

**New Mexico
Behavioral Health
Consumer, Family/Caregiver
Satisfaction Project**

2018



A Collaborative effort by:

The New Mexico Human Services Department: Behavioral Health Services Division, Office of Peer Recovery and Engagement, Medical Assistance Division; Children Youth and Families Department; Blue Cross/Blue Shield, Molina Healthcare, Presbyterian/Magellan, United Healthcare; and New Mexico Behavioral Health Consumers, Families, Children and Youth.

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FY2018 Consumer Family/Caregiver Report

What is the Consumer Satisfaction Project?

The New Mexico Consumer, Family/Caregiver and Youth Satisfaction Project (CFYP) is a yearly effort to survey the satisfaction of New Mexico Adult individuals, Family/Caregivers and Youth receiving state funded mental health and substance abuse treatment and support services.

The CFYP surveys serve two purposes:

- **To inform a quality improvement process to strengthen services in New Mexico; and,**
- **To fulfill federally mandated data reporting requirements.**

Adults and family members of youth in care answer the survey through telephone interviews. Telephone interviews were obtained from a pool of randomly-selected individuals or families who received behavioral health services from New Mexico Medicaid or Behavioral Health programs between July, 2017, and January, 2018. There is a separate Youth Report which surveys youth in detention and shelters; CYFD will make it available in late fall, 2018.

2018: The Fifth Year of Centennial Care

Since 2014 when Centennial Care began in New Mexico, there were some significant changes in New Mexico's behavioral health care environment that can continue to affect individuals during the period in which they were receiving care and surveyed (July, 2017, through January, 2018.)

- In January, 2014, New Mexico launched its new Medicaid program, *Centennial Care*, which manages both behavioral health and primary care services. At that point, most Medicaid-eligible individuals and families had to enroll in one of four managed care companies, while a portion remained in a separate Medicaid fee-for-service program.
- While the Medicaid benefit packages are primarily identical, each MCO offers some "value added" services that vary.
- All *Centennial Care* members were contacted to determine whether they would qualify for a more intense service - Care Coordination – designed to assist those with complex needs.
- A new emphasis on *integrated* behavioral and physical care was introduced.

The reader will see trend data in each of the domains which reflects the respondents' satisfaction across the most recent four years of Centennial Care (2015-2018.)

What we ask about:

The surveys contain questions that come from the federal Mental Health Statistics Improvement Program (MHSIP). The New Mexico Behavioral Health Collaborative added additional questions, including questions related to the National Outcome Measures System. This report will provide highlights separately from the Adult Survey and then from the Child & Family/Caregiver Survey. Findings from a separate and smaller Youth Survey will also be posted in late fall on the New Mexico Network of Care.

There are seven subscales within the survey that are used nationally. This provides a helpful benchmark for our state's performance. Each of those scales is presented in the report. Responses to most questions were measured in a five-point Likert scale, and scale values shown are the percent of respondents for whom the average of the individual's replies to that scale's questions was positive. Each scale result is graphed below to show the 2015, 2016, 2017, and 2018 results for New Mexico. A red line shows what the US average was in 2017 for that measure. The specific questions that make up the scale are listed below the graph, along with sample comments from respondents. In addition, questions addressed housing, employment, substance abuse, medications and care coordination. Those findings are presented after the seven domains are discussed.

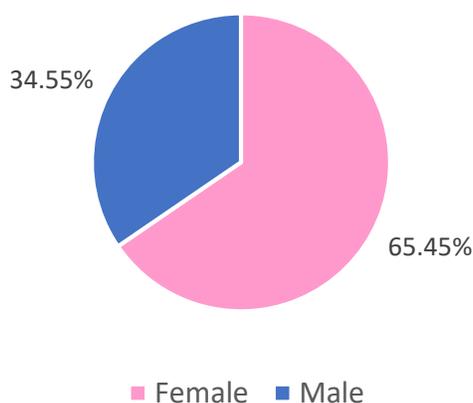
Survey Highlights- Adult

Who we surveyed - Adults

Our sample was drawn from those individuals who had received care anytime between July 1, 2017, and January 31, 2018. However, when called, respondents were free to speak about their experiences throughout the entire previous twelve months. Survey telephone calls were conducted in June and July 2018. For the 2018 survey, we heard from 1,045 adult respondents. Generally speaking, the sample well represented the population receiving services, with some exceptions noted below.

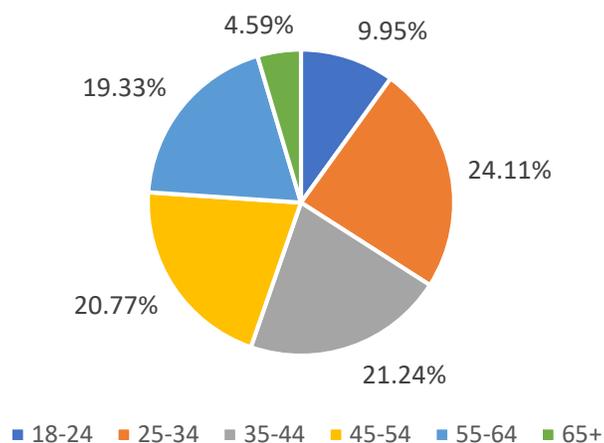
GENDER: However, females (65.5%) were overrepresented in the sample. They represent only 58% of those receiving services during the same period.

Adult Respondents by Gender

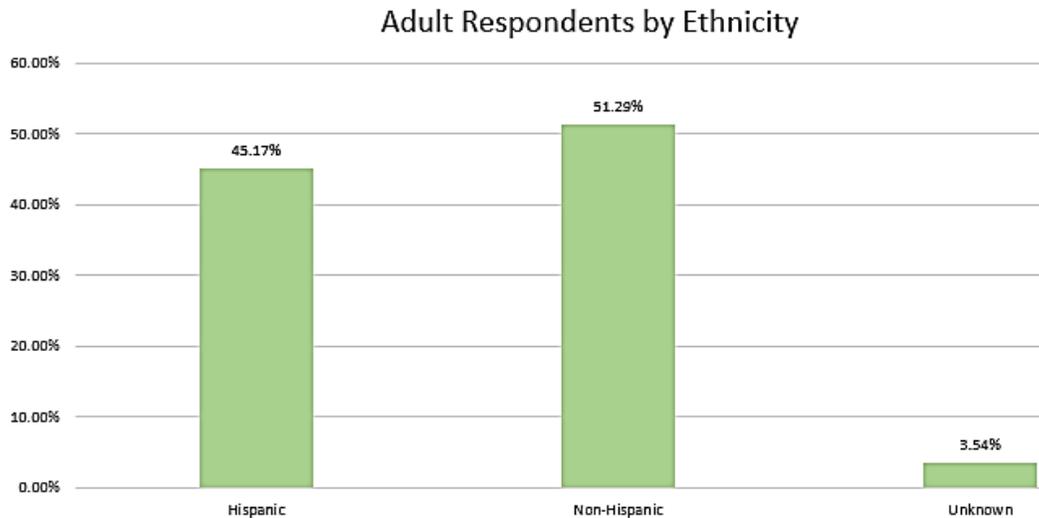


AGE: The respondents ages 45-64 years old (42%) were overrepresented in the sample. They represent only 29.7 percent of those receiving services during the same period. The reverse is true of the two youngest age group, 18-24 years, who were 10 percent of the sample but are 14.1 percent of the population receiving services. Similarly, the 25-34 age group (or, 24.1% of respondents) are underrepresented as compared to that group in the population served (28.6%).

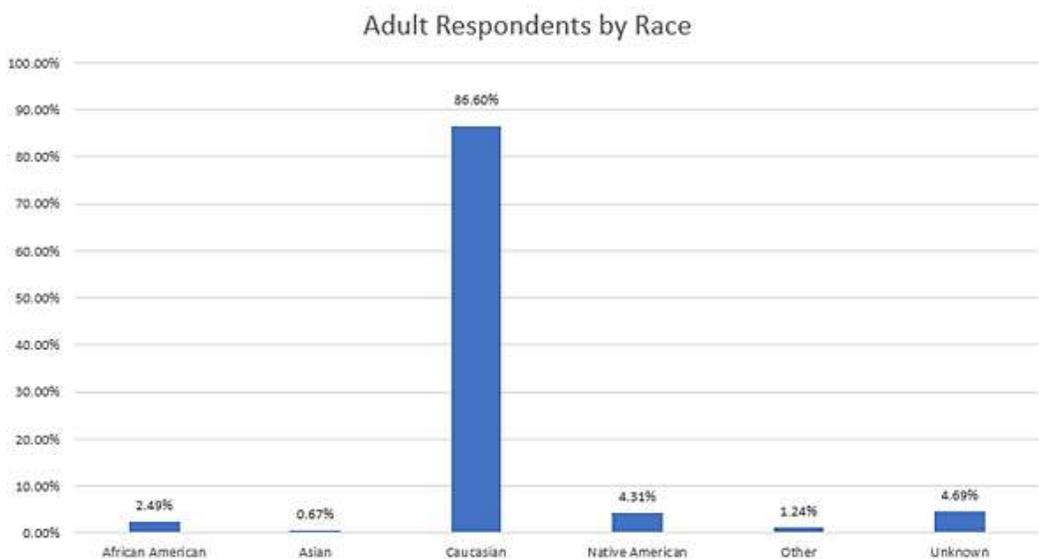
Adult Respondents by Age



ETHNICITY: Forty-five percent (45.2%) of the respondents identified their ethnicity as Hispanic. That is very similar to the population receiving services (46.6%) during the same period.



