



2024 Consumer Satisfaction Survey Final Analysis & Recommendations

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Prepared for: Southwest Michigan Behavioral Health

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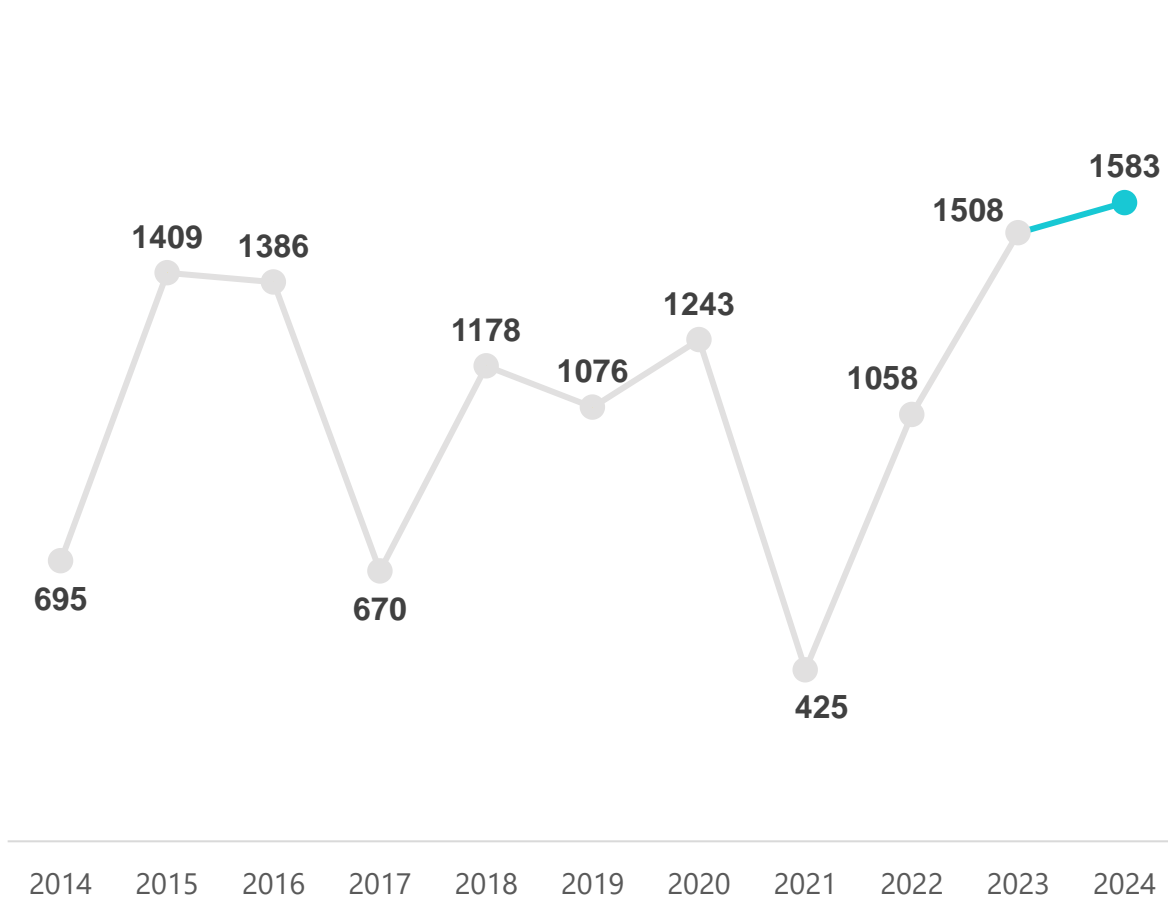
2024 Response Rates

Full methods breakdown available at end of report

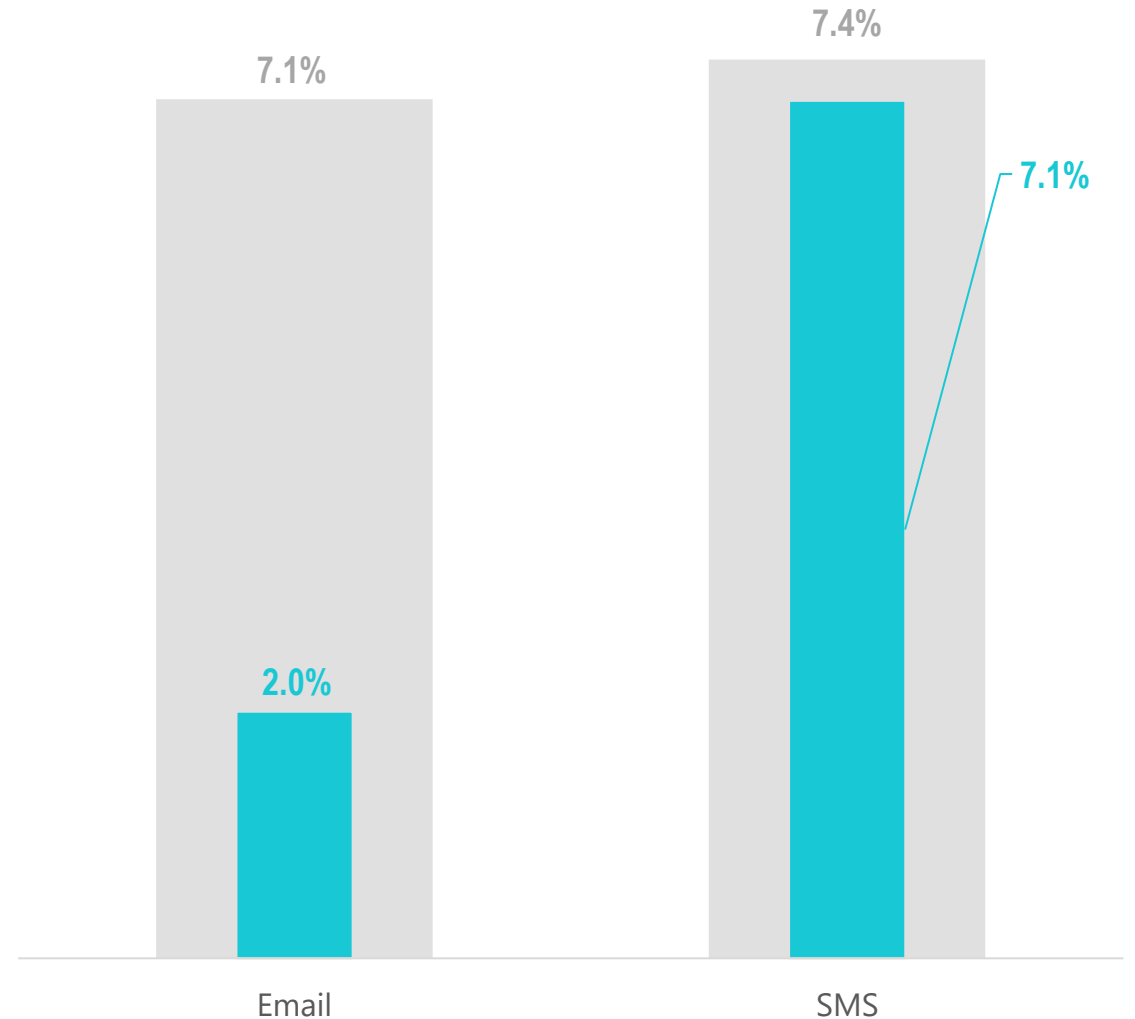
Highest number of responses ever recorded for 2024 MHSIP

Email response rate dropped 5 points to 2% in 2024, but SMS response rate held steady

MHSIP # of responses, 2014-2024



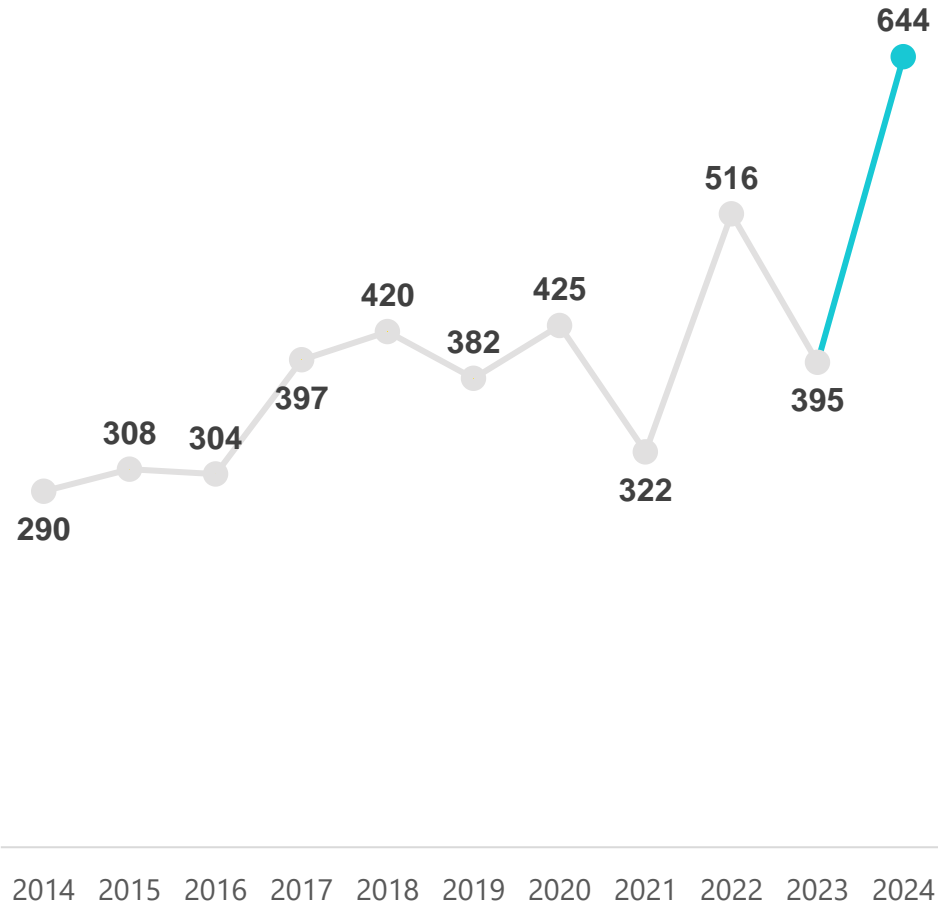
MHSIP response rate by medium 2023 vs. 2024



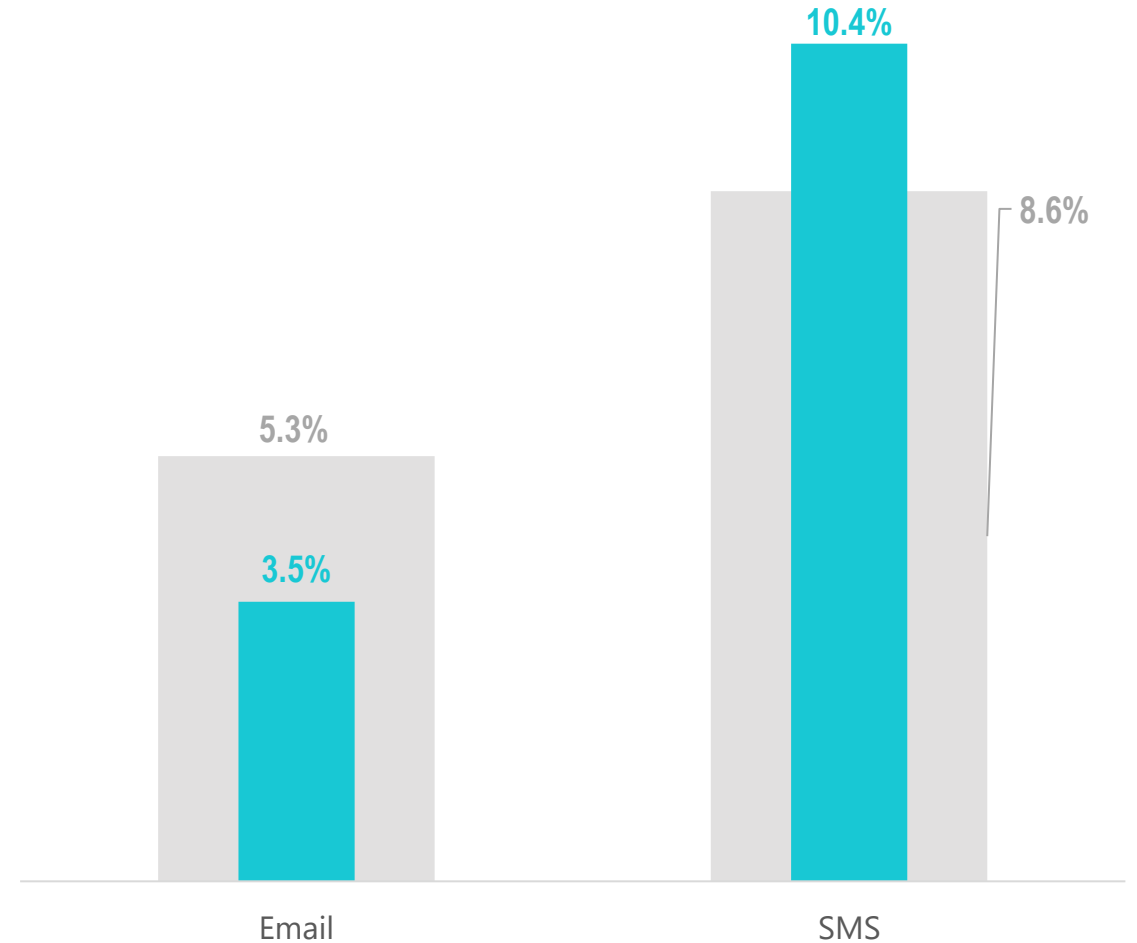
YSS number of responses hit highest ever recorded in 2024

