

# Consumer Perception Survey

Presented by:

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Data Collection: May 2025

# Survey's Received vs. Survey's Completed

Category	Received	Completed	Not Completed	% Completed	% Not Completed	Statewide % Completed	Statewide % Not Completed
Family	25	19	6	76%	24%	79.8%	20.2%
Youth	41	26	15	63.4%	36.6%	78.9%	21.1%
Adult	276	242	34	87.7%	12.3%	76.8%	23.2%
Older Adult	94	79	15	84%	16%	81%	19%
Total	436	366	70	83.9%	16.1%	78.4%	21.6%

Top reason for not completing the survey was REFUSED

# Demographics of Survey Participants

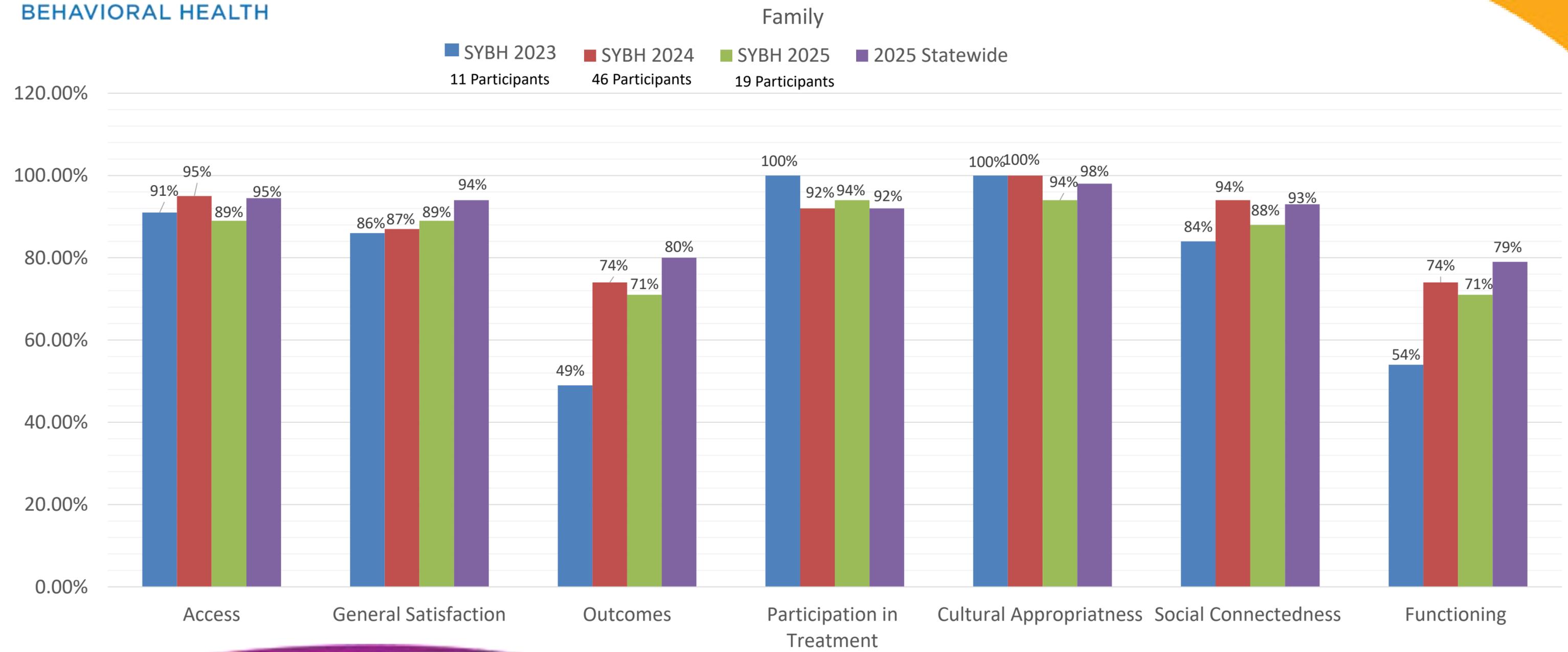
GENDER	Male	Female	Not Available
Family	**	**	**
Youth	**	57.7%	**
Adult	28.5%	37.6%	33.9%
Older Adult	13.9%	41.8%	44.3%

ETHNICITY	Hispanic	Not Hispanic
Family	**	**
Youth	57.5%	**
Adult	17.4%	47.5%
Older Adult	**	45.6%

