



**Northern
Michigan
Regional
Entity**

Mental Health
Services Survey

ALL PROVIDERS

JUNE 2025

Objectives



Receive feedback on how providers are meeting the needs of their clients



Identify opportunities for quality and performance improvement activities



Access the client's perspective about;

- Quality of care
- Access to care
- Interpersonal relationships
- Service delivery
- Service environment

Methodology

*12 Questions

*Clients receiving Outpatient, Medical Services, ACT, Peer Support Services, clubhouse, Long Term Support Services (CLS, Case Management, Self Direction, Family Training, Supported Employment) funded in whole or in part by NMRE

*Survey period: June 1 – June 30, 2024

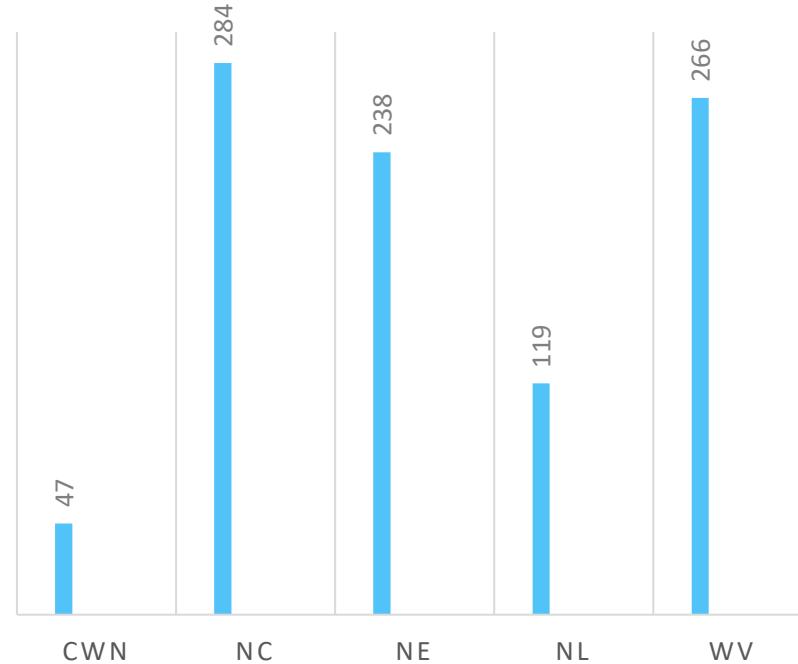
Available in paper or electronic format

Participation

- Total Responses: 960
- Total Served: 11,933
- Participation Rate: 8%

<u>Location</u>	<u># of Clients Completing Survey</u>
Centra Wellness Network	47
North Country CMH	284
Northeast Michigan CMH	238
Northern Lakes CMH	119
Wellvance	266