SMS outreach resulted in a higher response rate by ~2 points compared to 2023

YSS # of responses, 2014-2023



YSS response rate by medium 2023 vs. 2024





Mental Health Statistics Improvement Plan (MHSIP) Revised Tool: 2024 Results

Sample size: 1583

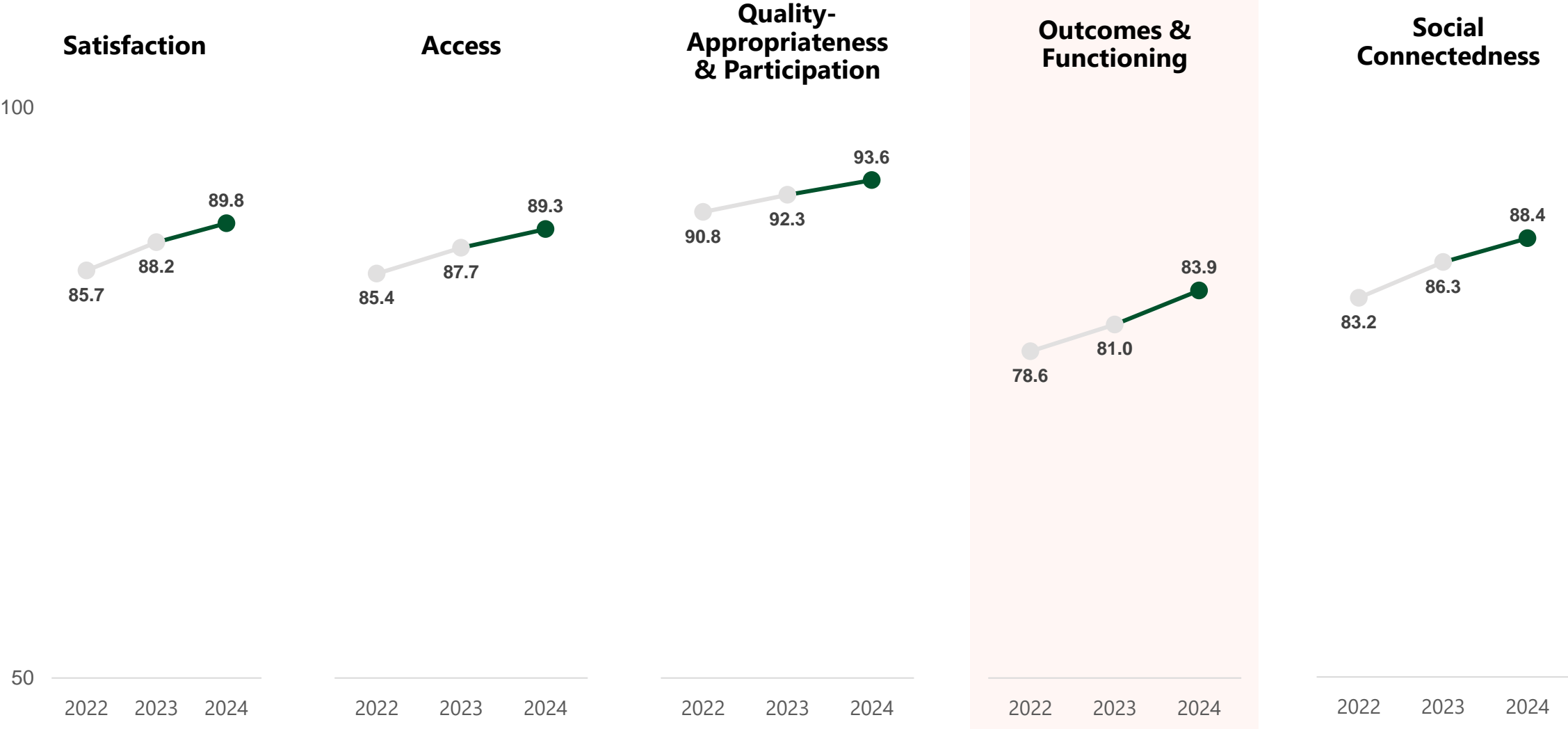


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SWMBH Consumer Satisfaction
2024 Results

Adults' outcomes & functioning improved from 2023 to 2024

Difference in constructs other than Outcomes & Functioning not statistically significant at 95% confidence.



Statistically significant difference ($p < .05$) between this year and previous year

Consumers had life-changing accounts of benefit from their CMHSPs

“Seeing the people at Woodlands on a regular basis helped me be able to **set goals and manage my life** better. Even if I'm struggling I feel better knowing that **I have support if I need it and people I can trust** for advice.”

“I'm not being dramatic when I say this, but ISK **actually saved my life**...I can honestly say after nearly 3 decades, **my mental health hasn't been this under control** or handled like this before.”

“The staff have helped me to **no longer be disabled** and to **live a normal life** working full time while continuing monthly treatment. I have been getting treatment for over 7 years and **plan to continue**.”

“This has been a **life saving service!** They helped me realize I was in a DV situation and **supported me through the entire process** of getting myself and my children out of that situation... **literally saved our lives**.”

“Helped me to be able to **live my life again**.”

“It is good to have a check-in to remind me that **my life is improving**, even if it is bit by bit. **I'm extremely appreciative**.”

“I'm actually **accomplishing and achieving my name change goal** in my transgender journey.”

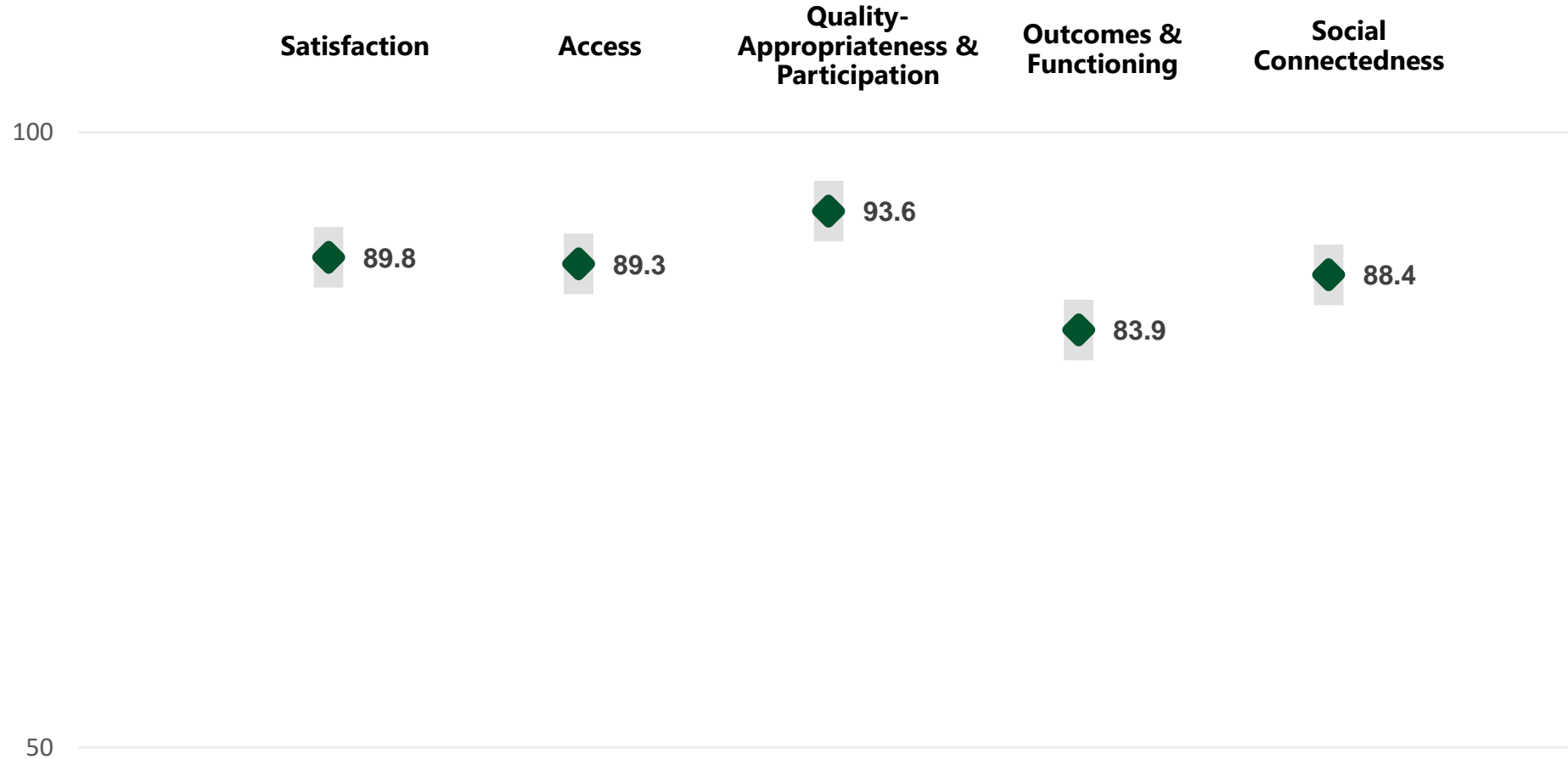
“My case manager is awesome. She has **helped me so much** in a short period of time. I now have **my own apartment**. I now have a **county ID card and Social Security card**. Those things are a big deal to me because I didn't have those things for a very very long time. **I would not have been able to do it without her**.”



All SWMBH CMHSPs: 2024 MHSIP scores by construct

Dark green denotes the percentage in agreement for that construct's items

Gray bars denote the likely range where the true percentage for all SWMBH consumers might lie (i.e., margin of error*)



Race: **Nonwhite** consumers reported slightly lower scores

"Nonwhite" category comprises any race other than White, including Black/African American, Asian, Native American, Native Hawaiian/Pacific Islander, or any mix of races. This aggregation was done due to small sample sizes.



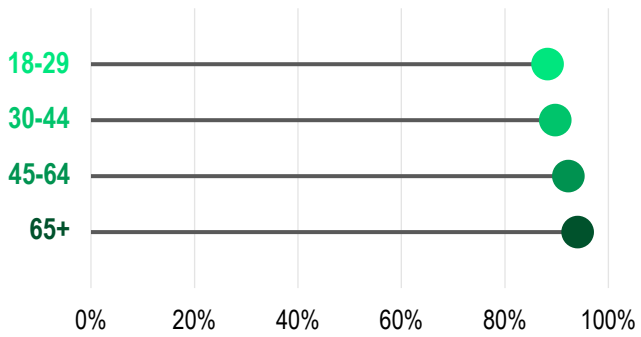
Statistically significant difference ($p < .05$) between groups (Mann Whitney U)

White n = 1,118
Nonwhite n = 361

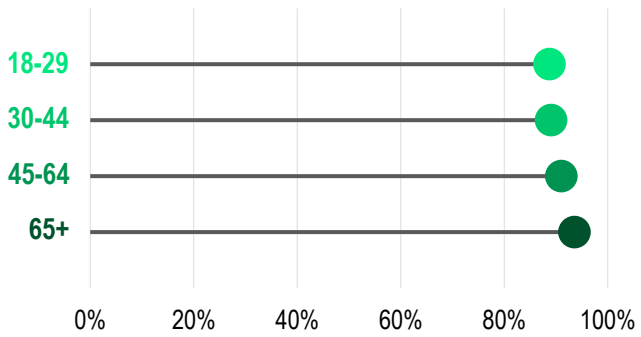
Age: Younger respondents had lower ratings, except in social connectedness where they reported higher ratings

However, construct ratings were generally similar between groups, so practical significance is limited.

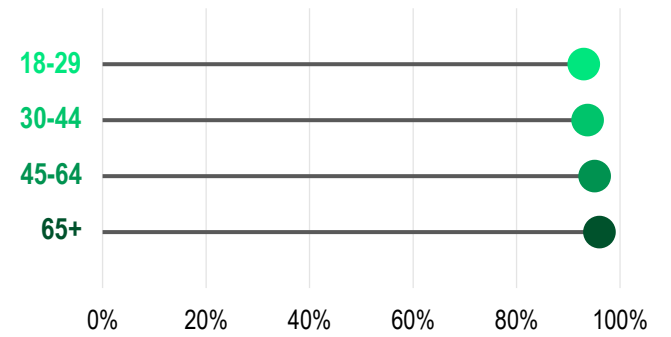
Satisfaction



Access

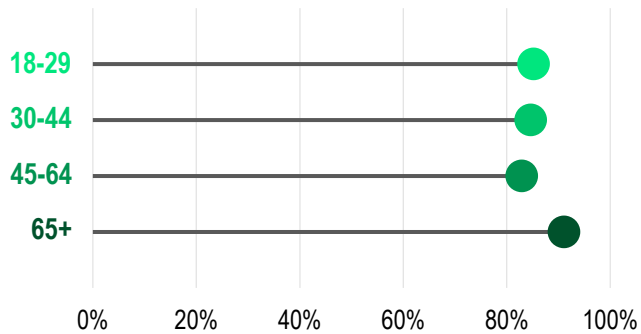


Quality-Appropriateness & Participation

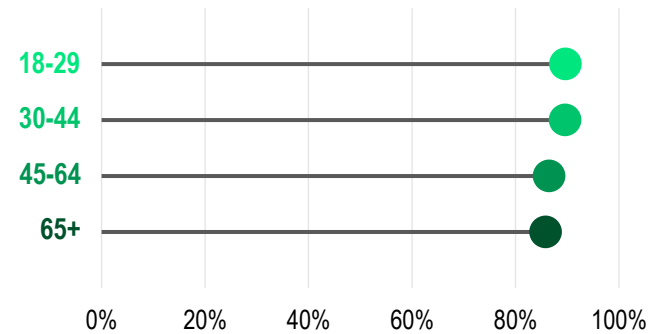


% stating "agree"

Outcomes & Functioning



Social Connectedness



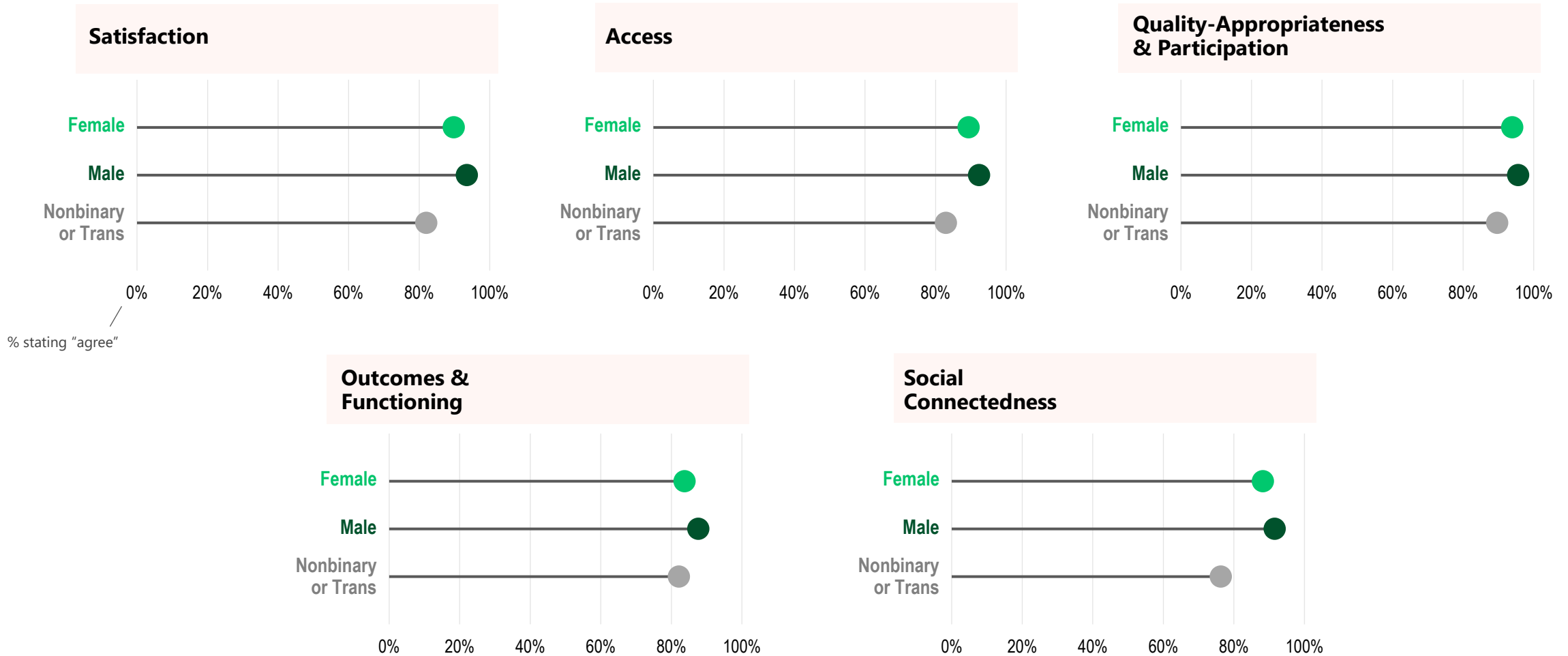
Statistically significant difference ($p < .05$) between age groups (Kruskal-Wallis)

18-29 n = 396
30-44 n = 510

45-64 n = 468
65+ n = 99

Gender: Nonbinary & transgender consumers reported lower scores; men reported slightly higher scores