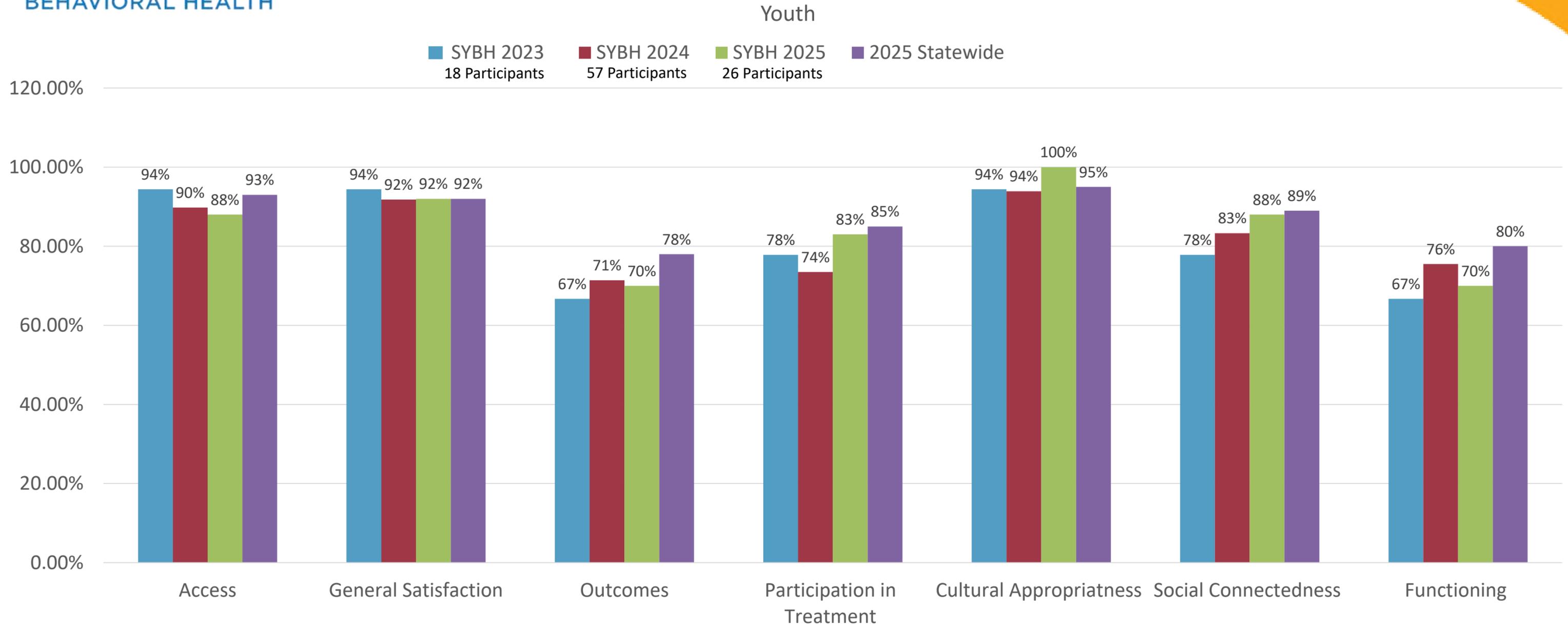
RACE	American Indian/Alaskan Native	Asian	Black	Native Hawaiian/Other Pacific Islander	White/Caucasian	Other	Two or more races	Decline to State
Family	**	**	**	**	68.4%	**		**
Youth	**	**	**	**	57.7%	**		**
Adult	**	**	**	**	46.7%	7%		31.8%
Older Adult	**	**	**	**	35.4%	**		44.3%

\*\*Data suppressed due to small N and/or meet data suppression requirement.

