

# **MHSIP Consumer Survey Technical Report Fiscal Year 2009**

**A Report from the Colorado Department of Human Services**

Division of Behavioral Health



---

**This report was prepared by:**

Samantha A. Farro, Ph.D.  
Division of Behavioral Health, Data and Evaluation

## About this Report

In 2009 and 2010, the Colorado Division of Behavioral Health (DBH) conducted its thirteenth annual Mental Health Statistics Improvement Program (MHSIP) Consumer Survey with a focus on services provided in State Fiscal Year 2009 (July 1, 2008-June 30, 2009). Consistent with national trends in performance measurement, DBH administers the MHSIP Consumer Survey to assess perceptions of public behavioral health services provided in Colorado. This report, to be disseminated to all mental health centers, describes data collection, sample selection, and results of this year's survey. This information can be used to inform future change and to act as a catalyst for more in-depth study of particular domains at the center level. DBH is committed to the inclusion of consumer participation at multiple levels of behavioral health services and perceives the MHSIP survey as one way of meeting this ongoing goal.

It is important to note that the MHSIP survey has been developed at a national level in part to promulgate data standards that allow for valid results to better inform policy and decisions (for a full description of MHSIP and the survey's underlying values, please visit <http://www.mhsip.org/>). MHSIP work groups include consumers and families with the seminal aim of such groups being the promotion of consumer-oriented services through data. DBH has a vested interest in promoting these values in Colorado as the state moves toward a recovery-oriented behavioral health system. Continuing the national-state MHSIP partnership is key to this endeavor. As evidence of the weight that DBH has placed on the promotion of consumer-driven services, it is notable that the MHSIP has been incorporated into multiple levels of operations, including a federal grant application and statewide mental health center contracts. The MHSIP survey continues to provide an excellent opportunity for DBH to partner on both national and statewide levels to shape future services through data.

Thank you to all who assisted in the data collection of the MHSIP survey. Center collaboration is instrumental to the success of the survey and DBH acknowledges and appreciates the hard work of the mental health centers and clinics in this process.

### What is the MHSIP Survey?

The MHSIP Consumer Survey consists of 36 items, each answered using a Likert scale ranging from one (strongly agree) to five (strongly disagree; see Appendix A). Standardized at a national level ([http://www.mhsip.org/MHSIP\\_Adult\\_Survey.pdf](http://www.mhsip.org/MHSIP_Adult_Survey.pdf)), the survey comprises the five following domains (see Appendix B):

- Access: six items that assess perceptions about service accessibility
- Quality/Appropriateness: nine items that assess perceptions of quality and appropriateness
- Outcomes: eight items that assess perceptions of outcomes as a result of services
- Participation: two items that assess perceptions of consumer involvement in treatment
- General Satisfaction: three items that assess satisfaction with services received

Additionally, one item assesses perceived provider sensitivity to cultural/ethnic backgrounds of consumers. The questionnaire also contains items pertaining to demographic information (e.g. age, ethnicity). In addition, two open-ended questions are included in order to gather opinions about the most and least preferred aspects of services received. DBH distributes the MHSIP Consumer Survey in both English and Spanish.

### Why Did the Survey Procedures Change?

In late 2008, a work group of stakeholders was formed in order to address a number of concerns raised by Colorado's mental health centers about the MHSIP survey project. This work group consisted of representatives from DBH, Colorado's Department of Health Care Policy and Financing, Behavioral Health Organizations, and various mental health centers across the state. Meeting regularly, the

workgroup addressed several concerns from previous years including: a low number of respondents per mental health center, delayed feedback of consumers from time of service to time of data collection, high administrative and financial costs, and resulting data that was not representative of the population served. DBH would like to express our gratitude to the members of the workgroup for their hard work and dedication to improving the MHSIP and YSSF methods and procedures.

### **What Survey Procedures Changed?**

In order to address concerns from previous years, changes were made in the procedures used to collect FY 2009's MHSIP data. For the first time, surveys were given directly to consumers who were currently receiving services rather than mailed to current and discharged consumers. Additionally, consumers who chose to complete the MHSIP survey were eligible to enter a drawing to win a \$10 gift card for a local grocery or convenient stores. And lastly, this year all consumers were included in the survey regardless of payor source. This was different from previous years that included only the consumers who were indigent or on Medicaid in the sample (see Appendix G).

### **Who Received the Survey?**

The Division used a convenience sampling method whereby each of the 17 community mental health centers and the two specialty clinics, Asian Pacific and Servicios de la Raza, were provided with surveys to hand out to consumers who were receiving services during a three week period. Consumers who were attending a first appointment or an intake were excluded from the sample.

### **How Was the Survey Administered?**

DBH contracted with the State of Colorado Central Services, Integrated Document Solutions (IDS) department to prepare, mail, receive, and enter data for the FY 2009 survey period. IDS mailed 450 MHSIP packets (including a cover letter, a MHSIP survey, and a lottery ticket to enter the gift card drawing) to each of the 17 community mental health centers and 150 MHSIP packets to each of the two specialty clinics. During the three-week data collection period, consumers were offered the opportunity to complete the MHSIP survey and a lottery ticket for entering a gift card drawing. Consumers could choose to mail the survey directly to IDS in a postage-paid return envelope or could drop (completed and refused) surveys in a secure box located at the center. At the end of the data collection period, centers shipped all surveys collected to IDS where they were sorted and processed. Data from the completed surveys were then entered and forwarded to DBH by IDS.

