

RECOVERY ORIENTED SYSTEM OF CARE (ROSC) SURVEY PROJECT Community Report

In 2017, Voice & Vision, Inc. **interviewed 72 individuals who used mental health services** “in the last 12 months” (from the time people were interviewed back 12 months) by phone from April 20 through October 25, 2017.

The purpose of this survey was to gather data from Community Care Behavioral Health Organization members about the extent to which their outpatient mental health services (Psych Rehab, Peer Support, Therapy, Case Management, and Medication Management) have embodied ROSC principles. The survey objectives, instrument, and Results Report were developed in collaboration with the *Chester County Departments of Human Services and Drug & Alcohol and **Community Care (also the project funder).

Because the Voice & Vision team has personal experience in recovery or helping loved ones, survey participants tend to feel comfortable sharing their stories and feedback about what helps and what gets in the way of their recovery. One-on-one interviews were conducted using a paper survey instrument, with quantitative and qualitative questions. Results are presented in aggregate and are anonymous, representing the collective voice of participants.

Recovery principles guide mental health services to provide people with person-driven care and address the whole health of the individual. This summary of the data is for provider and related professionals to assist in the continuous improvement of services in Chester County. This summary is offered with gratitude to those who shared their heartfelt experiences.



*<http://www.chesco.org/>

**<http://www.ccbh.com/>

RECOVERY ORIENTED SYSTEM OF CARE (ROSC)

In 2014, Chester County Departments of Human Services, Mental Health/Intellectual and Developmental Disabilities, and Drug & Alcohol along with Community Care Behavioral Health Organization began an asset mapping process to look at the Chester County Recovery Oriented System of Care (ROSC) with a focus on long-term recovery supports and whole health. A System’s Vision was created as a “North Star” for future work:

“The system will be designed to support the long-term recovery of people receiving services, through the delivery of exceptional treatment, paired with an intentional focus on the multiple life domains of those served, their hopes, dreams and their achievement of a fulfilling life in the community.”

MAIN SURVEY FINDINGS

What Helps

- ◆ Good communication between clients and psychiatrists
- ◆ A person-centered office environment and staff
- ◆ Activities which support recovery

What’s Needed

- ◆ Access to care
- ◆ Incorporation of hopes, dreams, and goals into treatment and recovery planning
- ◆ Resources and assistance in all areas of life to support whole health

What Respondents Told Us Helps...

❖ Communication between clients and psychiatrists

85% of respondents indicated ‘yes always’ or ‘somewhat’ that their psychiatrist listens to their input when prescribing medications. Consideration should be given to comments provided by nine people indicating that communication needed improvement (available upon request).

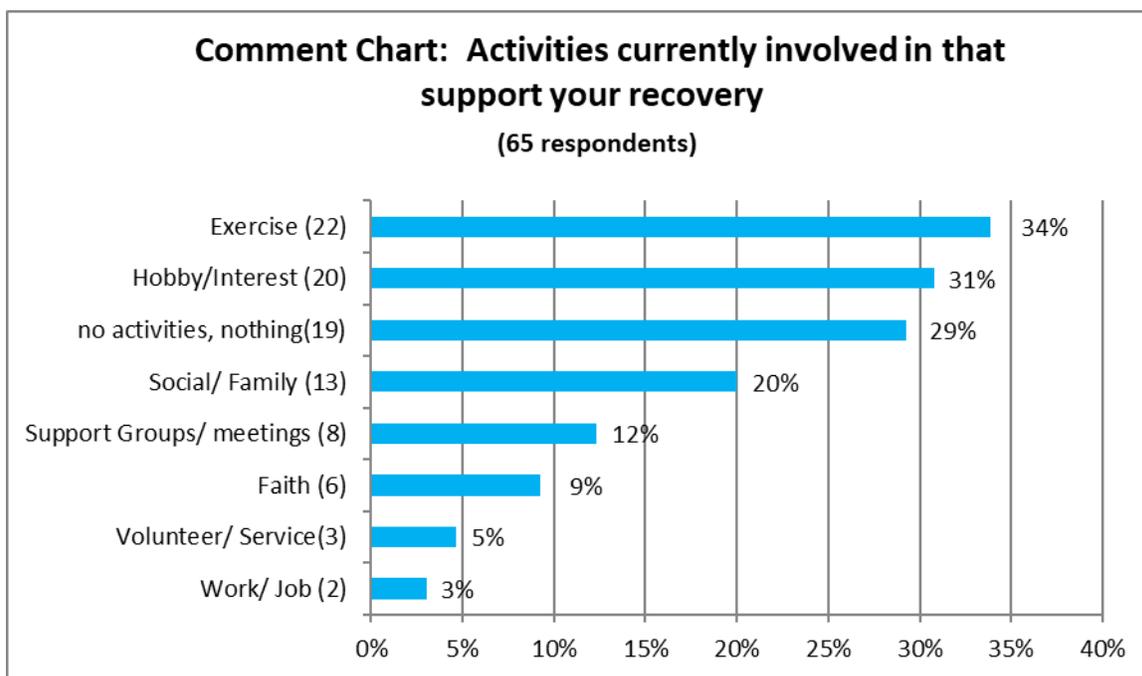
❖ Person-centered office environment and staff

