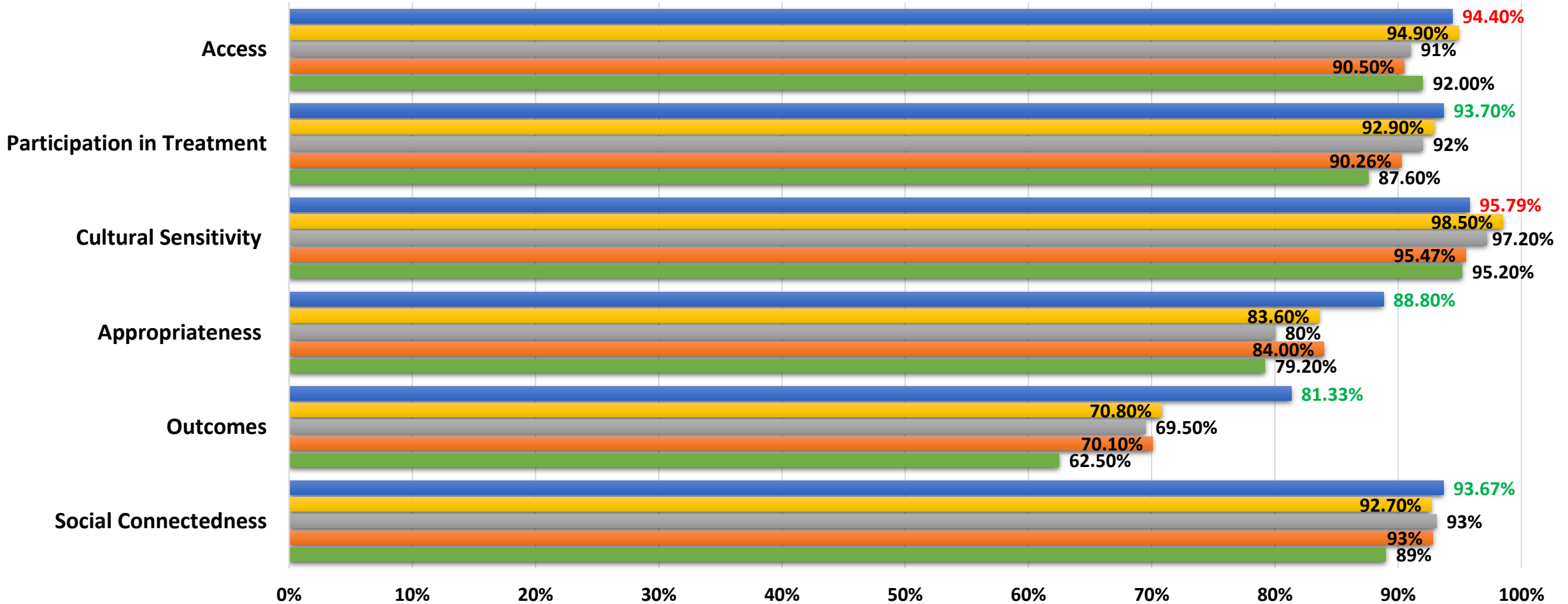




YSS Score Comparison By Year



■ 2018 ■ 2017 ■ 2016 ■ 2015 ■ 2014



2018 Ave. Score = 91.28%
 2017 Ave. Score = 88.90%
2018 = +2.38% Improvement

Green = Improvement in score compared to previous years results
Red = Decrease in score compared to previous year.