RACE: Similar to the population receiving services, 86.6 percent of the respondents identified themselves as Caucasian. Native American respondents (4.3%) were slightly underrepresented as compared to those receiving services (6.5%). African American respondents (2.5%) were the same proportion as those receiving services.



Overview of Adult Findings by Seven Domains: There were two different instruments tailored to the issues pertinent to adults and again for children. The items in each domain are identical to those used nationwide. That allows New Mexico to compare its performance to the National Average. Additional subscales were also measured (i.e., supportive housing, supportive employment, substance abuse) and issues related to medication management and care coordination. Those findings are presented immediately following the individual domain graphs.

In comparison to our 2017 performance, New Mexico improved in the majority (or, 57 percent) of the Adult domains (i.e., Improved Functioning, Participation in Treatment, Social Connectedness and Satisfaction). The prior year's performance was maintained in 2 domains (or, 29 percent): (i.e., Access and Quality & Appropriateness. In the domain of Outcomes, this year's performance was slightly lower (or, 1.1 percentage points) than in 2017. However, none of these differences were statistically significant.

Relative to the National Averages, New Mexico meets or is slightly below (i.e., 1.5 to 2.5 percentage points) in the domains of Social Connectedness, Satisfaction, Participation in Treatment and Quality & Appropriateness. However, we are notably below the National Average in Improved Functioning (-4.4 percentage points) Access (-7.0 percentage points) and significantly lower (-10.5 percentage points) in the Outcomes domain.

The MCO's are currently working on their quality improvement strategies to make improvements in these domains.

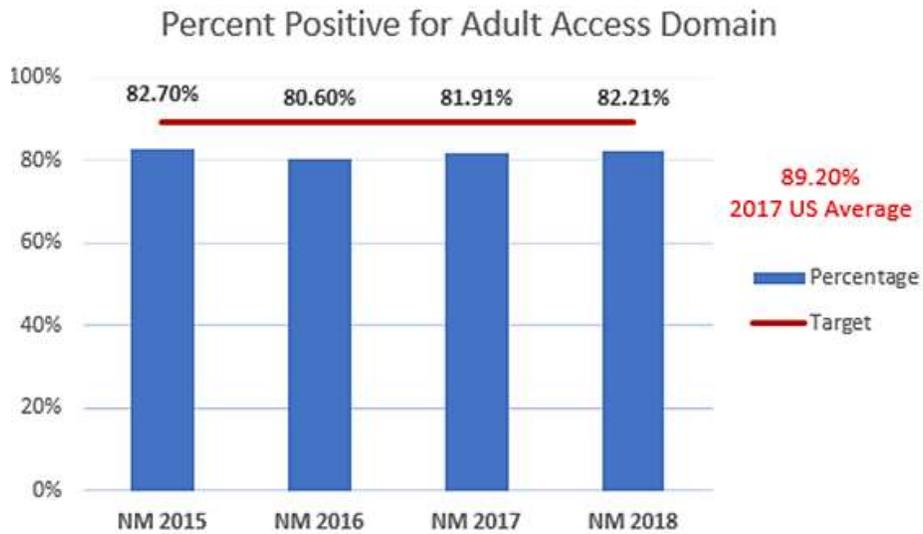
The complete report will be available on the New Mexico Network of Care website at:

www.newmexico.networkofcare.org

Domain: Access

Definition: *Entry into behavioral health services is quick, easy and convenient.*

Observations: The average proportion of positive responses for Access was 82.2 percent. This is similar to the prior year’s performance of 81.9 percent. However, this is below the national 2017 average of 89.2 percent, Respondents were least satisfied with access to their psychiatrist.

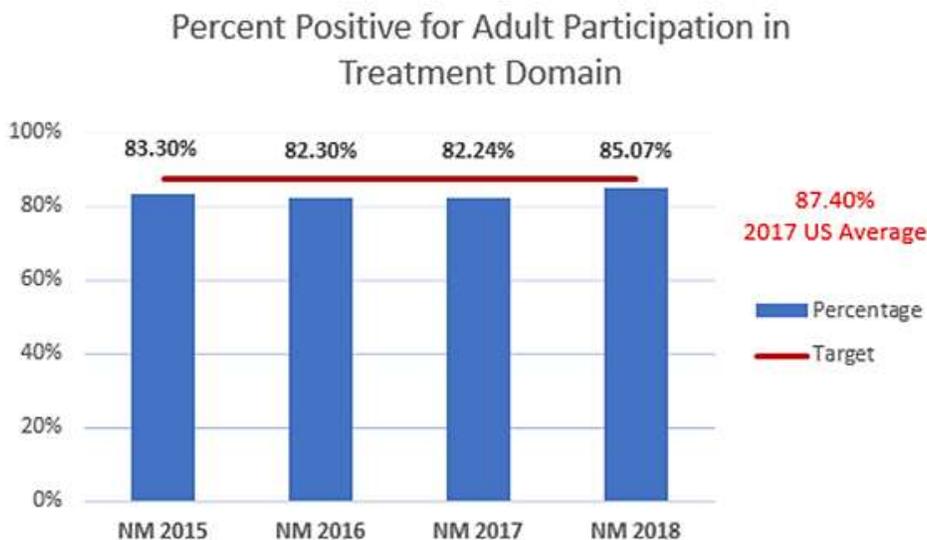


Domain	Q #	Question Text	Domain Item Percentage
Access	4	The location of services was convenient (parking, public transportation, distance, etc.).	84.91%
Access	5	Staff were willing to see me as often as I felt it was necessary.	87.11%
Access	6	Staff returned my call in 24 hours.	81.71%
Access	7	Services were available at times that were good for me.	88.95%
Access	8	I was able to get all the services I thought I needed.	85.25%
Access	9	I was able to see a psychiatrist when I wanted to.	78.45%

Domain: Participation in Treatment

Definition: Adults feel that they are a part of their treatment team.

Observations: The average proportion of positive responses for Participation in Treatment was 85.1 percent. This is below the 2017 National Average of 87.4 percent. However, it is an increase (2.8%) over the prior year's performance of 82.2 percent. While adults were generally satisfied asking questions about their treatment or medications, they were notably less satisfied about the process of setting their treatment goals.

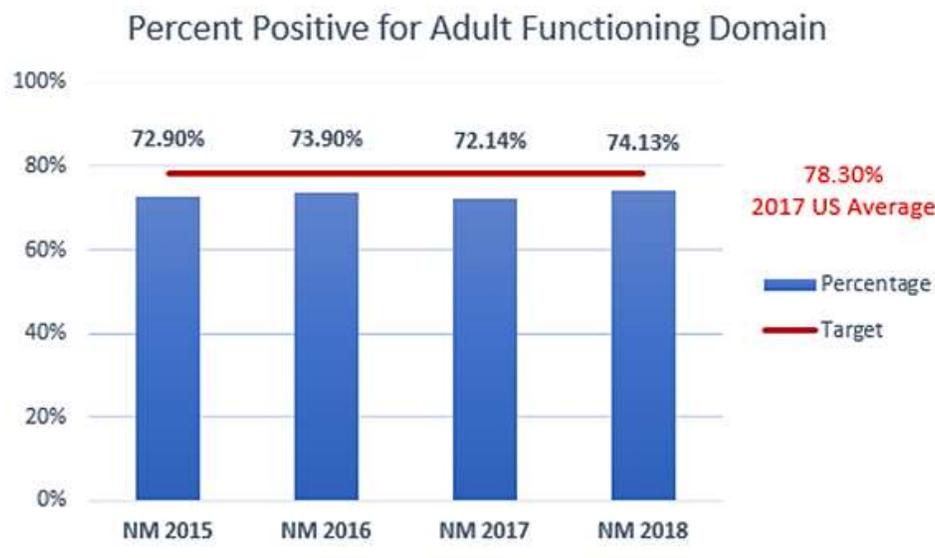


Domain	Q #	Question Text	Domain Item Percentage
Participation in Treatment Planning	11	I felt comfortable asking questions about my treatment and medication.	92.91%
Participation in Treatment Planning	17	I, not staff, decided my treatment goals.	86.58%

Domain: Improved Functioning

Definition: Adults feel they can manage their daily activities better.