PARTICIPANTS BY LOCATION



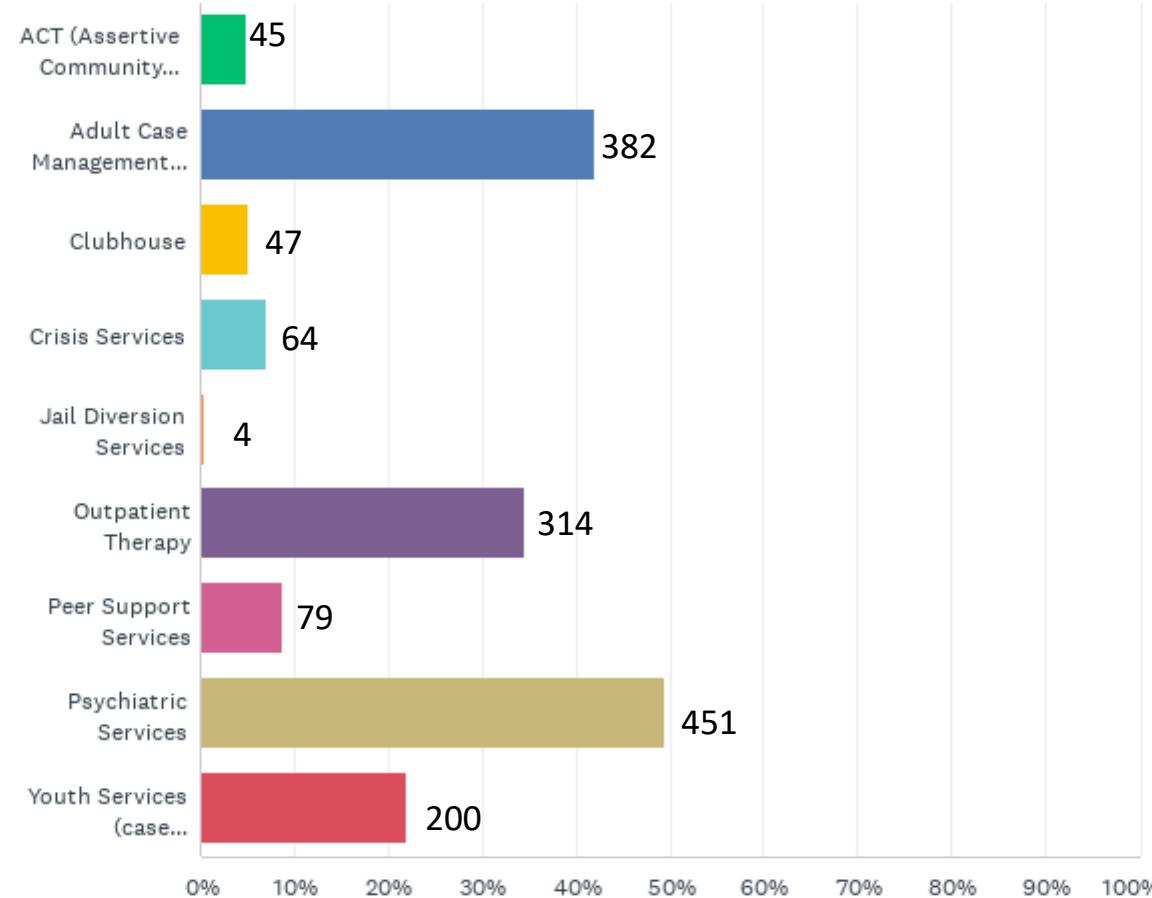
Data Collection Challenges

Overbooked staff with little time to focus on survey collection

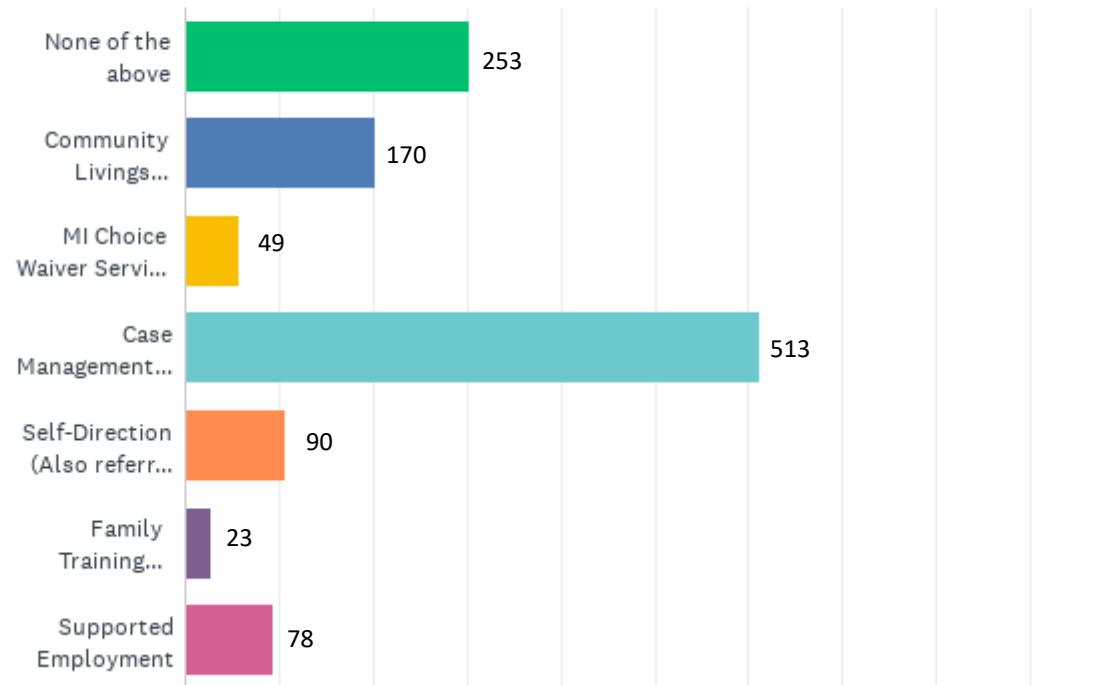
Ineffective survey administration due to lack of communication between staff and management

Surveys not returned to NMRE by clients or staff in a timely manner

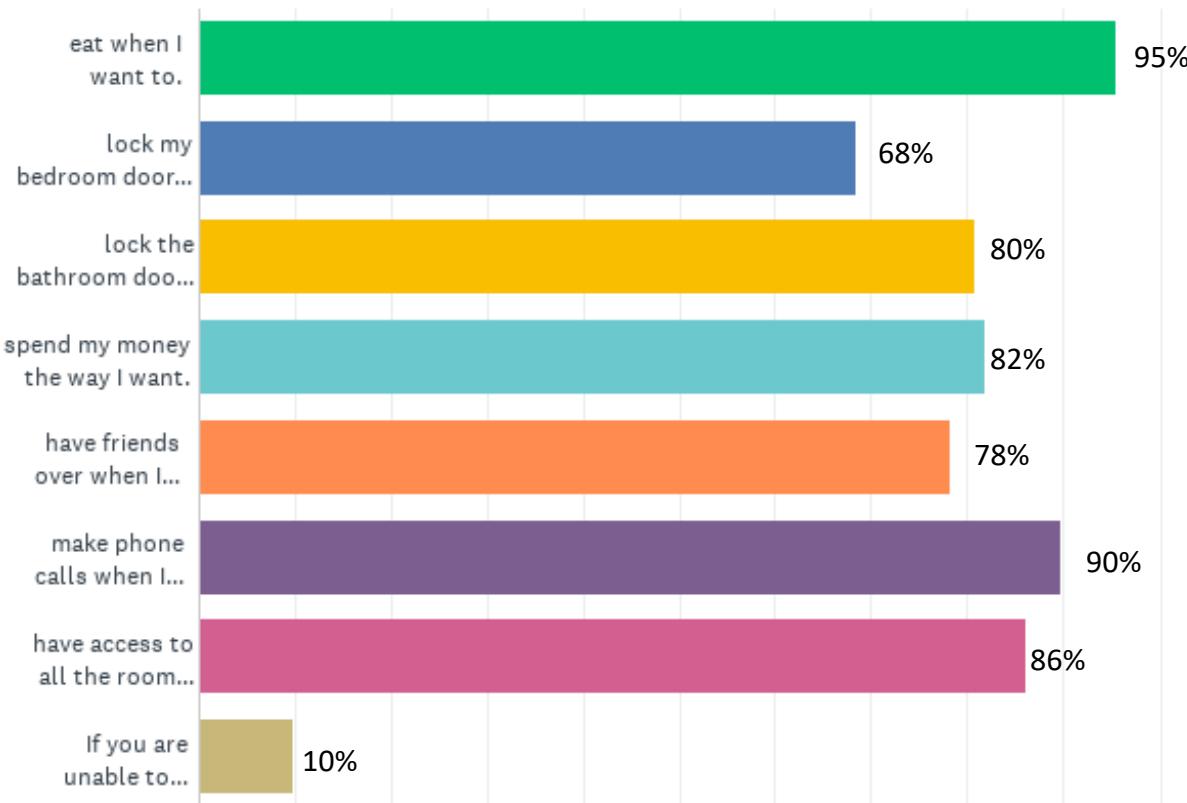
Q2 What services do you receive?