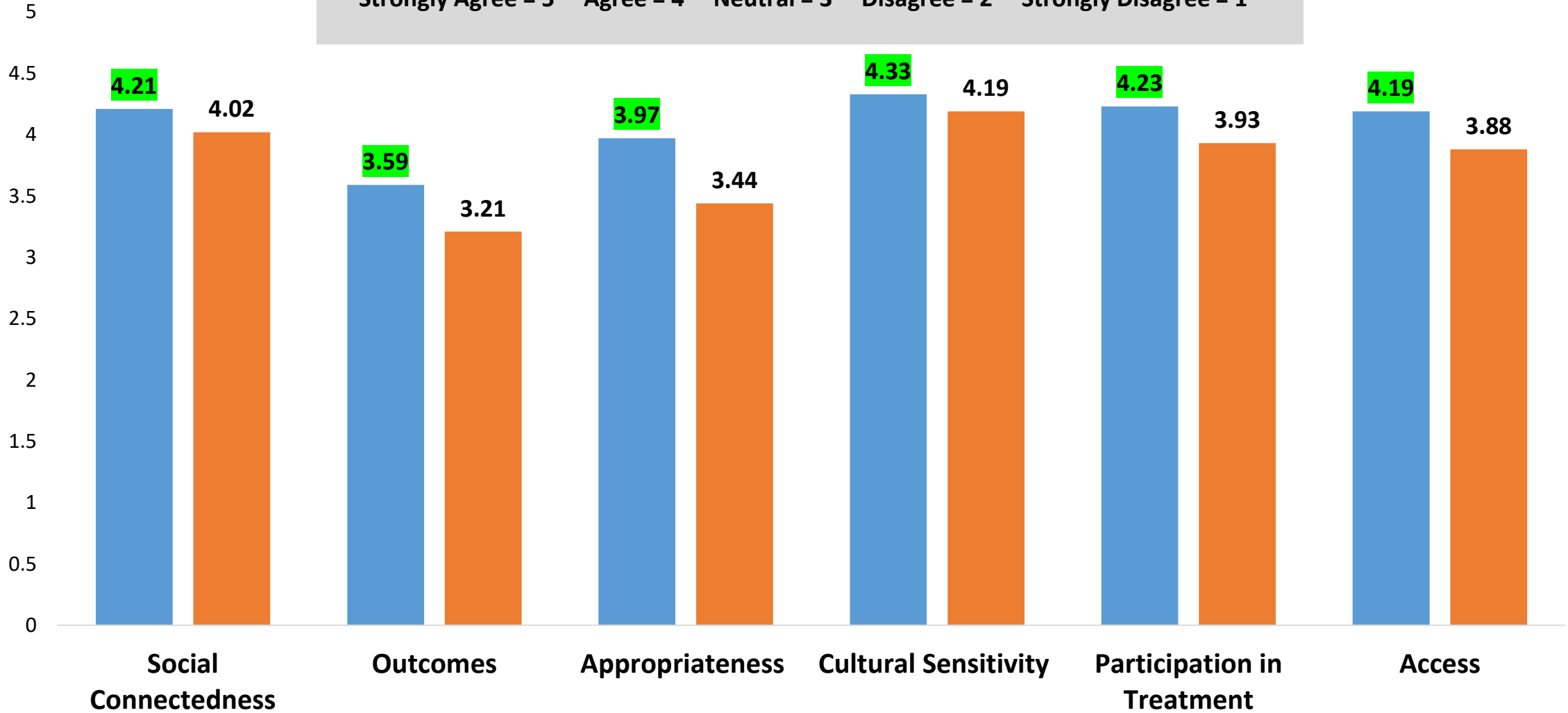


2018 vs. 2017 YSS Mean Score By Category



■ 2018 ■ 2017

Strongly Agree = 5 Agree = 4 Neutral = 3 Disagree = 2 Strongly Disagree = 1

