

Maryland's Public Behavioral Health System

Consumer Perception of Care Survey 2015

EXECUTIVE SUMMARY

MARYLAND'S PUBLIC BEHAVIORAL HEALTH SYSTEM

2015 CONSUMER PERCEPTION OF CARE SURVEY

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I. INTRODUCTION

The Department of Health and Mental Hygiene (DHMH) launched Maryland's Public Mental Health System (PMHS) in July 1997 as part of the state's Medicaid 1115 waiver reform initiative. The 1115 waiver created a system whereby specialty mental health services are delivered through a "carve-out" arrangement that manages public mental health funds under a single payer system. During the past 18 months, two major changes to the public system have occurred. The first was the formal merger of the Mental Hygiene Administration (MHA) with the Alcohol and Drug Abuse Administration (ADAA) in July 2014, creating an integrated Behavioral Health Administration (BHA). The second major change was the shift of substancerelated disorder (SRD) services from a managed care system to the Medicaid 1115 waiver "carve-out" system, which is now referred to as the Public Behavioral Health System (PBHS). The system continues to serve Medicaid recipients and a subset of uninsured individuals eligible for public behavioral health services due to severity of illness and financial need. Evaluation of consumer perception of care, including satisfaction with and outcomes of behavioral health services, is a requirement of the waiver and Code of Maryland Regulations. Because of the timing of these major changes, individuals treated primarily for a substance-related disorder were not able to be included in this 2015 Consumer Perception of Care (CPOC) survey effort.

Medicaid currently contracts with ValueOptions[®], Inc. to provide administrative services, including evaluation activities, for the PBHS. One of the evaluation activities is the administration of consumer surveys to assess consumer perception of care, including satisfaction with and outcomes of behavioral health services provided by the PBHS. ValueOptions[®], Inc. subcontracted with Fact Finders, Inc. of Albany, New York to conduct telephone interviews, collect and analyze data, and document the findings. This report represents findings of the 2015 Consumer Perception of Care Survey, which is the fifteenth systematic, statewide mental health consumer survey since the inception of the PBHS (formerly PMHS).

The survey protocol, including methodology, sampling, administration, and data collection is reviewed annually by the DHMH Institutional Review Board (IRB). The IRB is responsible for reviewing research protocols to ensure that the rights, safety, and dignity of human subjects are protected.

This report is a condensed version of the 2015 Consumer Perception of Care Survey - Detailed Report. To obtain a copy of this detailed document or brochures, visit the following Web site: bha.dhmh.maryland.gov.

II. METHODOLOGY

The potential survey population consisted of PBHS consumers for whom claims were received for outpatient mental health services rendered between January and December 2014. The sample was stratified by age and county of residence. Individuals were then randomly selected from among these groups. Service types for adults included outpatient mental health treatment services or psychiatric rehabilitation services. Service types for children and adolescents included outpatient mental health treatment services or family support services (i.e., psychiatric rehabilitation, mobile treatment, case management, and/or respite services). Individuals (16 years of age or older at the time of service) responded to the adult survey on their own behalf, while parents or caregivers responded to the child survey on behalf of children and adolescents under the age of 16.

Separate survey instruments were used for adults and for caregivers. The adult and the child/caregiver instruments both originated from a Federal initiative, the Mental Health Statistics Improvement Project (MHSIP) - Consumer Surveys. Items from these surveys are incorporated into the Center for Mental Health Services Uniform Reporting System (URS) for Federal Block Grant reporting. The Maryland Adult Consumer Perception of Care Survey is based on the MHSIP Consumer Survey, while the Maryland Child and Family Consumer Perception of Care Survey is based on the MHSIP Youth Services Survey for Families (YSS-F). In addition to the MHSIP items, both survey instruments include demographic items, service-specific sections, and selected items of interest regarding living situation, employment, education, and coordination of care.

