Health and Social Services Department



Mental Health Division

Quality Improvement Unit

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Consumer Perception Survey 2017 - Youth

In accordance with Department of Mental Health, the Solano Mental Health Plan (MHP) administered Consumer Perception Surveys from May 15-19, 2017 and from November 13-17, 2016. Surveys were available to all consumers that came into clinic and contractor locations for a service during this time. Completed surveys were collected and then were submitted to the Department of Mental Health.

The goal of this survey was to collect data for reporting on the federally determined National Outcome Measures (NOMs). Reporting on these NOMs are required by the Substance Abuse Mental Health Services Administration (SAMHSA), and receipt of federal Community Mental Health Services Block Grant (MHBG) funding was contingent on the submission of this data.

Demographics Overview	Youth Survey Spring 2017	Youth Survey Fall 2017	Family Survey Spring 2017	Family Survey Fall 2017
Total Surveys Received	92	137	139	203
Submitted by:				
County	76%	60%	56%	56%
Contractor	24%	40%	44%	44%
Gender:				
Male	40%	39%	53%	52%
Female	48%	48%	43%	40%
Other/Not Answered	12%	13%	4%	7%
Form Language:				
English	96%	97%	53%	77%
Spanish	4%	3%	22%	23%
Medi-Cal Insurance:	74%	80%	94%	92%
Ethnicity:				
American Indian/Alaskan Native	2%	7%	3%	7%
Asian	4%	7%	2%	2%
Black/African American	25%	30%	22%	31%
Mexican/Hispanic/Latino	34%	40%	45%	41%
Native Hawaiian/Other Pacific				
Islander	7%	4%	1%	4%
White/Caucasian	39%	33%	32%	39%
Other	26%	26%	12%	12%
Unknown	1%	4%	1%	1%
Agreed that services were provided in preferred language:	86%	89%	94%	89%
Agreed that written materials were provided in preferred language:	78%	80%	88%	88%

Demographics Overview	Youth Survey Spring 2017	Youth Survey Fall 2017	Family Survey Spring 2017	Family Survey Fall 2017
How long have services been received:	92	137	139	203
First Visit	5%	2%	4%	5%
More than first visit, but less than 1				
month	2%	8%	6%	6%
1 – 2 Months	10%	10%	7%	10%
3 – 5 Months	13%	11%	17%	20%
6 months – 1 year	20%	20%	28%	30%
More than 1 year	45%	37%	35%	26%
Not Answered	5%	12%	4%	3%

Results	Youth Survey	Youth Survey	Family Survey	Family Survey
	Spring 2017	Fall 2017	Spring 2017	Fall 2017
Total Surveys Received	92	137	139	203
1. Overall, I am satisfied with the				
services I/[my child] received.	92%	91%	90%	90%
2. I helped to choose my/[my child's]				
services.	65%	66%	86%	82%
3. I helped to choose my/[my child's]				
treatment goals.	80%	86%	90%	86%
4. The people helping me/[my child]				
stuck with me/[us] no matter what.	80%	82%	88%	83%
5. I felt I/[my child] had someone to talk				
to when I/[he/she] was troubled.	85%	84%	91%	86%
6. I participated in my own/[my child's]				
treatment.	83%	89%	86%	92%
7. I/[my child and/or family] received				
services that were right for me/[us].	88%	86%	91%	86%
8. The location of services was				
convenient for me/[us].	85%	92%	96%	95%
9. Services were available at times that				
were convenient for me/[us].	80%	83%	93%	94%
10. I/[my family] got the help I/[we]				
wanted [for my child].	85%	80%	85%	85%
11. I/[my family] got as much help as				
I/[we] needed [for my child].	73%	77%	79%	80%
12. Staff treated me with respect.	89%	95%	95%	98%
13. Staff respected my/[my family's]				
religious/spiritual beliefs.	77%	85%	80%	84%
14. Staff spoke with me in a way that I				
understood.	92%	95%	97%	98%
15. Staff were sensitive to my				
cultural/ethnic background.	75%	80%	81%	86%

