Perception of Care Surveys and Quality Improvement: An Overview
Institute of Medicine Recommendations (2006)

- Coordinate Care (SUD, MH, Health)
- Create Health Information Infrastructure / EHR
- Increase capacity of workforce to enable Quality Improvement (QI)
- Find (Market) Incentives to Leverage Change / Business Case
- Close Knowledge Gaps
Institute of Medicine Recommendations (2006)

• Patient-Centered Care
  - Involve patients and their families in the design, administration, and delivery of treatment and recovery services

• Create Infrastructure for EBPs and QI
  - Measure the processes and outcomes of care to continuously improve the quality
How does OASAS providers involve patients in the delivery of treatment and recovery services?
Fall 2008 Provider Survey
(n = 889: 82% response rate)
OASAS Provider Survey (2008)

- 87% used a provider-specific survey
- 29% conducted only an annual survey
- 98% used a paper form

When is the Survey Administered?

- 72% periodic cross-section
- 32% based on discharge
- 11% based on admission
OASAS Provider Survey Recommendations from Respondents (2008)

- Standardize survey forms
- Create benchmarks for interpretation
- Training and Technical Assistance in using surveys for Quality Improvement
What are the limitations of Client or Participant Satisfaction Surveys?

- Lack of standardized questions and performance dimensions
- Results in high levels of satisfaction – Thus no room for improvement
- Lack of Psychometric Testing – Reliability and Validity
Perception of Care Surveys are responsive to and meets . . .

- IOM Recommendations
- Independent Accreditation Requirements (Joint Commission / CARF)
- OASAS Regulations
- Health Care Reform recommendations
- National Outcome Measures (NOMs)
SAMHSA’s Modular Survey
Survey Questionnaire Development

- Forum on Performance Measures:
  - Behavioral Health and Related Services Systems
- Reviewed ~ Mental Health ~ Substance Use Disorder / Adult and Adolescent populations
- Different items / different populations / common elements – (modular survey)
- Selected the best questionnaire items using Item Response Theory (IRT)
Development of the Survey Questionnaire (continued)

- Additional content based on...
  - MHSIP Consumer Survey
  - ECHO Outcome Survey
  - Youth Services Survey (YSS / YSSF)
  - Consumer Assessment of Healthcare Providers and Systems (CAHPS)
OASAS’ Adaptation of the SAHMSA-sponsored Modular Survey

5 Domains: Rating Scales

A. Access and Quality (7 items)
B. Perceived Outcome (6 items)
C. Social Connectedness (7 items)
D. Readiness for Change (2 items)
E. Program Recommendation (2 items)

3 Open-ended Items (write-ins)

What is the program doing right?
What can be done to improve the program?
Is there anything else about this program that you would like to say?
Survey Content

**Best Practices**

Participant / Client Rights
Outcomes and Social Domains
Medication Supported Recovery
Nicotine Replacement Therapy

**Other Survey Items**

Time in Program (calculated by months)
Age, Gender, Ethnicity, and Race
Presenting Problem (SUD, MH, or Both)
History of Prior Treatment
Having a Criminal Justice Mandate
Employment / School Status
Rating Scale

<table>
<thead>
<tr>
<th>Disagree</th>
<th>Somewhat Agree</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>

“Not Applicable” or “Don’t Know” is not an option
However if an item is left blank, it is coded and reported as “No Response”
A: Access and Quality

1. When I needed services right away, I was able to see someone as soon as I wanted.
2. This program helped me develop a plan for when I feel stressed, anxious or unsafe.
3. The people I went to for services spent enough time with me.
4. I helped to develop my service/treatment goals.
5. The people I went to for services were sensitive to my cultural background (race, religion, language, sexual orientation).
6. I was given information about different services that were available to me.
7. I was given enough information to effectively handle my problems.
B: Perceived Outcome

As a result of the services (treatment), I have received...

8. I am **less bothered** by my symptoms.
9. I am better **able to cope** when things go wrong.
10. I am better **able to accomplish the things** I want to do.
11. I am **not likely to use** alcohol and/or other drugs.
12. I am doing **better at work/school**. (If this does not apply to you, please leave it blank.)
13. I get along with **my teachers/boss**. (If this does not apply to you, please leave it blank.)
C: Social Connectedness

14. There is **someone who cares** about whether I am doing better.
15. I have **someone who will help** when I have a problem.
16. I have people in my life who are a **positive influence**.
17. The people I care about are **supportive of my recovery**.
18. **People count on me** to help them when they have a problem.
19. I have **friends** who are **clean and sober**.
20. I have **someone who will listen** to me when I need to talk.
21. Using alcohol and/or drugs is a problem for me.

22. I need to work on my problems with alcohol and/or drugs.
E: Program Recommendation

23. I would **return** to this program if I need help in the future.

24. I would **recommend** this program to a friend or family member.
Open-ended Questions  
(write-ins)

- What is the program doing right?
- What can be done to improve the program?
- Is there anything else about this program that you would like to say?
Contact Information

• Perception of Care
  ◦ PoC@oasas.ny.gov

• Susan Brandau: (518)457-6129
  ◦ Susan.Brandau@oasas.ny.gov

• Henri Williams: (518) 485-0504
  ◦ Henri.Williams@oasas.ny.gov

• Bob Gallati: (518) 526-5953
  ◦ rjgallati@oasas.ny.gov