



## Department of Behavioral Health INFORMATION NOTICE 18-05

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**Date** October 31, 2018

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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, LCSW, Director

A handwritten signature in black ink, appearing to read "Veronica Kelley, LCSW".

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**Subject** Mental Health Consumer Perception Survey – Fall 2018

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**Purpose** To provide information and direction on the process and procedures involved in distributing and collecting the Department of Health Care Services (DHCS) Fall 2018 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).

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

#### When to administer survey:

November 5<sup>th</sup> (Monday) through November 9<sup>th</sup> (Friday), inclusive.

#### Who completes survey:

- 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 programs [e.g. CWIC, CCRT, STAY, TEST, Triage Transitional Services (formerly Diversion), ChRIS CRT, and CSU].
  - Correctional facilities
- 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"</li> <li>• Complete the Relias training, which will be available beginning <b>Monday, October 15, 2018, <i>no later than</i> Monday, November 5, 2018.</b></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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**Action:  
Survey  
Administration**

It is the intent of the DHCS that 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 DHCS.
4	Put the reporting unit (RU) at the bottom of the last page.
5	Receive the completed surveys from the consumers.
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 until the end of January 2019.
9	Visually inspect the survey forms to ensure the following items are completed: <ul style="list-style-type: none"><li>• County reporting unit</li><li>• CSI County client number (SIMON Number)</li><li>• County Code (36)</li><li>• Date of survey administration</li><li>• Reason for non-completion of survey</li></ul>

**Additional Notes:**

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

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### Survey Storage & Transportation Policy

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. Ensure appropriate protected health information (PHI) safeguards are followed.
2	Arrange secure and timely delivery of the completed surveys <u>no later than 12:00 p.m.</u> on <b>Wednesday, November 14, 2018</b> to DBH R&E at:  San Bernardino County Department of Behavioral Health 303 East Vanderbilt Way, San Bernardino, CA 92415-0026 Attn: Research & Evaluation – Consumer Perception Survey
3	Securely transmit the electronic MS Excel Clinic Tracking Log file containing PHI via encrypted email to R&E (if sending from outside County-DBH network).

### 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 November 2018 Consumer Perception Survey.