Respondents gave 90-100% positive response on all of the following: office environment welcoming, staff compassionate, respectful of cultural considerations, and accommodating of special needs.

| | |
|---|--------------|
| Was the office environment welcoming? | 97% (67/69) |
| Was the staff compassionate? | 97% (67/69) |
| Was the staff respectful of cultural considerations important to you? | 100% (63/63) |
| Was the staff accommodating of any other needs you may have? | 90% (35/39) |

❖ Activities which support recovery

Forty-six respondents described personal and community activities they are involved in to support their recovery. The top two were exercise and personal hobbies or interests.



What Respondents Told Us They Need...

❖ Access to care

When asked about difficulties in getting the help they needed for mental health and/or substance abuse in the last 12 months, the three most common responses* were:

- ◆ Staff turnover or unavailable staff (16)
- ◆ Delays in getting an appointment or waitlists (14)
- ◆ Provider staff didn't have sufficient knowledge (9) - examples included:
 - ◇ "My therapist had to do some research to learn about what was going on with me. She discussed with her advisor who also researched"
 - ◇ "Sometimes I feel like my doctor doesn't have sufficient knowledge."
 - ◇ "It took years for them to tell me my diagnosis."

*Respondents could choose multiple answers.

❖ Incorporation of hopes, dreams, and goals into treatment and recovery planning

When asked about how providers have incorporated your hopes, dreams, and goals in treatment/recovery planning, people offered various comments although few tangible examples. The following were themes that arose from the comments:

- ◆ 15 comments indicated hopes, dreams, goals were discussed in my counseling/treatment
- ◆ 12 comments indicated the provider had not done this
- ◆ 10 comments discussed the provider offering hope and encouragement
- ◆ 10 people were not sure/had no example
- ◆ 2 people gave specific examples of their provider working with them on hopes, dreams, or goals



❖ Resources and assistance in all areas of life to support whole health

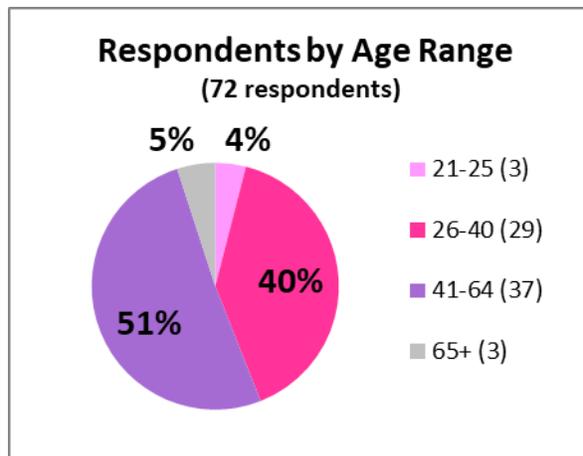
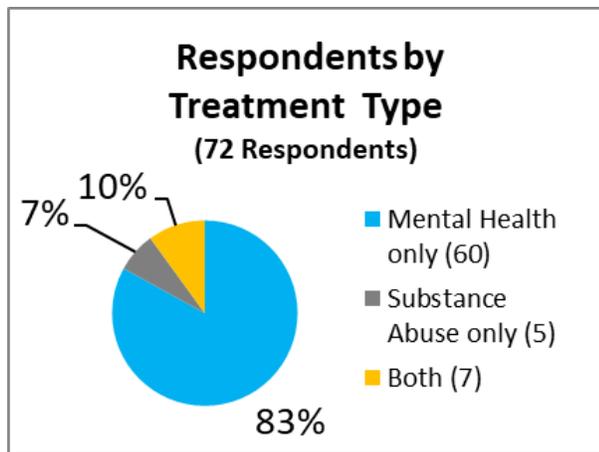
When asked if treatment providers were helping in areas of life beyond mental health and substance use treatment, the following areas showed as less than 60% positive:

- ◆ Finding housing (36% positive)
- ◆ Connecting people to resources to help with financial concerns (42% positive)
- ◆ Connecting people to jobs, volunteer work, or education (51% positive)

It is recognized that providers may not have staff to be able to offer help in these areas. In keeping with the ROSC principle of holistic, referrals and follow-up to appropriate services to help with these needs is recommended to increase chances for successful mental health treatment.

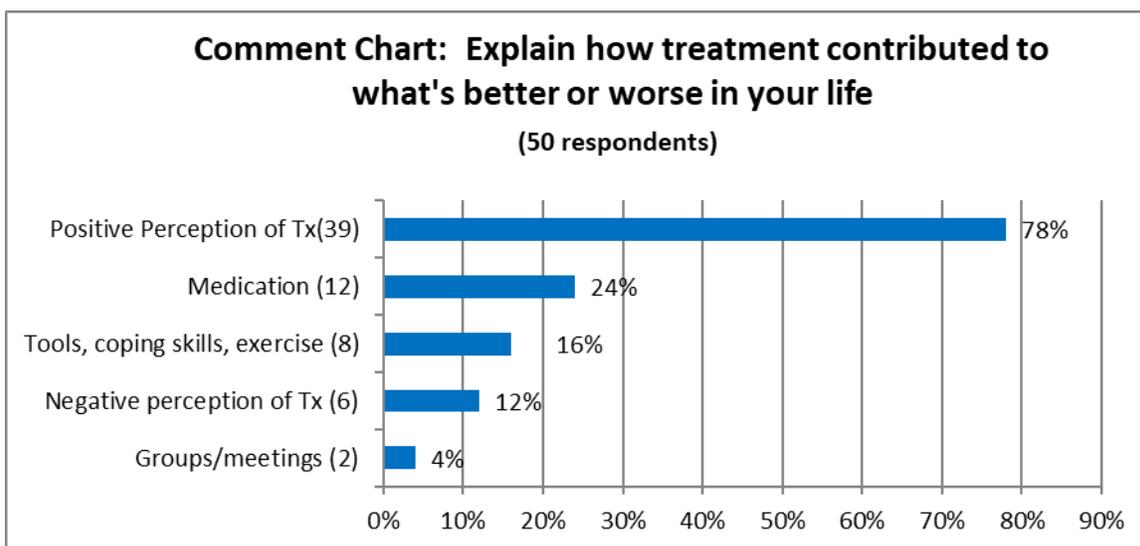
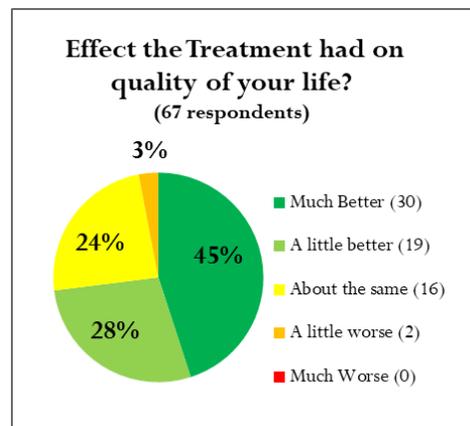
Who did we speak with?

The population provided was 388. Based on this number, 78 was the target number of interviews to complete to represent the opinions of people who had used services from March 2016-March 2017. Seventy-two people were interviewed.



Treatment Outcomes—Notable

- ◆ 73% of respondents indicated their treatment gave them a *much better or a little better* quality of life.
- ◆ 79% of respondents indicated ‘yes (always)’ that they were “given the chance to make treatment decisions” in the last 12 months.
- ◆ When asked how treatment contributed to what’s better or worse in their life, 78% of respondents shared positive comments about their perceptions of treatment.



Revised: March 9, 2018