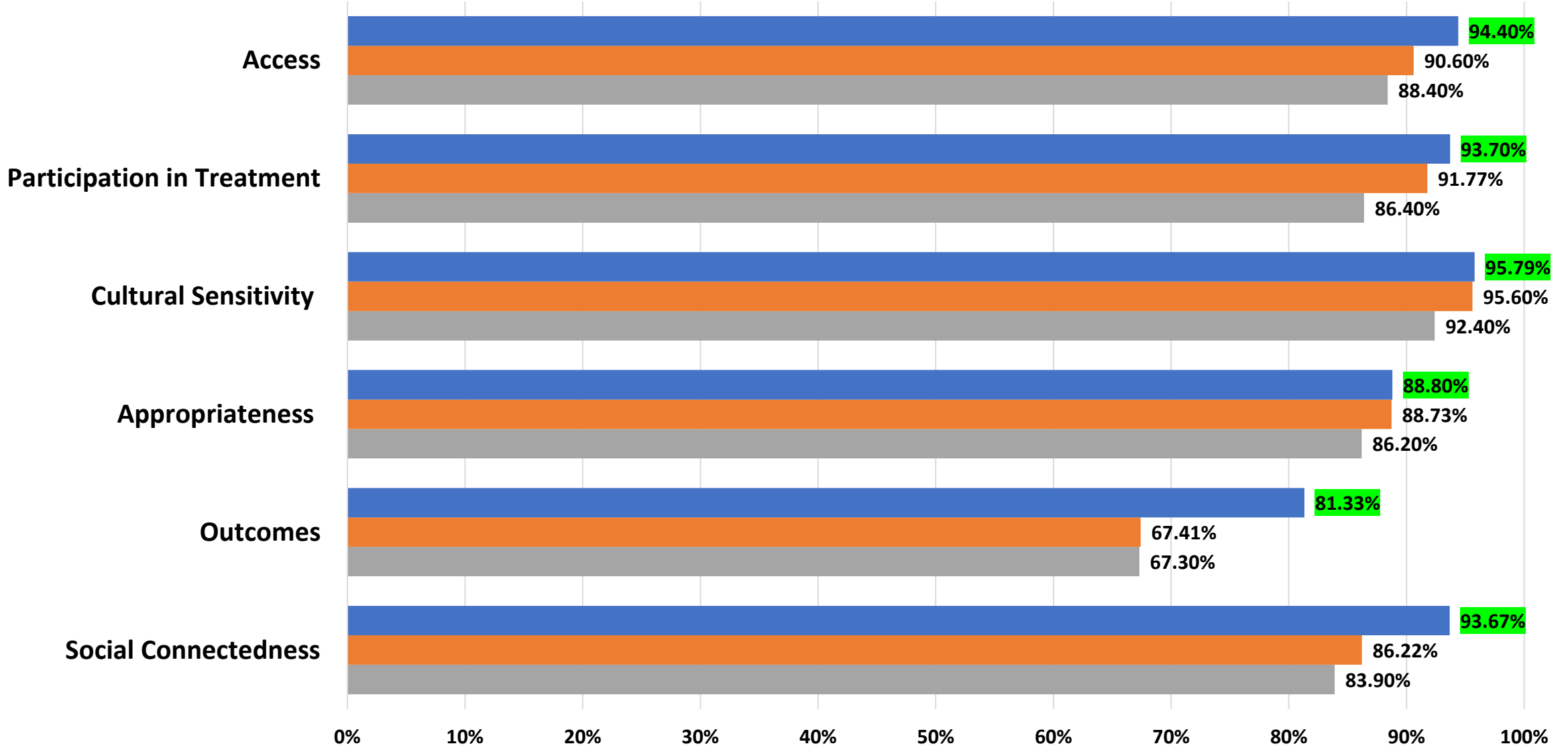




YSS State and National Score Comparison



■ SWMBH Scores ■ Michigan Ave. Scores ■ National Ave. Scores





How Did We Do?