### **What about Consumer Comments?**

Two open-ended survey questions queried consumers about their two most and least liked aspects of the services they received. In response to these questions, approximately 82% of respondents provided written comments to one or both of the questions. Upon request, DBH is able to send each center its consumers' comments in addition to the raw quantitative data. The Division's Data and Evaluation Section along with the Consumer and Family Affairs fielded phone calls regarding the survey, referring complaints and service requests to the Program Quality staff.

## **Results**

The unit of analysis for this report is at a state level. Although, DBH previously computed domain scores at the agency level, this approach was stopped because it may undermine DBH's goal to foster a collaborative and learning environment amongst Colorado's public mental health system. Rather, scores are computed at the state level and individual agencies have the option of receiving with their own data upon request.

### **Response Rate**

During the three-week data collection period, 3,218 surveys were offered to consumers. A total of 576 consumers declined to participate. The Division received a total of 2,642 completed or partially completed surveys, representing an 82.1% return rate (see Appendices F and G), an increase from the 20.4% return rate of the FY 2008 MHSIP.

## **Respondent Demographics**

The majority of the MHSIP respondents were female (60.9%), compared to 32.1% males and 0.3% transgendered (6.6% did not report gender). Regarding sexual orientation, respondents were asked to indicate which sexual orientation identity(ies) describe themselves. There were 15.1% of respondents marked “Prefer not to Answer.” Of the remaining cases, the majority of respondents identify as heterosexual (69.9%) followed by bisexual (3.6%) and lesbian or gay (3.2%). The item was left blank by 8.2% of respondents.

Following national guidelines, race and ethnicity were separated into two questions on this year’s survey. Hispanic was the sole choice for ethnicity, and 15% of respondents endorsed this item. However, 21.6% of the responses were missing, so this item may not reflect the respondents’ self-identified ethnicity accurately. Race had the following choices: American Indian/Alaska Native, White/Caucasian, Black/African American, Native Hawaiian/Pacific Islander, Asian, and Other. If a respondent chose more than one race, their racial identification was coded as Multiracial. Most respondents identified with only one racial group (77.2%). The majority of respondents identified as White/Caucasian (64.8%) followed by Black/African American (4.5%; see Appendix C). With respect to place of residence, 49.2% of respondents indicated that they lived within 5 miles of the mental health center, 23.8% lived 6-10 miles away, 13.4% lived 11 to 20 miles away, and 7.7% lived more than 20 miles away (5.9% did not responding to the item). Age Distribution as well as Marital Status are also presented in Appendix C.

*Language.* Regarding language fluency, 9.8% of respondents were bi- or multi-lingual while the majority of respondents spoke one language fluently (84.5%). Of those respondents that spoke one language, most often the language was English (82.1%) followed by Spanish (1.9%).

*Disability.* Slightly over half of the respondents in this survey (52.9%) reported having at least one type of disability (excluding mental health) and almost one-fifth of respondents (19.9%) identified as having multiple disabilities. Most frequently, respondents reported having a physical disability (23.7%) and/or a learning disability (18.1%).

*Employment.* Regarding employment, 68.5% reported not having worked at a paid job in the three months prior to the survey; however, 24.8% of the sample indicated having volunteered in this time frame.

*Criminal Background.* A small minority (5.7%) of 2009 survey respondents reported having been arrested in the past 12 months with a slightly higher proportion (9.8%) indicating having been arrested in the 12 months prior to that time frame. Please note that 21.3% or 563 responses were partially or completely missing from the items pertaining to past arrests.

*Health Services Utilization and Treatment Duration.* Descriptive statistics were employed to investigate health services utilization. Based on reports from agency staff, 30.5% of respondents were receiving Medicaid at the time of survey completion. It is important to note, however, that payor source data was missing for 42.4% of respondents. Among 2009 MHSIP respondents, 61.7% indicated having seen a physician or nurse for a health check-up, physical exam, or for an illness during the past year and an additional 10.5% indicated having seen a physician or nurse in an emergency room visit.

Respondents were asked to report the number of sessions they had attended in the last six months ranging from 0 to 26 or more sessions. Most frequently, respondents had attended 1-5 session(s) (27.9%) or 6-11 sessions (22.2%). However, 15.3% of 2009 MHSIP respondents attended 12-18 sessions, 10.3% attended 19-25 sessions, and 13.6% attended 26 or more sessions. Additionally, 17.6% of respondents reported that they are required by someone else (e.g., social services, court-ordered) to attend sessions. Lastly, a majority of respondents (72.9%) reported that they were receiving medication treatment through their agency at the time of survey completion.

## **MHSIP respondents compared to the CCAR population**

Chi-square tests compared survey respondents on demographic variables to Colorado adult mental health consumers as reported by FY 2008 Colorado Client Assessment Record’s (CCAR) database. The MHSIP

population significantly differed from the CCAR population in terms of Gender, Age, Race, Ethnicity, Marital Status, and Employment Status.

It is important to note that statistically significant differences may not represent meaningful differences. For instance, percentage distribution for Gender was relatively similar, suggesting that differences may, in fact, be due to the large population size from the CCAR population (n= 47,345; see Appendix D).

The MHSIP group of respondents differed significantly from the CCAR population with respect to employment status ( $\chi^2 = 284.85, p < .001$ ); specifically, 28.2% of the respondents endorsed having paid employment in comparison to 45.6% of the CCAR population. It should be noted that employment status of CCAR participants is calculated using a variable termed “Current Primary Role.” Comparing two different variables may have lead to the differences in percentages.

