



2023 Treatment Perceptions Survey (TPS) Report

Submitted for
The California Department of Health Care Service
04/08/2024

UCLA

David Geffen School of Medicine

Integrated Substance Abuse Programs

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2023 Treatment Perceptions Survey (TPS) Report

Executive Summary

Administration of the 2023 Statewide Treatment Perceptions Survey (TPS) occurred October 16-20, in 38 DMC-ODS counties. This was the seventh administration of the annual survey. Surveys were conducted via online and paper-based versions.

Over the course of these survey administrations, changes in satisfaction scores have remained relatively small, and the ratings for all domains have remained high across time for both adults and youth (scores on average over 4.0 on a scale from 1.0 to 5.0).

Findings

Engagement/Participation: Data collection occurred via paper (13,477 forms) and online (3,376 surveys) for both adults and youth and an additional 1,321 with incomplete data, totaling 18,174 respondents statewide. This was an increase from 2022 (N = 14,717 surveys) and 2021 (N = 16,628 surveys).

The highest percentage of adult survey forms was received from clients in OP/IOP programs (43.5%), followed by residential programs (31.6%) then NTPs/OTPs (17.7%). Standalone WM program participation increased in 2023 (3.6%) from 2022 (1.2%). In alignment with adult respondents, the vast majority of surveys from youth clients (88.7%) were also returned from OP/IOP programs, while a much lower percentage (6.5%) surveys were returned from residential programs, although this was also an increase from 2022 (4.5%).

Adult Scores: Average scores for each of the five domains were high and continue to remain in alignment with prior years: Quality and General Satisfaction domains yielded the highest scores (both 4.5), followed by the Outcome and Access (both 4.4), and Care Coordination domain yielded the lowest score (4.3). In 2023, an additional question was added to Outcome and Care Coordination domains. However, the mean scores in both the domains remained similar to the previous year's results. Respondents were least likely to agree with the individual statements for Care Coordination regarding staff connecting clients with services (80.9%), working with mental health (81.8%) and physical health providers (82.7%). These were noted last year as well, suggesting there may be continued room for improvement in satisfaction within the Care Coordination domain.

Youth Scores: Average scores for all the domains were also above 4.0 for youth in 2023, with a slight increase from 2022 in some domains. Therapeutic Alliance received the highest average score (4.4) followed by Access, Care Coordination and General Satisfaction (all 4.3). At the lower end of the scale were Quality (4.2) and Outcome domains (4.1). In 2023 one additional question was added to the Outcome domain. However, even with the new question, outcome domain results were similar to the previous year. Youth reported a high agreement with the statements of being "treated with respect" and that "counselors took the time to listen" (93.5% for both). On the other hand, they were also least likely to agree with the individual statements, "Felt less craving for drugs and alcohol" (72.9%), "My counselor provided necessary services" (73.9%) and, like 2022 data, youth respondents were less likely to agree with: "The staff are sensitive to my cultural background [ethnicity, religion, language, etc.]" (76.9%). 74.7% of youth respondents indicated Latinx background. This could provide an opportunity to review cultural awareness and competencies.

Scores by Treatment Setting: Satisfaction by treatment setting continues to indicate lower satisfaction among residential clients for both adults (88.1%) and youth (72.0%) than among clients in other settings. Some comments suggested these ratings may stem in part from limited access to the outside world, which is unique to residential settings and could be an avenue for future improvements.

Quality and General Satisfaction domains received the highest scores across all the treatment settings among adults, and Care Coordination received the lowest score across all treatment settings.

Although the youth residential ratings were based on responses from only 29 respondents this year, ratings for this setting were lower than other youth settings, consistent with findings from previous years.

Scores by Telehealth Services Received: Telehealth continues to be an important mechanism for receiving services. Telehealth is used by over half of youth and adults across all race/ethnic groups; however, there may be regional differences in availability, use and preference. In 2023, adult respondents indicated very little variation in General Satisfaction by the amount of telehealth services they received, suggesting they were just as satisfied with in-person and telehealth treatment. Scores for telehealth satisfaction remained high, between 4.4 and 4.5. For youth respondents, there was more variability among the scores, and the General Satisfaction domain among youth showed a slightly higher average score when “All” and “Almost All” of the services received were via telehealth.