III. ADULT SURVEY RESULTS

Telephone interviews were conducted with adults to assess their perception of care, including satisfaction with and outcomes of services received through Maryland's PBHS. These adults received outpatient mental health treatment and/or psychiatric rehabilitation services between January and December 2014. A total of 2,480 adults were successfully contacted to request participation in the survey; 817 adults completed the survey for a response rate of 32.9%.

DEMOGRAPHIC CHARACTERISTICS

Table 1 presents demographic and social characteristics of adult survey respondents:

Table 1. Demographic Characteristics of Adult Survey Respondents

	Characteristic	%
Gender	Female	62.3
Gender	37.7	
	Under 21	4.4
	21-30	15.9
A on	31-40	19.7
Age	41-50	24.7
	51-60	27.8
	61 and older	7.5
	Black or African-American	40.8
Race	White or Caucasian	55.2
	Other	4.0
Ethnicity	Spanish, Hispanic, or Latino	7.6
	Unemployed	29.6
	Employed full-time	11.9
	Employed part-time	10.5
Employment	Permanently disabled, not working	33.2
	Homemaker	2.2
	Student/Volunteer	6.2
	Refused/Don't Know/Other	6.4

SERVICE USE

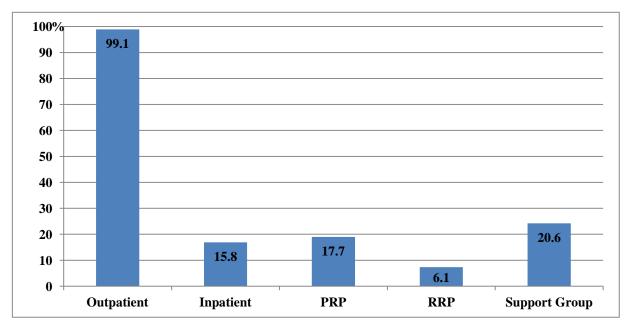


Figure 1: Reported Use of Services and Supports by Adult Survey Respondents

Service use was assessed by asking respondents about their recent use of mental health services and supports. As seen in Figure 1, nearly all respondents (99.1%) reported receiving some type of outpatient mental health treatment service. Inpatient mental health treatment was reported by 15.8% of respondents. 17.7% of respondents reported utilizing services from a psychiatric rehabilitation program (PRP), 6.1% reported utilizing a residential rehabilitation program (RRP), and 20.6% reported participating in a mental health self-help group for support (e.g., On Our Own, depression support group, family support group, etc.).

OUTCOME MEASURES

Respondents were asked how they had benefited from the mental health services they received. Each question started with the statement, "As a direct result of all the mental health services I received" and was followed by the specific outcome of service. Respondents indicated the degree to which they agreed or disagreed with the statement using a five-point Likert scale of "strongly agree," "agree," "neutral," "disagree," and "strongly disagree." The percentage of agreement ranged from 57.3% to 77.1% across outcome measures, as seen in Figure 2. Employed survey respondents reported a higher level of agreement than unemployed respondents with all 16 outcome statements. The 2013 and 2014 survey results are also included in the table for comparison purposes, although analyses for statistically significant differences were not conducted.