Male consumers reported higher scores than both groups in all constructs except Satisfaction and QA&P, while nonbinary and trans consumers reported lowest scores in Access and Social Connectedness



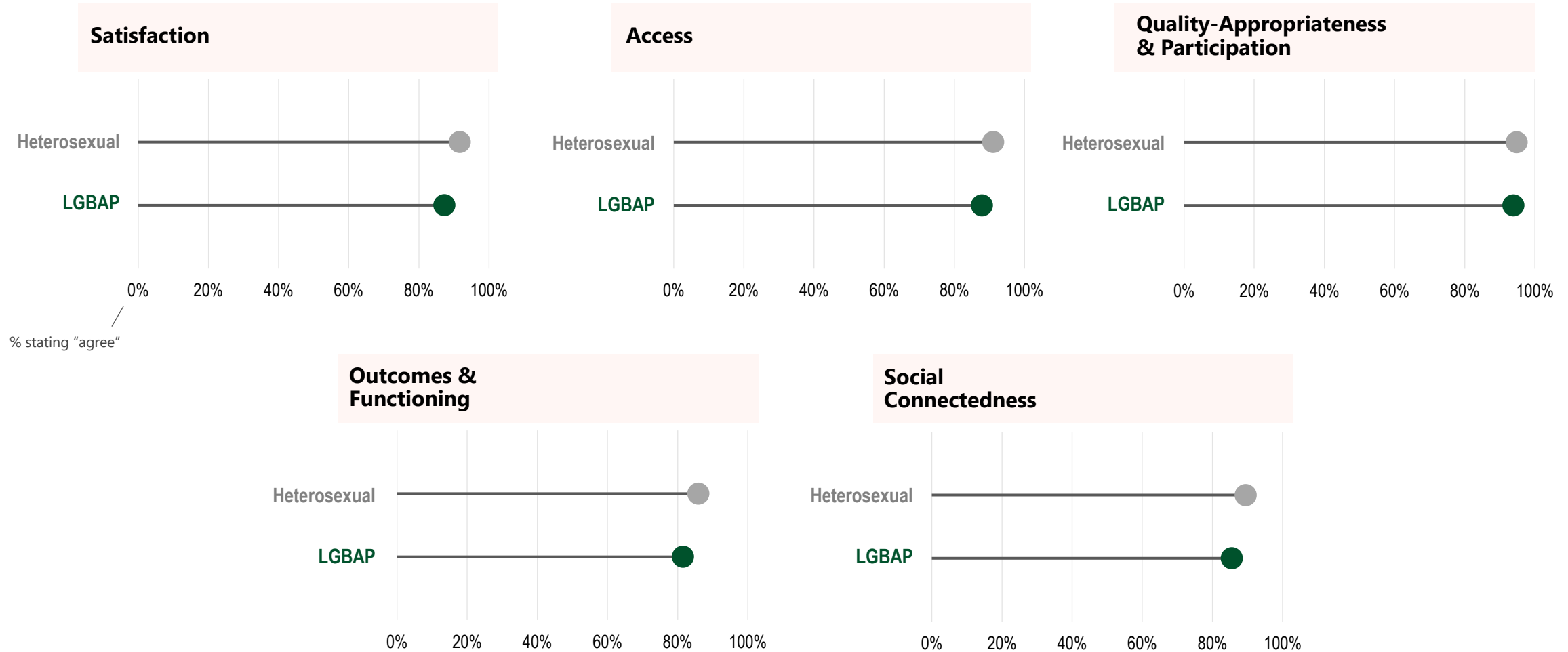
Statistically significant difference ($p < .05$) between gender groups (Kruskal-Wallis)

Female n = 905
Male n = 551

Nonbinary or Trans n = 67

Sexual Orientation: **LGBAP** consumers report slightly worse ratings than heterosexual/straight consumers across all constructs

LGBAP includes consumers identifying as lesbian, gay, bisexual, asexual, or pansexual



% stating "agree"

Statistically significant difference ($p < .05$) between groups (Mann Whitney U)

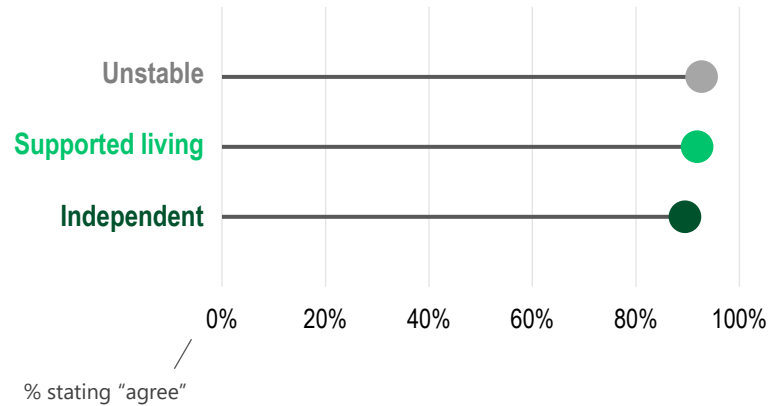
Heterosexual n = 1,143

LGBAP n = 238

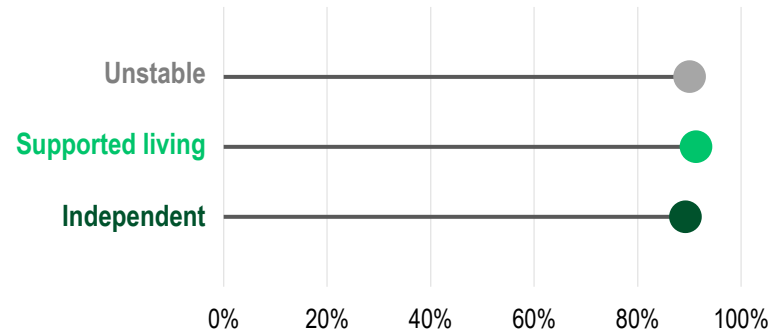
Living situation: Those with unstable housing reported lower social connectedness; no other major differences seen

"Unstable" was indicated if the respondent reported living in a shelter, motel/hotel, vehicle, etc. "Supported living" included AFC, group homes, relying on financial support from a relative, or other supported independent living. "Independent" included all other living situations.

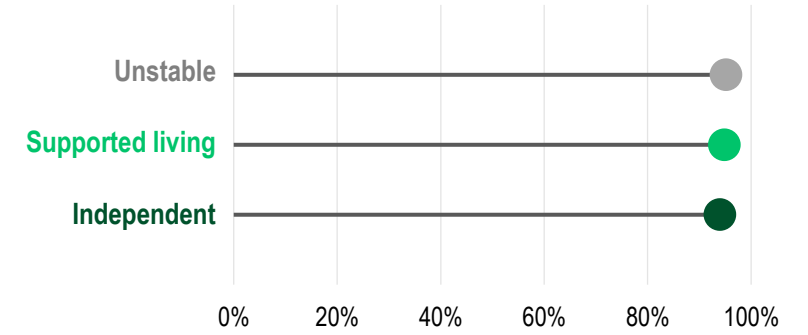
Satisfaction



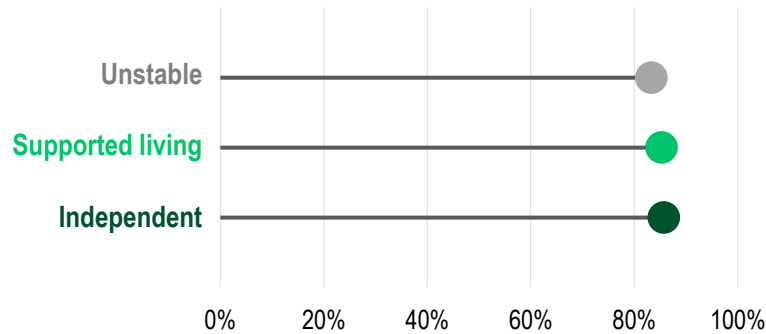
Access



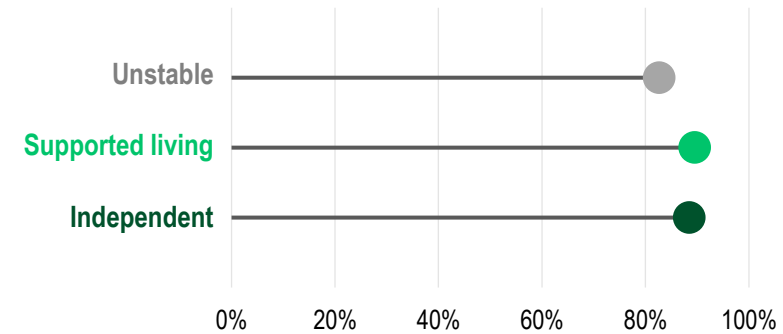
Quality-Appropriateness & Participation



Outcomes & Functioning



Social Connectedness



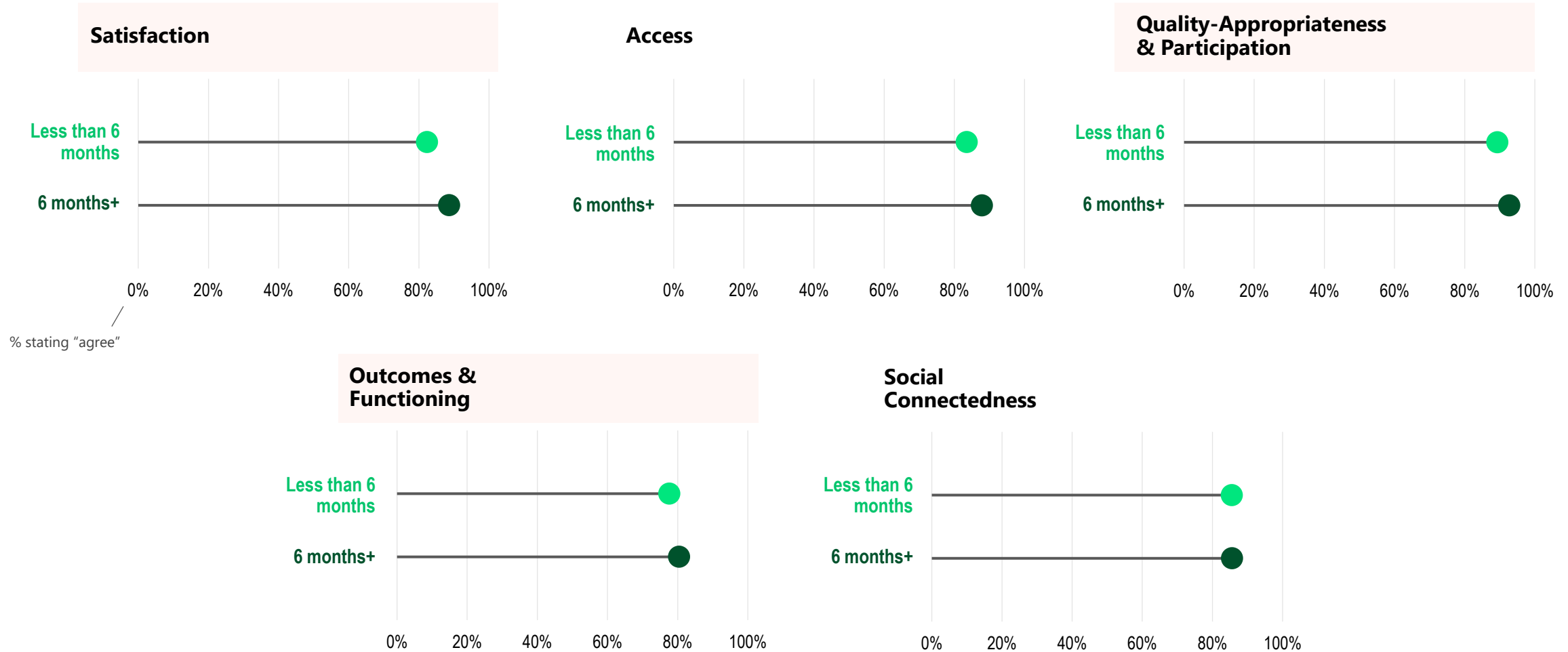
Statistically significant difference ($p < .05$) between groups (Mann Whitney U)

Unstable n = 107
Supported living n = 683

Independent n = 602

Length of Services: consumers with 6+ months of services had higher satisfaction, Q-A&P, and outcomes than consumers with less than 6mo

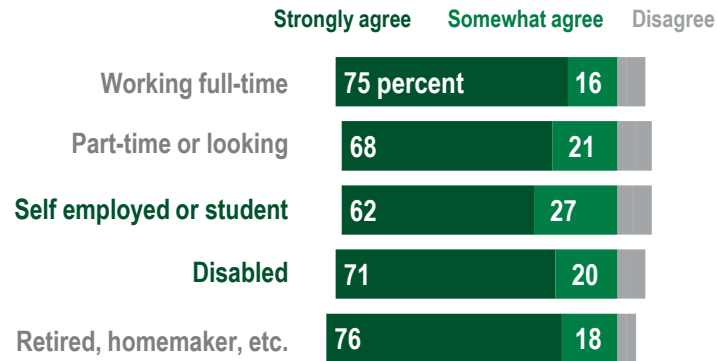
Tests for access and social connectedness did not reach statistical significance.