MHSIP Results

- ❑ 2018 Aggregate Score: 90.63%
- ❑ 2017 Aggregate Score: 86.28%

+4.43% Percent Improvement over 2017 Scores

YSS Results

- ❑ 2018 Aggregate Score: 91.28%
- ❑ 2017 Aggregate Score: 88.90%

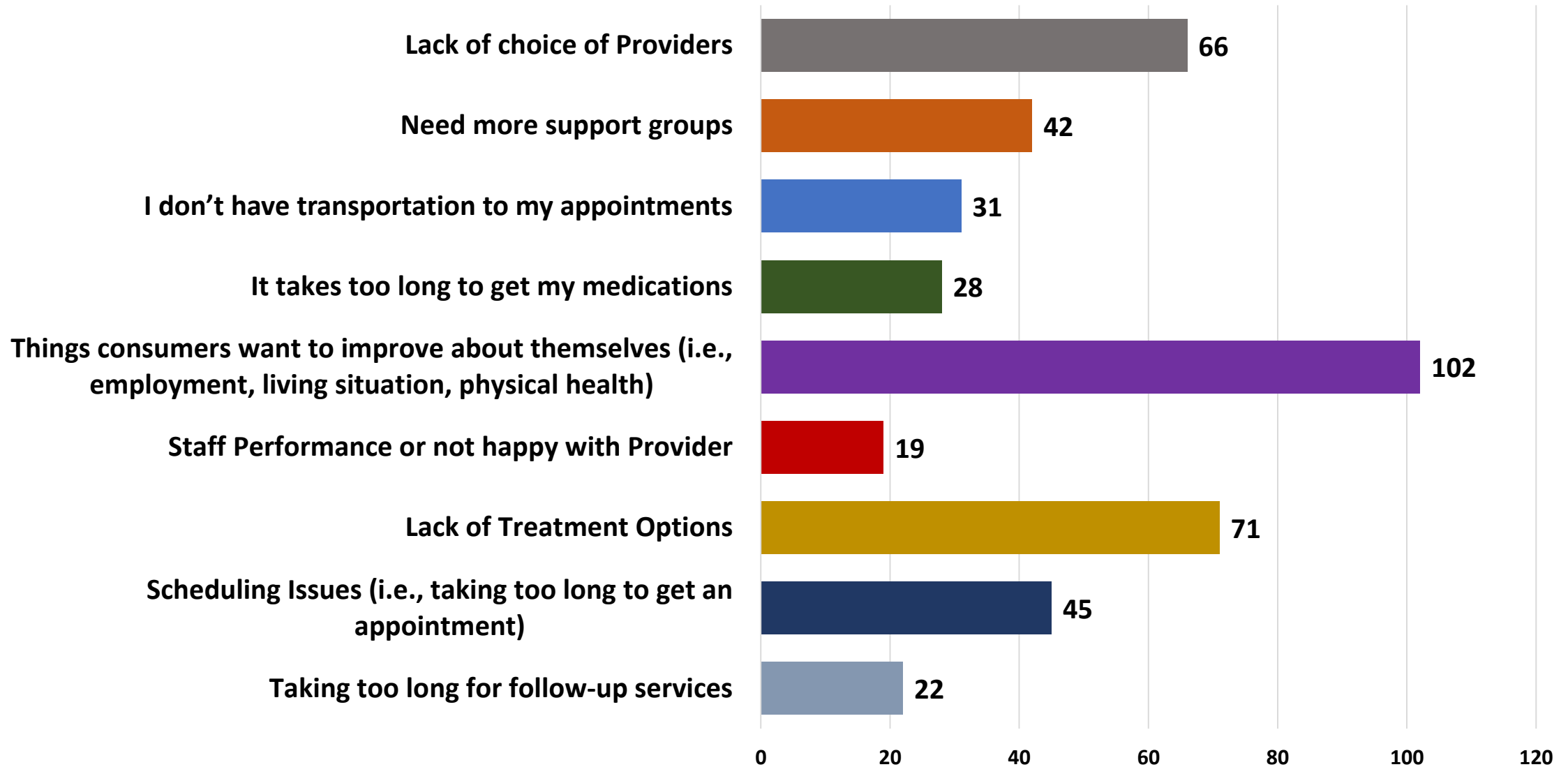
+2.38% Percent Improvement over 2017 Scores

Overall Result

+6.81% Percent Improvement



2018 Consumer Satisfaction Consumer Feedback





2018 Customer Satisfaction Survey Analysis - Next Steps – Opportunities for Improvement



- Publish results widely (*i.e., newsletters, share with stakeholders and regional committees*)
- Develop CMHSP Specific Reports for all (8) Counties.
- Perform a Causal Analysis on Results for all (8) Counties.
- *Analysis and Evaluation of Comments Received by Customers.*
- Identify any Common Denominators or Patterns in Comments Received by Customers.
- Determine Course of Action to Address Customer Feedback and Concerns.
- Evaluate Improvement Strategies and Opportunities for Improvement through QM, RUMCP and other Regional Committees for the 2019 Customer Satisfaction Survey Process.



2018

MI Health Link Member Satisfaction Survey (MIHL)