Figure 2. Outcome Measures

Statement	Stro	Strongly Agree/ Agree			Neutral		Strongly Disagree/ Disagree			
		2014	2013	2015	2014	2013	2015	2014	2013	
I deal more effectively with daily problems.*	76.5	72.3	75.9	12.8	16.1	13.5	10.7	11.5	10.6	
I am better able to control my life. *	72.9	72.6	74.3	15.1	16.9	15.0	12.0	10.5	10.7	
I am better able to deal with crisis. *	72.1	70.4	71.0	13.6	16.4	16.0	14.3	13.2	12.9	
I am getting along better with my family. *	71.5	71.0	72.5	16.7	17.2	14.4	11.8	11.7	13.1	
I do better in social situations. *	64.6	62.4	62.6	18.8	18.2	18.5	16.6	19.4	18.9	
I do better in school and/or work. *	61.6	63.1	64.3	18.4	18.1	18.1	20.0	18.8	17.6	
My housing situation has improved. *	58.3	59.6	61.8	19.8	20.2	17.1	22.0	20.2	21.0	
My symptoms are not bothering me as much. *	57.3	57.0	55.3	15.3	16.9	17.5	27.4	26.1	27.2	
I do things that are more meaningful to me. *	73.0	69.8	70.4	13.6	16.3	15.0	13.4	13.9	14.5	
I am better able to take care of my needs. *	73.1	72.3	73.0	14.4	16.3	15.8	12.4	11.4	11.2	
I am better able to handle things when they go wrong. *	68.7	65.3	64.9	17.2	17.6	17.2	14.1	17.0	17.9	
I am better able to do things that I want to do. *	63.4	65.2	64.4	18.9	18.1	16.5	17.8	16.7	19.1	
I am happy with the friendships I have. *	73.3	74.3	74.2	14.4	15.5	16.1	12.4	10.2	9.7	
I have people with whom I can do enjoyable things. *	77.1	79.4	76.7	10.1	10.7	10.7	12.8	9.9	12.5	
I feel I belong in my community. *	64.9	69.1	67.5	17.5	16.2	16.9	17.5	14.8	15.7	
In a crisis, I would have the support I need from family or friends. *	76.7	78.4	77.7	10.4	10.6	10.1	12.9	10.9	12.2	

^{*} Employed survey respondents reported a higher level of agreement than unemployed respondents with 16 of the 16 outcome statements.

OVERALL SATISFACTION

Overall satisfaction with mental health services received was assessed using the same Likert scale as was used for the outcome measures. A majority of the respondents (85.0%) reported agreement or strong agreement with the statement, "Overall, I am satisfied with the mental health services I received." This suggests a relatively high degree of overall satisfaction with mental health services provided by the PMHS to these adults.

SATISFACTION WITH SPECIFIC SERVICES

Respondents were asked about their satisfaction with multiple aspects of the outpatient mental health treatment and psychiatric rehabilitation services they received, using the same Likert scale as was used for the outcome measures. Respondents were generally satisfied with the services provided, as Figures 3 and 4 indicate. The percent of agreement for items addressing outpatient mental health treatment services satisfaction exceeded 71.0% for all items. The percent of agreement for items addressing satisfaction with psychiatric rehabilitation services exceeded 80.0% for all items. Similar to Figure 2, the 2013 and 2014 survey results are provided in Figures 3 and 4 for comparison purposes, although analyses for statistically significant differences were not conducted.

REFERRAL AND ACCESS TO SUBSTANCE USE SERVICES

Only 15.4% of the survey respondents reported that they attempted to get or had been referred for substance use services. Of those, 93.7% reported they were able to access substance use services.

COORDINATION OF CARE

A majority of survey respondents (91.7%) reported having a primary health care provider. Of those, 37.4% answered "yes" to the question, "To your knowledge, have your primary care provider and your mental health provider spoken with each other about your health?" This response represents a slight decrease from the 2014 survey (38.8%).