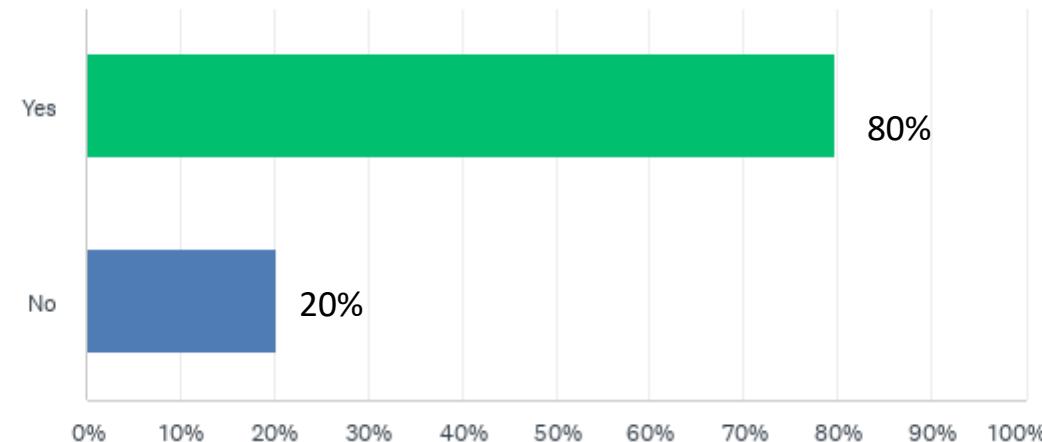
Please check any of the following Long Term Supports and Services you have received.



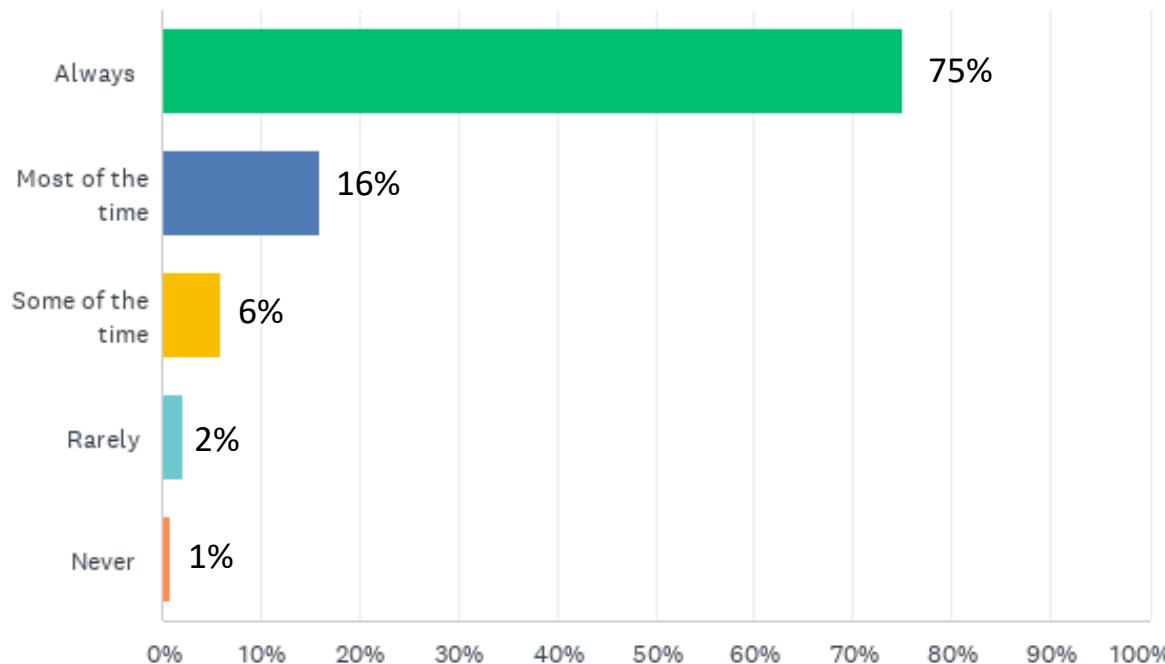
Q5 At home, I have the ability to (check all that apply):



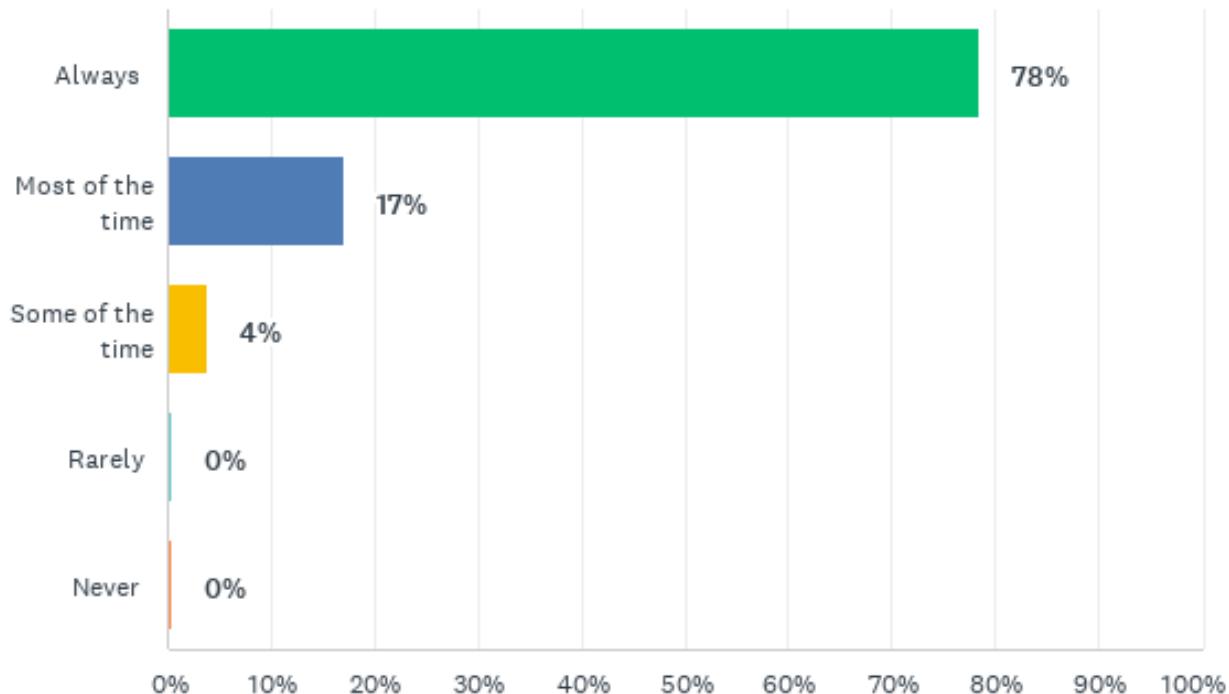
Somebody talked to me about sharing my health information with other people involved in my care.