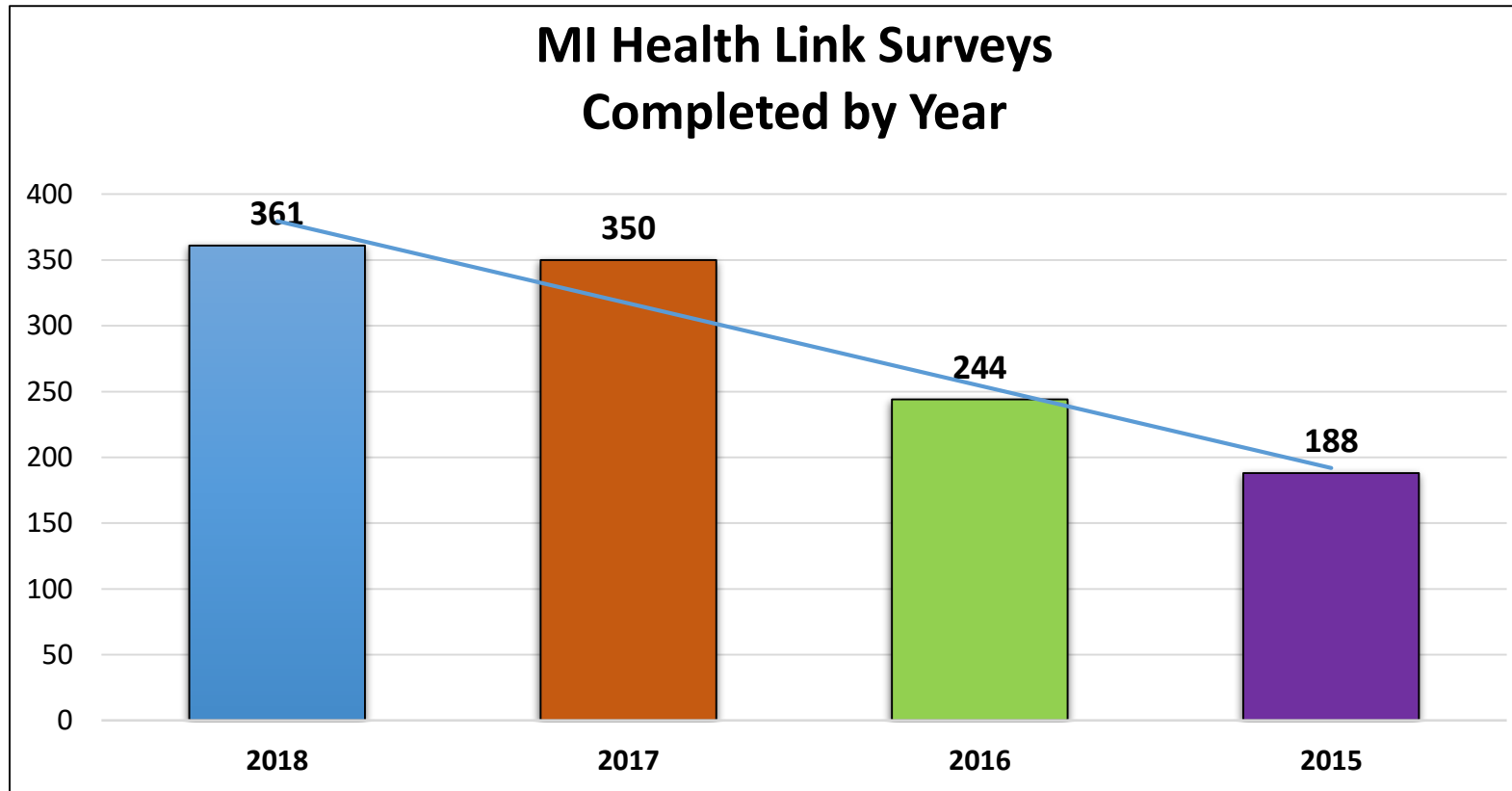
MIHL Survey Information



- MI Health Link is a program that joins Medicare and Medicaid benefits, rules and payments into one coordinated delivery system, which began in March 2015.
- MI Health Link health plans provide Michigan Pre-paid Inpatient Health Plans (PIHPs) payments to provide covered services.
- SWMBH:
 - Region 4 consist of Southwest Michigan: Barry, Berrien, Branch, Calhoun, Cass, Kalamazoo, St. Joseph and Van Buren counties.
- The MIHL survey was conducted by calling SWMBH MI Health Link consumers.
- The MIHL survey measures concerns that are important to consumers of MI Health Link Services including: Improved Functioning, Quality and Appropriateness, Outcomes, Social Connectedness, General Satisfaction, Participation in Treatment, and Access.
- Completing the survey is a core contractual deliverable to our Integrated Healthcare Partners (*Meridian Health Plan and Aetna Health Plan*)



How Many Surveys Were Completed



*841 calls made with 361 surveys completed = 42.9% response rate.



MIHL Survey Questions

(44 Questions Total/3 Additional Comment Sections)

- The first 36 questions are the same as the MHSIP Survey.
- The questions shown below are additional for MI Health Link Members.

Please answer the following questions to let us know how you are doing.