Figure 3. Satisfaction with Outpatient Mental Health Treatment Services

Statement	Strongly Agree/ Agree				Neutral		Strongly Disagree/ Disagree			
		2014	2013	2015	2014	2013	2015	2014	2013	
I like the services that I received.	87.9	85.5	86.4	6.2	7.7	5.4	5.8	6.8	8.2	
If I had other choices, I would still get services from this provider.	82.6	80.4	82.7	6.7	7.4	5.5	10.7	12.2	11.8	
I would recommend this provider to a friend or a family member.	86.2	83.8	84.3	4.2	5.2	4.7	9.6	11.0	11.0	
The location of services was convenient.	85.6	86.3	85.4	6.2	5.9	5.6	8.2	7.7	8.9	
Staff were willing to see me as often as I felt it was necessary.	86.0	87.0	86.5	5.4	4.7	4.0	8.6	8.3	9.6	
Staff returned my calls in 24 hours.	80.8	79.1	79.5	5.1	8.2	6.7	14.2	12.7	13.8	
Services were available at times that were good for me.	89.8	88.6	87.9	4.5	5.0	3.9	5.7	6.3	8.2	
I was able to get all the services I thought I needed.	82.0	81.4	80.9	4.6	5.0	5.3	13.4	13.5	13.7	
I was able to see a psychiatrist when I wanted to.	77.7	76.6	78.0	6.2	7.8	6.1	16.1	15.5	15.9	
Staff here believe that I can grow, change, and recover.	89.6	87.8	87.5	5.2	8.4	7.0	5.1	3.8	5.5	
I felt comfortable asking questions about my treatment and medication.	90.3	90.0	91.1	3.6	4.4	3.3	6.0	5.7	5.6	
I felt free to complain.	86.9	86.5	87.4	4.7	5.1	4.6	8.5	8.5	8.0	
I was given information about my rights.	90.5	91.5	91.2	3.2	2.7	2.8	6.3	5.9	6.0	
Staff encouraged me to take responsibility for how I live my life.	90.5	87.2	87.8	4.6	6.8	5.6	4.9	5.9	6.6	
Staff told me what side effects to watch out for.	82.2	82.1	81.0	4.4	6.3	6.2	13.3	11.5	12.8	
Staff respected my wishes about who is and is not to be given information about my treatment.	93.7	92.1	93.9	2.8	4.1	2.7	3.5	3.8	3.4	
I, not staff, decided my treatment goals.	79.1	77.0	76.7	10.9	12.1	10.1	10.0	11.0	13.2	
Staff helped me obtain the information I needed so that I could take charge of managing my illness.	85.8	85.9	84.9	6.1	6.2	6.9	8.0	7.8	8.2	
I was encouraged to use consumer-run programs.	71.2	72.8	68.4	8.3	10.0	10.1	20.6	17.1	21.5	
Staff were sensitive to my cultural or ethnic background.	84.9	84.7	83.8	8.9	8.2	9.4	6.2	7.2	6.9	
Staff respected my family's religious or spiritual beliefs.	90.0	88.2	89.0	7.3	7.8	8.1	2.7	3.9	3.0	
Staff treated me with respect.	93.7	93.8	95.2	2.8	3.4	1.5	3.5	2.7	3.3	
Staff spoke with me in a way that I understood.	95.3	95.4	96.3	1.4	2.4	1.8	3.3	2.2	2.0	

Figure 4. Satisfaction with Psychiatric Rehabilitation Program Services

Statement		ngly Ag Agree	gree/		Neutral		Strongly Disagree/ Disagree			
	2015	2014	2013	2015	2014	2013	2015	2013		
I like the services that I received.	91.7	86.9	91.1	2.1	5.8	4.5	6.2	7.4	4.5	
If I had other choices, I would still get services from this provider.	88.9	81.4	87.7	3.5	4.3	4.4	7.6	14.4	7.9	
I would recommend this provider to a friend or a family member.	88.3	87.9	87.7	4.8	3.2	4.4	6.9	9.0	7.9	
The location of services was convenient.	91.7	86.4	88.1	1.4	5.2	5.5	6.9	8.4	6.5	
Staff were willing to see me as often as I felt it was necessary.	87.5	86.8	87.1	5.6	2.6	3.5	6.9	10.5	9.5	
Staff returned my calls in 24 hours.	82.1	80.8	80.9	5.7	6.6	5.2	12.1	12.6	13.9	
Services were available at times that were good for me.	88.9	84.6	88.6	2.8	10.1	5.4	8.3	5.3	5.9	
I was able to get all the services I thought I needed.	82.1	85.4	87.9	8.3	6.3	4.0	9.7	8.4	8.0	
Staff here believe that I can grow, change, and recover.	93.6	91.5	89.1	3.5	4.8	4.1	2.8	3.8	6.7	
I felt comfortable asking questions about my rehabilitation.	90.2	92.6	92.0	3.5	3.2	2.5	6.3	4.2	5.5	
I felt free to complain.	84.6	84.6	88.0	9.1	3.7	3.5	6.3	11.7	8.5	
I was given information about my rights.	92.4	91.1	94.1	1.4	2.1	1.5	6.3	6.8	4.5	
Staff encouraged me to take responsibility for how I live my life.	91.5	90.6	87.9	3.5	5.8	5.1	5.0	3.7	7.1	
Staff respected my wishes about who is and is not to be given information about my rehabilitation.	91.6	90.2	93.5	2.1	5.4	1.5	6.3	4.4	5.0	
I, not staff, decided my rehabilitation goals.	83.2	77.5	81.1	7.0	11.5	8.7	9.8	10.9	10.2	
Staff helped me obtain the information I needed so that I could take charge of managing my illness.	86.7	88.9	87.8	6.3	5.3	5.6	7.0	5.9	6.6	
I was encouraged to use consumer-run programs.	80.3	85.2	82.3	7.7	4.9	6.6	12.0	9.9	11.1	
Staff were sensitive to my cultural or ethnic background.	85.9	94.3	85.2	5.9	2.3	8.2	8.1	3.4	6.6	
Staff respected my family's religious or spiritual beliefs.	88.2	95.3	88.1	6.6	2.4	9.2	5.1	2.4	2.7	
Staff treated me with respect.	95.2	93.2	93.0	1.4	3.7	3.0	3.4	3.1	4.0	
Staff spoke with me in a way that I understood.	93.1	94.7	96.0	1.4	2.1	1.0	5.5	3.1	3.0	