# Family Satisfaction Score by Domain



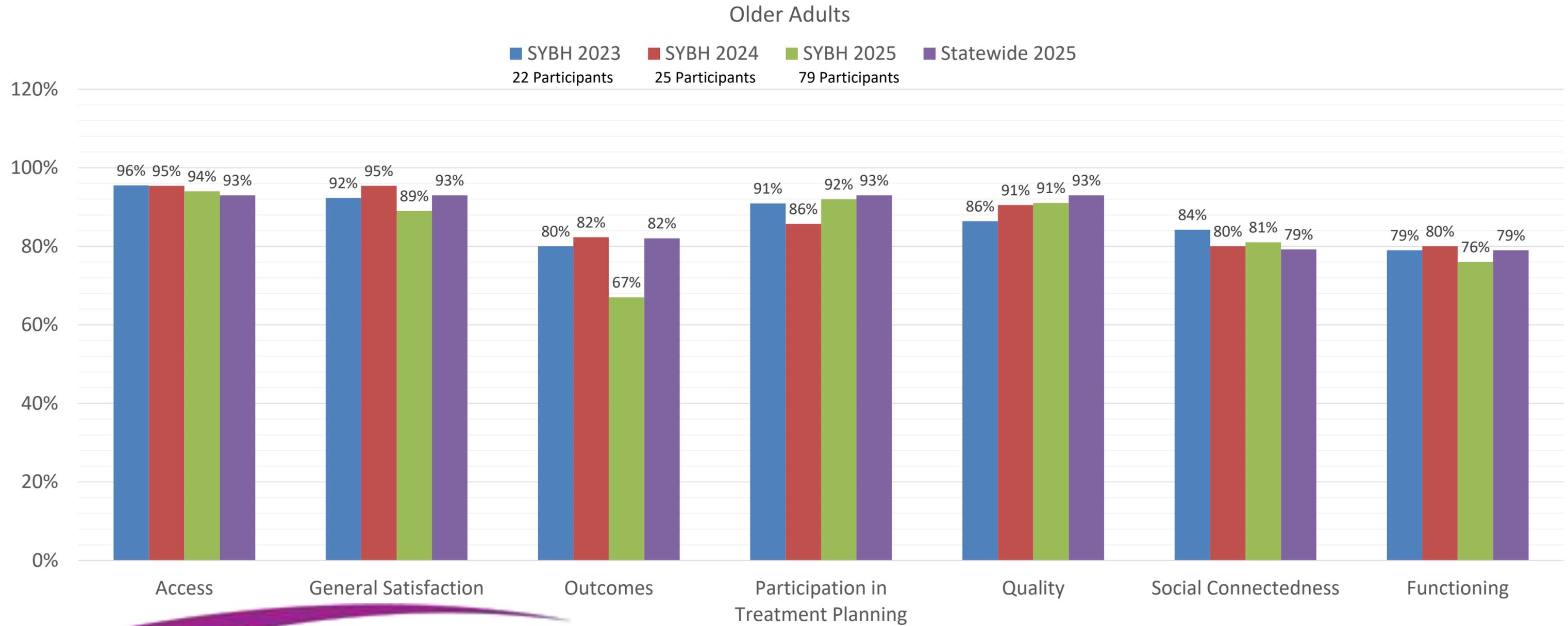
# Youth Satisfaction Score by Domain



# Adult Satisfaction Score by Domain



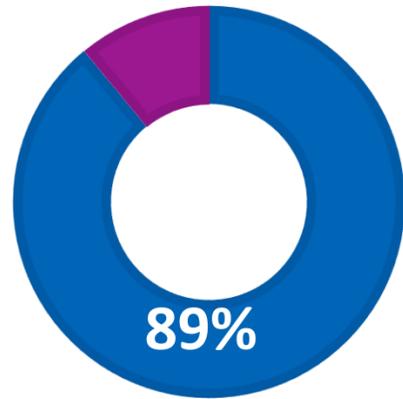
# Older Adult Satisfaction Score by Domain



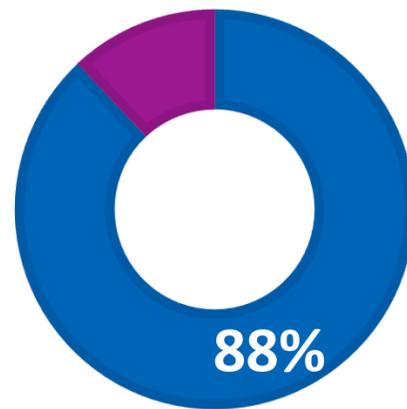
## FAMILY/YOUTH ACCESS

1. The location of the services was convenient for me/us.
2. Services were available at times that were convenient for me/us.