Observations: The average proportion of positive responses for Improved Functioning was 74.1 percent. This is below the national 2017 average of 78.3 percent. It is, however almost a two-point increase over the prior year's performance of 72.1 percent. Adults were least satisfied about managing their symptoms and being able to do what they wanted to do.

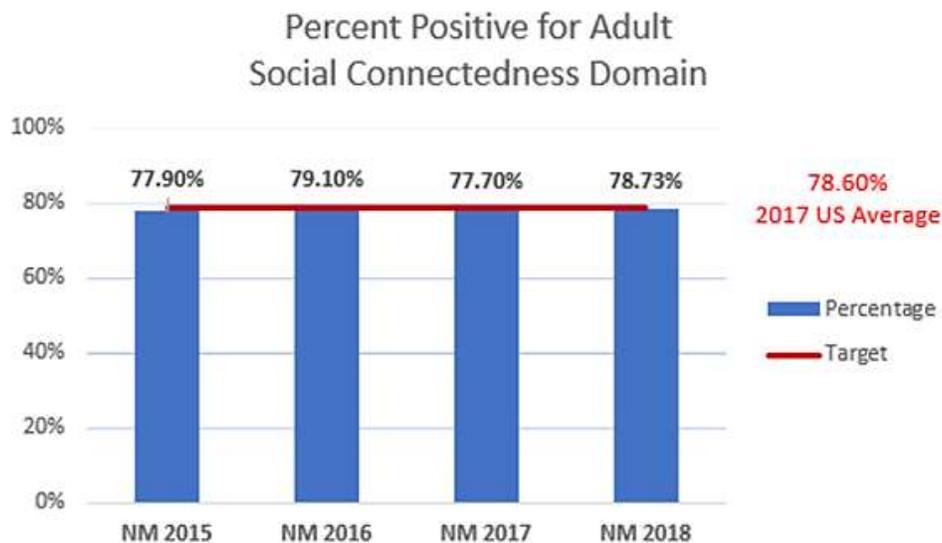


Domain	Q #	Question Text	Domain Item Percentage
Improved Functioning	28	My symptoms are not bothering me as much.	64.47%
Improved Functioning	29	I do things that are more meaningful to me.	78.63%
Improved Functioning	30	I am better able to take care of my needs.	79.98%
Improved Functioning	31	I am better able to handle things when they go wrong.	77.04%
Improved Functioning	32	I am better able to do things that I want to do.	75.78%

Domain: Social Connectedness

Definition: Adults feel they are connected in their family and friends, have social supports and belong to their community.

Observations: The average proportion of positive responses for Social Connectedness was 78.7 percent. This meets that national 2017 average of 78.6 percent. This is a one-point improvement over the prior year's performance of 77.7 percent. The area in which adults were less satisfied had to do with their sense of belonging in their community.

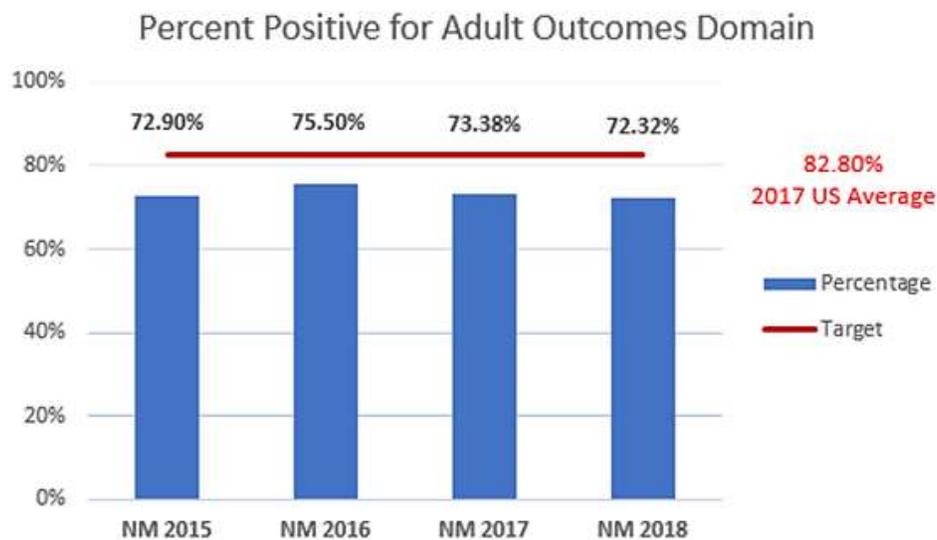


Domain	Q #	Question Text	Domain Item Percentage
Social Connectedness	33	I am happy with the friendships I have.	84.13%
Social Connectedness	34	I have people with whom I can do enjoyable things.	85.70%
Social Connectedness	35	I feel I belong in my community.	76.13%
Social Connectedness	36	In a crisis, I would have the support I need from family or friends.	86.39%

Domain: Outcomes

Definition: *The extent to which services provided to individuals with behavioral health needs have a positive or negative effect on their well-being, life circumstances, and capacity for self-management and recovery.*

Observations: The average proportion of positive responses for Outcomes was 72.3 percent, slightly lower (1.1% point) than the prior year performance (73.4%). This is significantly below the national 2017 average of 82.8 percent. Satisfaction was notably lower in the areas of symptom management, handling social situations, work, and housing.

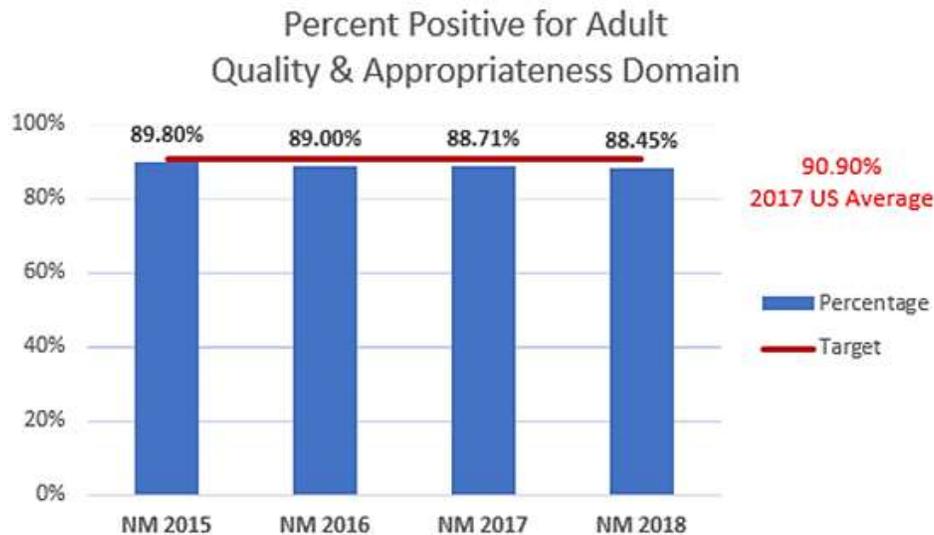


Domain	Q #	Question Text	Domain Item Percentage
Outcomes	21	I deal more effectively with daily problems.	81.54%
Outcomes	22	I am better able to control my life.	82.67%
Outcomes	23	I am better able to deal with crisis.	81.40%
Outcomes	24	I am getting along better with my family.	78.68%
Outcomes	25	I do better in social situations.	67.87%
Outcomes	26	I do better in school and/or work.	73.06%
Outcomes	27	My housing situation has improved.	72.34%
Outcomes	28	My symptoms are not bothering me as much.	64.47%

Domain: Quality & Appropriateness

Definition: Services are individualized to address the consumer's strengths and needs, cultural context, preferences and recovery goals.

Observations: The average proportion of positive responses for Quality & Appropriateness was 88.5 percent. This is similar to the prior year's performance of 88.7 percent. However, it is lower (2.5 points) than the national 2017 average of 90.9 percent. While adults were generally pleased with areas in this domain, they were less satisfied with staff's encouragement to use consumer-run programs and for help in watching out for side effects in their care.