IV. CHILD AND CAREGIVER SURVEY RESULTS

Telephone interviews were conducted with the caregivers of children served by Maryland's PBHS to assess their perception of care, including satisfaction with and outcomes of services rendered. These children received outpatient mental health treatment and/or family support services (i.e., psychiatric rehabilitation, mobile treatment, case management, and/or respite care) between January and December 2014. A total of 2,072 caregivers were successfully contacted to request participation in the survey. Of those contacted, 753 completed the survey for a response rate of 36.3%

DEMOGRAPHIC CHARACTERISTICS

Table 2 presents demographic characteristics of the children served.

Table 2. Characteristics of Children

C	Characteristic	%
Gender	Female	37.2
Gender	Male	62.8
	1-4	3.9
Ago	5-9	36.5
Age	10-14	49.7
	15 and older	10.0
	Black or African-American	52.2
Race	White or Caucasian	40.4
	Other	7.4
Ethnicity	Spanish, Hispanic, or Latino	14.1
Education	Currently in school	95.2
Education	Have repeated a grade	14.6

Table 3 presents demographic characteristics of the caregiver respondents of the children served.

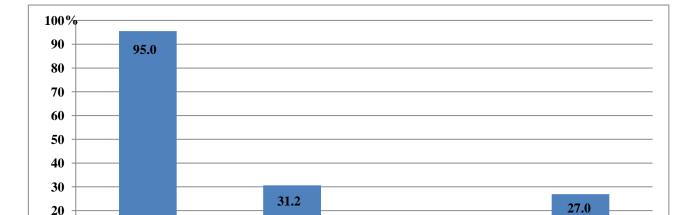
Table 3. Characteristics of Caregiver Respondents

Characteristic						
Gender	Female	90.8				
	Male	9.2				
	19-50	71.7				
Age	51-70	20.8				
g	71 and older	0.9				
	Refused/Don't Know	6.5				
	Black or African-American	45.3				
	White or Caucasian	41.4				
Race	More than one race reported	3.5				
	Other	7.8				
	Refused/Don't Know	2.0				
Ethnicity	Spanish, Hispanic, or Latino	9.0				

SERVICE USE

10

0



8.4

Inpatient

Support Group

Figure 5: Caregivers Report of Services Used by Child Consumers

Caregiver respondents were asked about their child's recent use of mental health services. As seen in Figure 5, nearly all of the caregiver respondents (95.0%) indicated their child had received some type of outpatient mental health treatment service. In addition, 31.2% reported receiving family support services, 8.4% indicated their child had stayed overnight in a hospital for an emotional or behavioral problem, and 27.0% reported that their child had participated in a mental health support group (e.g., peer counseling).