**Family**



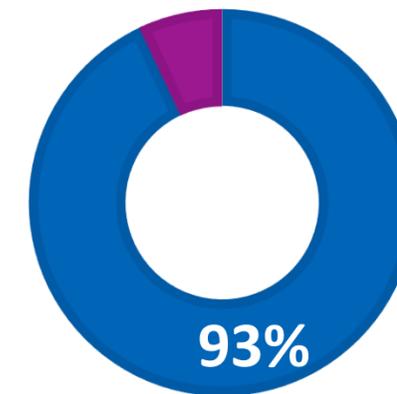
**Youth**



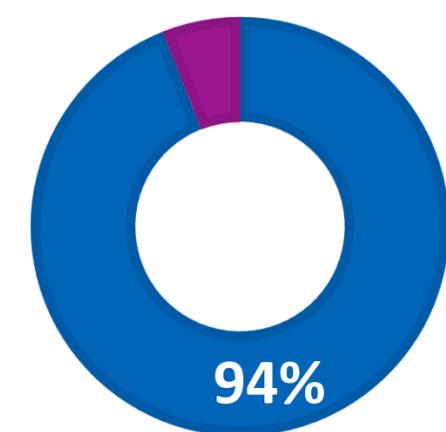
## ADULT/OLDER ADULT ACCESS

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

**Adult**

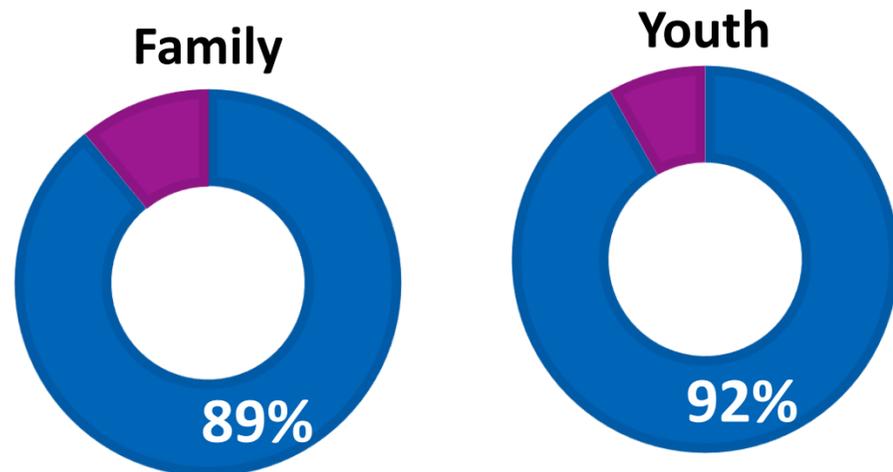


**Older Adult**



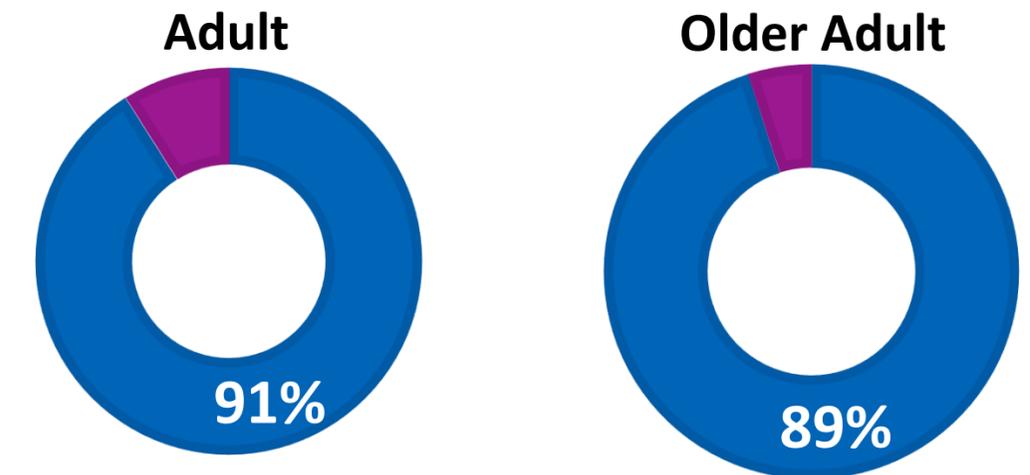
## FAMILY/YOUTH GENERAL SATISFACTION

1. Overall, I am satisfied with the services I/my child received.
2. The people helping me/my child stuck with us no matter what.
3. I felt I/my child had someone to talk to when he/she was troubled.
4. The services I/my child and/or family received were right for me/us.
5. I/My family got the help I/we wanted for my child.
6. I/My family got as much help as I/we needed for my child.