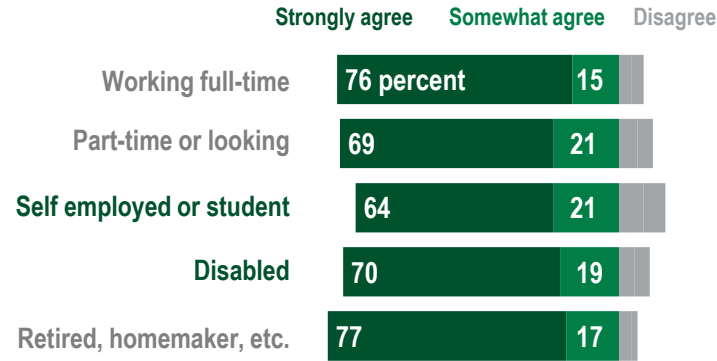
Employment status: Students & self-employed had lower satisfaction, access, and outcomes; disabled had lowest outcomes & social connectedness scores

Those working full time or retired/not seeking a job generally had the highest ratings across all groups

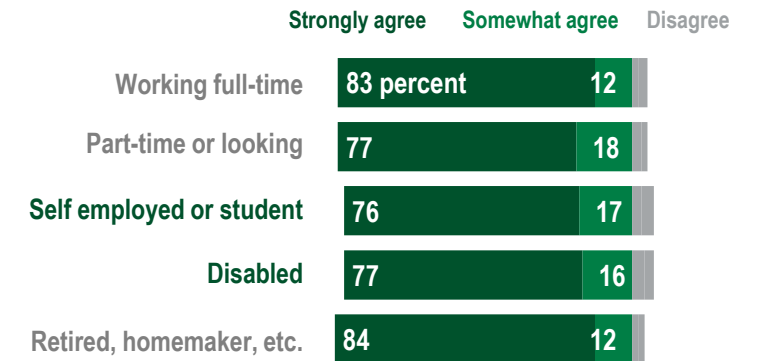
Satisfaction



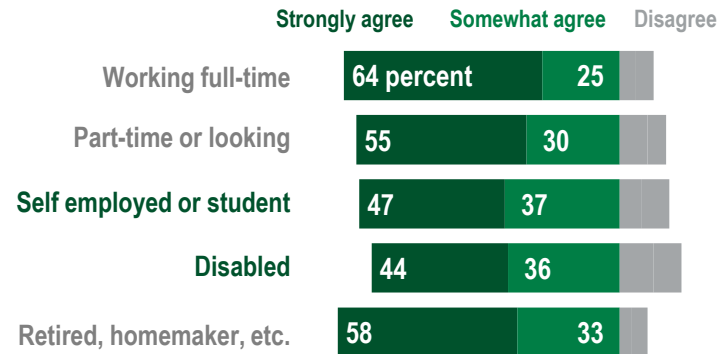
Access



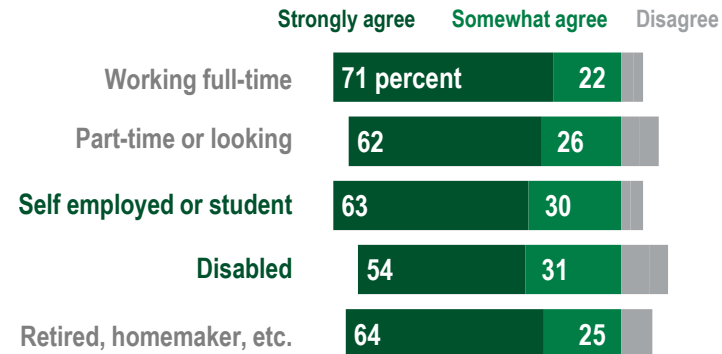
Quality-Appropriateness & Participation



Outcomes & Functioning



Social Connectedness



Statistically significant difference ($p < .05$) between age groups (Kruskal-Wallis)

Disabled n = 423
Self employed or student n = 125

Working full-time n = 308
Part-time or looking n = 409
Retired, homemaker, etc. n = 212

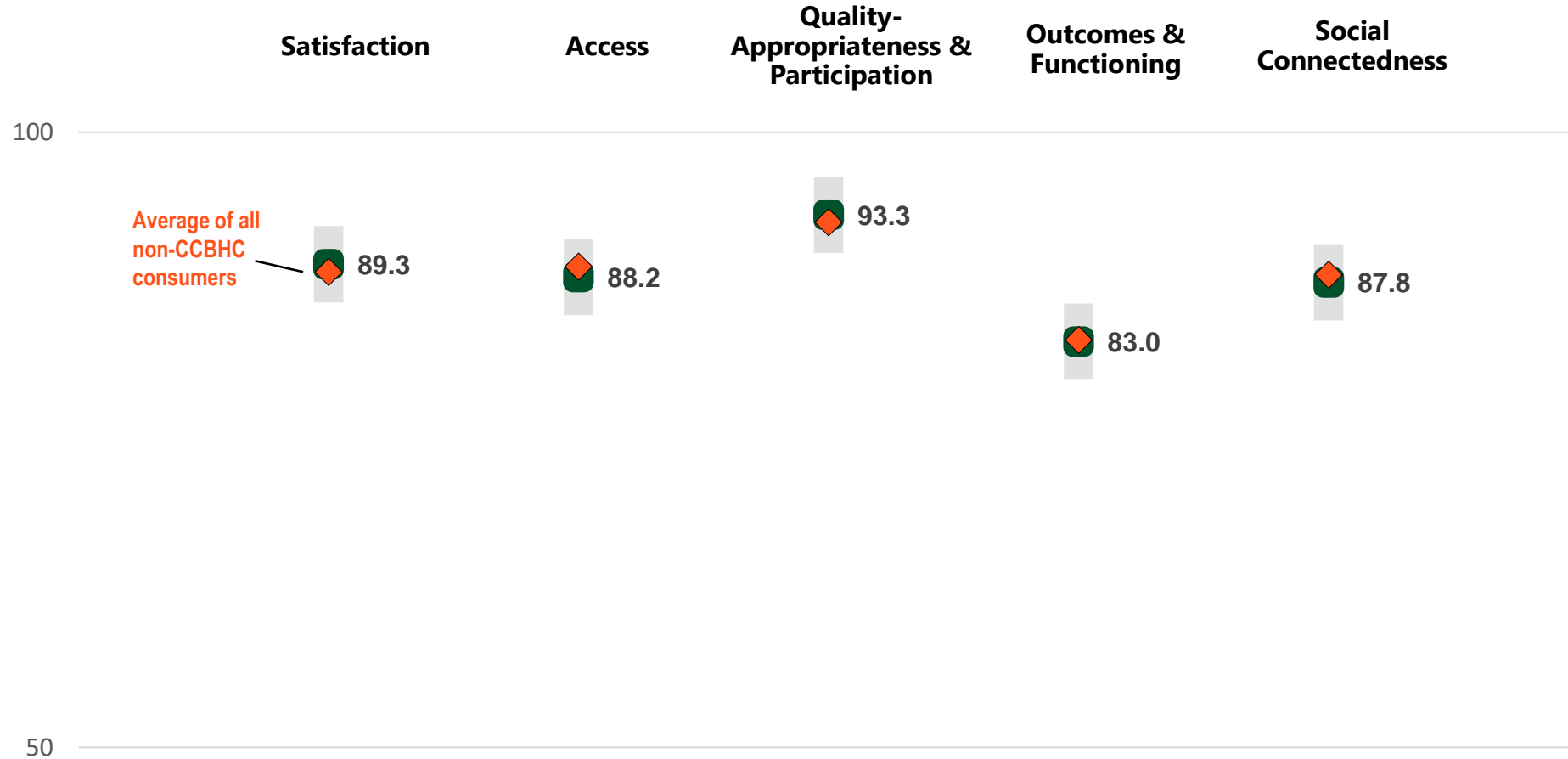
Adult **LTSS** consumers reported better scores than **non-LTSS** adults in all constructs

Dark green denotes the percentage of LTSS (long-term social services) consumers in agreement for that construct's items
Gray bars denote the likely range where the true percentage for all LTSS consumers might lie (i.e., margin of error*)



Adult CCBHC consumers reported almost identical scores to non-CCBHC adults

Dark green denotes the percentage of CCBHC (certified community behavioral health clinic) consumers in agreement for that construct's items
Gray bars denote the likely range where the true percentage for all CCBHC consumers might lie (i.e., margin of error*)



Opportunities for improvement in access to services, staff engagement with consumers,

Of MHSIP respondents who were *dissatisfied* with services, 5 major themes arose from qualitative feedback.

Access to services & continuity of care

45 comments

Lack of compassion & consumer-centered care

37 comments

Medication management issues

31 comments

Staff competency & turnover

26 comments

Lack of transparency & communication

19 comments



Youth Services Survey for Families (YSS) Revised Tool: 2024 Results

Sample size: 644

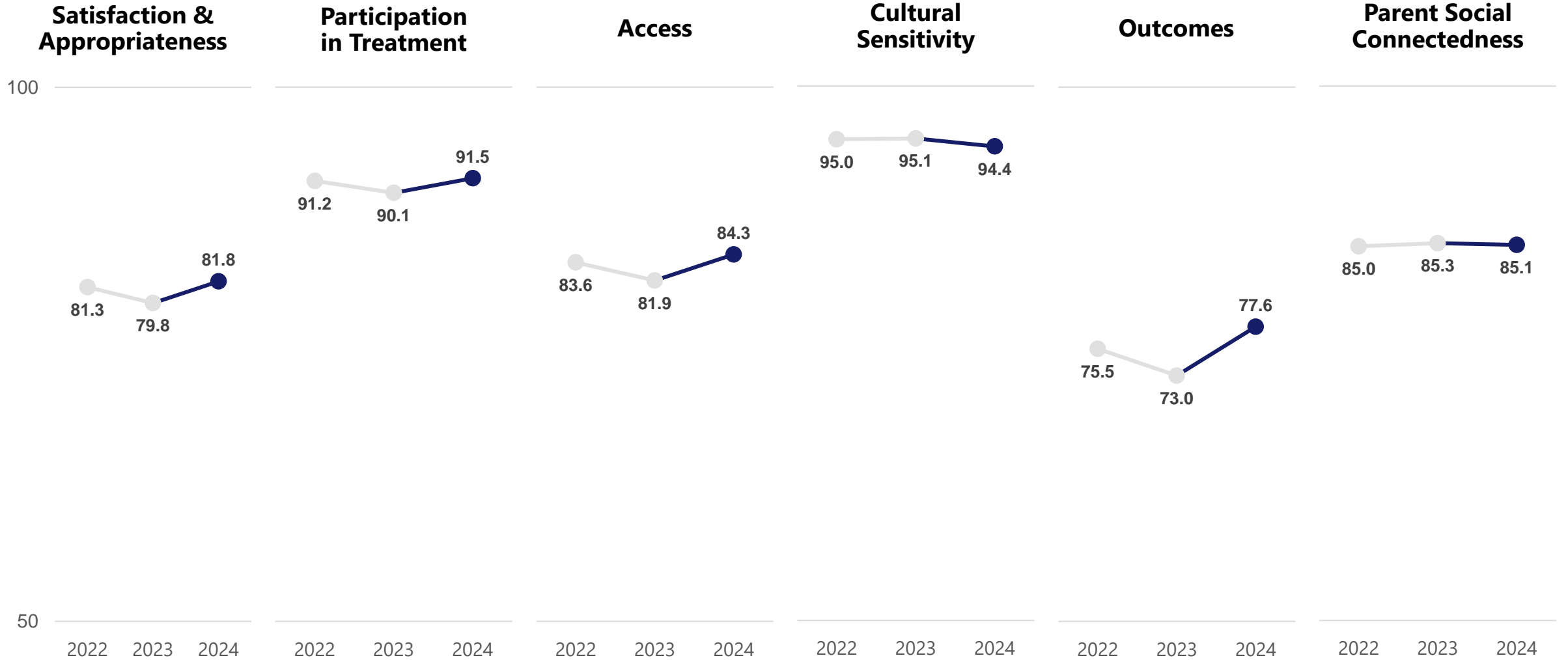


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SWMBH Consumer Satisfaction
2024 Results

Overall, YSS saw similar ratings from 2022-2024 (no statistical difference)

YSS scores by construct for previous 3 years. Differences in constructs between years are not statistically significant.



Positive highlights from the YSS comments section

“They really do research and **find things to help benefit you and your child's needs** they build a great relationship and **understand your kids needs and yours**. They **become family or a really great friend** to have along the way.”

“With mental health there are many highs and lows. Our ISK "team" has been there to **support not just my daughter, but our family** through every step and **provided us the services that we never know existed** until they came into our lives. I'm **so thankful** for each and every one of them!”

“The councilor works around my work schedule and my child enjoys going now. My child knows if she is feeling like hurting herself **she can call Riverwood and someone will answer**. I'm **very grateful** for the staff and services that are provided. As a parent it's very hard to watch your child self harm and not know where to turn. Now **I'm less stressed and my daughter is doing amazing** it's like having my little girl back!”

“Our case manager is an absolute blessing. She **stood by our side** and **helped us fight the injustices** my son was experiencing in school. She helped guide me and was **present for every meeting**. She helped my son get into the right school so **he could thrive**.”

“Our son is **coming back to the ray of light** he always has been, and **he's seeing himself that way** now too.”

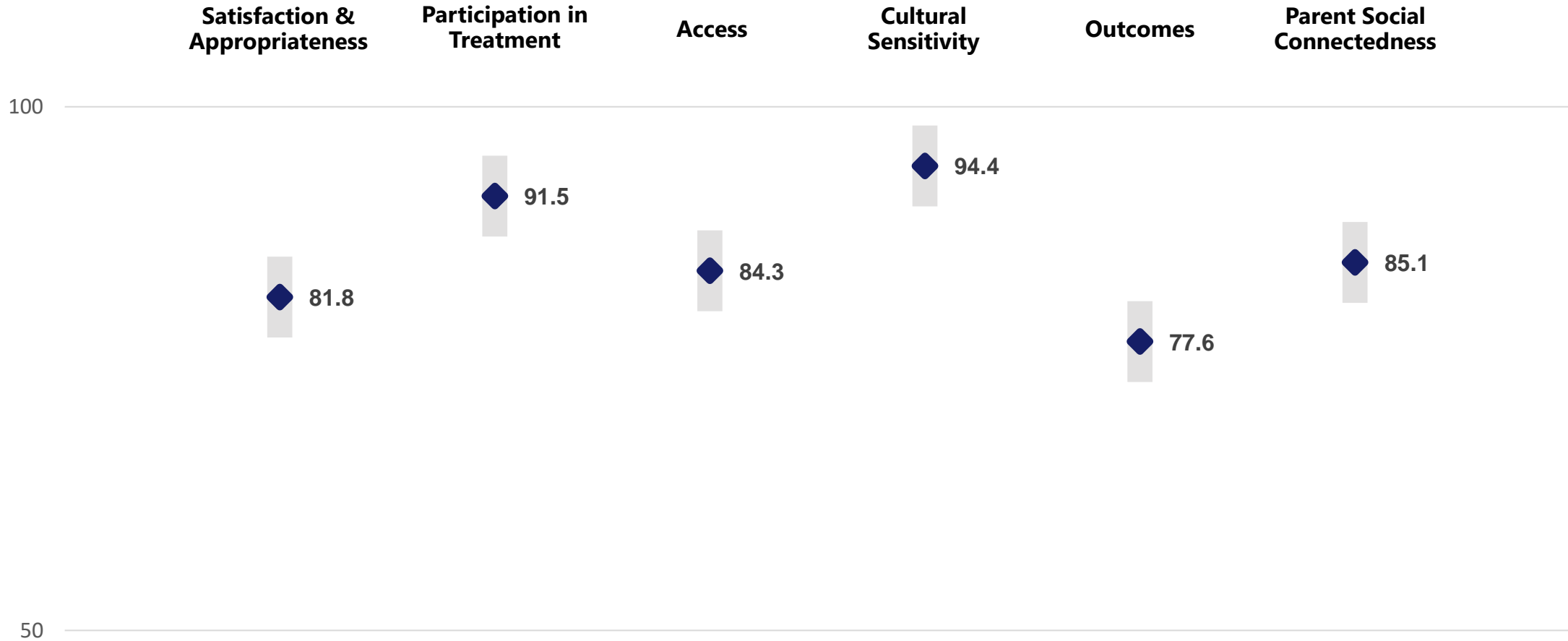
“The doctor is **amazing at talking to our child**. He always **includes him in the conversation** and **helps him understand** that this is a benefit having him on his meds. He is wonderful and that is **the reason we are still with Summit Pointe**.”