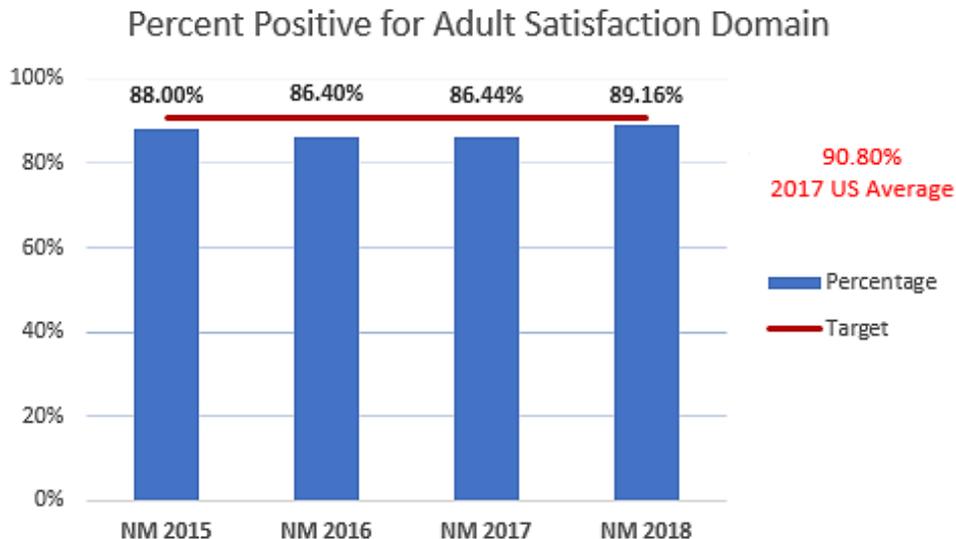


Domain	Q #	Question Text	Domain Item Percentage
Quality & Appropriateness	10	Staff here believed that I can grow, change and recover.	89.43%
Quality & Appropriateness	12	I felt free to complain.	88.17%
Quality & Appropriateness	13	I was given information about my rights.	92.53%
Quality & Appropriateness	14	Staff encouraged me to take responsibility for how I live my life.	90.11%
Quality & Appropriateness	15	Staff told me what side effects to watch out for.	83.87%
Quality & Appropriateness	16	Staff respected my wishes about who is and who is not to be given information about my treatment.	93.90%
Quality & Appropriateness	18	Staff were sensitive to my cultural background (race, religion, language, etc.)	91.87%
Quality & Appropriateness	19	Staff helped me obtain the information I needed so that I could take charge of managing my illness.	88.54%
Quality & Appropriateness	20	I was encouraged to use consumer-run programs (support groups, drop-in centers, crisis phone line, etc.).	79.23%

Domain: Satisfaction

Definition: *Adults are generally happy with the services they are provided.*

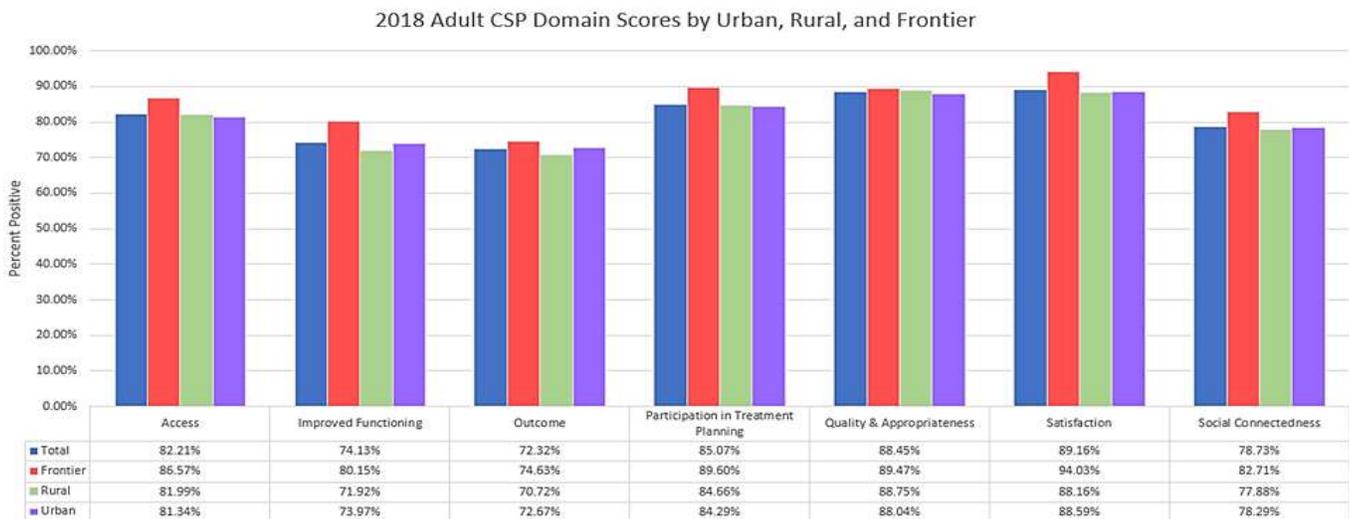
Observations: The average proportion of positive responses for Satisfaction was 89.2 percent. This is almost a 3-point increase over the prior year's performance of 86.4 percent. However, it is lower (1.6 points) than the national 2017 average of 90.8 percent. Adults were less satisfied with the range of provider choices available to them.



Domain	Q #	Question Text	Domain Item Percentage
Satisfaction	1	I like the services that I received here.	91.52%
Satisfaction	2	If I had other choices, I would still get services from this agency.	85.89%
Satisfaction	3	I would recommend this agency to a friend or family member.	90.09%

Geographic Patterns

The seven domains were also analyzed to determine any differences between respondents who live in Urban, Rural or Frontier areas of the state. It is a notable pattern that respondents in Frontier areas of the state were consistently more positive in six out of the seven domains.



Other Areas

Problems in the support areas are often crucial factors affecting behavioral health recovery. The following highlight a few. In addition, questions were asked about Care Coordination at the health plan level. These questions were only asked of those who had been assigned this service.

Housing: When asked “*Is your housing situation getting in the way of your mental health/recovery?*” a smaller cohort of the total sample (11.6%) said “Yes.” Among those respondents, 44.63 percent indicated they “agreed or strongly agreed” to this subscale of items:

- My housing needs were part of my treatment plan.
- When I had a housing problem, I was assisted by staff.
- If I had to wait to get housing assistance, I still received support for my other needs from my treatment team.

Employment: When asked “*Does having work (either paid or volunteer) help you with your recovery from mental health or substance abuse disorders?*” 46 percent of the total sample said “Yes”. Among those respondents, on average, the majority (49.8%) indicated they “agreed or strongly agreed” to this subscale of items:

- My work goals were part of my treatment plan.
- When I had a problem with work, I was assisted by staff.
- Because of the staff’s help in general, my work situation is better.

Substance Abuse: A smaller cohort of respondents (16%) said they had received services for drug or alcohol use in the past year. But among those respondents, on average, almost all (96%) indicated they “agreed or strongly agreed” to this subscale of items:

- I have the tools I need to understand and continue with my recovery.
- The substance abuse services I received helped me reduce my use of drugs and/or alcohol.

Medications: Over two-thirds of respondents (67%) indicated that they received medication services as part of their treatment in the past year. Among those respondents, on average, 78.9 percent indicated they “agreed or strongly agreed” to this subscale of items:

- I am getting my medications when I need them.
- The medication(s) I am taking helps me control symptoms that used to bother me.
- I was offered a choice in, or alternative to, medication.

Care Coordination: About 16.8 percent of respondents had been assigned care coordination assistance at higher levels (Level 2 or 3) in Centennial Care. The percent of positive response per each item was as follows:

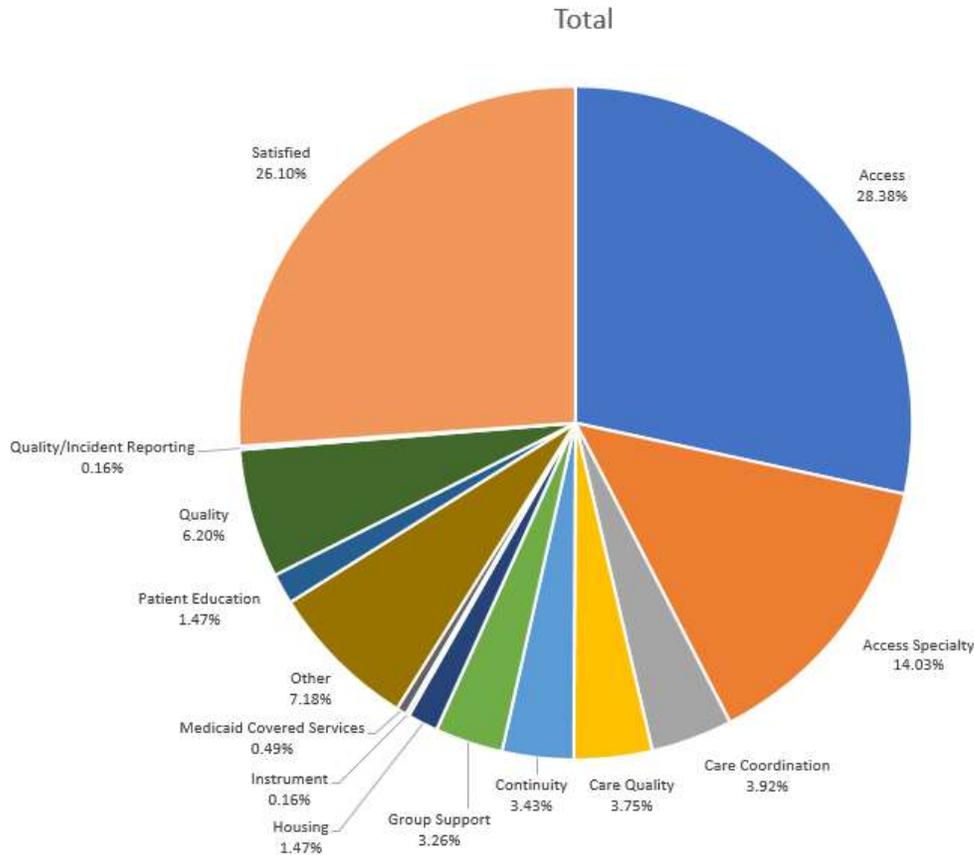
- 84.2% You were involved in developing your goals for your Care Plan.
- 81.8% Your physical health was included in your Care Plan.
- 82.2% Your Care Coordinator reviewed progress on your goals when you met together.
- 73.8% When your Care Coordinator talked with you on the phone, it helped you with your goals.
- 78.9% Your Care Coordinator assisted you when there was an interruption or change in your care.