Recommendations

- Continue supporting telehealth for youth and adults.
- Review efforts to address cultural sensitivity, in particular for youth.
- Consider ways to encourage more family involvement in the delivery of youth services.
- Enhance the complementary role of physical and mental health services as part of service delivery.

Historical Background

In 2017, UCLA developed the Treatment Perceptions Survey (TPS) for adults based on San Francisco County's Treatment Satisfaction Survey. A year later, a youth version based on Los Angeles County's Treatment Perceptions Survey was introduced. Both survey questionnaires include items from the Mental Health Statistics Improvement Program, MHSIP. Input on the development of the surveys was solicited from and provided by:

- The California Department of Health Care Services (DHCS)
- The Substance Abuse Prevention Treatment+ Committee (SAPT+) of the County Behavioral Health Director's Association (CBHDA) of California
- The Drug Medi-Cal Organized Delivery System (DMC-ODS) External Quality Review (EQRO) Clinical Committee, Behavioral Health Concepts (BHC)
- The Youth System of Care Evaluation Team at Azusa Pacific University, among other stakeholders

The TPS was designed and continues to serve multiple purposes: 1) fulfill the counties' EQRO requirement related to conducting a patient satisfaction survey at least annually using a validated tool; 2) address the data collection needs for the CMS required evaluation of the DMC-ODS waiver; and 3) support DMC-ODS quality improvement efforts while providing pertinent information on the impacts of the waiver.

Data Collection Methods

The administration of the TPS occurs annually in October during a specified five-day period determined by UCLA and in agreement with DHCS. The TPS was only paper-based (one-page and large-print versions) during the first three survey periods in calendar years (CYs) 2017, 2018, and 2019. In CY 2020 and 2021 UCLA added an online version to facilitate data collection and expedite analysis as is possible.

Both paper-based and online surveys are available in English and 12 threshold languages (Spanish, Chinese, Tagalog, Farsi, Arabic, Russian, Hmong, Korean, Eastern Armenian, Western Armenian, Vietnamese, and Cambodian) for both adults and youth.

Survey Items and Domains

The adult and youth surveys underwent several enhancements for the 2023 administration; in collaboration with DHCS, questions were streamlined and better aligned with the satisfaction domains. For the adult and youth surveys, one additional question was added to the Outcome domain ("as a direct result of the services I am receiving, I feel less craving for drugs and alcohol"), one additional question was added to the Care Coordination domain ("Staff here helped me connect with services as needed, i.e., social services, housing, etc.), a question on sexual orientation with six response categories was added, gender identity category was expanded from four to six categories and one additional question in the telehealth section was added (see surveys on pages 18-19).

The adult survey now includes 16 items addressing patient perceptions of satisfaction in five domains: Access, Quality, Care Coordination, Outcome, and General Satisfaction. The youth survey now includes 19 items and the same five domains as the adult survey plus an additional domain: Therapeutic Alliance. As providers continued to use telehealth to deliver services to patients, the telehealth items for both adult and youth surveys included 2 questions. There is a final section where comments may be written. Items were also better aligned with domains.

TPS Adult Survey Items by Domain (new items for 2023 are indicated below)

Survey respondents indicate the extent to which they disagree or agree with statements using a 5-point Likert scale (1= Strongly disagree and 5= Strongly agree).

Access

The location was convenient (public transportation, distance, parking, etc.).
Services were available when I needed them.

Quality

I chose the treatment goals with my provider's help.
Staff gave me enough time in my treatment sessions.
Staff treated me with respect.
Staff spoke to me in a way I understood.
Staff were sensitive to my cultural background (race, religion, language, etc.).

General Satisfaction

I felt welcomed here.
Overall, I am satisfied with the services I received.
I was able to get all the help that I needed.
I would recommend this agency to a friend or family member.

Outcome

As a direct result of the services I am receiving, I am better able to do things that I want to do.
As a direct result of the services I am receiving, I feel less craving for drugs and alcohol. (NEW)

Care Coordination

Staff here work with my Physical Health care providers to support my wellness.
Staff here work with my Mental Health care providers to support my wellness.
Staff here helped me to connect with other services as needed (social services, housing, etc.) (NEW)

Telehealth

Now thinking about the services you received, how much of it was by telehealth (by telephone or video-conferencing)?
How helpful were your telehealth visits compared to traditional in-person visits? (NEW)

TPS Youth Survey Items by Domain (new items for 2023 highlighted)

Access

The location of services was convenient for me.
Services were available at times that were convenient for me.
I had a good experience enrolling in treatment.