Regarding Medicaid Status, it is important to note that for the FY2009, DBH employed a modified MHSIP data collection strategy in order to address survey concerns from prior years. Unfortunately, with this new data collection strategy, a portion of the data regarding participants’ Medicaid status was lost. Checks have been put in place to ensure the loss of this data does not occur in future years. However, because of the loss of MHSIP Medicaid status data, comparisons were not conducted with the CCAR population data.

### Overall Domain Results

DBH computes domain scores reflecting the percentage of agreement versus disagreement for the State of Colorado. Agreement is defined as a mean that ranges from 1 to 2.49 whereas disagreement is defined as a mean that ranges from 2.50 to 5. Respondents who do not answer at least 2/3 of domain items do not receive a domain score. This method of computation follows national recommendations. Below in Table 1 are the corresponding items for each domain.

Table 1

*MHSIP Domain Items*

<p><b>Access Domain (6)</b>  <i>-The location of services was convenient.</i>  <i>-Staff were willing to see me as often as necessary.</i>  <i>-Staff returned my calls within 24 hours.</i>  <i>-Services were available at times that were good for me.</i>  <i>-I was able to get all the services I thought I needed.</i>  <i>-I was able to see a psychiatrist when I wanted to.</i></p> <p><b>Quality/Appropriateness Domain (9)</b>  <i>-Staff here believe I can grow, change, and recover.</i>  <i>-I felt free to complain.</i>  <i>-I was given information about my rights.</i>  <i>-Staff encouraged me to take responsibility for how I live my life.</i>  <i>-Staff told me what side effects to watch for.</i>  <i>-Staff respected my wishes about who is, and is not able to be given information about my treatment.</i>  <i>-Staff were sensitive to my cultural/ethnic background.</i>  <i>-Staff helped me obtain information so that I could take charge of managing my illness.</i>  <i>-I was encouraged to use consumer-run programs (support groups, drop-in centers, crisis phone line, etc.).</i></p>	<p><b>Participation in Service/Treatment Planning (2)</b>  <i>-I, not staff, decided my treatment goals.</i>  <i>-I felt comfortable asking questions about my treatment and medication.</i></p> <p><b>Consumer Perception of Outcomes (8)</b>  <i>-I deal more effectively with daily problems.</i>  <i>-I am better able to control my life.</i>  <i>-I am better able to deal with crisis.</i>  <i>-I am getting along better with my family.</i>  <i>-I do better in social situations.</i>  <i>-I do better in school and/or work.</i>  <i>-My housing situation has improved.</i>  <i>-My symptoms are not bothering me as much.</i></p> <p><b>General Satisfaction (3)</b>  <i>-I like the services that I received here.</i>  <i>-If I had other choices, I would still get services from this agency.</i>  <i>-I would recommend this agency to a friend or family member.</i></p>
--	---

Table 2 presents summary results in percentages with confidence intervals (95%) for the total scores for the 2009 fiscal year as well as for 2008 and 2007. Looking at the trends over time, the 2009 fiscal year

levels of agreement remained relatively stable or slightly higher for all domains compared to fiscal year 2008. Please refer to Appendix E where percentages of endorsement for the full Likert scale are presented by item within each domain.

Table 3

*Valid Percent Agreement by Fiscal Year*

Fiscal Year	Access	Quality/ Appropriateness	Outcomes	Participation	General Satisfaction
2007	76.0 (73.9-78.1)	75.5 (72.4-77.6)	64.0 (62.2-65.8)	78.7 (75.5-80.5)	74.3 (71.5-76.5)
2008	76.5 (73.6-78.5)	74.6 (72.5-77.5)	63.1 (60.2-65.8)	79.7 (77.7-82.3)	74.7 (72.5-77.5)
2009* (95% CI) (n)	83.9 (82.5-85.3) (2217)	86.0 (84.7-87.3) (2272)	64.0 (62.1-65.9) (1692)	75.4 (73.7-77.1) (1993)	87.6 (86.3-88.9) (2315)

\*Note: A new sampling method was utilized during Fiscal Year 2009. Because of this, comparisons across years is cautioned.

### Demographics and Domain Agreement

Analysis of variance was conducted examining relations between domain agreement and the demographic and other variables recorded on the MHSIP. To help correct for the high number of statistical tests run, a conservative approach was used for the interpretation of significance ( $p < .001$ ). Specifically, the variables of Gender, Age Group, Employment/Volunteer Status, Ethnicity, Race, Distance from Center, Language Fluency, Disability Status, Sexual Orientation Status, Relationship Status, Length of Treatment, and Criminal Justice Status were examined with relation to domain agreement.

#### Gender

Results did not find any overall significant difference between scores on domains by Gender using a significance level of  $p < .001$ . See Table 3 for Female, Male, Transgendered, and participants that Prefer Not to Answer (PNTA) percent agreement for all domains.

Table 3

*Valid Percent Agreement by Gender*

Gender (n)	Access	Quality/Appropriateness	Outcomes	Participation	General Satisfaction
Female (1531)	86.5	90.0	65.8	80.8	90.0
Male (820)	85.4	87.7	72.3	79.6	88.6
Transgendered (9)	88.9	100	55.6	100	88.9
PNTA (46)	80.4	76.0	60.4	66.7	76.5

Note. The reported *n* of each gender category reflects the smallest number of total respondents on any one domain. The number of respondents across domains fluctuated by a small amount.