Additional Comments:

At the end of the telephone survey, respondents were asked an opened-ended question:

“What are the top two things that can improve your experience with behavioral health services in New Mexico?”

There were 613 responses which were categorized into the following themes represented in the pie chart below.



Two thirds of the responses addressed Access and Satisfaction.

Access (28% of responses) The most frequently cited issues were:

- Location of, or ease in getting service
- Availability of Staff needed
- Transportation to care

Access Specialty (14% of responses) The most frequently cited issues were:

- Access to needed medications
- Availability of a Psychiatrist

Satisfied (26% of responses) The most frequently cited issues were:

- Pleased with their experiences in care
- Specify staff were very helpful

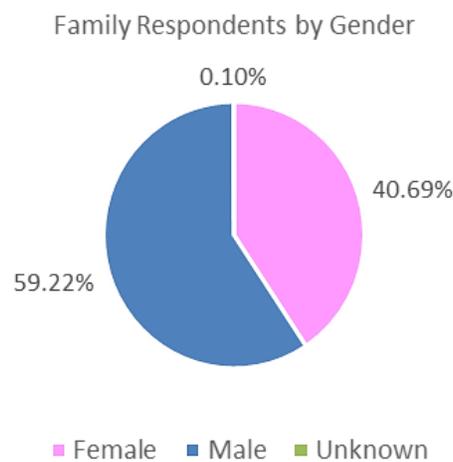
Further details will be available in the final report on the New Mexico Network of Care.

Survey Highlights- Child Family/Caregiver Survey

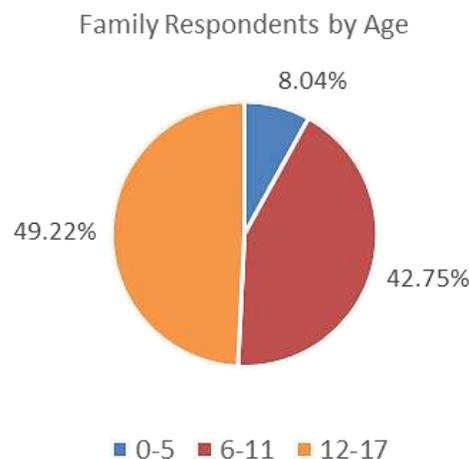
Who we surveyed - Child Family/Caregivers

Our sample was drawn randomly from those children who had received care between July 1, 2017, and January 31, 2018. We spoke to their Family/Caregivers; and, they were free to speak about their experiences of their children in service through the entire previous twelve months. Telephone surveys were conducted in June and July, 2018. For the 2018 survey, we heard from 1,020 Family/Caregiver respondents.

GENDER: Forty-one percent (40.7%) of the children receiving services were females and 59 percent were males. This is similar to the genders of the overall population of females receiving care during this period.

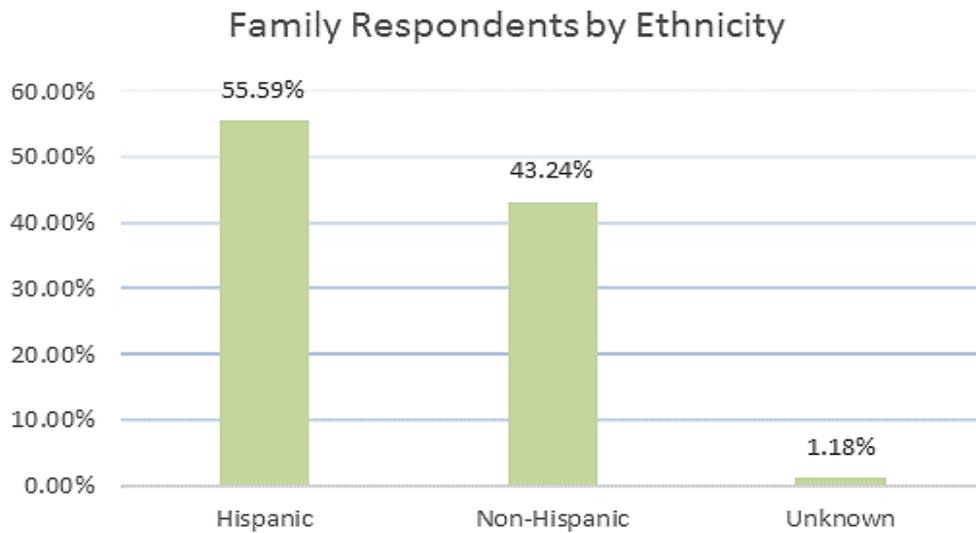


AGE: Almost one-half (49.2%) of children sampled were 12-17 years old. Another 43 percent of the sample were 6-11-year-old children. This is similar to the age groups in the overall population of children receiving care during this period.

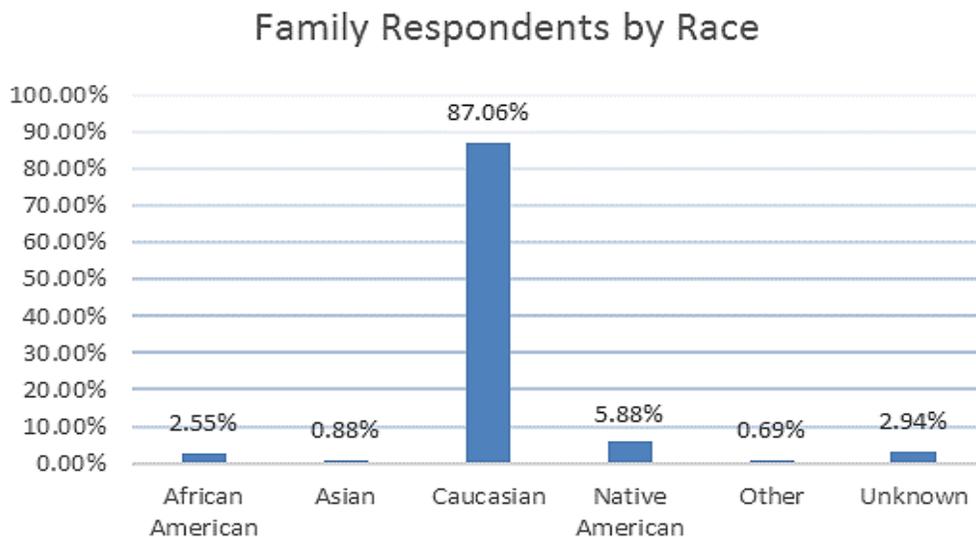


ETHNICITY: Fifty-six percent (55.6%) of the children sampled were Hispanic as compared to the 43.2 percent who were non-Hispanic. This is very similar to the overall population of children in care during this period.

This is similar to the proportions in the population receiving services during this period.



RACE: Eighty-seven percent (87.1%) of the group of children sampled were Caucasian. Native Americans (5.9%) were under represented as compared to the overall (8.2%) population of children receiving care during this time period.



Overview of Child/Family Caregiver Findings by Seven Domains: There were two different instruments tailored to the issues pertinent to adults and again for children. The items in each domain are identical to those used nationwide. That allows New Mexico to compare its performance to the National Average. Additional subscales were also measured (i.e., supportive housing, supportive employment, substance abuse) and issues related to medication management and care coordination. Those findings are presented immediately following the individual domain graphs.

In comparison to our 2017 performance, New Mexico maintained performance in 3 domains (i.e., Access, Cultural Sensitivity and Social Connectedness). With the domain of Participation in Treatment, there was a statistically significant improvement of almost 3 percentage points. There were decreases in performance in three domains (i.e. Improved Functioning, Outcomes and Satisfaction).