Family Support Services

OUTCOME MEASURES

Outpatient

Caregiver respondents were asked how their child had benefited from the mental health services received. Each question started with the statement, "As a direct result of all of the mental health services my child and family received" and was followed by the specific outcome of services. Caregiver respondents indicated the degree to which they agreed or disagreed with the statement using a five-point Likert scale of "strongly agree," "agree," "neutral," "disagree" and "strongly disagree." The percent of agreement ranged from 55.5% to 75.8% across child outcome measures, as seen in Figure 6. The 2013 and 2014 survey results are also included in the table for comparison purposes, although analyses for statistically significant differences were not conducted.

Four additional questions assess the "social connectedness" of caregivers of children. The range of agreement for these questions is 86.3% to 94.1%.

Figure 6. Outcome Measures

Statement		ongly Ag Agree	gree/		Neutral		Strongly Disagree/ Disagree			
		2014	2013	2015	2014	2013	2015	2014	2013	
My child is better at handling daily life.	71.2	69.9	69.1	15.7	17.9	19.1	13.2	12.2	11.9	
My child gets along better with family members.	70.5	74.3	70.4	16.3	15.5	18.4	13.3	10.2	11.2	
My child gets along better with friends and other people.	71.7	73.9	72.8	15.7	16.4	17.6	12.7	9.7	9.6	
My child is doing better in school and/or work.	66.7	68.2	68.5	12.5	17.1	16.6	20.8	14.7	14.9	
My child is better able to cope when things go wrong.	58.1	59.7	61.2	18.4	21.2	20.6	23.5	19.0	18.2	
I am satisfied with our family life right now.	75.8	74.3	76.5	10.4	13.8	11.0	13.8	11.9	12.5	
My child is better able to do things he or she wants to do.	72.9	76.3	74.7	17.2	14.6	14.4	9.9	9.1	10.9	
My child is better able to control his or her behavior.	55.5	59.7	60.3	20.3	20.5	19.3	24.2	19.7	20.4	
My child is less bothered by his or her symptoms.	61.3	60.4	64.1	20.3	22.4	18.2	18.4	17.3	17.7	
My child has improved social skills.	69.7	71.1	71.0	15.7	16.7	15.6	14.6	12.2	13.3	
As a direct result of the mental health services my child and	family re	eceived:								
I know people who will listen and understand me when I need to talk.	86.3	86.4	88.6	8.5	7.4	6.5	5.2	6.2	4.9	
I have people that I am comfortable talking with about my child's problems.	89.2	90.5	91.4	5.8	4.7	3.8	5.1	4.7	4.9	
In a crisis, I would have the support I need from family or friends.	90.8	87.0	90.2	3.9	7.2	4.8	5.3	5.8	5.0	
I have people with whom I can do enjoyable things.	94.1	91.9	93.1	3.1	5.3	3.4	2.8	2.8	3.5	

OVERALL SATISFACTION

Overall satisfaction with mental health services received was assessed using the same Likert scale as was used for the outcome measures. A majority of the caregiver respondents (82.8%) reported agreement or strong agreement with the statement, "Overall, I am satisfied with the mental health services my child received." This finding suggests a relatively high degree of overall caregiver respondent satisfaction with mental health services provided by the PBHS to their children.

SATISFACTION WITH SPECIFIC SERVICES

Caregiver respondents were asked about their satisfaction with multiple aspects of the outpatient mental health treatment and family support services that their children received, using the same Likert scale as was used for the outcome measures. Caregiver respondents were generally satisfied with the services provided, as Figures 7 and 8 indicate. The percent of agreement for items addressing outpatient mental health treatment services satisfaction exceeded 76.0% for all items. Likewise, the percent of agreement for items addressing family support services satisfaction exceeded 80.0% for all items. 2013 and 2014 survey results are provided in Figures 7 and 8 for comparison purposes.