37. Are you currently (still) getting mental health services from this Provider? Yes No

38. How long have you received mental health services from this Provider?

- a. Less than a year (less than 12 months) (continue to Question 39)
- b. 1 year or more (at least 12 months) (Skip to Question 42 on page 3)

ADD COMMENT (VERBATIM):

A) Regarding your service experiences, has there been anything that has been particularly beneficial for you (describe in detail)?

B) Has there been anything you would like to improve?

C) Anything else you would care to add?

42. Were you arrested during the last 12 months?
 Yes No

43. Were you arrested during the 12 months prior to that?
 Yes No

44. Over the last year, have your encounters with the police...
 a. been reduced (for example, I have not been arrested, hassled by police, taken by police to a shelter or crisis program)
 b. stayed the same
 c. increased
 d. not applicable (I had no police encounters this year or last year)

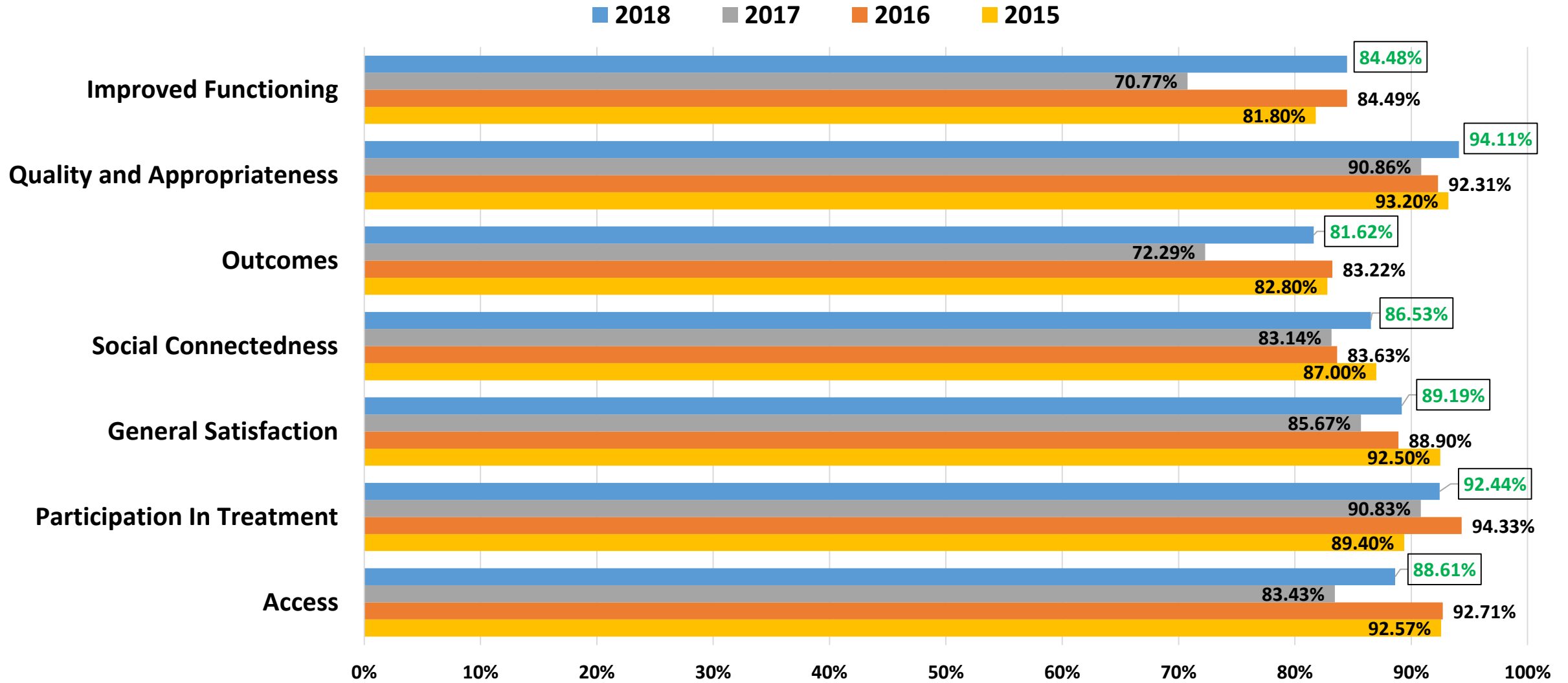
39. Were you arrested since you began to receive mental health services?
 Yes No