#### Age

Analysis of variance results did not find any overall significant difference between scores on the domains by Age Group using a significance level of  $p < .001$ . It is important to note that, when respondents were divided by age group, the sample sizes of each group became relatively small and may have influenced results.

Table 4

*Valid Percent Agreement by Age Group*

Age Group (n)	Access	Quality/ Appropriateness	Outcomes	Participation	General Satisfaction
18-20 (75)	90.9	92.1	73.7	80.0	84.4
21-30 (390)	86.8	92.1	67.7	81.0	89.0
31-45 (792)	85.2	88.0	63.8	80.4	88.0
46-64 (771)	86.1	87.8	68.4	77.9	91.7
65-74 (56)	81.5	90.8	76.8	82.8	87.9
75+ (9)	80.0	80.0	55.6	90.0	100

Note. The reported *n* of each age category reflects the smallest number of total respondents on any one domain. The number of respondents across domains fluctuated by a small amount.

**Ethnicity**

Significant differences were found between scores on domains by Ethnicity using a significance level of  $p < .001$ . Specifically, differences were found on the Quality/Appropriateness, Participation, and Satisfaction domains between the non-Hispanic participants and participants that Prefer Not to Answer (PNTA) regarding Ethnicity. It is important to note that the sample size was much smaller for the groups of respondents that PNTA ( $n = 9$ ) relative to the non-Hispanic sample ( $n = 1335$ ) and this may have contributed to the significant findings.

Table 5

*Valid Percent Agreement by Ethnicity*

Ethnicity (n)	Access	Quality/Appropriateness	Outcomes	Participation	General Satisfaction
Hispanic (370)	90.5	93.0	68.9	84.9	92.4
Non-Hispanic (1335)	85.7	<b>89.4</b>	67.3	<b>80.3</b>	<b>89.6</b>
PNTA (9)	80.8	<b>82.4</b>	62.0	<b>70.1</b>	<b>81.7</b>

Note. The reported *n* of each ethnicity category reflects the smallest number of total respondents on any one domain. The number of respondents across domains fluctuated by a small amount.

**Race**

Results did not find any overall significant difference between scores on domains by Race using a significance level of  $p < .001$ .

Table 6

*Valid Percent Agreement by Race*

Race (n)	Access	Quality/ Appropriateness	Outcomes	Participation	General Satisfaction
American Indian/Alaska Native (76)	92.4	84.6	70.9	73.7	84.8
Asian (18)	88.9	72.2	55.6	66.7	88.9
Black/African American (111)	88.7	87.8	73.7	82.0	90.5
MultiRacial (105)	84.4	88.4	67.9	82.9	90.4
Native Hawaiian/Pacific Islander (6)	100	66.7	66.7	83.3	100
Other (100)	90.4	89.3	71.2	81.0	90.5
PNTA (135)	80.3	80.6	55.6	71.4	82.6
White/Caucasian (1637)	85.0	89.6	67.8	80.2	89.4

Note. The reported *n* of each race category reflects the smallest number of total respondents on any one domain. The number of respondents across domains fluctuated by a small amount.

## Employment

Employment status in the three months prior to completing the survey related to significant difference between levels of agreement in the Outcomes domain. Specifically, employed respondents endorsed a 75.2% agreement with the Outcome domain compared to 65.1% for the unemployed group, indicating higher levels of agreement for employed respondents for Outcome domain items.

Table 7

*Valid Percent Agreement by Employment Status within past three months*

Employment ( <i>n</i> )	Access	Quality/ Appropriateness	Outcomes	Participation	General Satisfaction
Employed (685)	88.2	91.1	<b>75.2</b>	83.0	90.8
Unemployed (1725)	85.0	87.9	<b>65.1</b>	78.7	88.5

Note. The reported *n* of each employment category reflects the smallest number of total respondents on any one domain. The number of respondents across domains fluctuated by a small amount.

## Distance to Agency

Results did not find any overall significant difference between scores on domains by Distance to Agency using a significance level of  $p < .001$  with the exception of the Access domain, where consumers living 0-5 miles away from the agency were higher than all other groups.

Table 8

*Valid Percent Agreement by Distance to Agency*

Distance ( <i>n</i> )	Access	Quality/Appropriateness	Outcomes	Participation	General Satisfaction
0-5 miles (1243)	88.5	89.0	68.6	79.5	90.2
6-10 miles (605)	85.8	88.2	66.6	81.3	88.4
11-20 miles (336)	80.1	89.0	68.2	80.1	87.5
20+ miles (195)	80.7	90.0	67.7	81.0	89.6

Note. The reported *n* of each distance to agency category reflects the smallest number of total respondents on any one domain. The number of respondents across domains fluctuated by a small amount.

## Sexual Orientation

Results did not find any overall significant difference between scores on domains by Sexual Orientation identity using a significance level of  $p < .001$ . See Table 8 for the percent agreement of all domains by sexual orientation.

Table 9

*Valid Percent Agreement by Sexual Orientation*

Sexual Orientation ( <i>n</i> )	Access	Quality/Appropriateness	Outcomes	Participation	General Satisfaction
Bisexual (86)	79.1	81.8	69.8	79.3	79.1
Lesbian/Gay (82)	86.8	92.8	68.7	86.6	94.0
Heterosexual (1755)	86.1	89.5	67.5	80.6	90.0

Note. The reported *n* of each sexual orientation category reflects the smallest number of total respondents on any one domain. The number of respondents across domains fluctuated by a small amount.

## Relationship Status

Results did not find any overall significant difference between scores on domains by Relationship Status using a significance level of  $p < .001$ . See Table 9 for the percent agreement of all domains by status.