All SWMBH CMHSPs: 2024 YSS scores by construct

Dark blue denotes the percentage in agreement for that construct's items

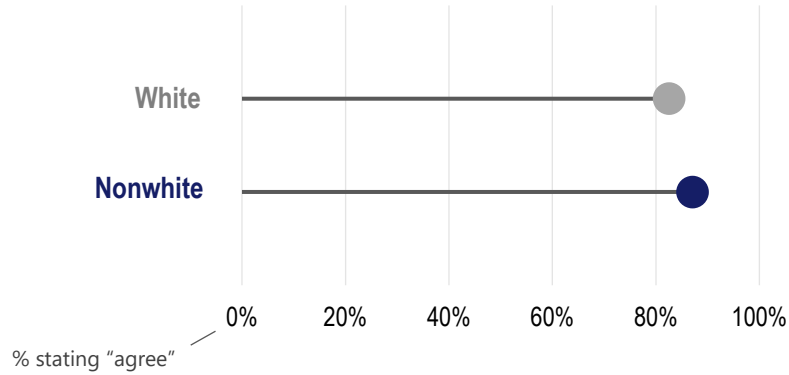
Gray bars denote the likely range where the true percentage for all SWMBH consumers might lie (i.e., margin of error*)



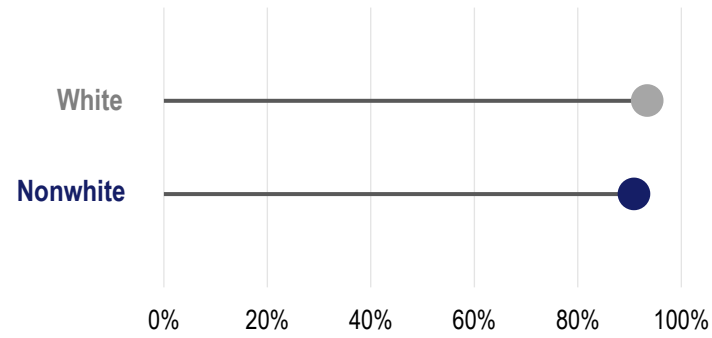
Race: White youth had slightly better participation in treatment, but nonwhite youth had slightly better outcomes

“Nonwhite” category comprises any race other than White, including Black/African American, Asian, Native American, Native Hawaiian/Pacific Islander, or any mix of races.

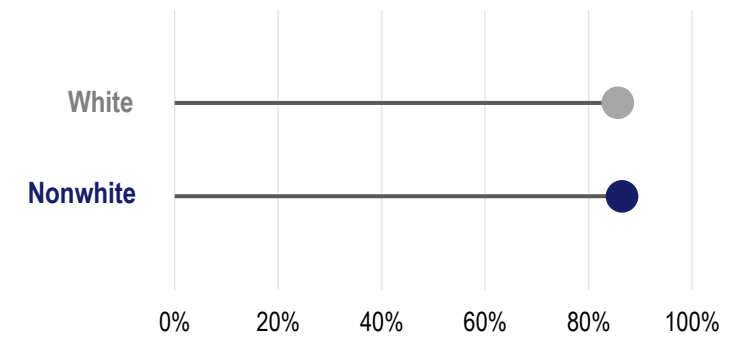
Satisfaction & Appropriateness



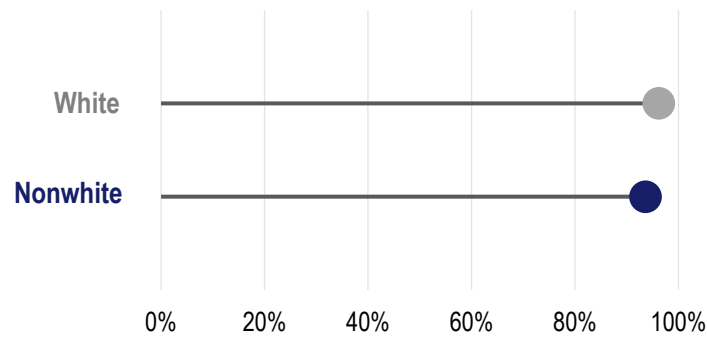
Participation in Treatment



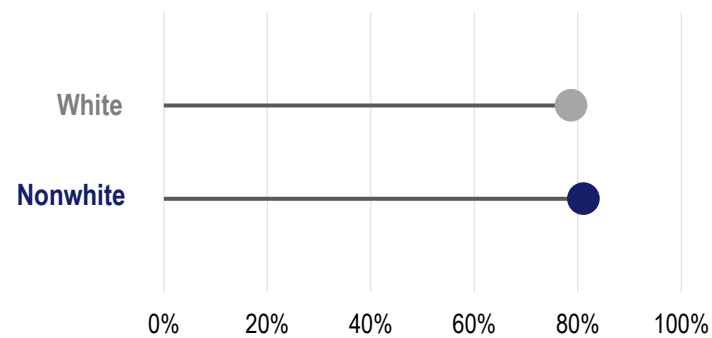
Access



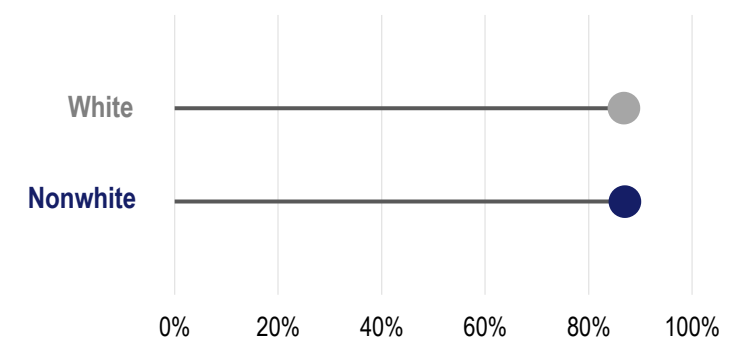
Cultural Sensitivity



Outcomes



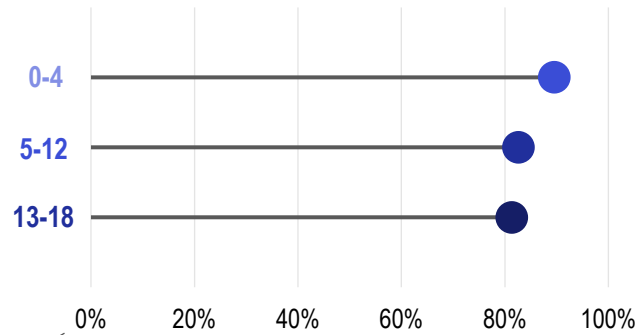
Parent Social Connectedness



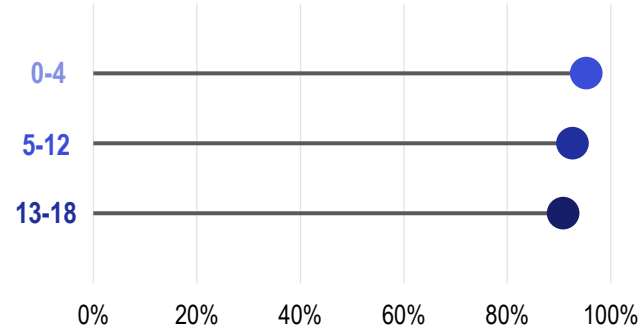
Age: Generally, the older the youth, the lower the survey scores

Lower scores were most pronounced in satisfaction, outcomes, and parent social connectedness.

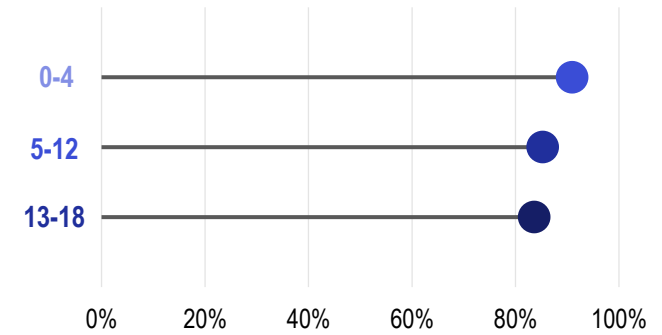
Satisfaction & Appropriateness



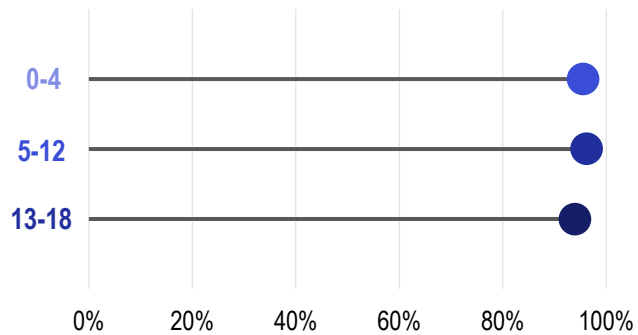
Participation in Treatment



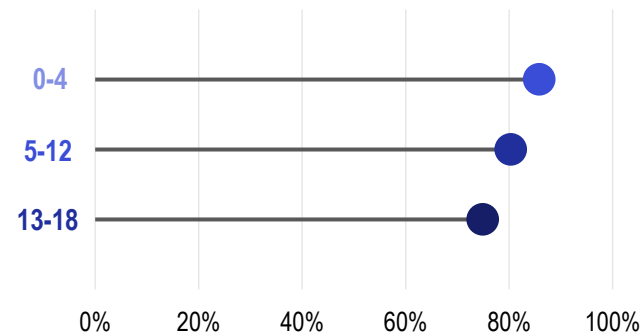
Access



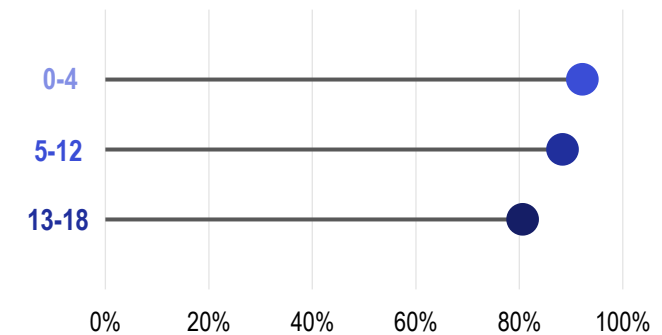
Cultural Sensitivity



Outcomes



Parent Social Connectedness

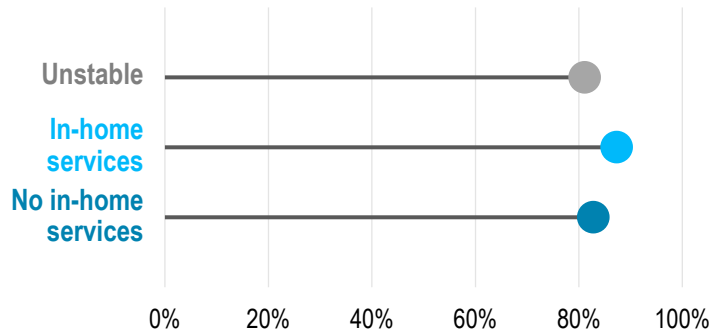


% stating "agree"

Housing: Youth in an unstable living situation had lower reported outcomes

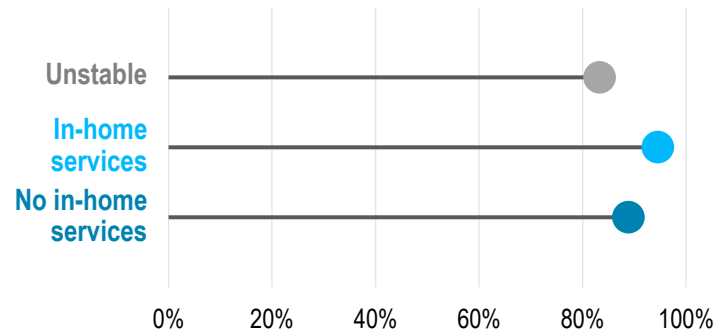
Otherwise, scores were statistically similar among the housing unstable, youth not receiving in-home services, and youth that did receive in-home services (included foster care, group homes, residential care, or other in-home services).

Satisfaction & Appropriateness

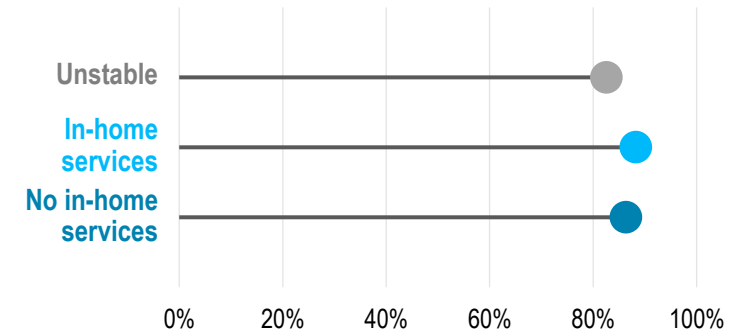


% stating "agree"

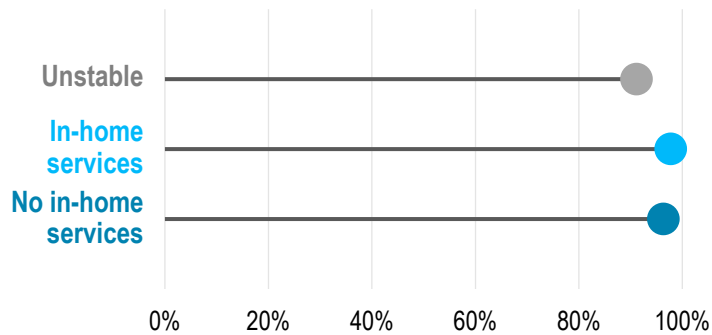
Participation in Treatment



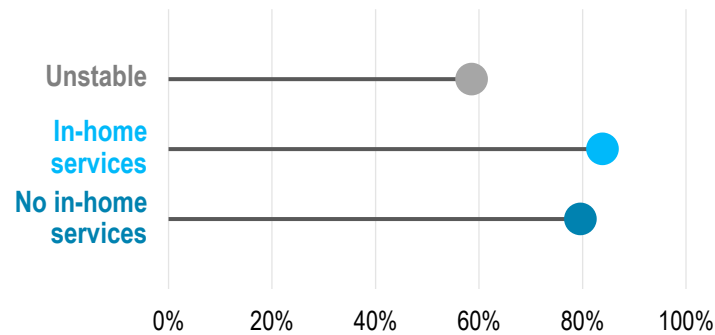
Access



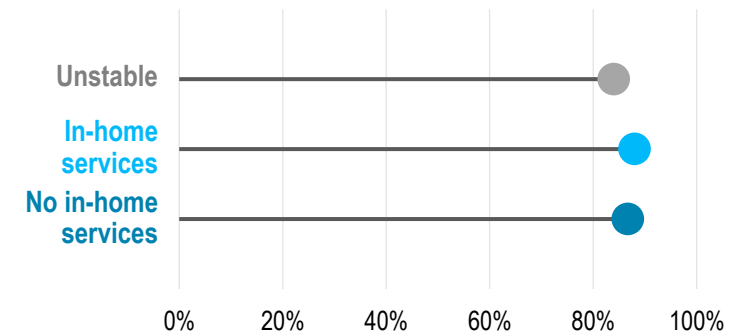
Cultural Sensitivity



Outcomes

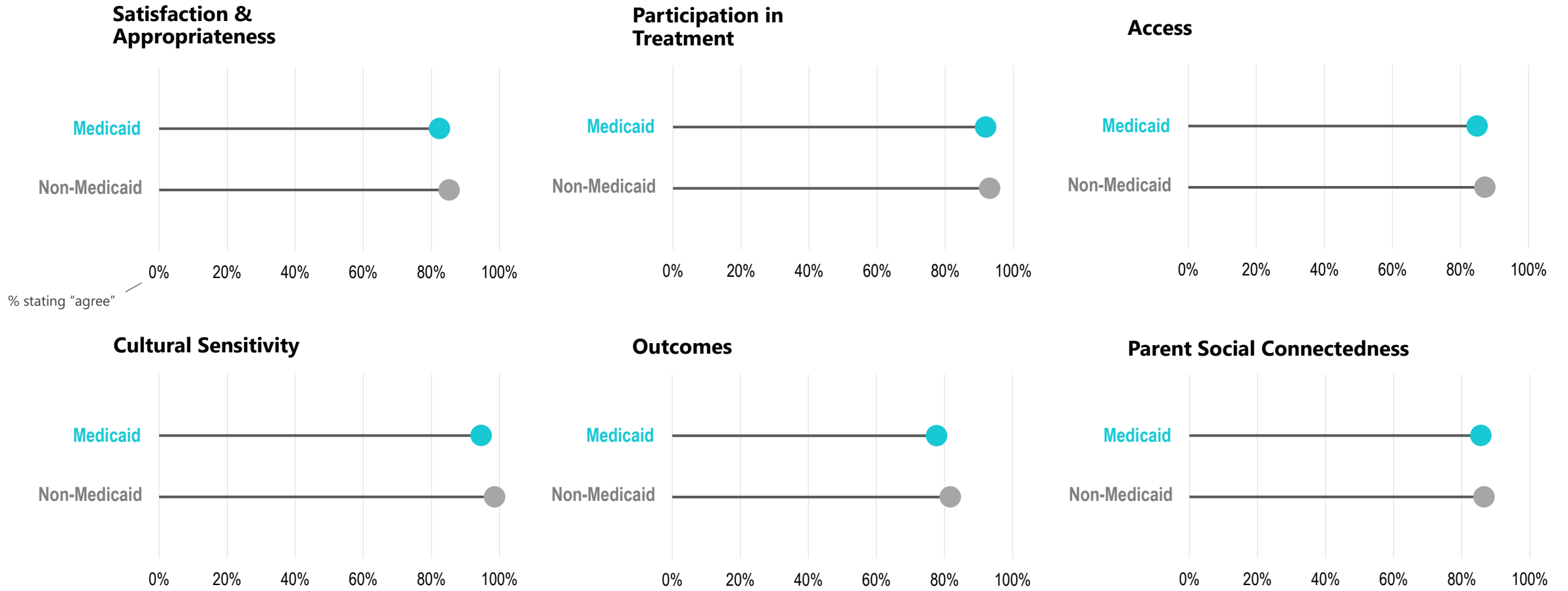


Parent Social Connectedness



Medicaid status: youth did not see different scores in 2024 whether they were using Medicaid or not

No differences between the two groups were statistically significant.