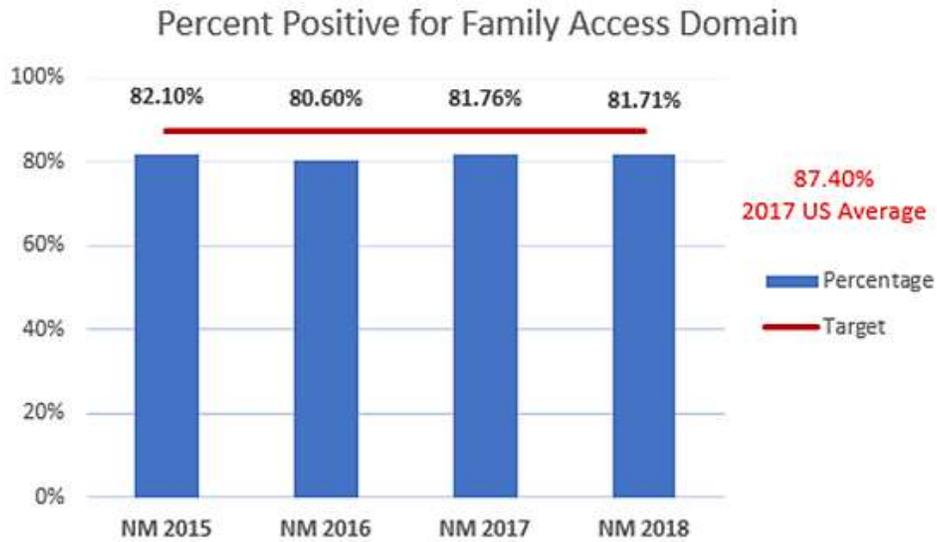
However, in comparison to other states, New Mexico exceeded the 2017 National Averages in five out of the seven domains. Only in the domains of Access and Satisfaction did we not meet the National Averages.

The MCO's are currently working on their quality improvement strategies to make improvements in these domains.

Domain: Access

Definition: *Entry into behavioral health services is quick, easy and convenient.*

Observations: The average proportion of positive responses for Access was 81.7 percent. This is very similar to the prior year’s performance of 81.8 percent. However, it is below the national 2017 average of 87.4 percent.

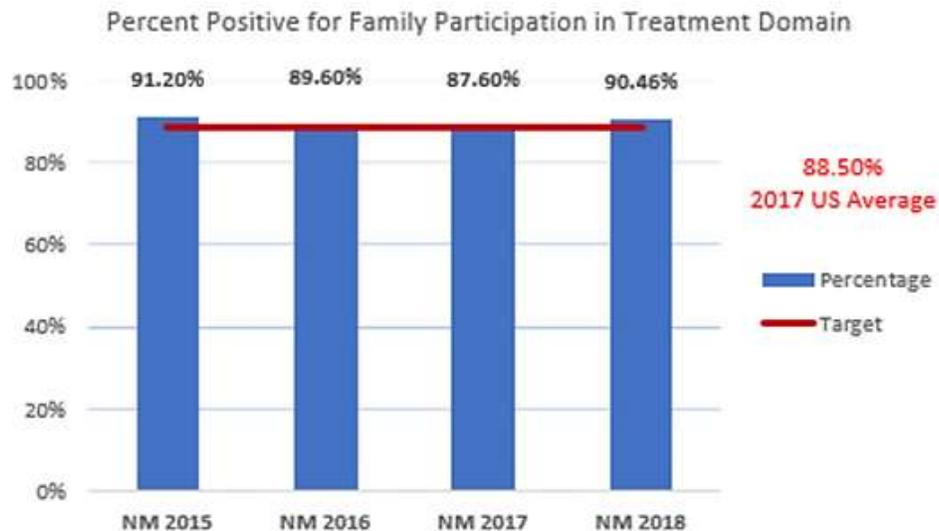


Domain	Q #	Question Text	Domain Item Percentage
Access	8	The location of services was convenient for us.	87.62%
Access	9	Services were available at times that were convenient for us.	86.73%

Domain: Participation in Treatment Planning

Definition: Families feel that they are a part of their child's treatment team.

Observations: The average proportion of positive responses for Participation in Treatment was 90.5 percent. This is almost a 3-point increase over the prior year's performance of 87.6 percent and a statistically significant improvement. And it exceeds the national 2017 average of 88.5 percent. Families feel very positive about being part of their child's treatment team, choosing the child's treatment goals and choosing their child's services.

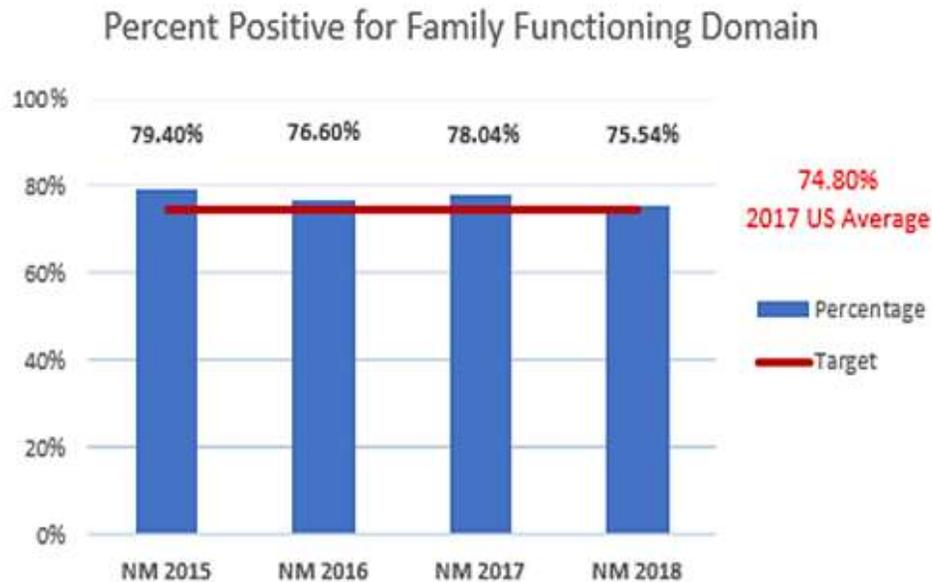


Domain	Q.#	Question Text	Domain Item Percentage
Participation in Treatment	2	I helped to choose my child's services.	89.13%
Participation in Treatment	3	I helped to choose my child's treatment goals.	90.53%
Participation in Treatment	6	I participated in my child's treatment.	94.46%

Domain: Improved Functioning

Definition: Families feel their child is better able to do the things they want to do, and have someone with whom they can enjoy things.

Observations: The average proportion of positive responses for Improved Functioning was 75.5 percent. Although this is above the national 2017 average of 74.8 percent, it is 2.5 points lower than the prior year's performance of 78 percent. While generally satisfied, families are least positive about their child doing being better able to cope when things go wrong.

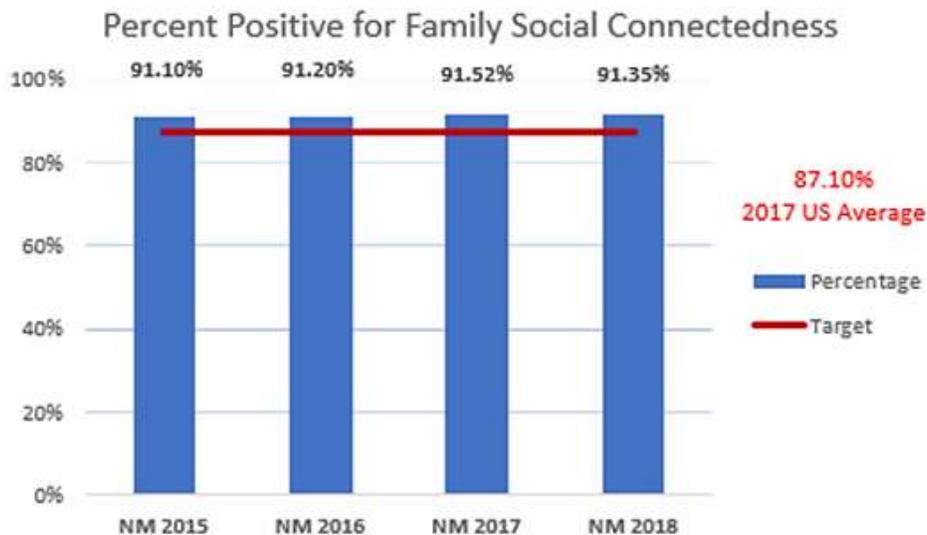


Domain	Q #	Question Text	Domain Item Percentage
Improved Functioning	16	My child is better at handling daily life.	77.47%
Improved Functioning	17	My child gets along better with family members.	77.74%
Improved Functioning	18	My child gets along better with friends and other people.	77.70%
Improved Functioning	19	My child is doing better in school and/or work.	76.77%
Improved Functioning	20	My child is better able to cope when things go wrong.	69.68%
Improved Functioning	22	My child is better able to do things he/she wants to do.	83.08%

Domain: Social Connectedness

Definition: Families feel they have the social supports to listen to them when they need to talk and have help to deal with their child's problems or crises.

Observations: The average proportion of positive responses for Social Connectedness was 91.4 percent. This is above that national 2017 average of 87.1 percent and is similar to the prior year's performance of 91.5 percent. Families were very satisfied with themselves, and their child, getting the help that they need.