Table 10

*Valid Percent Agreement by Relationship Status*

Relationship Status ( <i>n</i> )	Access	Quality/Appropriateness	Outcomes	Participation	General Satisfaction
Divorced (412)	85.6	87.4	63.4	80.4	91.4
Living w/ Sig. Other (126)	88.4	93.0	64.6	81.8	86.1
Married (404)	89.1	91.2	70.7	83.2	91.6
Multiple Statuses (76)	83.3	88.5	72.4	84.6	89.9
Separated (100)	85.2	92.5	66.0	87.4	85.2
Single (1096)	85.2	87.8	69.3	78.2	88.6
Widowed (75)	87.3	91.1	69.7	82.7	96.3
PNTA (100)	81.4	85.4	60.0	69.3	81.4

Note. The reported *n* of each relationship status category reflects the smallest number of total respondents on any one domain. The number of respondents across domains fluctuated by a small amount.

**Disability**

Results indicate significant differences between scores on domains by Disability at a significance level of  $p < .001$  for the Access, Outcomes, and Participation domains. However, post-hoc analyses did not demonstrate significant differences between specific types of Disability, perhaps due to the small sample size within each disability group. Disability was then recoded into a dichotomous variable that compared consumers who had the presence of any disability to those that did not. T-test analysis was used to compare the means between groups and results indicate that a statistically significant difference exists for the percent agreement on the Outcomes domain between those with and without the presence of a disability. See Table 10 comparisons of percent agreement for all domains by disability.

Table 11

*Valid Percent Agreement by Disability*

Disability ( <i>n</i> )	Access	Quality/Appropriateness	Outcomes	Participation	General Satisfaction
Blind/Partially Sighted	93.6	93.8	74.2	77.4	96.9
Deaf/Hard of Hearing	88.4	90.7	65.1	78.6	90.7
Developmental	85.0	87.1	66.3	81.1	88.2
Learning	90.4	90.6	66.7	78.8	88.0
None	88.0	91.3	77.6	84.9	89.9
Physical	84.3	85.0	62.1	77.6	89.5
TBI	91.1	90.2	68.3	73.8	91.1
Other	89.0	90.7	60.7	80.0	88.0
PNTA	75.4	80.3	53.5	68.8	84.8

Note. The reported *n* of each disability category reflects the smallest number of total respondents on any one domain. The number of respondents across domains fluctuated by a small amount.

**Discussion and Implications**

The MHSIP Consumer Survey offers valuable information on consumer perspectives of Colorado behavioral health services. However, it is important to interpret these findings with caution for several reasons. For example, it is important to note that the sampling method used for the current project only samples consumers who are attending sessions at a mental health agency. This data does not capture the opinions of consumers who have discontinued service with the agency for whatever reason or those unable to access services at all. Additionally, there were significant demographic differences between the CCAR mental health population and MHSIP sample on all demographic variables (see Appendix D).

Despite some limitations, the FY09 MSHIP data provide very rich information that may be helpful for informing future behavioral health services. Overall, the majority of respondents indicated that their perceptions of Access, Quality/Appropriateness, Participation and General Satisfaction were generally satisfactory. The Outcomes domain was noted as having the lowest levels of agreement. However, this domain had a higher percentage of “Neutral” or “Not Applicable” responses compared to the other domains. Respondents reported higher levels of feeling neutral about the impact that services had on their daily lives as compared to the other domains.

Although in the past, analysis of patterns in data across fiscal years were described, it was not appropriate to include in this year’s report due to the significant changes in sampling method used this year.

In summary, the MHSIP 2009 provides invaluable data regarding consumer perceptions and supports the ideals of a consumer-driven model; this information can inform change and highlight strengths for individual mental health centers and for the state as a whole.

*For information regarding this report please contact Samantha Farro, Ph.D. at the Division of Behavioral Health, 3824 W. Princeton Circle, Denver, CO 80236, 303-866-7400.*



**Appendix A**  
**COLORADO DIVISION OF BEHAVIORAL HEALTH SURVEY**

Please indicate your agreement with each of the following statements by circling the number that best represents your opinion. Please answer all questions. If the question is about something you have not experienced, circle the number 9, to indicate that this item is “not applicable” to you.

	Strongly Agree	Agree	I am Neutral	Disagree	Strongly Disagree	Not Applicable
1 I liked the services that I received here.	1	2	3	4	5	9
2 If I had other choices, I would still get services from this agency.	1	2	3	4	5	9
3 I would recommend this agency to a friend or family member.	1	2	3	4	5	9
4 The location of services was convenient (parking, public transportation, distance, etc).	1	2	3	4	5	9
5 Staff were willing to see me as often as I felt it was necessary.	1	2	3	4	5	9
6 Staff returned my calls within 24 hours.	1	2	3	4	5	9
7 Services were available at times that were good for me.	1	2	3	4	5	9
8 I was able to get the services I thought I needed.	1	2	3	4	5	9
9 I was able to see a psychiatrist when I wanted to.	1	2	3	4	5	9
10 Staff here believe I can grow, change and recover.	1	2	3	4	5	9
11 I felt comfortable asking questions about my treatment and medication.	1	2	3	4	5	9
12 I felt free to complain.	1	2	3	4	5	9
13 I was given information about my rights.	1	2	3	4	5	9
14 Staff encouraged me to take responsibility for how I live my life.	1	2	3	4	5	9
15 Staff told me what side-effects to watch for.	1	2	3	4	5	9
16 Staff respected my wishes about who is, and is not to be given information about my treatment.	1	2	3	4	5	9
17 I, not staff, decided my treatment goals.	1	2	3	4	5	9
18 Staff were sensitive to my cultural/ethnic background.	1	2	3	4	5	9
19 Staff helped me obtain information so that I could take charge of managing my illness.	1	2	3	4	5	
20 I was encouraged to use consumer-run programs (support groups, drop-in centers, crisis phone line, etc.).	1	2	3	4	5	9