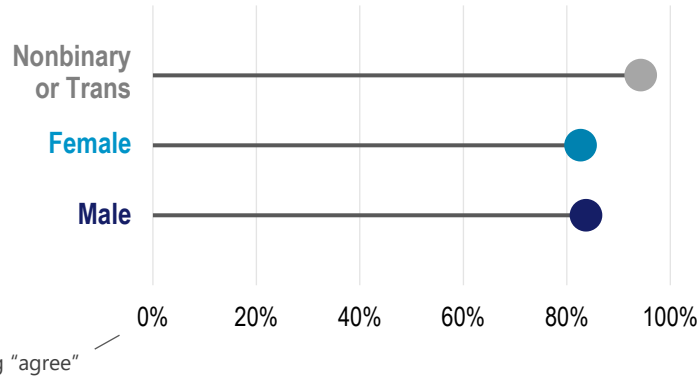


% stating "agree"

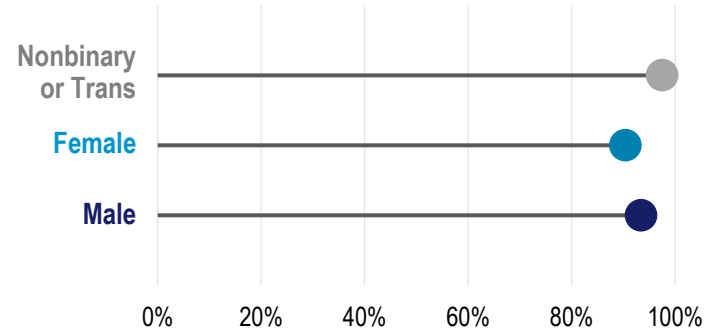
Overall, youth did not report major differences between genders

Nonbinary or transgender youth did not have statistically different scores than male or female youth.

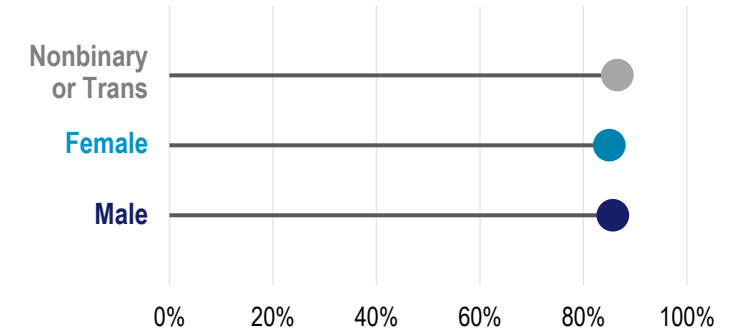
Satisfaction & Appropriateness



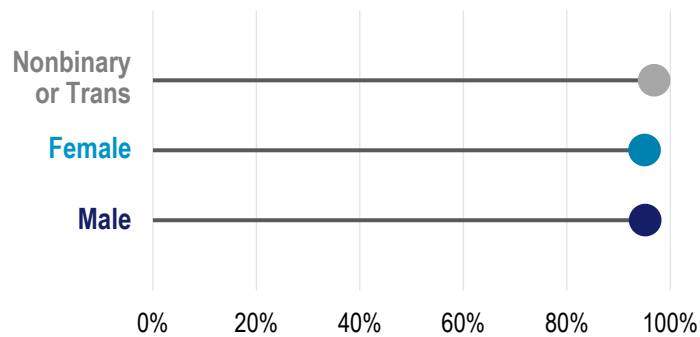
Participation in Treatment



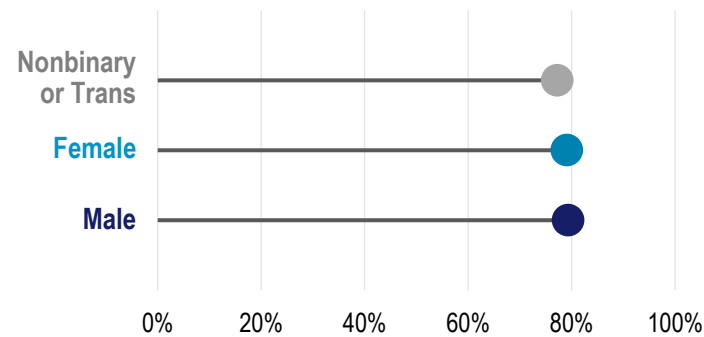
Access



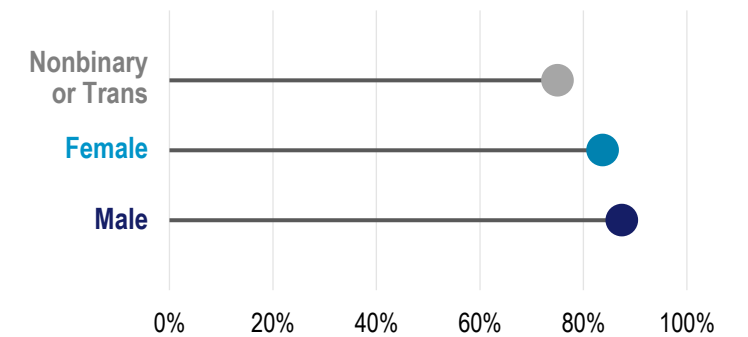
Cultural Sensitivity



Outcomes



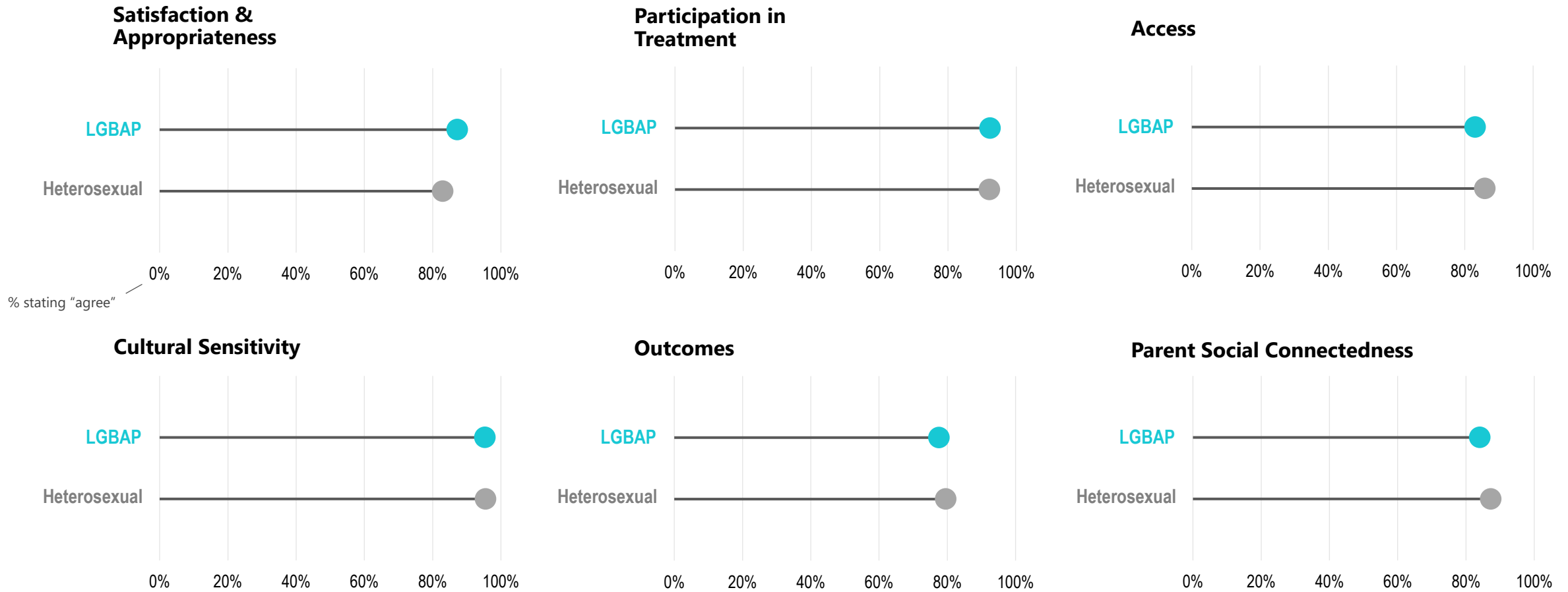
Parent Social Connectedness



Nonbinary or Trans n = 15
Female n = 237
Male n = 369

LGBAP: youth did not see different scores in 2024 based on their sexual orientation

No differences between the two groups were statistically significant. LGBAP = lesbian, gay, bisexual, asexual, or pansexual.

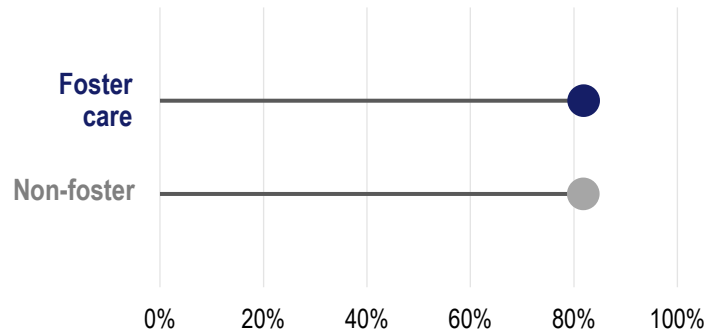


% stating "agree"

Foster care youth had less participation in treatment than non-foster youth

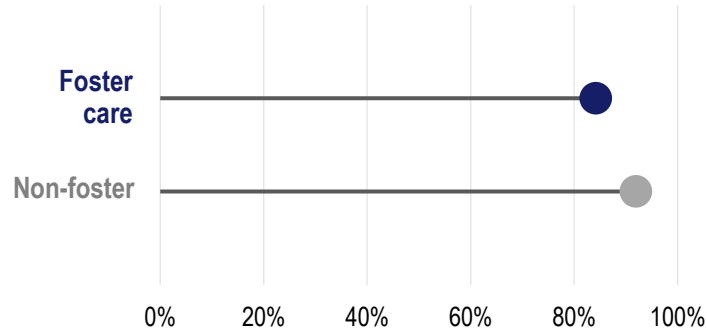
No other differences between the two groups were statistically significant.

Satisfaction & Appropriateness

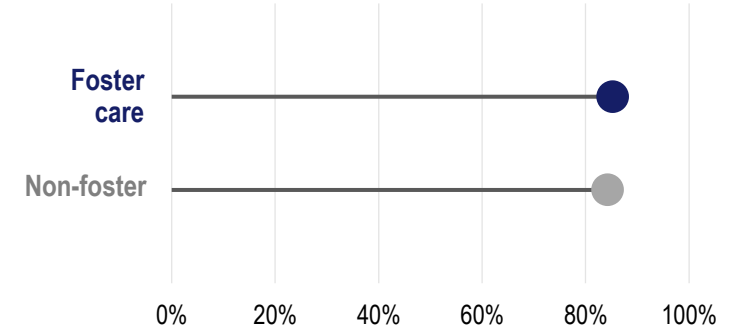


% stating "agree"

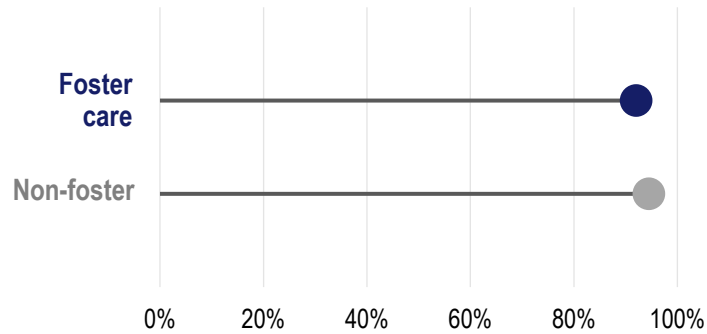
Participation in Treatment



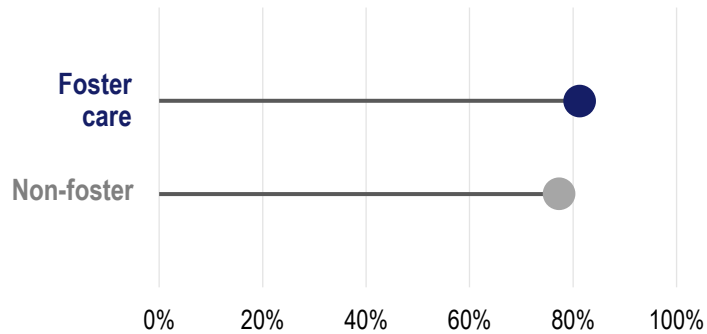
Access



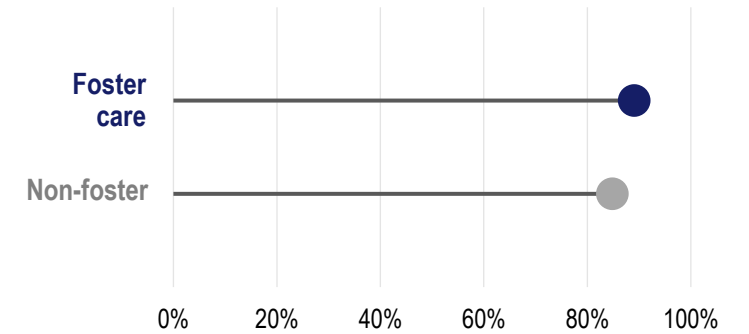
Cultural Sensitivity



Outcomes



Parent Social Connectedness



Length of services: those getting services for longer than 6 months reported much better outcomes

They also reported higher satisfaction and participation in treatment, but to a lesser degree.



