

The chart above shows the results of the Region 3 Adult Consumer Survey for the last 5 years. The Department of Health and Human Services' Division of Behavioral Health conducted the survey on consumers receiving mental health and/or substance use disorder services from publicly funded, community based behavioral health system in Nebraska to assess the quality and impact of the services provided by measuring consumer responses in seven domains. The survey received input from 184 adults receiving services through Region 3 Network Providers.

Access Questions:

The location of services was convenient (parking, public transportation, distance, etc.).

Staff were willing to see me as often as I felt it was necessary.

Staff returned my calls within 24 hours.

Services were available at times that were good for me.

I was able to get all the services I thought I needed.

I was able to see a psychiatrist when I wanted to.

Quality and Appropriateness Questions:

I felt free to complain.

I was given information about my rights.

Staff encouraged me to take responsibility for how I live my life.

Staff told me what side effects to watch out for.

Staff respected my wishes about who and who is not to be given information about my treatment.

Staff at _ believe that I can grow, change and recover.

Staff were sensitive to my cultural background (race, religion, language, etc.).

Staff helped me obtain the information that I needed so that I could take charge of managing my illness.

I was encouraged to use consumer-run programs (support groups, drop-in centers, crisis phone line, etc.).

Outcome Questions:

I deal more effectively with daily problems.

I am better able to control my life.

I am better able to deal with crisis.

I am getting along better with my family.

I do better in social situations.

I do better in school and/or work.

My housing situation has improved.

My symptoms are not bothering me as much.

Participation in Treatment Planning:

I felt comfortable asking questions about my treatment and medication.

I, not staff, decided my treatment goals.

General Satisfaction:

I like the services that I received there.

If I had other choices, I would still get services from this agency.

I would recommend _ to a friend or family member.

Functioning:

My symptoms are not bothering me as much.

I do things that are more meaningful to me.

I am better able to take care of my needs.

I am better able to handle things when they go wrong.

I am better able to do the things that I want to do.

Social Connectedness:

I am happy with the friendships I have.

I have people with whom I can do enjoyable things.

I feel I belong in my community.

In a crisis, I would have the support I need from family or friends.