AS A DIRECT RESULT OF SERVICES I RECEIVED:		Strongly Agree	Agree	I am Neutral	Disagree	Strongly Disagree	Not Applicable
21	I deal more effectively with daily problems.	1	2	3	4	5	9
22	I am better able to control my life.	1	2	3	4	5	9
23	I am better able to deal with crises.	1	2	3	4	5	9
24	I am getting along better with my family.	1	2	3	4	5	9
25	I do better in social situations.	1	2	3	4	5	9
26	I do better in school and/or work.	1	2	3	4	5	9
27	My housing situation has improved.	1	2	3	4	5	9
28	My symptoms are not bothering me as much.	1	2	3	4	5	9
29	In a crisis, I would have the support I need from family or friends.	1	2	3	4	5	9
30	I am happy with the friendships I have.	1	2	3	4	5	9
31	I have people with whom I can do enjoyable things.	1	2	3	4	5	9
32	I feel I belong in my community.	1	2	3	4	5	9
33	I do things that are more meaningful to me.	1	2	3	4	5	9
34	I am better able to take care of my needs.	1	2	3	4	5	9
35	I am better able to handle things when they go wrong.	1	2	3	4	5	9
36	I am better able to do things that I want to do.	1	2	3	4	5	9

37. What two things do you like the **most** about the services you receive?

38. What two things do you like the **least** about the mental health services you receive?

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

39. Approximately how many mental health sessions have you attended through this Center in the **past six months (26 weeks), not including today?**

- 0
  1-5
  6-11
  12-18
  19-25
  26+

**EMPLOYMENT**

40. During the past 3 months did you work at a paid job?  Yes  No  
41. During the past 3 months have you spent time doing volunteer work?  Yes  No

42. In the last year, did you see a medical doctor (or nurse) for a health check up or because you were sick? (Check one)  
 Yes, in a clinic, office, or home visit  Yes, but only in a hospital emergency room  No  Do not remember

43. Are you being prescribed medication from this Center?  Yes  No  
43a. If yes, did the doctor or nurse tell you what side effects to watch for?  Yes  No

44. How long have you received mental health services from this Center?  
 a. Less than a year (less than 12 months) (continue to Question 45)  
 b. 1 year or more (at least 12 months) (Skip to Question 48)

45. Were you arrested since you began to receive mental health services from this Center?  
 Yes  No

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

47. Since you began to receive mental health services from this Center, 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)

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

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

50. 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)

51. Are you required by someone else to attend mental health sessions (e.g., social services, court-ordered)?  
 Yes  No

**Please answer the following questions to let us know a little about you.**

52. Gender:  Woman  Man  Transgender  I prefer not to answer

53. Distance from your home to this mental health center: (Please choose one.)  
 0-5 miles  6-10 miles  11-20 miles  20+ miles

54. Age Group:  18-20  21-30  31-45  46-64  65-74  75+

55. Ethnicity:  I am Hispanic/Latino/a  I prefer not to answer  
 I am not Hispanic/Latino/a

56. Race: (Mark all that apply)
- |  |   |
|--|---|
| <input type="checkbox"/> American Indian/Alaska Native | <input type="checkbox"/> Asian                            |
| <input type="checkbox"/> Black/African American        | <input type="checkbox"/> Native Hawaiian/Pacific Islander |
| <input type="checkbox"/> White/Caucasian               | <input type="checkbox"/> Other: _____                     |
| <input type="checkbox"/> I prefer not to answer        |   |

57. In which language(s) do you speak fluently? (Mark all that apply)
- |   |  |
|---|--|
| <input type="checkbox"/> English                | <input type="checkbox"/> Chinese (Mandarin or Cantonese) |
| <input type="checkbox"/> Spanish                | <input type="checkbox"/> Russian                         |
| <input type="checkbox"/> American Sign Language | <input type="checkbox"/> Japanese                        |
| <input type="checkbox"/> German                 | <input type="checkbox"/> Italian                         |
| <input type="checkbox"/> French                 | <input type="checkbox"/> Polish                          |
| <input type="checkbox"/> Vietnamese             | <input type="checkbox"/> Tagalog                         |
| <input type="checkbox"/> Korean                 | <input type="checkbox"/> Arabic                          |
| <input type="checkbox"/> Other _____            | <input type="checkbox"/> I prefer not to answer          |

58. Do you identify yourself as any of the following? (Mark all that apply)
- Person who is deaf or hard of hearing
  - Person who is blind or partially sighted
  - Person with a physical disability
  - Person with a developmental disability
  - Person with a learning disability
  - Person with a traumatic brain injury
  - None
  - Other \_\_\_\_\_
  - I prefer not to answer

59. How do you describe your sexual orientation?
- Heterosexual
  - Lesbian/Gay
  - Bisexual
  - I prefer not to answer

60. Current Marital/Relationship Status:
- |                                   |  |   |
|-----------------------------------|--|---|
| <input type="checkbox"/> Single   | <input type="checkbox"/> Living with Significant Other | <input type="checkbox"/> I prefer not to answer |
| <input type="checkbox"/> Married  | <input type="checkbox"/> Separated                     |   |
| <input type="checkbox"/> Divorced | <input type="checkbox"/> Widowed                       |   |

THANK YOU!