## ADULT/OLDER ADULT GENERAL SATISFACTION

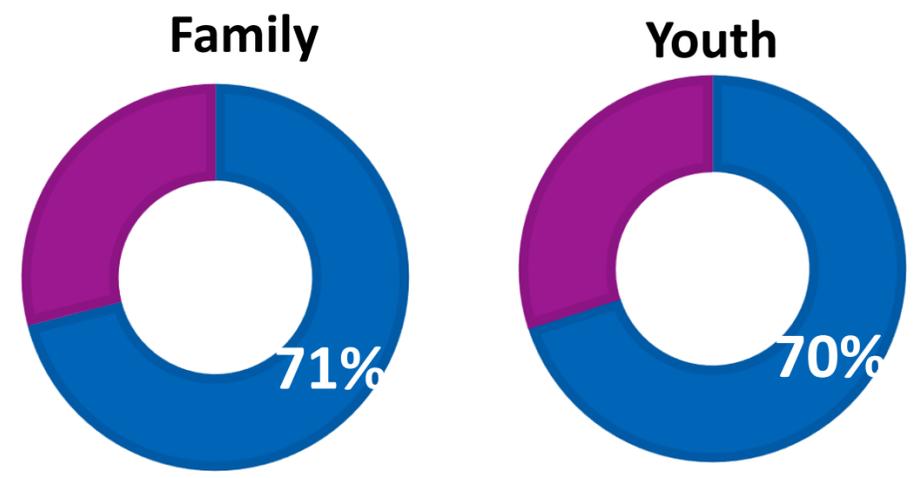
1. I like the services that I received here.
2. If I had other choices, I would still get services from this agency.
3. I would recommend this agency to a friend or family member.



*This slide contains the questions asked during the survey that were used to score the access domain*

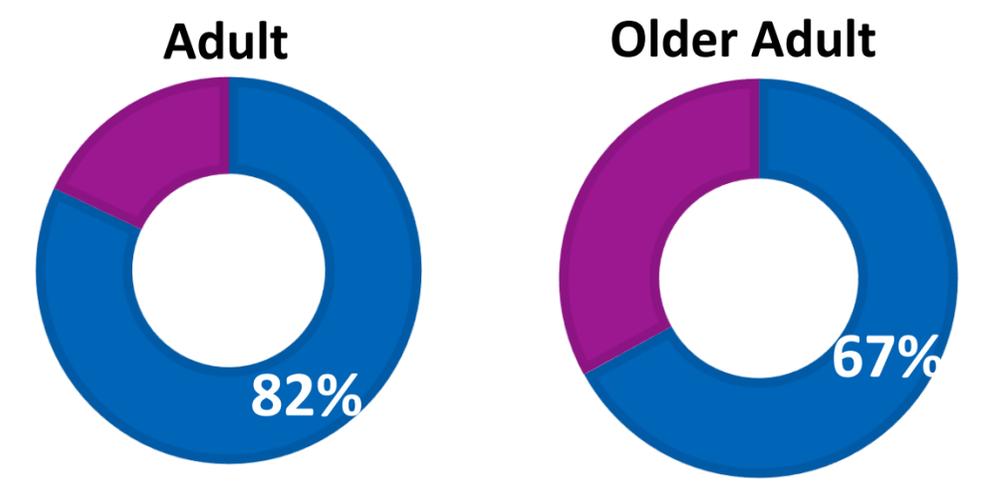
## FAMILY/YOUTH Outcomes

1. I/My child is better at handling daily life.
2. I/My child gets along better with family members.
3. I/My child gets along better with friends and other people.
4. I/My child is doing better in school and/or work.



## ADULT/OLDER ADULT Outcomes

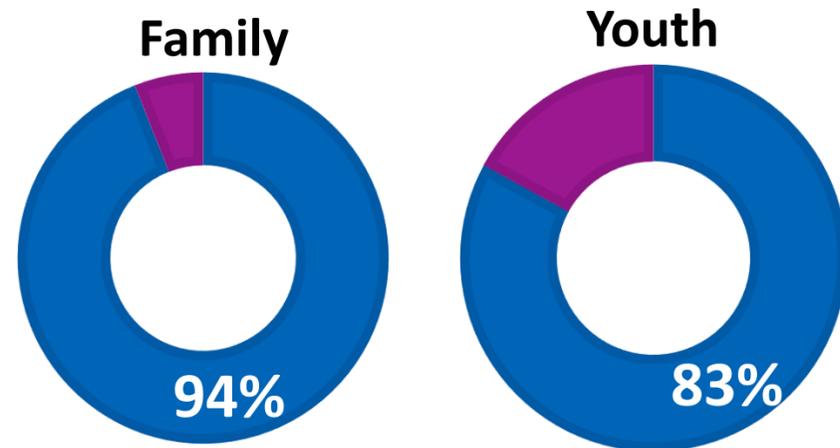
1. I deal more effectively with daily problems.
2. I am better able to control my life.
3. I am better able to deal with crises.
4. I am getting along better with my family.
5. I do better in social situations.
6. I do better in school and/or work.
7. My housing situation has improved.
8. My symptoms are not bothering me as much.
9. I do things that are more meaningful to me.