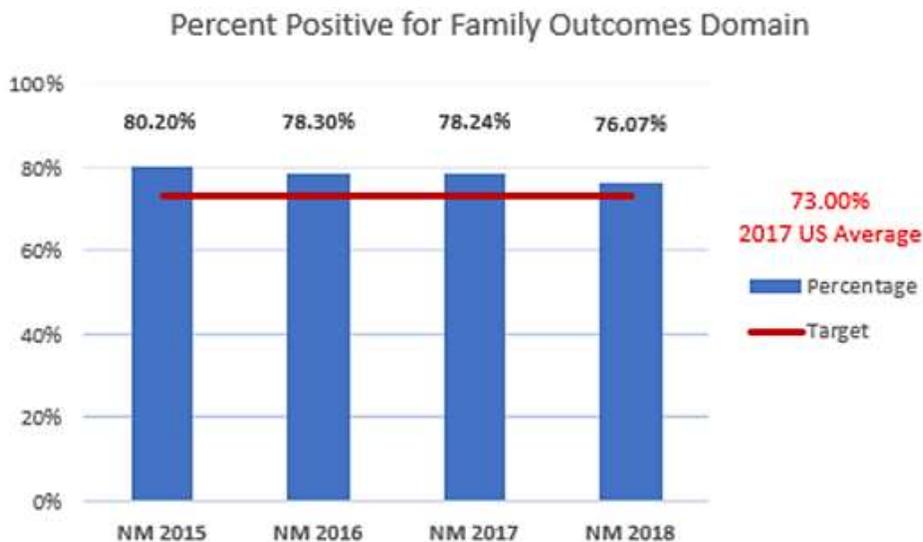


Domain	Q #	Question Text	Domain Item Percentage
Social Connectedness	23	I know people who will listen and understand me when I need to talk.	92.79%
Social Connectedness	24	I have people that I am comfortable talking with about my child's problems.	92.60%
Social Connectedness	25	In a crisis, I would have the support I need from family or friends.	92.81%
Social Connectedness	26	My child has people with whom he/she can do enjoyable things.	94.88%

Domain: Outcomes

Definition: *The extent to which services provided to families with behavioral health needs have a positive or negative effect on their child’s ability to get along with family and friends, do better in school, handle daily activities and cope with problems.*

Observations: The average proportion of positive responses for Outcomes was 76.1 percent which is 2 points lower than the prior year’s performance of 78.2 percent. However, it is notably higher than the 2017 national average of 73 percent. Satisfaction was lowest in the areas of school and coping when things went wrong.

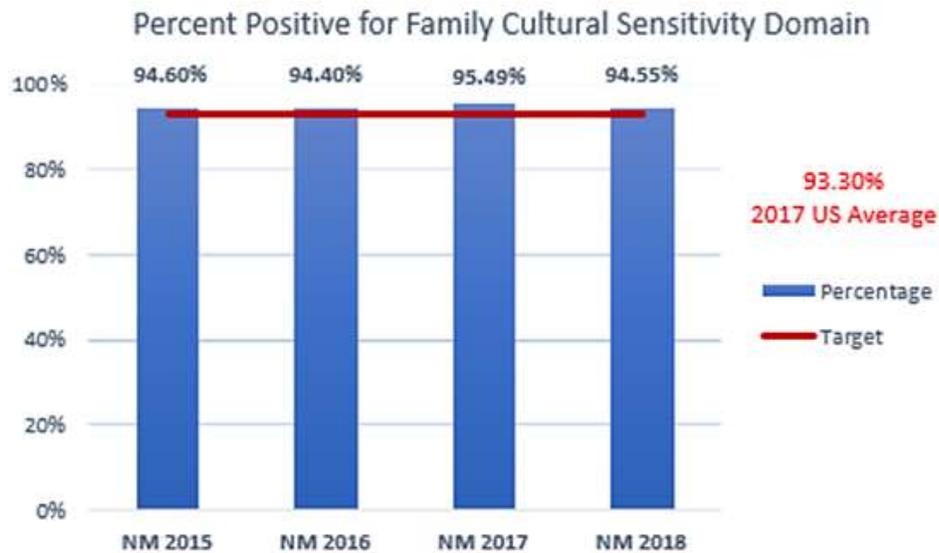


Domain	Q #	Question Text	Domain Item Percentage
Outcomes	16	My child is better at handling daily life.	77.47%
Outcomes	17	My child gets along better with family members.	77.74%
Outcomes	18	My child gets along better with friends and other people.	77.70%
Outcomes	19	My child is doing better in school and/or work.	76.77%
Outcomes	20	My child is better able to cope when things go wrong.	69.68%
Outcomes	21	I am satisfied with our family life right now.	85.36%

Domain: Cultural Sensitivity

Definition: *The extent to which services provided to families are delivered in a manner that is respectful of cultural background, language and spiritual beliefs.*

Observations: The average proportion of positive responses for Cultural Sensitivity was 94.6 percent. This is above that national 2017 average of 93.3 percent, but slightly lower than the prior year's performance of 95.5 percent. Families are very satisfied with staff's respect for and sensitivity to the family's cultural background and spiritual beliefs. They also felt they were spoken to in a way they understood.

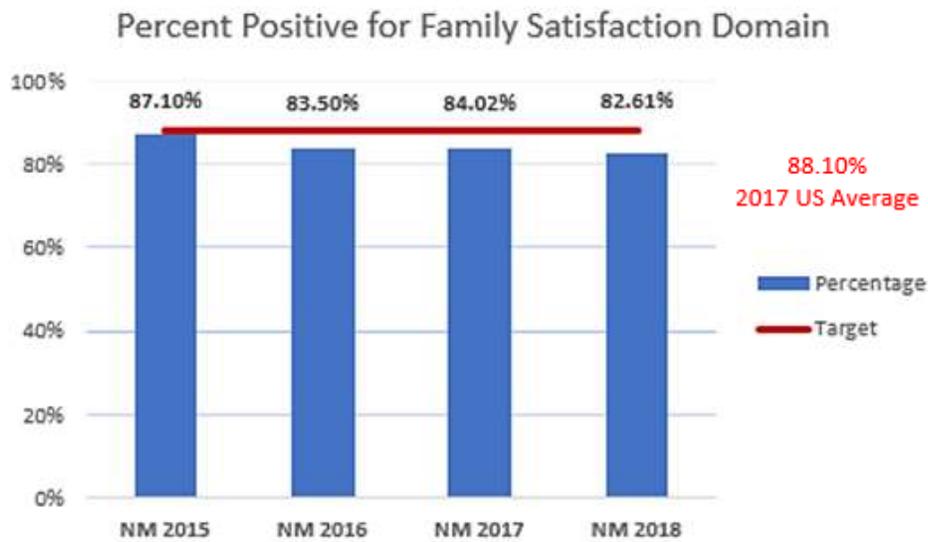


Domain	Q #	Question Text	Domain Item Percentage
Cultural Sensitivity	12	Staff treated me with respect.	93.31%
Cultural Sensitivity	13	Staff respected my family's religious/spiritual beliefs.	96.07%
Cultural Sensitivity	14	Staff spoke with me in a way that I understood.	95.97%
Cultural Sensitivity	15	Staff was sensitive to my cultural/ethnic background.	96.23%

Domain: Satisfaction

Definition: Families are generally happy with the services that are provided to their child.

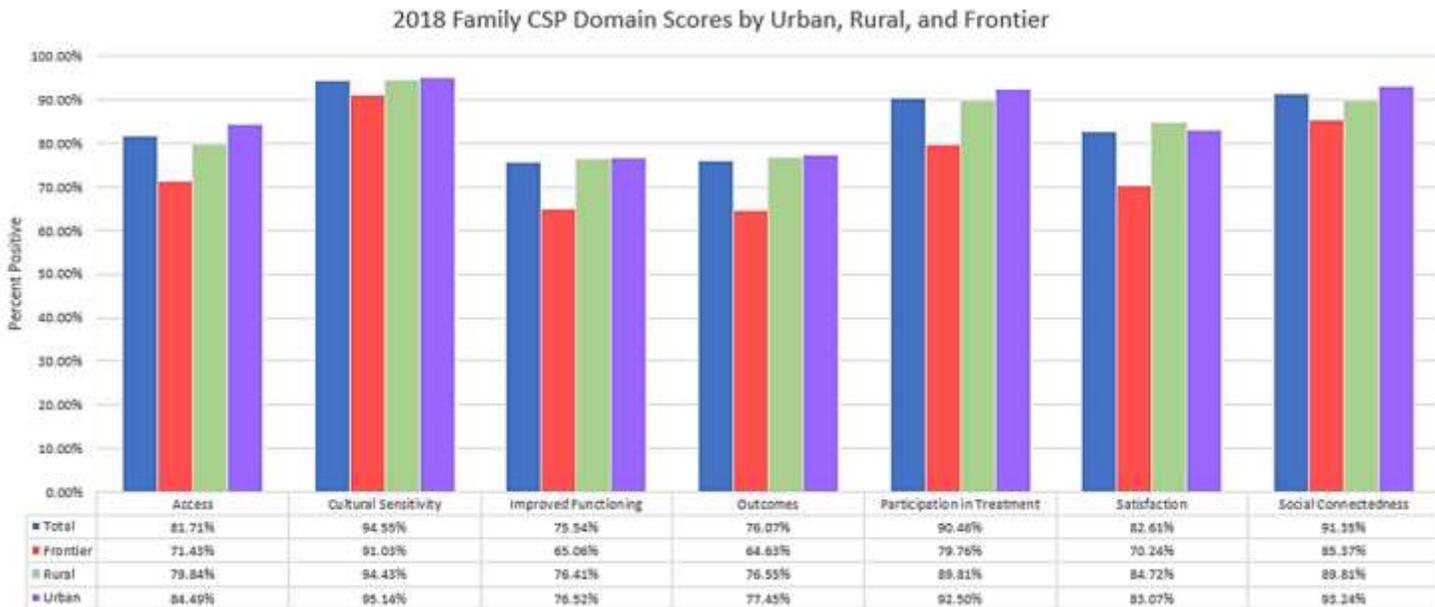
Observations: The average proportion of positive responses for Satisfaction was 82.6 percent. This is notably below (5.5 points) the national 2017 average of 88.1 percent, as well as slightly lower than the prior year’s performance of 84 percent. While families were very satisfied with the services their child received, they were less satisfied about getting the amount of help they wanted or needed.