REFERRAL AND ACCESS TO SUBSTANCE USE SERVICES

Only 5.6% of the caregiver respondents reported that their child had attempted to get or had been referred for substance use services. Of those children, 100.0% of caregiver respondents reported that they were able to access substance use services.

COORDINATION OF CARE

A majority of caregiver respondents (98.4%) reported that their child has a primary health care provider, and a majority of caregiver respondents (87.0%) reported that their child had seen their primary care provider in the previous year. Over one-third (36.3%) of caregiver respondents responded "yes" to the question, "To your knowledge, has (child)'s primary health care provider and (child)'s mental health provider spoken with each other about (child)'s health or mental health?" This response represents a slight decrease from the 2014 survey (38.0%).

Figure 7. Satisfaction with Outpatient Mental Health Treatment Services

Statement 2		ongly Ag Agree	gree/		Neutral		Strongly Disagree/ Disagree			
		2014	2013	2015	2014	2013	2015	2014	2013	
Overall, I am satisfied with the services my child received.	85.4	83.8	85.6	7.0	9.5	6.8	7.6	6.7	7.6	
I helped choose my child's services.	90.1	88.3	89.0	2.8	6.0	3.9	7.0	5.8	7.1	
I helped choose my child's treatment goals.	88.3	89.8	89.9	4.6	3.7	4.0	7.1	6.5	6.1	
The people helping my child stuck with us no matter what.	84.9	86.1	86.1	5.2	6.1	4.9	9.9	7.9	9.0	
I felt my child had someone to talk to when he/she was troubled.	87.4	86.5	87.4	6.4	6.6	6.2	6.3	6.9	6.3	
I participated in my child's treatment.	96.9	96.6	95.1	1.0	1.2	1.7	2.1	2.2	3.1	
The services my child and/or family received were right for us.	86.8	85.2	85.5	6.4	8.3	7.3	6.8	6.4	7.3	
The location of services was convenient for us.	84.9	83.1	87.3	5.6	6.7	5.8	9.5	10.1	6.8	
Services were available at times that were convenient for us.	83.8	85.5	85.8	7.2	5.3	4.5	9.0	9.1	9.8	
My family got the help we wanted for my child.	83.0	82.6	82.7	7.5	9.4	6.9	9.6	7.9	10.4	
My family got as much help as we needed for my child.	76.1	74.7	76.3	10.5	11.1	9.5	13.5	14.2	14.2	
Staff treated me with respect.	97.3	96.4	96.4	1.5	2.3	2.4	1.1	1.3	1.2	
Staff respected my family's religious or spiritual beliefs.	96.3	94.7	94.8	3.4	4.1	4.6	0.3	1.2	0.5	
Staff spoke with me in a way that I understood.	97.6	97.9	98.0	1.3	1.2	1.0	1.1	0.9	1.0	
Staff were sensitive to my cultural or ethnic background.	94.6	95.4	94.1	4.5	3.6	5.1	0.9	1.0	0.8	
I felt free to complain.	91.9	92.4	93.7	4.3	3.3	2.8	3.8	4.3	3.5	