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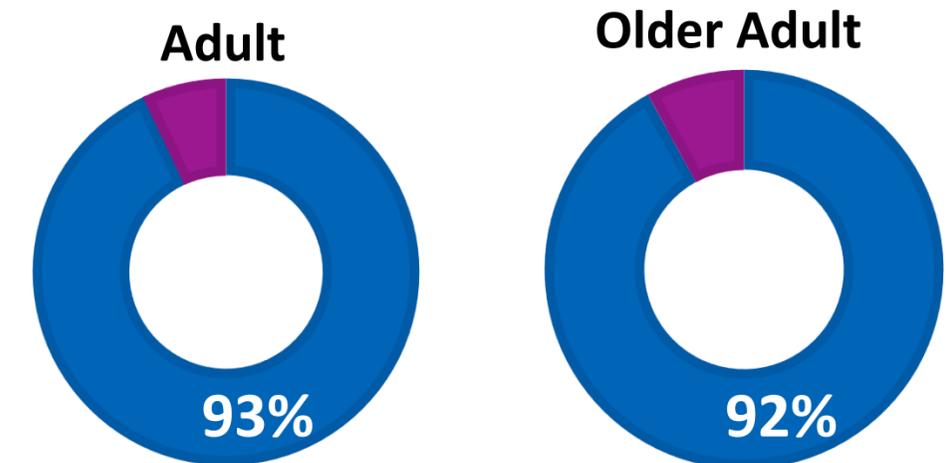
## FAMILY/YOUTH PARTICIPATION IN TREATMENT PLANNING

- 1. I helped to choose my/ my child's treatment goals.
- 2. I participated in my /mychild's service.
- 3. I participated in my own treatment.



## ADULT/OLDER ADULT PARTICIPATION IN TREATMENT PLANNING

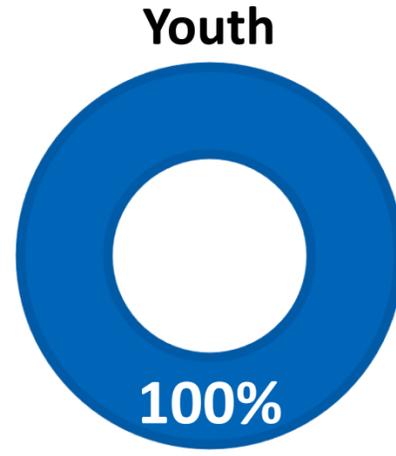
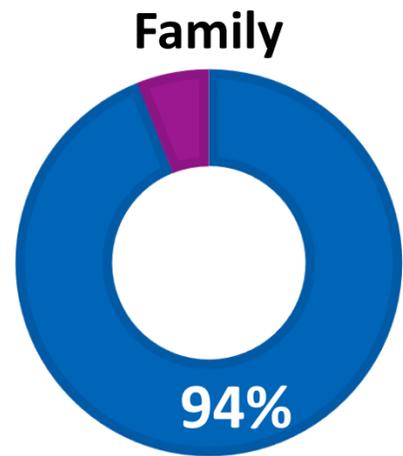
- 1. I, not the staff, decided my treatment goals.
- 2. I felt comfortable asking questions about my treatment and medication.