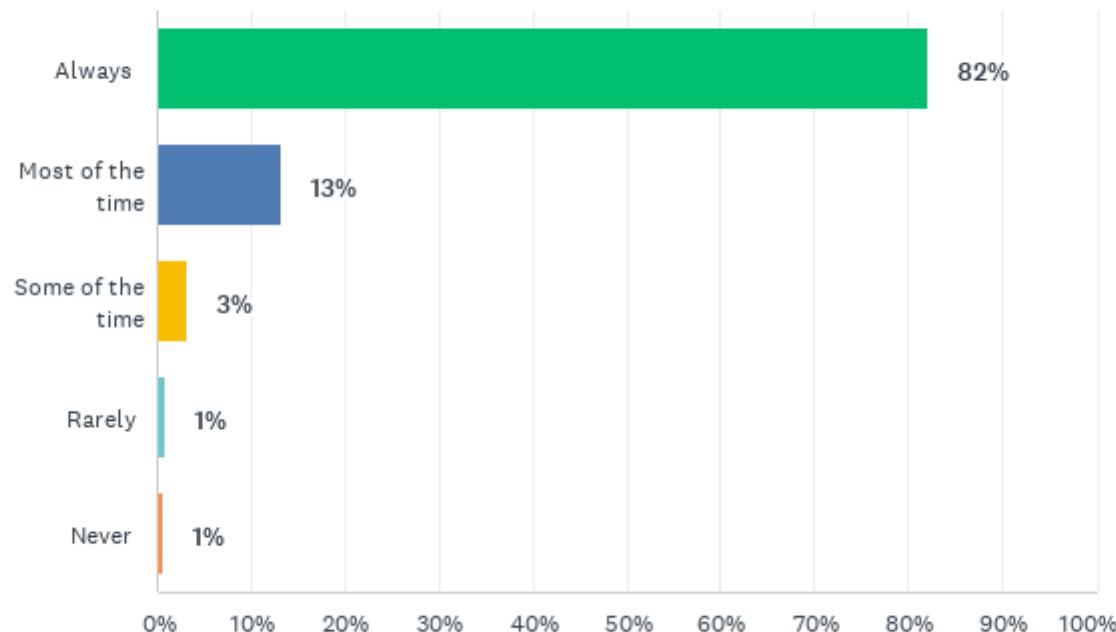
I feel comfortable asking questions about my services or asking for other services I want.



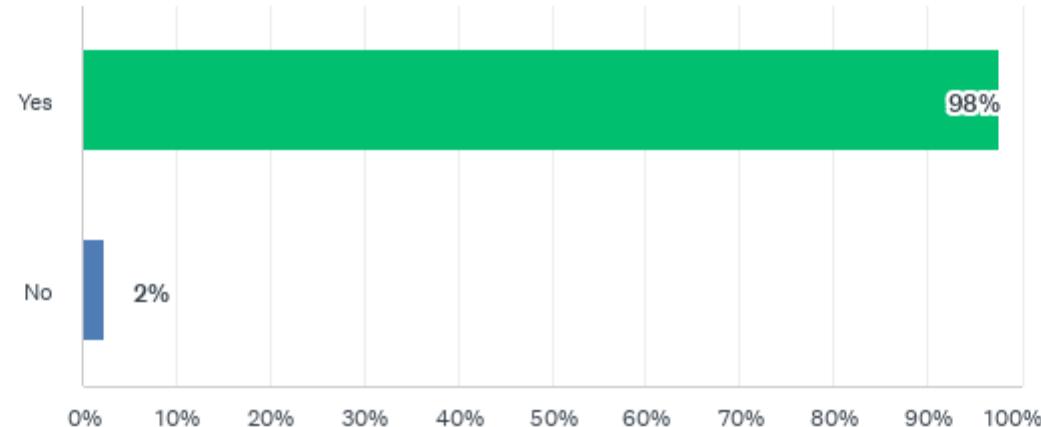
Staff explain information about my services to me in a way that I can understand.



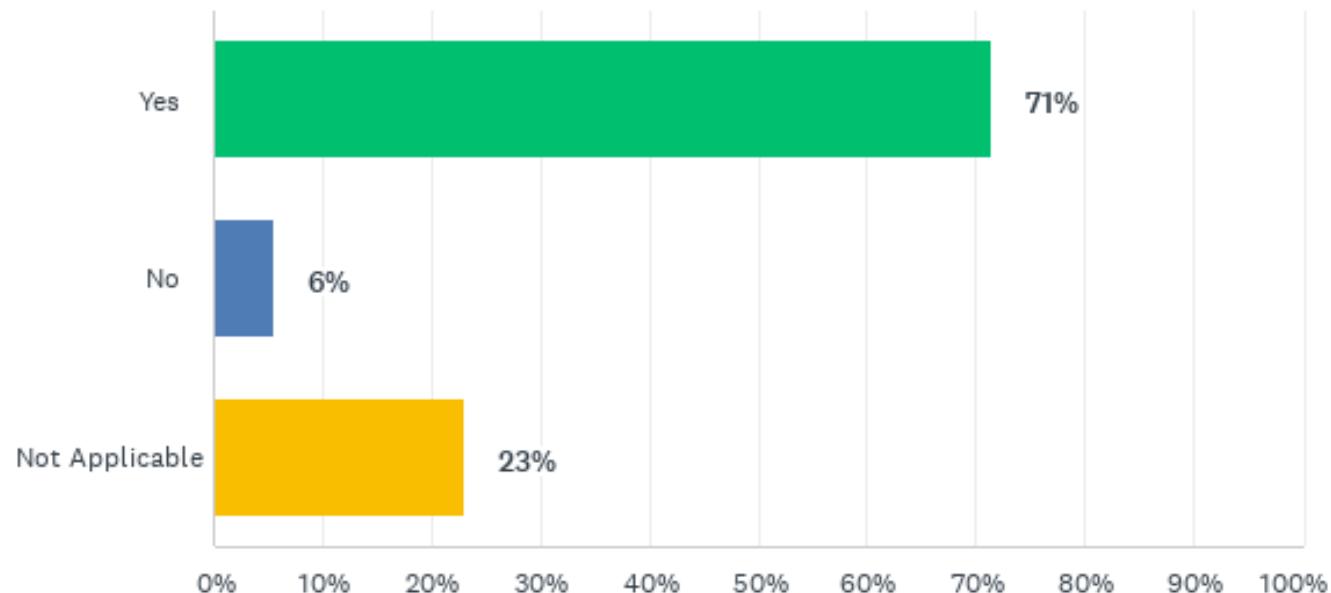
I am involved in my health care decisions and the development of my treatment plan.