Figure 8. Satisfaction with Family Support Services

Statement 2		ongly Ag Agree	gree/		Neutral		Strongly Disagree/ Disagree		
		2014	2013	2015	2014	2013	2015	2014	2013
Overall, I am satisfied with the services my child received.	87.1	86.8	87.5	8.2	6.8	4.2	4.7	6.5	8.3
I helped choose my child's services.	88.5	88.6	88.8	3.0	6.5	1.9	8.5	5.0	9.3
I helped choose my child's service goals.	88.0	92.7	91.6	5.2	3.5	2.3	6.9	3.9	6.0
The people helping my child stuck with us no matter what.	88.8	88.2	88.9	6.9	5.3	2.8	4.3	6.5	8.3
I felt my child had someone to talk to when he/she was troubled.	90.0	88.9	90.6	3.5	6.5	2.3	6.5	4.6	7.0
I participated in my child's services.	96.6	95.8	94.9	1.7	2.7	1.4	1.7	1.5	3.7
The services my child received were right for us.	87.9	86.3	88.4	6.1	8.4	2.8	6.1	5.3	8.8
The location of services was convenient for us.	82.1	85.7	89.8	8.1	8.7	1.9	9.8	5.7	8.4
Services were available at times that were convenient for us.	85.0	86.8	87.5	5.6	4.9	3.7	9.4	8.3	8.8
My family got the help we wanted for my child.	84.5	84.4	84.3	8.2	7.6	4.1	7.3	8.0	11.5
My family got as much help as we needed for my child.	80.3	77.2	78.2	7.7	11.2	7.4	12.0	11.6	14.4
Staff treated me with respect.	97.9	96.6	96.3	.9	1.5	1.9	1.3	1.9	1.9
Staff respected my family's religious or spiritual beliefs.	95.9	93.6	95.5	2.8	4.7	4.0	1.4	1.7	0.5
Staff spoke with me in a way that I understood.	99.1	96.2	99.1	0.0	1.9	0.5	0.9	1.9	0.5
Staff were sensitive to my cultural or ethnic background.	94.4	93.3	97.5	5.1	5.0	2.5	0.5	1.7	0.0
I felt free to complain.	94.8	94.2	93.3	2.6	4.7	1.9	2.6	1.2	4.8

V. SUMMARY

Statewide telephone surveys were administered to assess consumers' perceptions of services received through Maryland's Public Behavioral Health System. These surveys represent the fifteenth systematic, statewide assessment of consumer perception of care since 1997. Data collection, data analysis, and documentation of the survey findings were subcontracted through Fact Finders, Inc. on behalf of ValueOptions[®], Inc. and the Behavioral Health Administration (formerly the Mental Hygiene Administration).

The potential survey population consisted of PBHS consumers for whom claims were received for outpatient mental health services rendered between January and December 2014. The sample was stratified by age and county of residence. Individuals were then randomly selected from among these groups. Service types for adults included outpatient mental health treatment services or psychiatric rehabilitation services. Service types for children and adolescents included outpatient mental health treatment services or family support services (i.e., psychiatric rehabilitation, mobile treatment, case management, and/or respite services). Individuals (16 years of age or older at the time of service) responded to the adult survey on their own behalf, while parents or caregivers responded to the child survey on behalf of children and adolescents under the age of 16.

Of the 2,480 adult consumers who were successfully contacted and asked to participate, 817 completed the telephone interview for a response rate of 32.9%. Of the 2,072 caregivers who were successfully contacted and asked to participate in the survey, 753 completed the telephone interview for a response rate of 36.3%.

Both adults and caregivers were satisfied overall with the mental health services they or their children received: 85.0% of adults and 82.8% of caregivers of children agreed or strongly agreed that, "Overall I am satisfied with the mental health services I (my child) received." Regarding satisfaction with specific aspects of outpatient mental health treatment services, over 71.0% of adults responded positively for all 23 survey items (range 71.2% to 95.3%). Regarding satisfaction with specific aspects of psychiatric rehabilitation services, over 80.0% of adults responded positively for all 21 survey items (range of 80.3% to 95.2%). Regarding satisfaction with specific aspects of outpatient mental health treatment services for children, over 76.0% of caregivers responded positively for all 16 survey items (range of 76.1% to 97.6%). Regarding satisfaction with specific aspects of family support services for children, over 80.0% of caregivers responded positively for all 16 survey items (range of 80.3% to 99.1%).

Responses to the 16 adult survey items that assess outcomes of care ranged from 57.3% to 77.1% agreement. Responses to the 10 caregiver survey items that assess outcomes of care for children ranged from 55.5% to 75.8% agreement. Over 86.0% of caregivers responded positively to each of the four outcomes items assessing "social connectedness" of the caregivers themselves.

It is hoped that these survey findings will be used to identify opportunities for improvement in the PBHS.



Larry Hogan, Governor

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