## Appendix B: Domain Items

### **Access Domain (6)**

The location of services was convenient.  
Staff were willing to see me as often as necessary.  
Staff returned my calls within 24 hours.  
Services were available at times that were good for me.  
I was able to get all the services I thought I needed.  
I was able to see a psychiatrist when I wanted to.

### **Quality/Appropriateness Domain (9)**

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

### **Participation in Service/Treatment Planning (2)**

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

### **Consumer Perception of Outcomes (8)**

I deal more effectively with daily problems.  
I am better able to control my life.  
I am better able to deal with crisis.  
I am getting along better with my family.  
I do better in social situations.  
I do better in school and/or work.  
My housing situation has improved.  
My symptoms are not bothering me as much.

### **General Satisfaction (3)**

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



## Appendix C: Demographic Information of 2009 MHSIP Respondents

MHSIP Respondents		
Gender	%	<i>n</i>
Female	60.9	1610
Male	32.1	849
Transgendered	0.3	9
Prefer Not To Answer	2	52
<i>Missing</i>	<i>4.6</i>	<i>122</i>
Race	%	<i>n</i>
American Indian/Alaska Native	3.0	79
Asian	0.7	18
Black/African American	4.5	118
Multiracial	4.4	116
Native Hawaiian/Pacific Islander	0.2	6
Other	4.1	108
White/Caucasian	64.8	1711
Prefer Not To Answer	5.5	145
<i>Missing</i>	<i>18.4</i>	<i>486</i>
Ethnicity	%	<i>n</i>
Non-Hispanic/Latina(o)	52.8	1394
Hispanic/Latina(o)	15.0	397
Prefer Not To Answer	10.6	281
<i>Missing</i>	<i>21.6</i>	<i>570</i>
Age	%	<i>N</i>
18-20	2.9	77
21-30	15.6	412
31-45	31.3	826
46-64	30.7	810
65-74	2.5	67
75+	0.4	11
<i>Missing</i>	<i>16.6</i>	<i>439</i>
Sexual Orientation*	%	<i>n</i>
Heterosexual	69.6	1840
Lesbian/Gay	3.2	85
Bisexual	3.6	94
<i>Missing</i>	<i>15.1</i>	<i>400</i>
Relationship Status	%	<i>n</i>
Single	43.8	1158
Married	15.9	420
Divorced	16.5	436
Living with a Significant Other	4.9	129
Separated	4.1	108
Widowed	3.1	83
<i>Missing</i>	<i>11.7</i>	<i>308</i>
Disability	%	<i>n</i>
Deaf/Hard of Hearing	5.9	156
Blind/Partially Sighted	4.6	122
Physical Disability	23.7	625
Developmental Disability	12.8	339
Learning Disability	18.1	479
Traumatic Brain Injury	6.5	172
Other	32.1	12.1
No Disability	35.7	943
Multiple Disabilities	19.9	527
Prefer Not To Answer	6.7	178

\*These are not mutually exclusive categories.

Appendix D: Comparison of Demographic Information of 2008 MHSIP to 2008 CCAR Respondents

<b>Gender</b>	<b>MHSIP Respondents<sup>1</sup></b>		<b>CCAR Respondents</b>	
	<b>%</b>	<b>n</b>	<b>%</b>	<b>N</b>
Female	63.9	1610	60.6	28703
Male	33.7	849	39.4	18642
<b>Age Group</b>				
18-21 years	3.5	77	6.4	3031
21-31 years	18.7	412	25.3	11973
31-45 years	37.5	826	33.6	15910
46-65 years	36.8	810	29.8	14115
65-75 years	3.0	67	3.4	1613
75+ years	0.5	11	1.5	703
<b>Race</b>				
American Indian/Alaska Native	3.7	79	1.5	687
Asian	0.8	18	0.3	403
Black/African American	5.4	117	5.8	2700
Multi-Racial	5.3	115	2.7	1257
Native Hawaiian/Pacific Islander	0.3	6	0.2	79
Other	5.0	107	13.1	6082
White/Caucasian	79.5	1709	75.9	35312
<b>Ethnicity</b>				
Non-Hispanic/Latina/o	77.8	1394	82.9	39263
Hispanic/Latina/o	22.2	397	17.1	8082
<b>Marital Status<sup>2</sup></b>				
Single/Never Married	52.5	1155	44.2	20877
Divorced	19.8	436	25.0	11802
Married	19.1	420	20.7	9782
Widowed	3.7	81	3.0	1426
Separated	4.9	108	7.2	3393
<b>Paid Employment</b>				
Yes	28.2	710	45.6	13767
No	71.8	1809	54.4	16444

<sup>1</sup> Percentages for this table differ slightly from the table in Appendix C because “Missing” values or options that were not analogous from the MHSIP and CCAR were not included for these analyses.