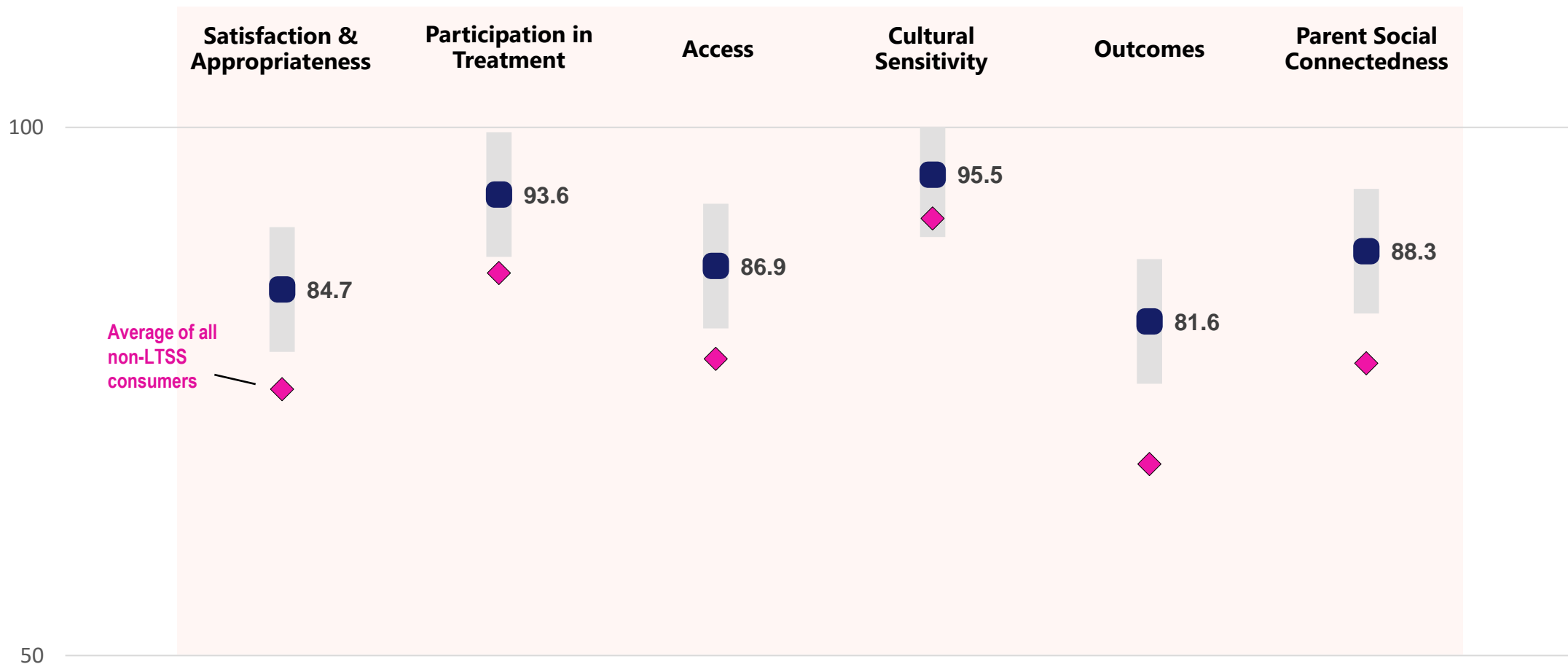
% stating "agree"

Statistically significant difference ($p < .05$) between age groups (Mann Whitney U)

Less than 6 months n = 172
6 months+ n = 457

Youth LTSS families report better scores in all constructs in the 2024 YSS

Dark blue denotes the percentage of LTSS (long-term social services) consumers in agreement for that construct's items
Gray bars denote the likely range where the true percentage for all LTSS consumers might lie (i.e., margin of error*)



Average of all non-LTSS consumers

Statistically significant difference ($p < .05$) between LTSS and non-LTSS

Youth CCBHC families report worse access than non-CCBHC consumers

Dark blue denotes the percentage of CCBHC (certified community behavioral health clinic) consumers in agreement for that construct's items
Gray bars denote the likely range where the true percentage for all CCBHC consumers might lie (i.e., margin of error*)



Opportunities for improvement in access to services, staff engagement with consumers,

Of YSS respondents who were *dissatisfied* with services, 3 major themes arose from qualitative feedback.

Lack of reliable communication from staff

29 comments

Limited access to services

25 comments

Lack of specialized care/understanding of needs

18 comments

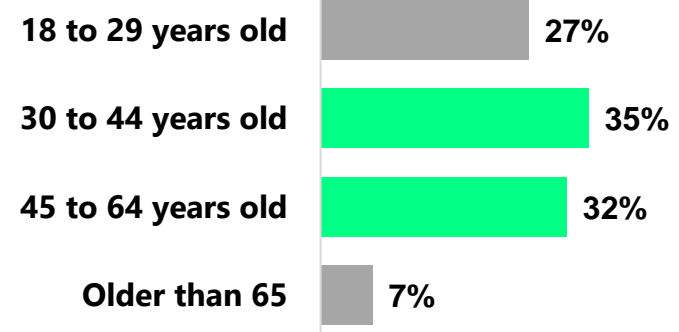
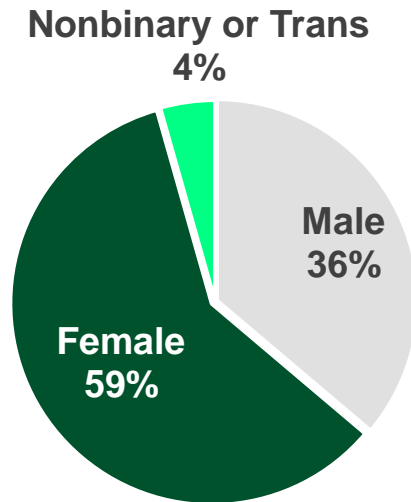
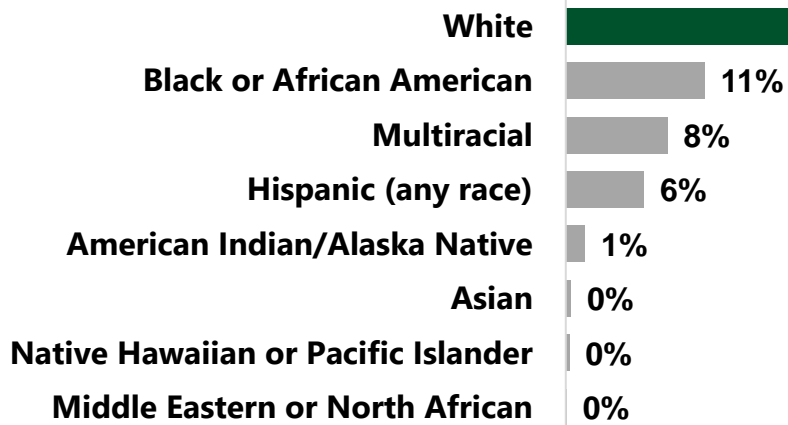




Survey Diagnostics

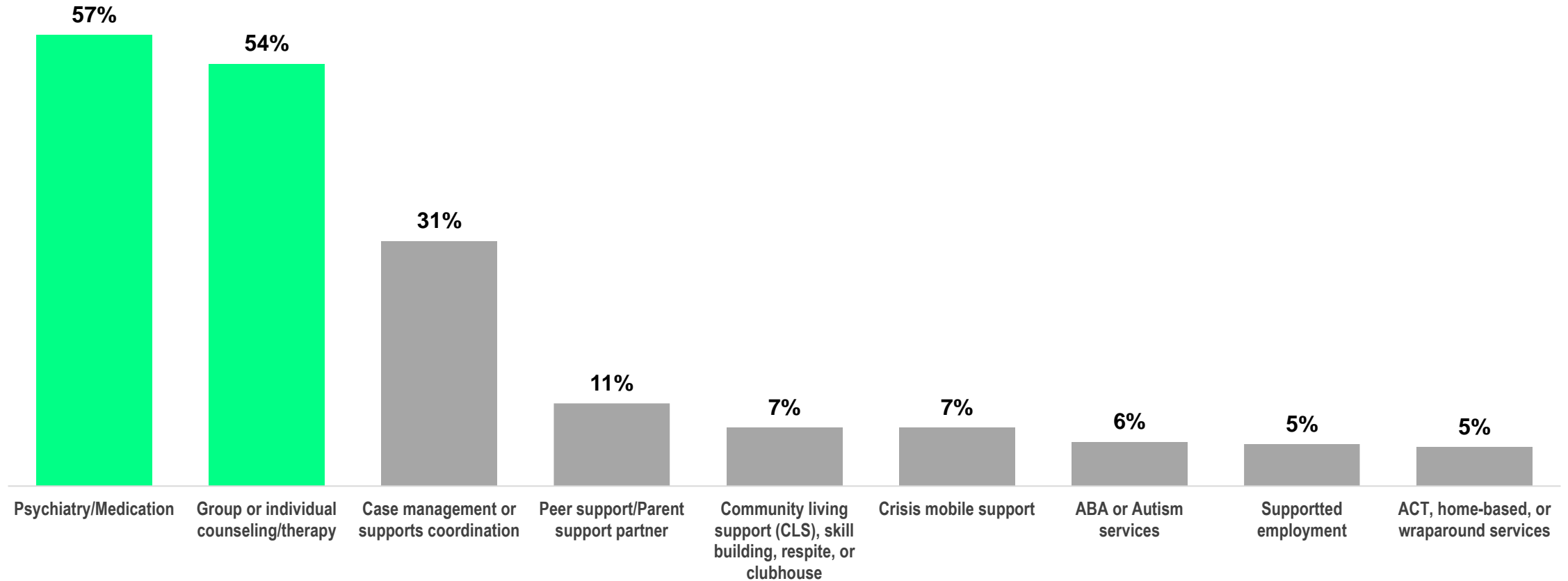
MHSIP 2024 respondents similar in makeup to prior years

Question about sex assigned at birth allowed for identification of transgender respondents, around 2% of all respondents.



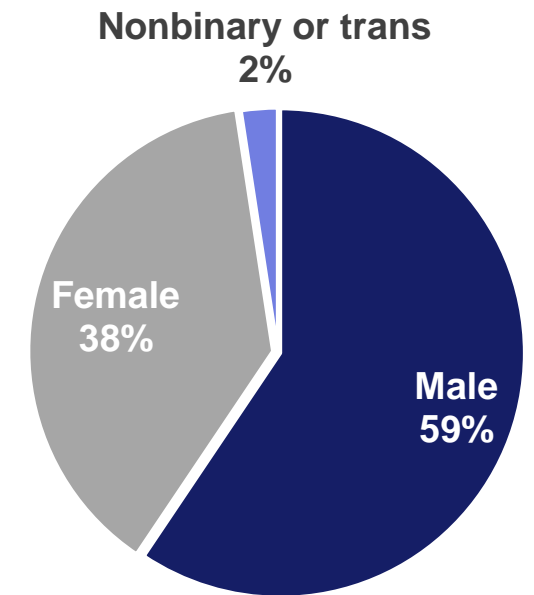
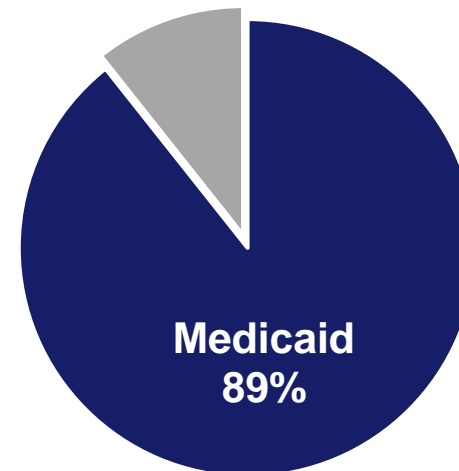
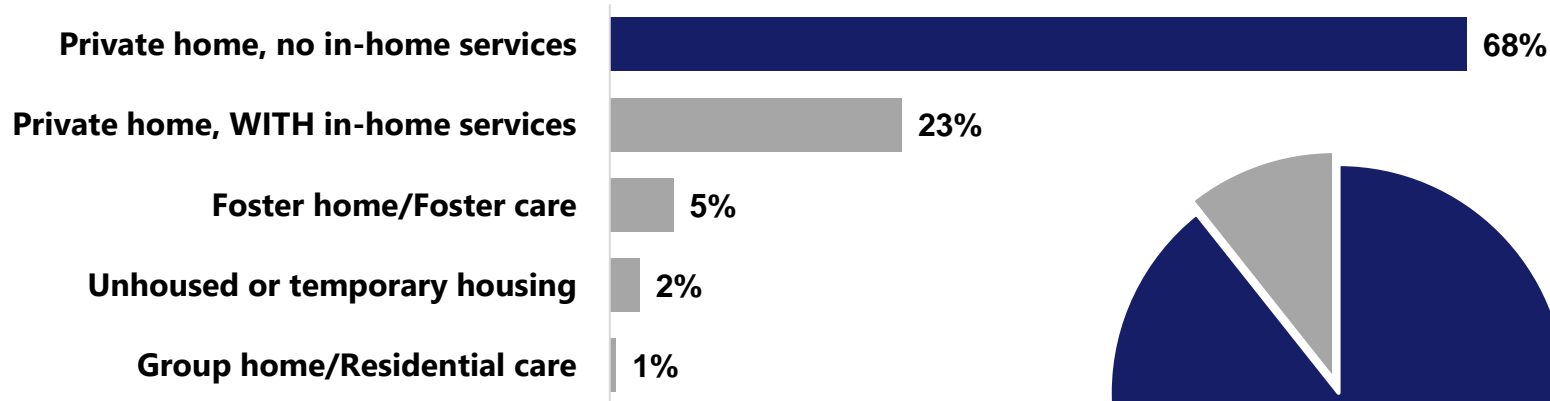
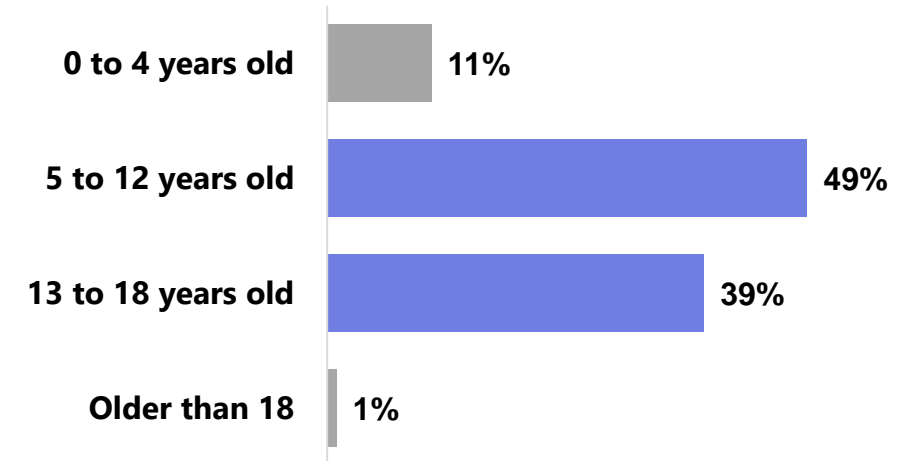
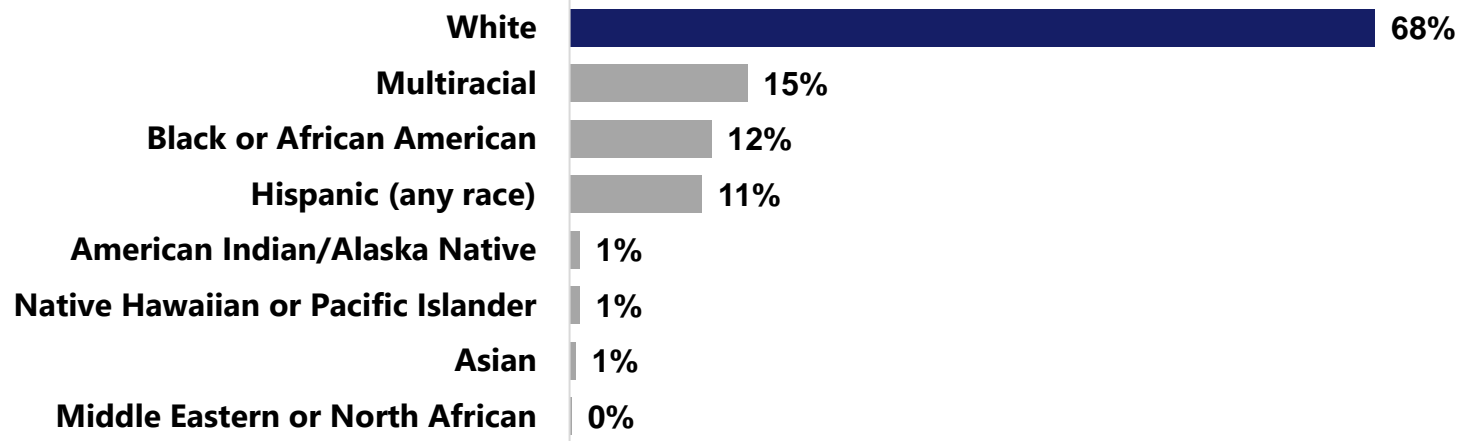
Most MHSIP respondents utilized **psychiatry and therapy**, followed by case management

Percentages represent the proportion of consumers that used that service.
This new question was asked in 2024 to identify the kinds of services used by consumers.