Results	Youth Survey Spring 2017	Youth Survey Fall 2017	Family Survey Spring 2017	Family Survey Fall 2017
Total Surveys Received	92	137	139	203
1. I/[my child] am/[is] better at handling				
daily life.	75%	64%	67%	61%
2. I/[my child] get/[gets] along better				
with family members.	68%	58%	70%	57%
3. I/[my child] get/[gets] along better				
with friends and other people.	71%	60%	66%	59%
4. I/[my child] am/[is] doing better in	,			
school and/or work.	59%	66%	66%	56%
5. I/[my child/ am/[is] better able to				
cope when things go wrong.	67%	68%	62%	54%
6. I am satisfied with my family life right				
now.	61%	50%	65%	58%
7. I/[my child] am/[is] better able to do	650/	640/	700/	= 0 0/
things I/[he or she] want/[wants] to do.	65%	64%	73%	59%
8. I know people who will listen and	050/	000/	070/	0.50/
understand me when I need to talk.	85%	80%	87%	86%
9. I have people that I am comfortable				
talking to about my/[my child's]	000/	040/	000/	000/
problem(s).	80%	81%	88%	89%
10. In a crisis, I would have the support I	020/	700/	020/	050/
need from family or friends.	82%	70%	83%	85%
11. I have people with whom I can do	020/	000/	0.00/	0.407
enjoyable things.	83%	80%	86%	84%

Results	Youth Survey Spring 2017	Youth Survey Fall 2017	Family Survey Spring 2017	Family Survey Fall 2017
Total Surveys Received	92	137	139	203
1. Is your child currently living with you?				
Yes			92%	90%
No			3%	5%
Not Answered			5%	5%
2. Have you/[has your child] lived in any				
of the following place(s) in the last 6 months?				
With one or both parents	61%	59%	50%	54%
With another family member	16%	22%	9%	10%
Foster homes	12%	7%	8%	16%
Therapeutic foster home	1%	1%	1%	0%
Crisis shelter	2%	1%	2%	1%
Homeless shelter	3%	1%	1%	1%
Group home	8%	7%	1%	2%
Residential treatment center	1%	2%	0%	0%
Hospital	4%	4%	0%	0%

Results	Youth Survey Spring 2017	Youth Survey Fall 2017	Family Survey Spring 2017	Family Survey Fall 2017
Local jail or detention facility	1%	2%	0%	1%
State correctional facility	1%	1%	0%	0%
Runaway/homeless/on the streets	0%	1%	0%	1%
Other	7%	7%	3%	5%
3. In the last year, did you/[your child]				
see a medical doctor (or nurse) for a				
health check-up or because you/[he or				
she] were/[was] sick?				
Yes, in a clinic or office	52%	50%	71%	67%
Yes, but only in a hospital or				
emergency room	20%	13%	5%	5%
No	12%	13%	19%	21%
Do not remember	11%	15%	1%	3%
Not answered	5%	9%	4%	4%
4. Are you/[is your child] on medication				
for emotional/behavioral problems?				
(Answered "Yes")	50%	47%	29%	23%
5. If yes, did the doctor or nurse tell				
you/[you and/or your child] what side				
effects to watch for? (Answered "Yes")	38%	39%	22%	20%
6. Were you/[was your child] arrested				
since beginning to receive mental health				
services (or in the last 12 months)?				
Yes	4%	2%	1%	1%
No/Not Answered	96%	98%	99%	99%
7. Were you/[was your child] arrested during the 12 months prior to that?				
Yes	7%	4%	2%	1%
No/Not Answered	93%	96%	98%	99%
8. Since you/[your child] began to				
receive mental health services, have				
your encounters with the police:				
Been reduced	7%	6%	2%	3%
Stayed the same	4%	4%	1%	1%
Increased	2%	2%	0%	0%
Not applicable	38%	30%	55%	52%
Not Answered	49%	58%	42%	43%
9. Were you/[was your child] expelled or				
suspended since beginning services?				
Yes	9%	5%	6%	6%
No/Not Answered	91%	95%	94%	94%
10. Were you/[was your child] expelled				
or suspended during the 12 months prior to that?				

Results	Youth Survey Spring 2017	Youth Survey Fall 2017	Family Survey Spring 2017	Family Survey Fall 2017
Yes	11%	7%	6%	5%
No/Not Answered	89%	93%	94%	95%
11. Since starting to receive services (or in the last 12 months), the number of days you/[your child] were/was in school is:				
Greater	13%	10%	9%	9%
About the same	25%	11%	11%	17%
Less	0%	2%	2%	2%
Does Not Apply	11%	12%	19%	22%
Not Answered	51%	65%	34%	50%