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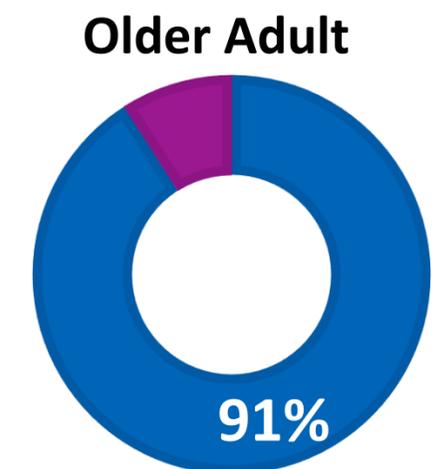
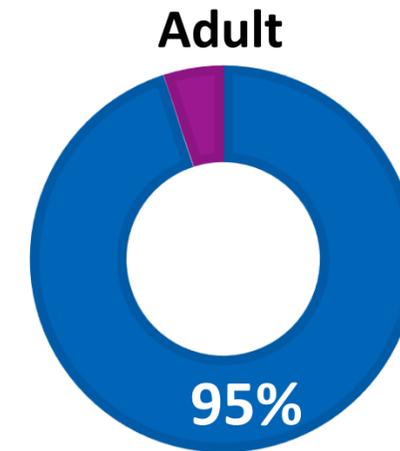
## FAMILY/YOUTH CULTURAL APPROPRIATENESS

1. Staff treated me with respect.
2. Staff respected my/my family's religious/Spiritual beliefs.
3. Staff spoke with me in a way that I understood.
4. Staff were sensitive to my cultural/ethnic background.



## ADULT/OLDER ADULT QUALITY

1. Staff here believe that I can grow, change, and recover.
2. I felt free to complain.
3. I was given information about my rights.
4. Staff encouraged me to take responsibility for how I live my life.
5. Staff told me what side effects to watch out for.
6. Staff respected my wishes about who is, and who is not to be given information about my treatment.
7. Staff were sensitive to my cultural background (race, religion, language, etc.)
8. Staff helped me obtain the information I needed so that I could take charge of managing my illness.
9. I was encouraged to use consumer-run programs



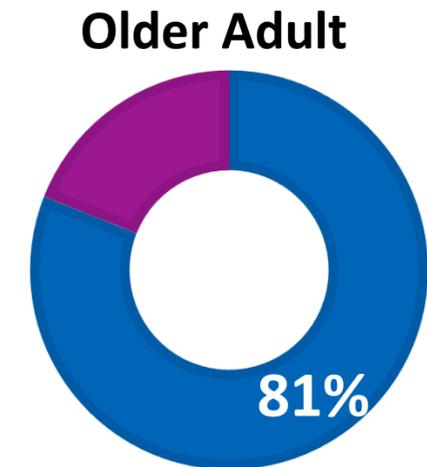
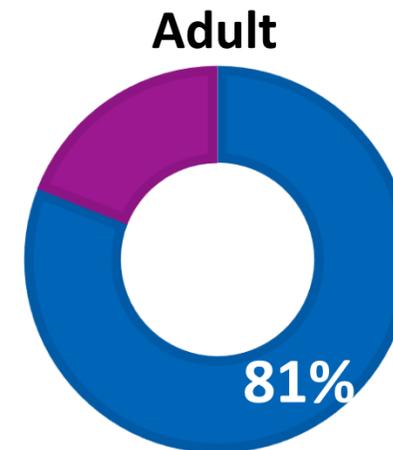
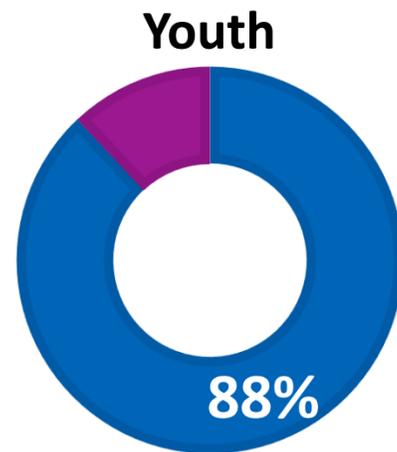
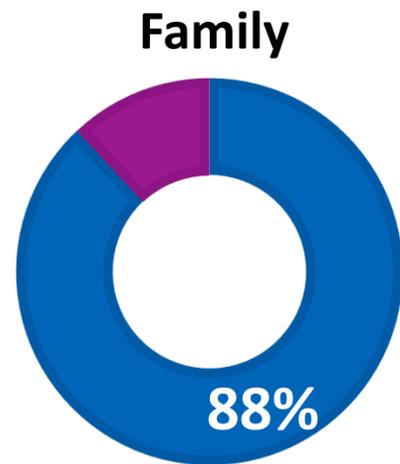
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## FAMILY/YOUTH SOCIAL CONNECTEDNESS

1. I know people who will listen and understand me when I need to talk.
2. I have people that I am comfortable talking with about my child's problem.
3. In a crisis, I would have the support I need from family or friends.
4. I have people with whom I can do enjoyable things.