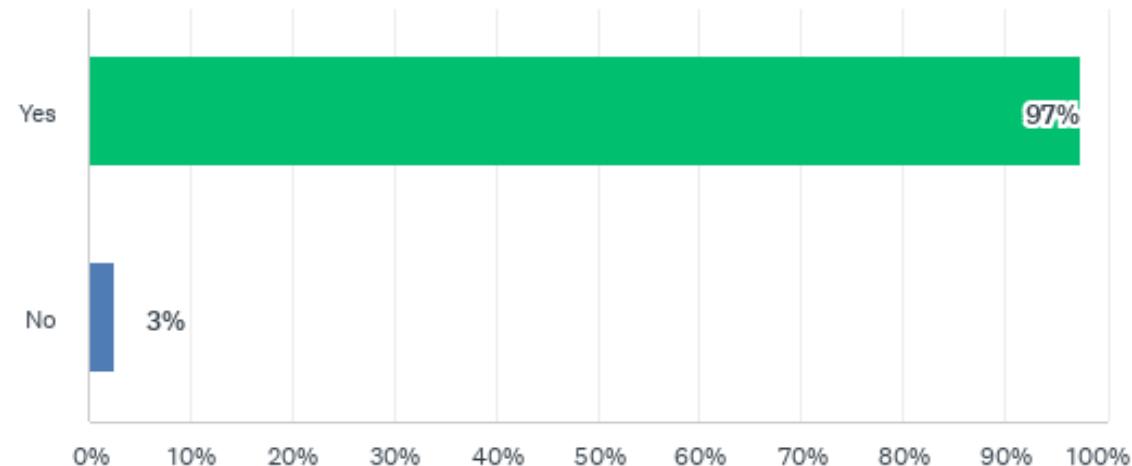
Q14 I know who to call when I need help, or I am in crisis.



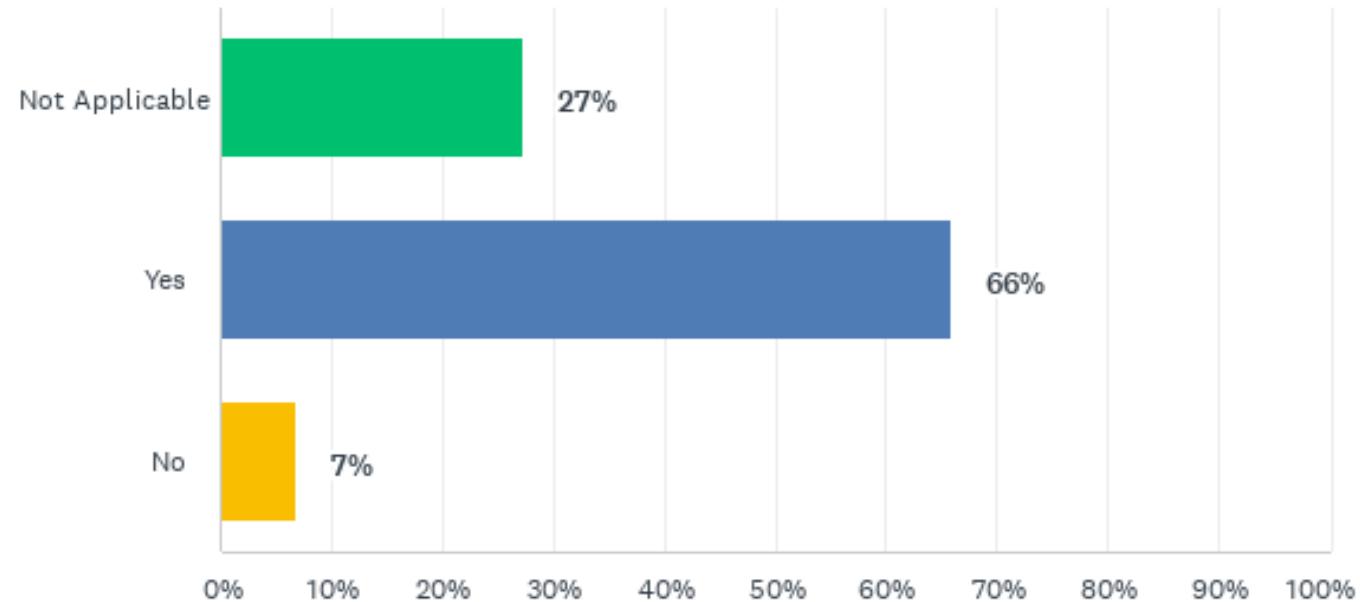
Someone has talked with me about the side effects of any medication prescribed to me through CMH and explained the results of any lab tests ordered by CMH.



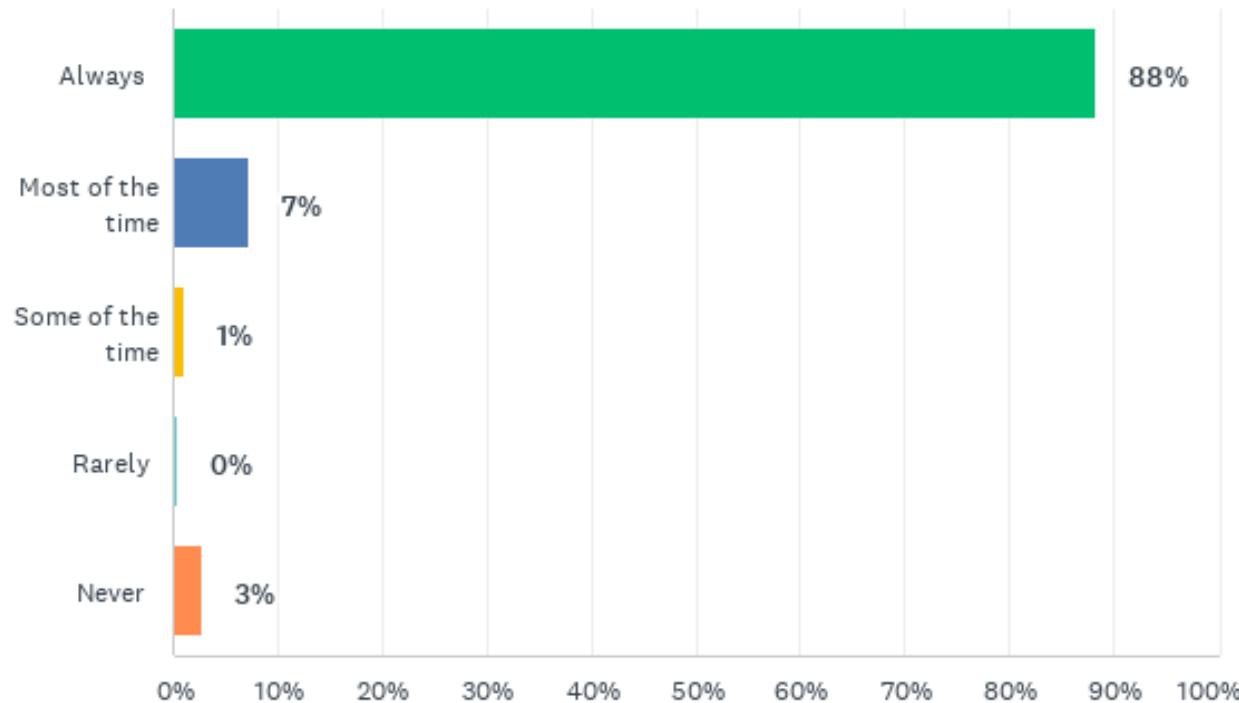
Q11 Appointment times are convenient for me.



