State of California—Health and Human Services Agency
Department of Health Care Services

TOBY DOUGLAS
DIRECTOR

EDMUND G. BROWN JR.
GOVERNOR

DATE: March 3, 2014

MHSUDS INFORMATION NOTICE NO.: 14-007

TO: COUNTY MENTAL HEALTH DIRECTORS

SUBJECT: MENTAL HEALTH CONSUMER PERCEPTION SURVEY DATA COLLECTION

REFERENCE: IMPLEMENTATION OF THE CONSUMER PERCEPTION SURVEY, WELFARE AND INSTITUTIONS CODE SECTION 5898 AND SECTION 3530.40 OF TITLE 9 OF THE CALIFORNIA CODE OF REGULATIONS

This Department of Health Care Services (DHCS) Information Notice provides guidance to Counties[1] for the submission of data for the Consumer Perception Survey (CPS) Data Collection requirement. The goal of this survey is to collect data for reporting on the federally determined National Outcome Measures (NOMs). Reporting on these NOMs are required by the Substance Abuse Mental Health Services Administration (SAMHSA), and receipt of federal Community Mental Health Services Block Grant (MHBG) funding is contingent upon the submission of this data. Counties are required to conduct the survey and submit data per §3530.40 of Title 9 of the California Code of Regulations.

The survey period will take place from **Monday, April 28 through Friday, May 2, 2014**. DHCS has contracted with the California Institute for Mental Health (CiMH) to scan and process the submitted forms and aggregate the data.

Once the survey forms have been completed and collected, they must be submitted to CiMH no later than **Monday, May 19, 2014**. Persons at the county/local level responsible for data collection and reporting are asked to do the following:

1. Download the data collection materials, including instructions and each of the CPS forms from the CiMH website. A link to the materials will be available at http://www.cimh.org/consumer-perception-surveys by **Friday, February 28, 2014**.

[1] "County" means the County Mental Health Department, two or more County Mental Health Departments acting jointly, and/or city-operated programs receiving funds per Welfare and Institutions Code Section 5701.5. (§ 3200.090 of Title 9 of the California Code of Regulations (CCR).

Forms are available for Adults, Older Adults, Youth, and Family/Parents of Youth. Adult and Older Adult forms are available with or without *Quality of Life* survey items, and counties may choose to use either type of form.

2. Conduct the survey during the collection period specified above.

3. Please mail the completed surveys no later than **Monday, May 19, 2014**, to the following address:

   California Institute for Mental Health
   2125 19th Street, 2nd Floor,
   Sacramento, CA 95818
   Attention: Stephanie Oprendek, Ph.D.

Please note the forms must be printed directly from the PDF documents on the CiMH website; photocopied forms will not be accepted as they will not correctly scan. Other survey types or forms that have been modified in any way by the counties to collect this data will also not be accepted, as they cannot be aggregated with the standard forms.

For counties who have Teleform software and wish to print forms locally from their Teleform Designer software, Teleform form definition files (Version 8.2 and Version 10.6) will also be available on the CiMH website. Counties who choose to scan/enter data locally must aggregate their data according to the data dictionaries available on the DHCS Information Technology Web Services (ITWS) website at https://itws.dhcs.ca.gov/. Resulting data files should be uploaded to county DHCS ITWS folders no later than **5:00 pm on Friday, June 20, 2014.** Data files received after that time cannot be utilized in statewide reporting. Please notify one of the CiMH staff below if your county plans to upload data files to the ITWS.

Counties will be able to retrieve electronic data files of their survey submissions by logging onto the DHCS ITWS website. The data will be posted in county-specific folders for download.

If you have any questions regarding the CPS Data Collection process, please contact the following staff at CiMH:

Candice Medina
Program Support Specialist
cmedina@cimh.org
(916) 556-3480 ext. 160

Stephanie Oprendek, Ph.D.
Program Manager
soprendek@cimh.org
(916) 284-8146

Sincerely,

Original Signed By

Karen Baylor, Ph.D., LMFT, Deputy Director
Mental Health & Substance Use Disorder Services

cc: Candice Medina
Program Support Specialist
California Institute for Mental Health
2125 19th Street, 2nd Floor,
Sacramento, CA 95818

Stephanie Oprendek, Ph.D.
Program Manager
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2125 19th Street, 2nd Floor,
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