40. Were you arrested during the 12 months prior to that?
 Yes No

41. Since you began to receive mental health services, have your encounters with the police...
 a. been reduced (for example, I have not been arrested, hassled by police, taken by police to a shelter or crisis program)
 b. stayed the same
 c. increased
 d. not applicable (I had no police encounters this year or last year)



MIHL Consumer Satisfaction Survey Score Comparison By Year



Improvement over previous years scores in all (7) categories

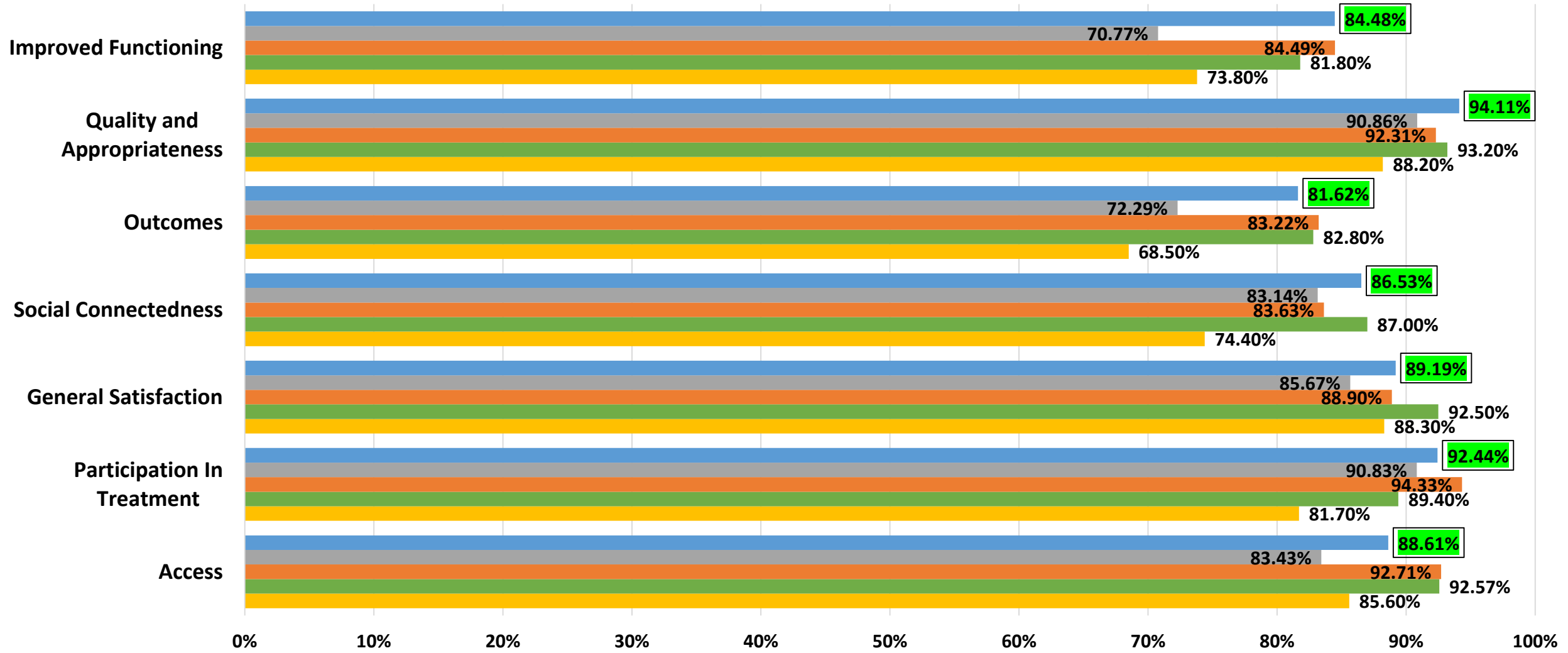


MI Health Link Consumer Satisfaction Survey

Score By Year Against National Average



■ 2018 ■ 2017 ■ 2016 ■ 2015 ■ National Avg 2017





How Did We Do?

MIHL Results

- ☐ 2018 Aggregate Score: 88.14%
- ☐ 2017 National Ave Score: 80.07%
- ☐ 2017 Aggregate Score: 82.43%

+5.71% Percent Improvement over 2017 Scores

+8.07% Percent Improvement Over National Ave Scores



2018 MI Health Link

Consumer Satisfaction Constructive Criticism