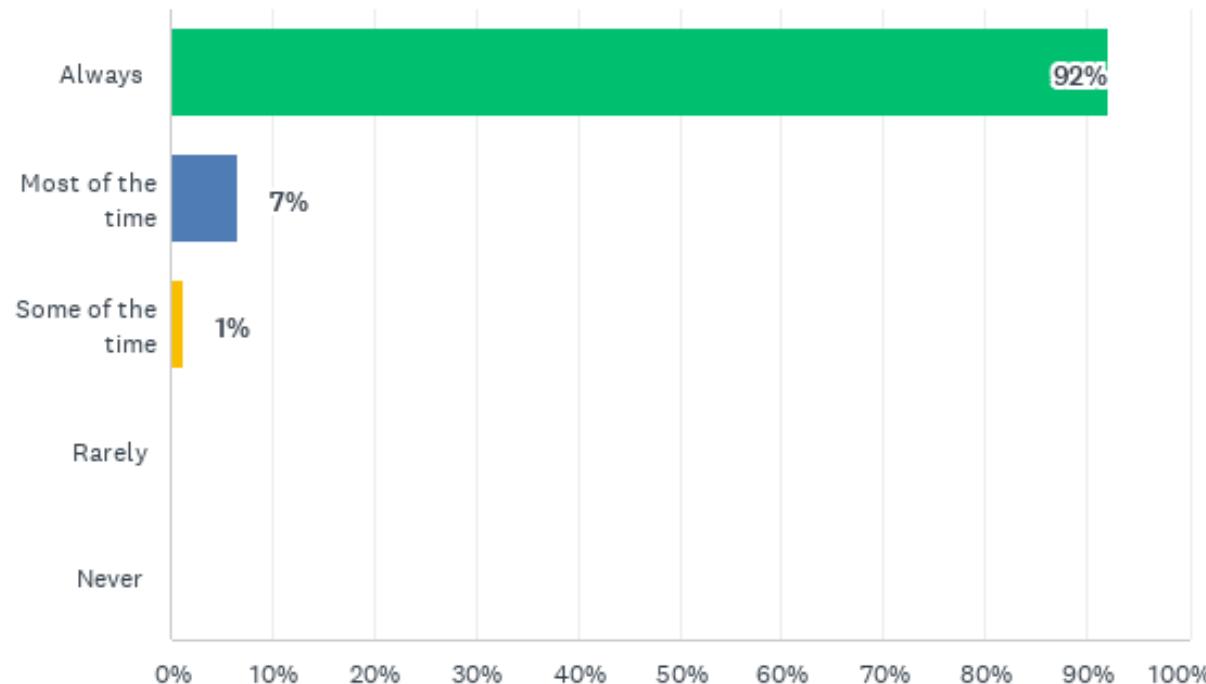
Access to services via telephone or video (telemedicine/telehealth) has improved my care.



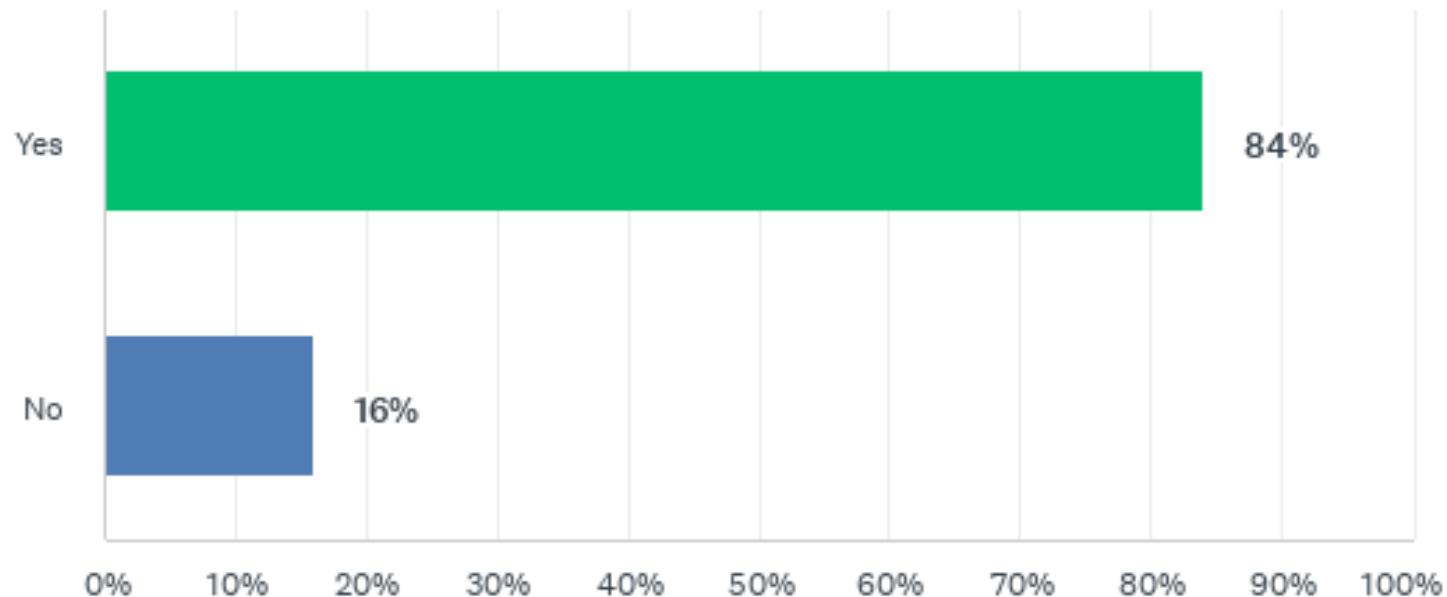
I feel staff is sensitive to my cultural/ethnic background or gender identity.



