

Vermont Mental Health Performance Indicator Project
Agency of Human Services, Department of Health, Division of Mental Health
Weeks Building, 103 South Main Street, Waterbury, VT 05671-1601

MEMORANDUM

TO: Vermont Mental Health Performance Indicator Project
Advisory Group and Interested Parties

FROM: John Pandiani
Stephen Morabito

DATE: March 11, 2005

RE: CRT Consumer Survey

This week's PIP provides an overview of findings of the FY2004 CRT Consumer Satisfaction Survey. A copy of the full report on the FY2004 Consumer Evaluation of Community Rehabilitation and Treatment Programs in Vermont is available on the website: <http://www.ddmhs.state.vt.us/docs/res-eval/satisfaction-research/04CRTtechnicalreport.pdf>. Findings from previous surveys of CRT consumer satisfaction are also available online:

2001 CRT Consumer Satisfaction Survey:

<http://www.ddmhs.state.vt.us/docs/res-eval/satisfaction-research/01CRTtechnicalreport.pdf>

1997 CRT Consumer Satisfaction Survey:

<http://www.ddmhs.state.vt.us/docs/res-eval/satisfaction-research/97consumertechreport.pdf>

As always, we look forward to your comments and your suggestions for further analyses of these data to pip@vdh.state.vt.us or 802-241-2638.

Project Overview and Summary of Results

In late 2003 and early 2004, the Adult Unit of the Vermont Division of Mental Health (DMH) asked consumers to evaluate the Community Rehabilitation and Treatment (CRT) Programs for adults with severe and persistent mental illness in Vermont's ten Community Mental Health Centers. All consumers who received services from these programs during January through June of 2003 were sent questionnaires that asked for their opinion of various aspects of these services. A total of 1,225 consumers (45% of deliverable surveys) returned completed questionnaires. The survey instrument was based on the MHSIP Consumer Survey developed by a multi-state work group and modified as a result of input from Vermont stakeholders. The Vermont consumer survey was designed to provide information that would help stakeholders to compare the performance of CRT Programs in Vermont.

Methodology

In order to facilitate comparison of Vermont's ten CRT Programs, the consumers' responses to twenty-one fixed alternative items were combined into six scales, and their responses to four open ended questions were combined into four narrative scales. In addition, consumers' responses to four questions that related to specific outcomes were analyzed individually. The fixed alternative item scales focus on *overall* consumer evaluation of program performance, and evaluation of program performance with regard to *access, service, respect, autonomy* and *outcomes*. The narrative scales include frequency of *positive* and *negative comments about program performance*. *Positive* comments are further broken down into *positive comments about staff* and *positive comments about service*. In order to provide an unbiased comparison across programs, survey results were statistically adjusted to remove the effect of dissimilarities among the client populations served by different community programs. Measures of statistical significance were also adjusted to account for the proportion of all potential subjects who responded to the survey.

Overall Results

The majority of consumers served by CRT Programs in Vermont rated their programs favorably. On our overall measure of program performance, 81% of the respondents evaluated the programs positively. Some aspects of program performance, however, were rated more favorably than other aspects. Fixed alternative items related to service received more favorable responses (83% favorable) than items related to access (81% favorable), respect (81% favorable), autonomy (79% favorable) or outcomes (68% favorable).

In total 81% of the consumers provided narrative comments: positive comments about program performance were offered by 62% of the consumers and negative comments about program performance by 39% of the consumers. Statewide, 47% of the consumers made positive comments specifically about staff and 26% made positive comments specifically about services.

Statewide, 33% of respondents indicated that they had been *employed* in the past year. Twenty-one percent of respondents indicated that they had been *hospitalized for mental health treatment* and 27% indicated that they had been *hospitalized for medical treatment* in the past year. Finally, 6% of respondents indicated that they had been *arrested* in the past year.

Overview of Differences Among Programs

In order to compare consumers' evaluations of CRT Programs in the ten regional Community Mental Health Centers, scores on each of the ten composite scales were compared to the statewide average for each scale. The results of this survey indicate that there were significant differences in consumers' evaluations of some of the state's ten CRT Programs.

