

Chapter: **QUALITY IMPROVEMENT**  
Title: **PERSON SERVED EXPERIENCE**

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### **I. ABSTRACT**

This policy establishes the standards and procedures for person-served follow-up, concurrent, and post-discharge satisfaction assessments for the person served at Macomb County Community Mental Health (MCCMH).

### **II. APPLICATION**

This policy shall apply to directly operated and contracted network providers of the MCCMH Board.

### **III. POLICY**

It is the policy of the MCCMH to:

- A. Periodically assess the experience of persons served on a system-wide basis, both while the person served is actively receiving services from MCCMH programs and after the person served has been discharged from MCCMH programs.
- B. Periodically assess provider and referral source satisfaction with MCCMH services.
- C. Perform at a minimum, one follow-up contact to person served post-discharge through the satisfaction/follow-up survey; and;

- D. Use information obtained from the persons served experience survey to improve service delivery and assess needs for new or expanded service programs.

#### **IV. DEFINITIONS**

- A. The Mental Health Statistics Improvement Program (MHSIP) survey is a standardized, federally recognized survey to measure members' perceptions of the quality of and efficiency of the mental health services they receive.
- B. Youth Services Satisfaction Survey for Families (YSS-F) is a standardized federally recognized survey to measure youth and family members' perceptions of the quality of and efficiency of the mental health services they receive.

#### **V. STANDARDS**

- A. Person served satisfaction surveys for adults and children shall be prepared in formats that will enable all persons served to provide feedback on their satisfaction with services, regardless of disability level or functional impairment.
- B. Post-discharge surveys shall provide an opportunity for consumers to report on their current status, and identify service needs, as well as to indicate their satisfaction with services provided.
- C. Concurrent surveys shall provide an opportunity for person served to report their satisfaction with services while still participating in service provision.
- D. Person served shall be given the opportunity to report their assessment of services without fear of reprisal or without jeopardizing receipt of services for which they qualify.
- E. Consumer satisfaction information pertaining to identifiable individuals shall be considered confidential, as well as protected as quality assurance documents.
- F. MCCMH shall review satisfaction assessments, and shall:
  - 1. Take specific action on individual cases as appropriate
  - 2. Identify and investigate sources of dissatisfaction.
  - 3. Outline systemic action steps to address the findings; and
  - 4. Inform stakeholders, including providers, person served, and the MCMH Board of assessment results.
- G. MCCMH shall evaluate the effects of the actions taken in response to satisfaction assessments, as outlined above.

- H. MCCMH shall comply with the state-level data collection reporting requirements contained in the current MDCH/MCCMH Managed Mental Health Supports and Services Contract pertaining to consumer satisfaction surveys.

## VI. PROCEDURES

### A. Post-Discharge Follow-up and Satisfaction Assessment

1. Follow-up after a persons served has been discharged from a service program shall be by U.S. mail, using consumer post-discharge follow-up and satisfaction questionnaires, *“Help Us Serve You Better”* (for adults), or *“Kids, Tell Us What You Think”* (for children).
2. Completed post-discharge follow-up and satisfaction questionnaires shall be returned to the Quality Department for quarterly aggregation and preparation of a summary report for presentation to the Citizens Advisory Councils, the MCCMH Quality Assessment and Performance Improvement (QAPI) Committee, the MCCMH Board, and, at least annually, in public communications.

### B. Concurrent Satisfaction Assessment

1. Follow-up for current person served shall be by U.S. mail, secure electronic link, QR code, or in person using a consumer concurrent satisfaction questionnaire, *“MHSIP”* (for adults), or *“YSS-F”* (for children).
2. At least annually, all members receiving care shall be offered the option to complete a person served concurrent satisfaction questionnaire, with distribution provided to ensure each member has the opportunity to receive the survey at least once per year
3. Completed concurrent questionnaires shall be returned to the Quality Department for aggregation (at least annually) and preparation of a summary report in accordance with the MCCMH annual Quality Improvement Plan (QAPIP).

### C. All Satisfaction Assessments

1. Person served requests for further contact noted on the person served satisfaction surveys shall be forwarded to the MCCMH Ombudsman and the customer service department.
2. Other follow-up activities may be initiated at the request of the person served, his/her parent or guardian, as applicable, or by the behavioral health providers of the Board.

## **VII. REFERENCES / LEGAL AUTHORITY**

- A. Commission on Accreditation of Rehabilitation Facilities (CARF) 2010 Standards Manual, §1D. Input from Persons Served and Other Stakeholders, 1., 2., pp. 51-52; §1M. Information Measurement and Management, 1., 3., 4., pp. 91-96; §1N. Performance Improvement, 1., 2., pp. 97-98.
- B. MDHHS-MCCMH Medicaid Managed Specialty Supports and Services Contract

## **VIII. EXHIBITS**

- A. None.