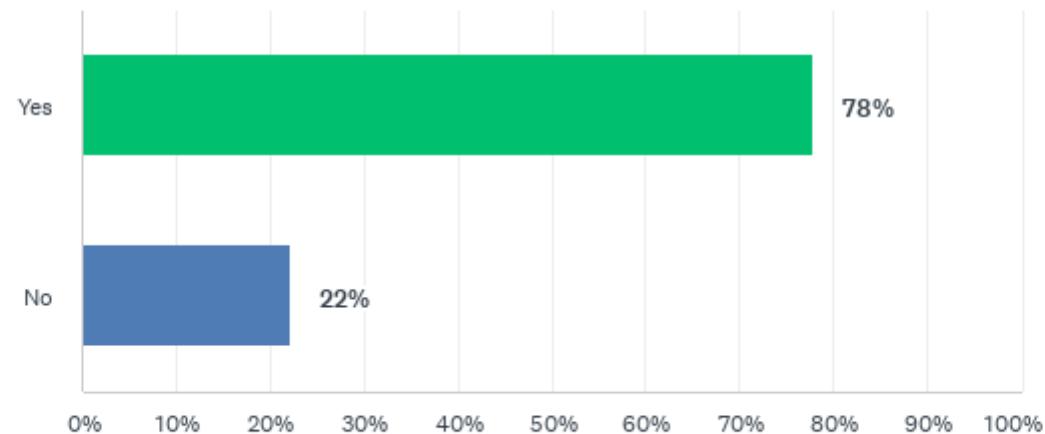
Q13 Staff treat me with dignity and respect.



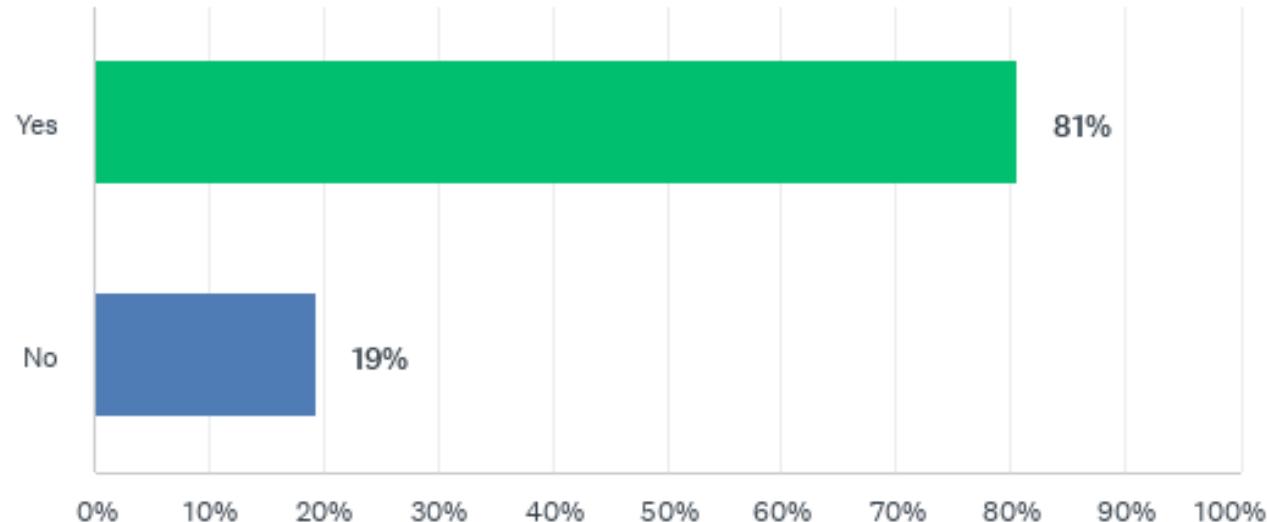
I know how to file a complaint or grievance, if I want to.



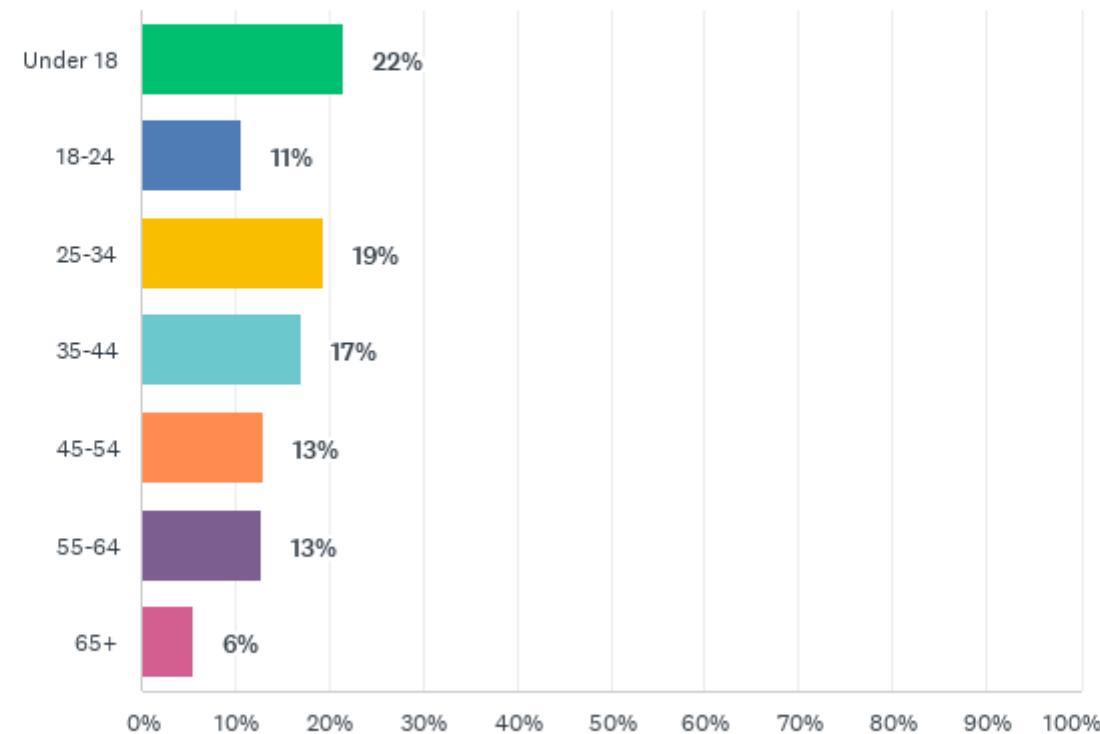
I know how to file an appeal if I don't agree with a denial of a service I requested or I don't agree with a change to my services.