Domain	Q #	Question Text	Domain Item Percentage
Satisfaction	1	Overall, I am satisfied with the services my child received.	89.70%
Satisfaction	4	The people helping my child stuck with us no matter what.	86.63%
Satisfaction	5	I felt my child had someone to talk to when he/she was troubled.	86.53%
Satisfaction	7	The services my child and/or family received were right for us.	85.94%
Satisfaction	10	My family got the help we wanted for my child.	83.14%
Satisfaction	11	My family got as much help as we needed for my child.	76.26%

Geographic Patterns

The seven domains were also analyzed to determine any differences between respondents who live in Urban, Rural, or Frontier areas of the state. Respondents in Urban areas of the state were consistently more positive in six out of the seven domains. Only in the Satisfaction domain did Rural respondents indicate higher satisfaction.



Other Areas

Access to Care: This is an important area for all families. Most Family respondents (81.2%) indicated that staff who understood their situation returned calls within 24 hours all or most of the time. Most respondents (80.2%) indicated that when their children needed behavioral health services, they received them within two weeks all or most of the time. Nearly all children and families (98.7%) received the information needed and their services in the language they preferred. When needed, 64.2 percent of the respondents indicated they were provided an interpreter, and when provided 98% felt it was helpful. Only 3 percent indicated that language was a barrier to getting an appointment. An additional indication of their satisfaction is reflected in the finding that 84.8 percent of the respondents indicated they would recommend the agency to a friend or family member.

Medications: One-third (35.5%) of families indicated that their children received medication services as part of their treatment in the last year. Of those respondents, most (56.1%) indicated they “agreed or strongly agreed” to this subscale of items: However, access to a psychiatrist was rated notably lower than the other two items.

- My child had difficulty getting in to see a psychiatrist when we wanted.
- Staff told me what side effects to watch for regarding prescribed medications for my child.
- I was offered alternatives to or choices about, my child taking medication.

Behavioral Services received at School: Forty-six percent (46.4%) of the families indicated that their child received Behavioral Health Services at school. Few respondents (17.2%) indicated they needed assistance in getting special education services related to behavioral health services for their child

Use of newer behavioral health services: We wanted to know whether families were interested in receiving three newer services: Respite, Family and Youth Specialist services.

- Three fourths of respondents (77.2%) would use Family Specialist services if offered to them.
- Most respondents (86.2%) would encourage their child to use Youth Specialist services if offered to them. Fifty-eight percent (58%) said they would use Respite Services if they were offered to them.
- Very few respondents (8%) had received Respite Services. But of those almost all were satisfied with the services:
 - 88.9% Found services helpful
 - 87.7% Found the location convenient
 - 92.6% Found the times available were flexible to meet their needs.
 - 85.2% Were satisfied with the quality of training of the respite provider
 - 87.7% Were satisfied that there were enough hours available convenient to the family
 - 93.8% Would recommend the service to another parent.
 - Importantly, the majority of respondents (52.9%) would use Respite Service if they were available to them.

Care Coordination: Only 3.6 percent of respondents had their child assigned by their Managed Care Health Plan to the higher level of Centennial Care service called Care Coordination (Level 2 or 3). Within this smaller group, the percent of positive response per each item was as follows:

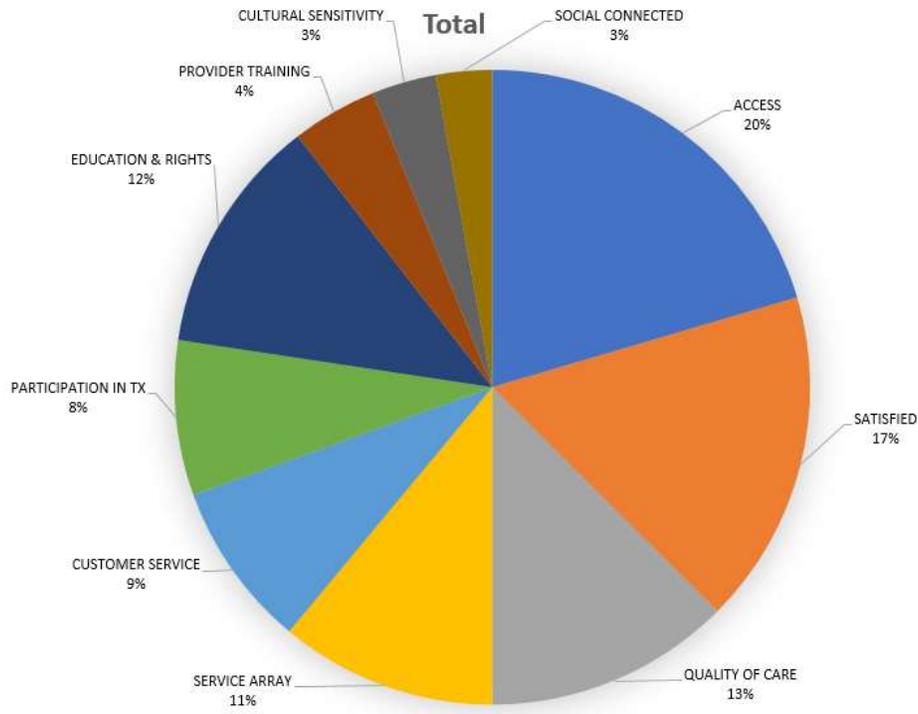
- 77.8% I participated in developing my child's Care Plan.
- 80.6% My child's physical health was included in his/her Care Plan.
- 77.2% I had contact with my health plan's Care Coordinator and we talked about my child's goals.
- 65.7% I had contact with my health plan's Care Coordinator and we talked about action steps to take to meet my child's goals.
- 54.6% My health plan's Care Coordinator helped me get services that actually helped my child, even if there had been changes or loss of services.
- 62.2% I am satisfied with my overall experience with my health plan's Care Coordination services.

Additional Comments:

At the end of the telephone survey, respondents were asked an opened-ended question:

“What are the top two things that can improve your experience with behavioral health services in New Mexico?”

There were 734 responses which were categorized into the following themes represented in the pie chart below.



Highlights of the most cited categories:

Access (20% of responses) The most frequently cited issues were:

- Proximity to services
- Timeliness in initially seeing a provider
- More provider selection/availability to individuals or agencies.
- Provider availability: office hours, frequency/consistency of provider
- Community Supports/resources

Satisfied (17% of responses) The most frequently cited issues were:

- Generally pleased with the services they received.

Quality of Care (13% of responses) The most frequently cited issues were:

- Promptness/timeliness of providers
- Engagement of parents as part of the team

Education and Rights (12% of responses) The most frequently cited issues were:

- Behavioral Health Education
- Educating families to their child’s rights for an appropriate education

Further details will be available in the final report on the New Mexico Network of Care.

Next Steps:

The findings from the Annual Consumer and Family/Caregiver Satisfaction Survey are part of our yearlong continuous quality improvement efforts. At the monthly meetings of the Steering Committee for the Annual Survey, the MCO's will be reviewing their specific results. From that, they will present their quality improvement interventions targeted at impacting their performance.

This report and its appendices will be posted on <http://newmexico.networkofcare.org/>

Acknowledgments

There are many individuals who assisted in obtaining the information for this survey, and it is impossible to mention everyone by name. The Project Steering Committee would like to extend their gratitude to all the workers, volunteers, family members, and other stakeholders who participated.

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Western Sky: Carolyn Griego

Special Thanks to:

Falling Colors: Reba Serafin and Gordon O'Brien

Families ASAP: Delfy Roach

Albuquerque Center for Hope and Recovery: Maxine Henry