Positive Consumer Evaluation of Community Rehabilitation and Treatment Programs: FY 2004

Agency	Scales Based on Fixed Alternative Items					Scales Based on Narrative Comments				
	Overall	Access	Service	Respect	Autonomy	Outcomes	Positive	Negative	Pos. Service	Pos. Staff
Northeast	■	■	■	□	■	□	□	□	■	□
Addison	■	□	■	□	□	□	□	■	□	□
Northwest	□	■	□	□	□	■	□	□	□	□
Southeast	■	□	□	□	□	□	□	□	□	■
Lamoille	□	□	□	□	□	□	□	■	□	□
Bennington	□	▨	□	□	□	□	□	□	■	□
Orange	□	□	□	□	□	□	□	□	▨	■
Washington	□	□	□	□	□	□	▨	■	▨	□
Rutland	□	□	□	□	□	□	▨	□	□	▨
Chittenden	▨	▨	▨	▨	▨	□	□	▨	▨	□

Key ■ Better than average □ No difference ▨ Worse than average

Examination of the scales based on fixed alternative items showed that the Northeast region scores for the *overall* scale, *access* scale, *service* scale, and the *autonomy* scale were significantly above the statewide average. Consumer evaluations of the Addison region showed that the *overall* scale score and *service* scale score were significantly above the statewide average. The Southeast region scored significantly above the statewide average with regard to the *overall* scale. Consumer evaluations of the Northwest region were significantly above the statewide average with regard to the *access* and *outcomes* scale scores. The Bennington region scored significantly below the statewide average with regard to the *access* scale. The CRT Program in Chittenden received significantly lower scores on five of the scales based on fixed alternative items (*overall*, *access*, *service*, *respect*, and *autonomy*). Consumer evaluations of the remaining regions, Lamoille, Orange, Washington, and Rutland were not different from the statewide average on any of these scales.

Analysis of the narrative scales also produced significant differences between individual programs and statewide averages. On the *positive comments* scale the Washington and Rutland regions were rated lower than the statewide average. With regard to the *negative narrative comments* scale, Addison, Lamoille, and Washington had a significantly fewer proportion of negative comments than the statewide average while Chittenden had significantly more. On the *positive comments about service* scale, the Northeast and Bennington regions were rated higher and the Orange, Washington, and Chittenden regions were rated lower. On the *positive comments about staff* scale, Southeast and Orange were rated higher and Rutland was rated lower than the statewide average. There were also differences among programs regarding consumer self-reports of outcomes. Consumers in the CRT program in Chittenden and Washington were significantly more likely to report that they were employed in the past year. Consumers in the CRT program in the Northeast region and the Southeast region were significantly less likely to report that they were employed in the past year. Only CRT Program consumers in the Addison region had a significantly lower rate than the statewide average for both hospitalization for mental health treatment and hospitalization for medical treatment. No other significant differences were observed on these two measures. The self reports of arrests for consumers of three CRT program regions were significantly lower than the statewide average: Bennington, Lamoille, and Addison. Only CRT consumers in the Chittenden region had a significantly higher self-reported arrest rate.

Statewide Results

The majority of consumers served by CRT Programs at Community Mental Health Centers in Vermont rated their programs favorably. The most favorably rated item was "Services are available at times that are good for me", with 91% of the consumers agreeing or strongly agreeing with that item. Other favorably rated aspects of care were "Most of the services I get are helpful" (88% favorable), "Staff treated me with respect" (87% favorable), and "I have been given information about my rights" (87% favorable). The least favorably rated items related to outcomes of treatment. Only 63% felt that "I do better at work and/or in school" and "My symptoms are not bothering me as much".

There were significant differences in consumers' ratings of CRT Programs on the six scales derived from fixed alternative responses to the survey. Eighty-one percent of consumers rated programs favorably *overall*, and the survey items related to *service*, for instance, received more favorable responses (83% favorable) than items related to *autonomy* (79% favorable), *access* (81% favorable) or *respect* (81% favorable). *Outcomes*, our sixth scale, received the least favorable responses (68%). A high proportion of consumers (81%) provided narrative comments: 62% of consumers had made *positive comments* and 39% made *negative comments*. Further examination of the *positive comments* indicated 26% of consumers made specific *positive comments about services* and 47% made *positive comments about staff*.

Consumer Evaluation of Community Rehabilitation and Treatment Programs Statewide: FY 2004