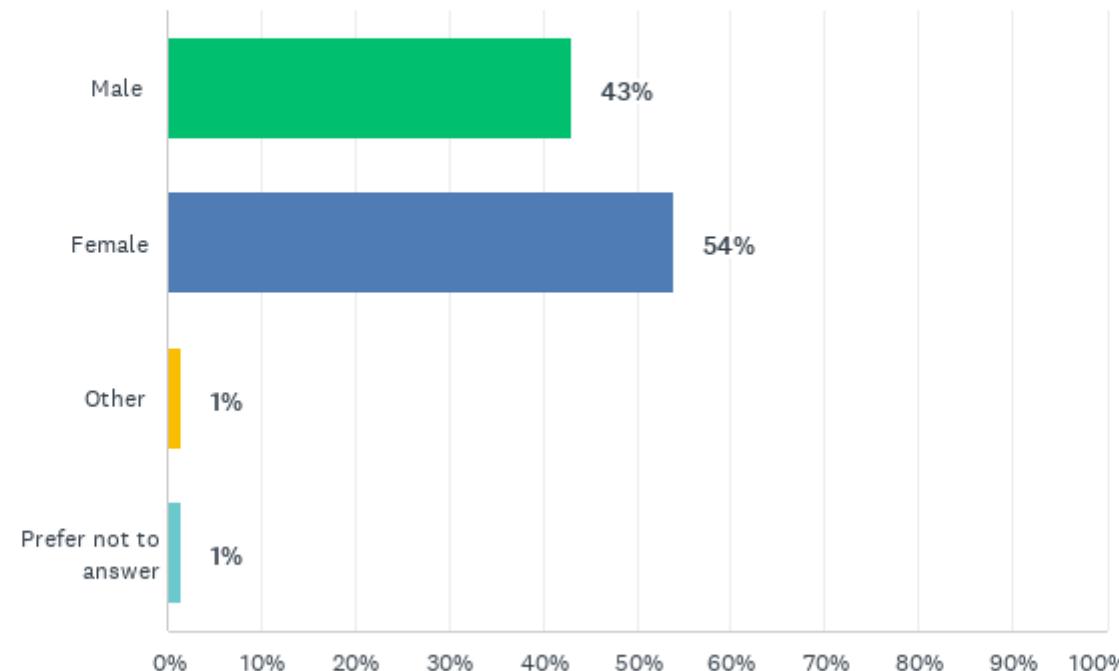
I have been given information about mediation services and I know how to request mediation if I want to.



Q19 What is your age



Q20 What is your gender?



Performance Comparison FY22 v. FY23

In FY22, NMRE served 15,731 recipients with 4% (620) of recipients participating in the survey, compared to 16,045 people served in FY23, and 6% (920) of recipients participating in the survey. There was a **2% increase** in participation.

95% said they felt staff were sensitive to their cultural and ethnic background and gender identity, compared to 97% in FY22. There was a **2% decrease** in staff sensitivity over the past year.

99% said staff treat them with dignity and respect, the same number from FY22. There has been no change over the past year.

96% said they are involved in the development of their treatment plan, compared to 98% in FY22. There was a **2% decrease** in person centered planning over the past year.

16% do not know how to file a grievance, compared to 19% in FY22. Grievance knowledge has **increased by 3%** over the past year.

22% do not know how to file an appeal, compared to 20% in FY22. Appeal knowledge has **decreased by 2%** over the past year.

19% are not aware of mediation services

*no data for FY22

25% are not always comfortable asking questions about their services or requesting new services, compared to 34% in FY22. The ease at which recipients feel comfortable asking about services has **increased by 9%** over the past year.

20% were not informed about sharing of health information , compared to 23% in FY22. The knowledge about sharing health information has **increased by 3%** over the past year.

Recommendations

Recipients have the right to file appeals of an Adverse Benefit Determination. Review the Appeal process with all staff to ensure compliance.

Recipients have the right to file grievances if they are unhappy. Review the grievance process with all staff to ensure compliance.

Recipients have the right to mediation services, which is a good alternative to appeals or grievances. Recipients must be given information about mediation. Review mediation services with staff to endure compliance.

Recipients should feel comfortable enough to ask questions about their services or request new services. Make sure staff are approachable and can answer any questions recipients may have.

Staff must make sure notice of privacy/confidential information paperwork is procured, and that the client understands that they are giving permission for their health care team to coordinate their care. It is vital that we normalize open lines of communication between behavioral and medical health providers.

Overview

98% of recipients are involved in their health care decisions and the development of their treatment plan.

95% of recipients feel that staff explain information in a way they can understand

99 % of recipients feel that they are treated with dignity and respect.

ACTION TAKEN

This year, the NMRE included questions regarding Long Term Supports and Services (LTSS) and Home & Community Based Services (HCBS).

Responses that included possible Recipient Rights violations were reported to the corresponding CMH. Particularly, the HCBS written responses included noncompliance by licensed specialized residential homes were reported and opened as investigations.

Responses regarding licensed general Adult Foster Care Homes and the noncompliance of HCBS were reported to LARA.

Based on individual CMH responses, extra training has been recommended. For example, an astounding 34% of respondents at a specific CMH did not know how to file an appeal. Quality and Compliance was informed and staff training recommended.



Questions