



**Department of Behavioral Health  
INFORMATION NOTICE 19-07**

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**Date**                    October 25, 2019

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**To**                        Department of Behavioral Health (DBH) Deputy Directors, Program Managers, Clinic Supervisors, Contract Agencies

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**From**                    Veronica Kelley, DSW, LCSW, Director

A handwritten signature in blue ink, appearing to read "Veronica Kelley", is written over the "From" line.

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**Subject**                Semi-Annual Mental Health Consumer Perception Survey

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**Purpose**                To provide DBH and contract agencies with information and direction on the process and procedures involved in distributing and collecting the Department of Health Care Services (DHCS) semi-annual Consumer Perception Survey (CPS).

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**Background**        Department of Health Care Services (DHCS) MHSUDS INFORMATION NOTICE NO.: 18-044 provides guidance to counties for the submission of data for the Consumer Perception Survey (CPS) Data Collection to inform data collection for the federally determined National Outcome Measures (NOM) as required by the Substance Abuse and Mental Health Services Administration (SAMHSA).

Counties are required to conduct the survey and submit data per §3530.40 of Title 9 of the California Code of Regulations (CCR). Therefore, counties are required to administer the CPS in May and November each calendar year.

Consumers have the opportunity to give their feedback to DBH through this very important process. It is vital that every consumer who receives an outpatient service during the survey period has the opportunity to complete a survey form.

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### Needed Action

#### Administer the survey to:

- All consumers accessing outpatient mental health services (face-to-face mental health services, case management, day treatment, and/or medication services) at DBH or contract outpatient sites.
- All consumers age thirteen (13) years and older, with or without Medi-Cal.
- All parents and caregivers of youth under the age of eighteen (18).
- All consumers enrolled in MHSA Full Service Partnerships.

#### Exclusions

All consumers currently being served within the following settings are excluded:

- Acute hospitals;
- Psychiatric Health Facilities (PHF);
- Crisis and Residential programs [e.g. CWIC, CCRT, STAY, TEST, Triage Transitional Services (formerly Diversion), ChRIS, CRT, and CSU];
- Correctional facilities, and
- Long-term care institutional placements (e.g., State hospitals, Institute for Mental Disease).

### Details: Survey Preparation

#### Staff Survey Designation

In order to encourage candid responses from consumers, only clerical staff (or non-clinical volunteers) should interact with consumers for survey purposes. Therefore, the following steps shall be taken:

Step	Action
1	All clinic supervisors or contract agency managers are required to designate a responsible non-clinical employee to complete the Relias training sessions, which address the processes involved with administering these surveys.
2	The designated non-clinical employee will: <ul style="list-style-type: none"> <li>• Self-enroll in the <b>Consumer Perception Survey</b> training in Relias by searching for "CONSUMER PERCEPTION", and</li> <li>• Complete the Relias training prior to the first (1<sup>st</sup>) day of the survey period.</li> </ul>

**Note:** Contact DBH Workforce Education and Training at (800) 722-9866 for any questions regarding your Relias account, password, or access.

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### Survey Administration

Clinical or supervisory staff should **not** handle the completed survey forms. The role of the non-clinical person will be to:

Step	Action
1	Briefly explain the purpose of the survey to consumers
2	Provide written and verbal assurances of confidentiality
3	Code the surveys with the client and County information as required by DHC
4	Enter the reporting unit (RU) at the bottom of the last page
5	Receive the completed surveys from the consumer
6	Enter all surveys on the MS Excel Clinic Tracking Log
7	Return copy of Clinic Tracking Log with all completed surveys to DBH R&E
8	Save electronic MS Excel Clinic Tracking Log for two (2) months after survey administration concluded.
9	Visually inspect the survey forms to ensure the following items are completed: <ul style="list-style-type: none"><li>• DBH reporting unit;</li><li>• CSI County client number (Behavioral Health Information Management System (BHMIS) number);</li><li>• County Code (36);</li><li>• Date of survey administration, and</li><li>• Reason for non-completion of survey (if applicable).</li></ul>

#### **Additional Notes:**

- Consumers will be surveyed only once for each RU where they receive services.
- If consumer declines to complete the survey, the clinic or agency must still return a form with the items listed in *Step 9* to DBH Research and Evaluation (R&E) to ensure DBH fully complies with DHCS requirements.

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**Survey  
Storage and  
Transport**

It is the responsibility of the clinic supervisors or contract agency managers to complete the following steps:

Step	Action						
1	Secure confidential and completed surveys in a locked cabinet or drawer at all times until the end of the survey period. Follow appropriate protected health information (PHI) safeguards.						
2	Arrange secure and timely delivery of the completed surveys to DBH R&E at:  San Bernardino County Department of Behavioral Health Attn: Research & Evaluation Consumer Perception Survey 303 East Vanderbilt Way, San Bernardino, CA 92415-0026						
3	Transmit the electronic MS Excel Clinic Tracking Log file containing PHI via email to R&E as directed below: <table border="1" data-bbox="613 982 1458 1260"> <thead> <tr> <th>If</th> <th>Then</th> </tr> </thead> <tbody> <tr> <td>If transmitting from within County-DBH secure network (sbcounty.gov)</td> <td>Email containing MS Excel Clinic Tracking Log <b>does not</b> need to be encrypted</td> </tr> <tr> <td>If transmitting from a contract agency or outside County-DBH secure network (sbcounty.gov)</td> <td>Email containing MS Excel Clinic Tracking Log <b>does</b> need to be encrypted</td> </tr> </tbody> </table>	If	Then	If transmitting from within County-DBH secure network (sbcounty.gov)	Email containing MS Excel Clinic Tracking Log <b>does not</b> need to be encrypted	If transmitting from a contract agency or outside County-DBH secure network (sbcounty.gov)	Email containing MS Excel Clinic Tracking Log <b>does</b> need to be encrypted
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**Contact  
Information**

Contact DBH R&E at [research@dbh.sbcounty.gov](mailto:research@dbh.sbcounty.gov) or (909) 388-0975 if you have any questions or need more information regarding the DHCS Consumer Perception Survey.