YSS 2024 youth were similar in demographic makeup to 2023

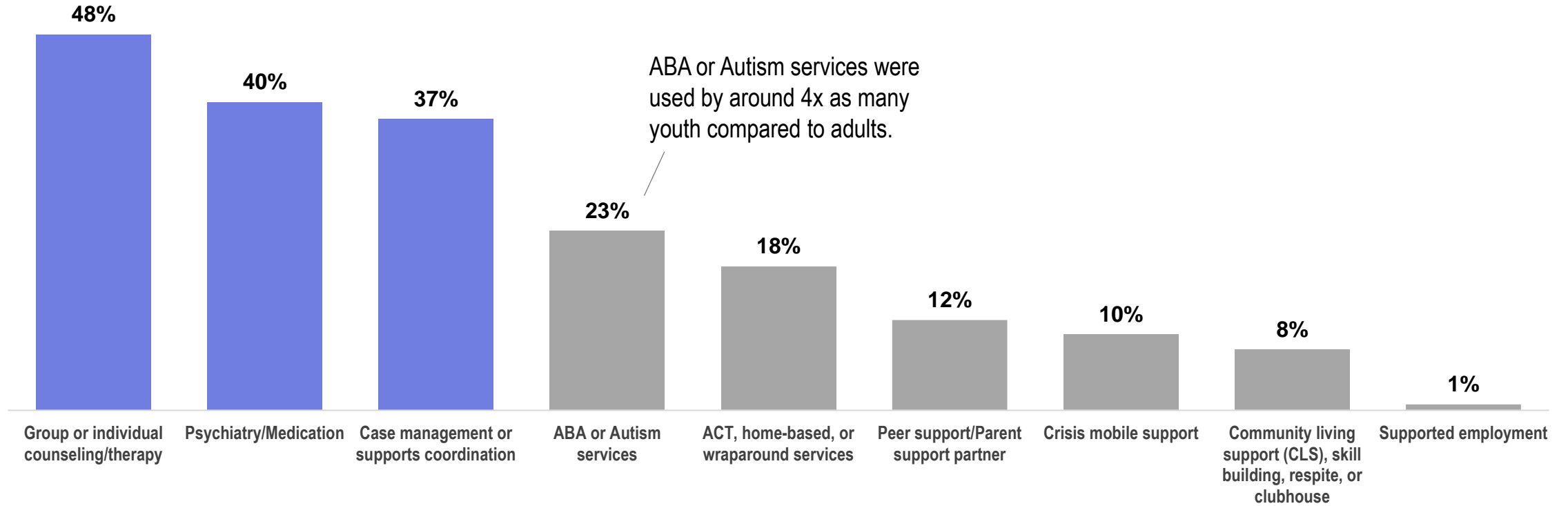
More male youth seemed to receive services than male adults, and non-Medicaid responses grew slightly.



The plurality of YSS respondents utilized **therapy**, then **psychiatry**, followed closely by **case management**

Percentages represent the proportion of consumers that used that service.

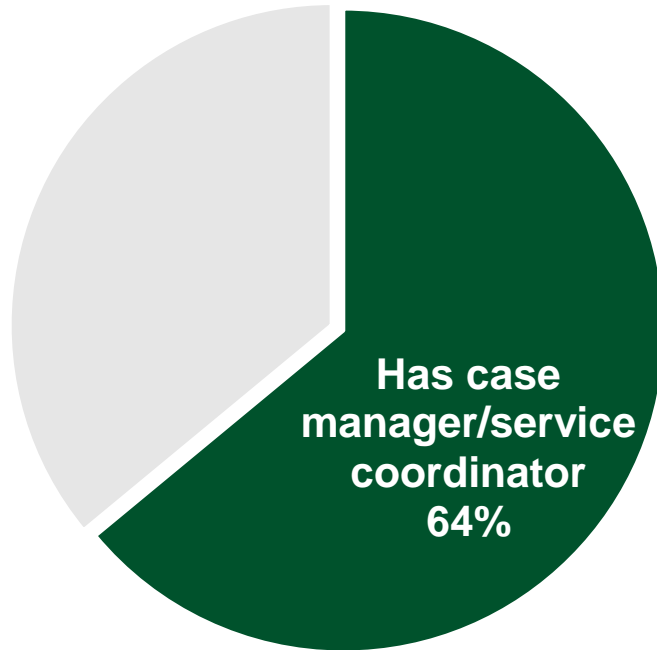
This new question was asked in 2024 to identify the kinds of services used by consumers.



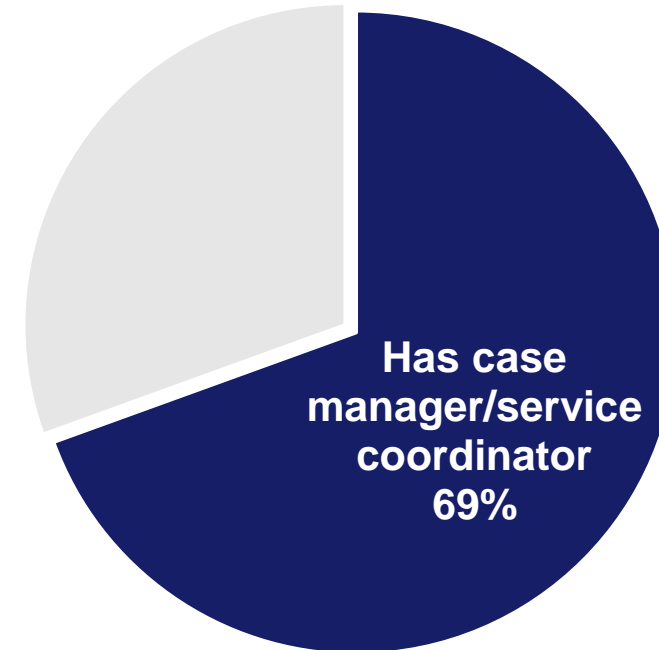
More youth than adults reported having a case manager or service coordinator (LTSS) again in 2024

Same question was asked in "services received" question but had much lower percentages reporting yes.

MHSIP

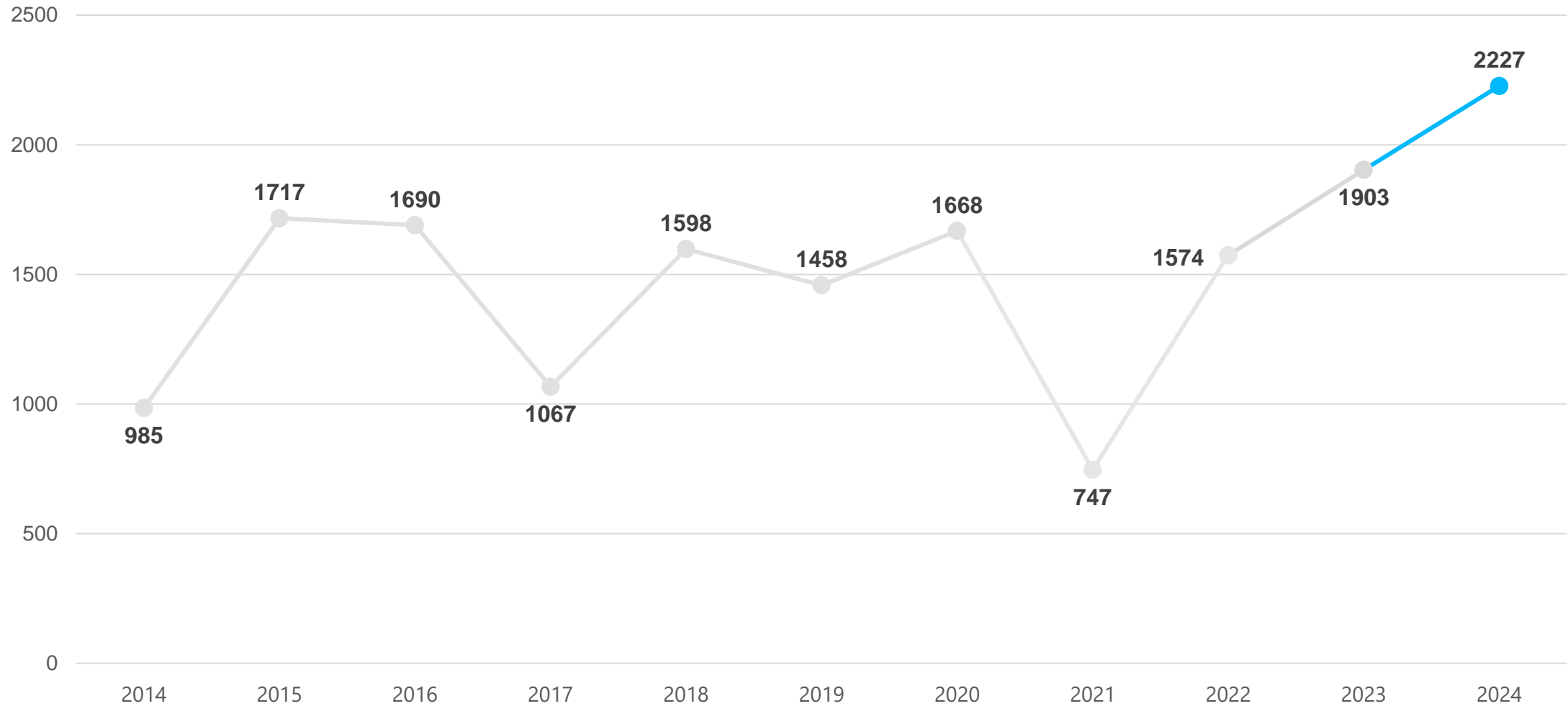


YSS



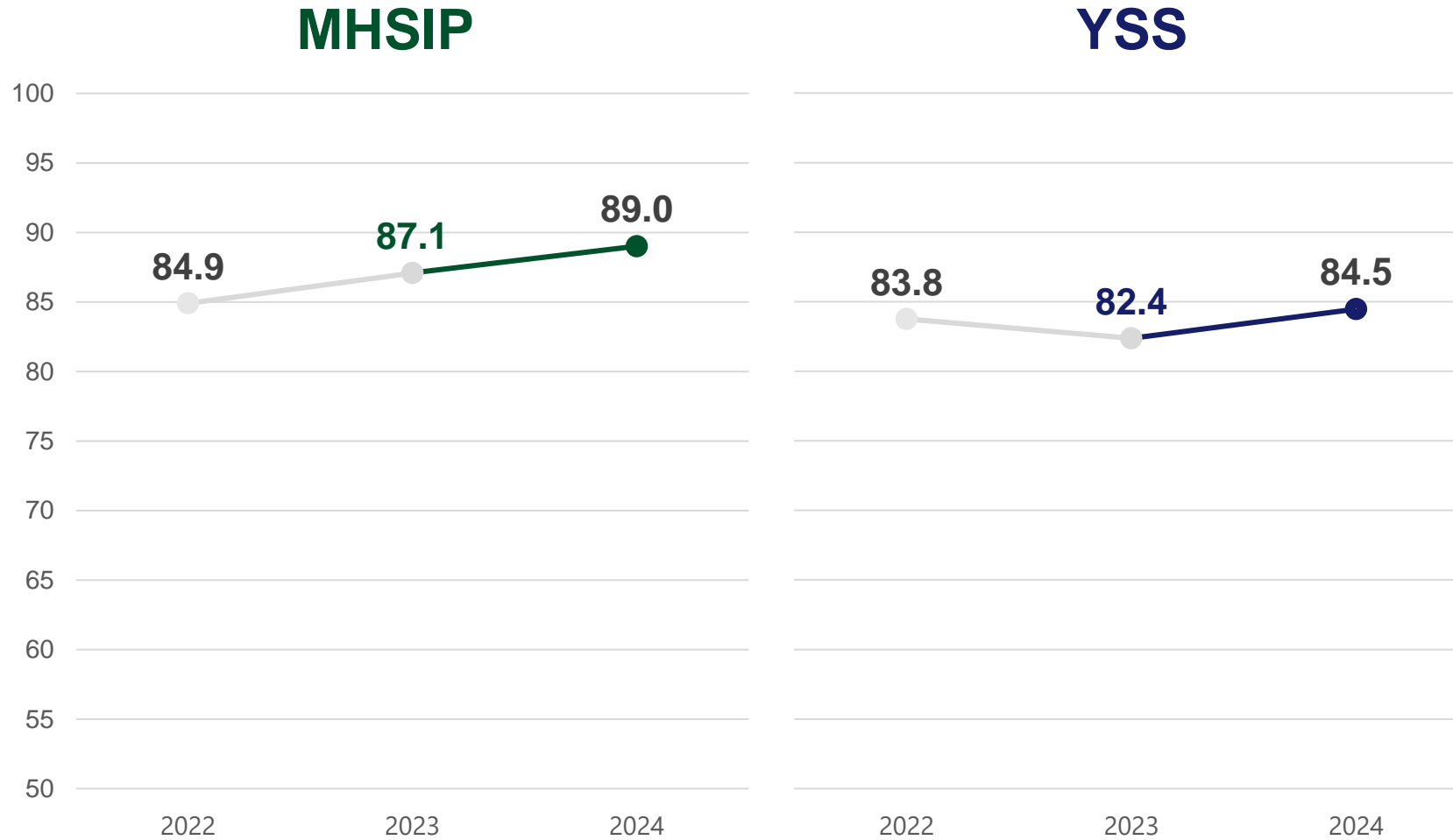
Total cumulative completions reached highest point again in 2024

This year, both YSS and MHSIP responses were at all-time highs.



Total aggregate average scores ticked up for both **YSS** and **MHSIP** in 2024

Still almost a 5-pt difference between adult and youth scores in the aggregate.





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