## ADULT/OLDER ADULT SOCIAL CONNECTEDNESS

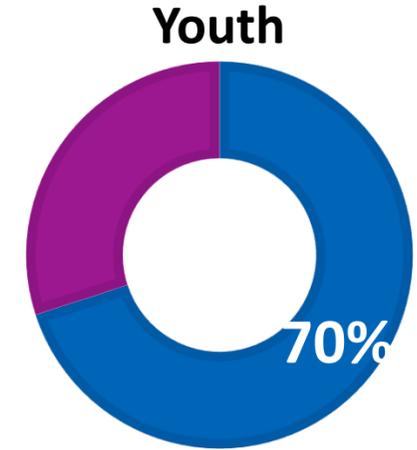
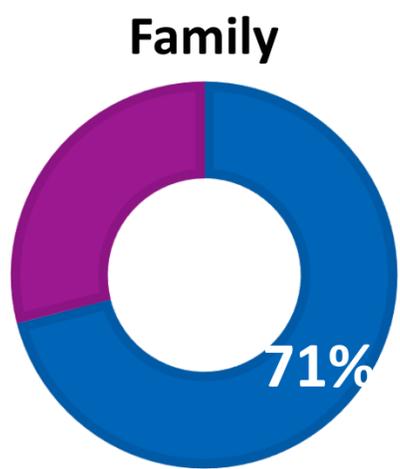
1. I am happy with the friendships I have.
  2. I have people with whom I can do enjoyable things.
  3. I feel I belong in my community.
- In a crisis, I would have the support I need from family or friends.



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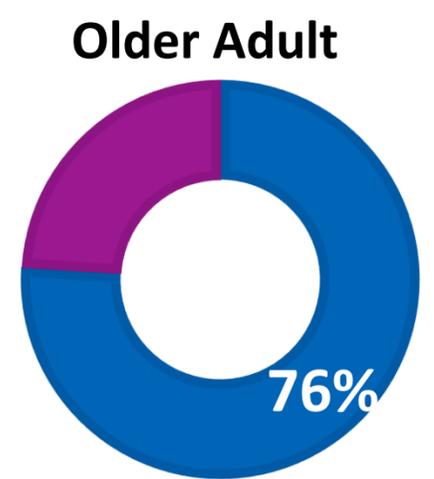
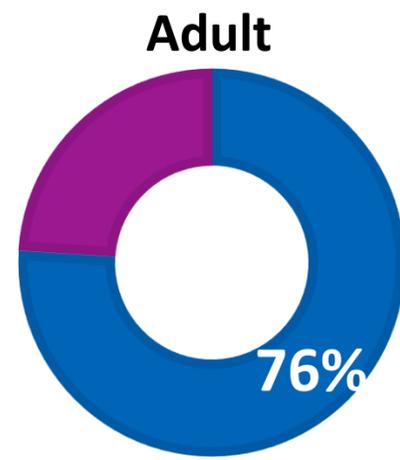
## FAMILY/YOUTH FUNCTIONING

1. I/my child am/is better able to do things I/he or she wants to do.
2. As a result of the services my child/I received, my child is better at handling daily life.
3. As a result of the services my child/I received, my child gets along better with family members.
4. As a result of the services, my child/I received, my child gets along better with friends and other people.
5. As a result of the services my child/ I received, my child is doing better in school/work.



## ADULTS/OLDER ADULTS FUNCTIONING

1. I am better able to take care of my needs.
2. I am better able to handle things when they go wrong.
3. I am better able to do things that I want to do.



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## QUALITY IMPROVEMENT GOAL: MONITOR CLIENT SATISFACTION THROUGH THE CONSUMER PERCEPTION SURVEY

QUALITY IMPROVEMENT GOALS	FAMILY	YOUTH	ADULTS	OLDER ADULTS
MEET OR EXCEED 80% SATISFACTION WITH OUTCOMES	71% Below Target	70% Below Target	82% EXCEED	67% Below Target
MEET OR EXCEED 80% SATISFACTION WITH FUNCTIONING	71% Below Target	70% Below Target	76% Below Target	76% Below Target
MEET OR EXCEED 80% SATISFACTION WITH CULTURAL APPROPRIATENESS	94% EXCEED	100% EXCEED	N/A	N/A
MEET OR EXCEED 80% RECEIVED ACCESS IN PREFERRED WRITTEN LANGUAGE	93% EXCEED	95% EXCEED	98% EXCEED	98% EXCEED