<sup>2</sup> The option “Living with Significant Other” was removed from this analysis because the CCAR does not have an analogous option  
 FY 2009 MHSIP Technical Report: 17

Appendix E: Percent Endorsement of MHSIP Domains by Item

Access Domain Item Endorsement

Access Item (N)	Percent Endorsement					
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Not Applicable
The location of services was convenient (2594).	48.3	32.5	10.1	4.7	1.8	0.7
Staff were willing to see me as often as necessary (2599).	51.5	33.3	7.5	3.7	1.5	0.9
Staff returned my calls within 24 hours (2604).	43.1	32.4	10.5	5.0	1.7	5.7
Services were available at times that were good for me (2600).	50.7	36.3	7.1	2.6	1.4	0.3
I was able to get all the services I thought I needed (2601).	49.7	36.4	7.6	2.6	1.9	0.3
I was able to see a psychiatrist when I wanted to (2588).	37.1	31.6	13.6	7.6	3.0	4.9

Quality/Appropriateness Domain Item Endorsement

Quality/Appropriateness Item (N)	Percent Endorsement					
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Not Applicable
Staff here believe I can grow, change, and recover (2592).	52.7	32.7	9.5	1.2	0.7	1.3
I felt free to complain (2597).	44.0	31.8	13.1	4.8	2.5	2.2

I was given information about my rights (2593).	55.8	33.2	5.4	2.2	0.8	0.7
Staff encouraged me to take responsibility for how I live my life (2591).	51.9	33.9	8.9	1.4	0.5	1.4
Staff told me what side effects to watch for (2588).	40.5	30.4	13.1	6.1	2.1	5.8
Staff respected my wishes about who is, and is not able to be given information about my treatment (2583).	55.2	31.9	6.6	1.4	1.1	1.7
Staff were sensitive to my cultural/ethnic background (2572).	43.6	28.9	13.9	1.6	0.9	8.4
Staff helped me obtain information so that I could take charge of managing my illness (2581).	44.5	34.6	11.2	3.0	1.3	3.0
I was encouraged to use consumer-run programs (2576).	42.6	30.7	13.6	4.3	1.0	5.3

Participation Domain Item Endorsement

Participation Item (N)	Percent Endorsement					
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Not Applicable
I felt comfortable asking questions about my treatment and medication (2599).	54.8	32.9	6.1	2.2	1.2	1.2
I, not staff, decided my treatment goals (2585).	39.9	34.2	15.1	4.5	2.0	2.0

Outcome Domain Item Endorsement

Outcome Item (N)	Percent Endorsement					
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Not Applicable
I deal more effectively with daily problems (2576).	34.8	39.7	16.0	4.3	1.5	1.1
I am better able to control my life (2576).	33.5	38.8	18.1	4.4	1.8	0.9
I am better able to deal with crisis (2564).	31.0	37.6	19.5	6.1	1.7	1.2
I am getting along better with my family (2564).	31.3	33.7	19.0	5.5	2.8	4.7
I do better in social situations (2561).	26.2	34.3	22.7	8.3	3.0	2.5
I do better in school and/or work (2521).	20.8	22.4	22.8	6.0	2.2	21.3
My housing situation has improved (2554).	28.7	23.8	23.3	7.2	4.6	9.2
My symptoms are not bothering me as much (2558).	25.5	32.9	20.8	11.1	4.7	1.9

General Satisfaction Domain Item Endorsement

Satisfaction Item (N)	Percent Endorsement					
	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Not Applicable
I like the services that I received here (2609).	57.1	32.9	6.4	1.2	0.9	0.2

If I had other choices, I would still get services from this agency (2594).	50.0	32.4	9.3	3.8	1.8	0.8
I would recommend this agency to a friend or family member (2596).	54.8	32.4	7.2	2.0	1.3	0.5

---

Appendix F: Survey Counts/Response Rate by Agency

<b>Agency</b>	<b>Blank Surveys</b>	<b>Completed</b>	<b>Rejected</b>	<b>Total</b>	<b>Response Rate</b>
Arapahoe/Douglas	450	124	53	177	70.1
Asian Pacific	150	0	27	27	0
Aurora	450	135	76	211	64.0
Centennial	450	133	16	149	89.3
Colorado West	450	136	43	179	76.0
Community Reach	450	208	70	278	74.8
Jefferson	450	247	0	247	100
Larimer	450	225	43	268	84.0
MHCBBC	450	244	42	286	85.3
MHCD	450	167	27	194	86.1
Midwestern	450	56	27	83	67.5
North Range	450	247	11	258	95.7
Pikes Peak	450	22	91	113	70.9
San Luis Valley	450	5	0	5	100
Servicios de la Raza	150	33	0	33	100
Southeast	450	89	11	100	89.0
Southwest/Axis Health	450	101	15	116	87.1
Spanish Peaks	450	120	24	144	83.3
West Central	450	150	0	150	100
<i>Total</i>	<i>7950</i>	<i>2642</i>	<i>576</i>	<i>2318</i>	<i>82.1</i>

## Appendix G: Payor Status<sup>3</sup>

MHSIP Respondents		
Number of Payors	%	<i>n</i>
One	49.6	1311
Two	7.8	208
<i>Missing</i>	<i>42.5</i>	<i>1123</i>
Payor Source <sup>4</sup>		<i>2642</i>
Indigent	4.6	122
Medicaid	24.0	634
Medicare	5.1	136
Third Party Insurance	3.3	86
Self Pay	5.2	137
Sliding Scale/None	3.4	90
Other	4.0	106
<i>Missing</i> <sup>5</sup>	<i>42.5</i>	<i>1123</i>

<sup>3</sup> Note: Due to an error in this year's data entry, an unknown amount of data regarding payor source was lost. Thus, it is advised to use caution when interpreting this data, as it may be an inaccurate representation of the actual distribution of payor source.

<sup>4</sup>This data includes only those with one payor source.

<sup>5</sup> Missing includes missing or miscoded items.