Therapeutic Alliance

My counselor and I work on treatment goals together.
I feel my counselor took the time to listen to what I had to say.
I developed a positive, trusting relationship with my counselor.
I feel my counselor was sincerely interested in me and understood me.
I like my counselor here.
My counselor is capable of helping me.

Quality

I received services that were right for me.
Staff treated me with respect.
Staff were sensitive to my cultural background (race/ethnicity, religion, language, etc.).
My counselor provided necessary services for my family.

Care Coordination

Staff here make sure that my health and emotional health needs are being met (physical exams, depressed mood, etc.).
Staff here helped me with other issues and concerns I had related to legal/probation, family, and educational systems.

Outcome

As a direct result of the services I am receiving, I am better able to do things I want to do.
As a direct result of the services I am receiving, I feel less craving for drugs and alcohol. (NEW)

General Satisfaction

Overall, I am satisfied with the services I received.
I would recommend the services to a friend who is in need of similar help.

Telehealth

Now thinking about the services you received, how much of it was by telehealth (by telephone or video-conferencing)
How helpful were your telehealth visits compared to traditional in-person visits? (NEW)

Survey Administration

The relevant Information Notice, survey forms and instructions, forms in the multiple threshold languages, and other materials (i.e., Frequently Asked Questions, survey administration announcements, flyers, training slides, TPS codebook, and sample county and program summary reports) are available online, with periodic updates, at [client-treatment-perceptions-survey](#).

Full URL: <https://www.uclaisap.org/dmc-ods-eval/html/client-treatment-perceptions-survey.html>

Representative staff from counties and the Partnership HealthPlan of California Wellness and Recovery Program (PHC) coordinated the survey administration and data collection with providers in their respective provider networks. Paper surveys were collected and subsequently sent to UCLA via FedEx. Data from the UCLA online survey portal was received by UCLA directly from the survey participant. Counties that collected survey data through their own online portal submitted via the UCLA Box Portal. The data was analyzed, and county- and provider-level summary reports were prepared and made available to participating counties/Partnership Plan. Counties were also given access to their raw data files and written comments from the online and paper surveys.

Thirty-one counties and PHC (representing seven counties: Humboldt, Lassen, Mendocino, Modoc, Shasta, Siskiyou, and Solano) participated in the TPS during the October 16-20, 2023, survey period. As in previous years, programs included outpatient/intensive outpatient (OP/IOP), Residential, Narcotic Treatment Program/Opioid Treatment Program (NTP/OTP), and Withdrawal Management (WM, standalone) treatment settings.

New to 2023 was a pilot effort that UCLA introduced, in collaboration with DHCS. Consent to Contact data was collected from only Online survey participants in English and Spanish. The intent was to create another opportunity to dive deeper into treatment experiences through follow up qualitative interviews with survey participants who agreed to be contacted at a later time. The responses to participate in the pilot test were well-received and over 60% of respondents consented and provided contact information. Several areas of inquiry may benefit from additional efforts to better understand patient/client experiences and ultimately improve outcomes.

Results and Discussion

Surveys Submitted

For the 2023 survey period, 18,174 total TPS forms from both adults and youth were received from 31 participating counties and 7 PHC counties. Adults accounted for 95.3% of forms (N = 17,327), and youth accounted for 4.7% (N = 847). In 2023, the number of survey forms submitted has shown a marked increase from the previous 3 years, for example the 2022 survey administration received 14,717 forms; at the height of the pandemic, the 2021 and 2020 survey administrations reflected a drop in participation (N = 16,628 and N = 13,163, respectively). All 31 counties and PHC returned adult forms. Although youth participation increased in 2023 to 847 surveys as compared with 579 in 2022—only 83% (26 counties) counties returned youth forms—6 counties along with PHC did not submit any youth forms. (Please see Appendix for additional TPS data).

In 2023, 693 adult programs and 131 youth programs with unique provider IDs participated in the data collection which was an increase from 2022 for youth and yet a decrease for adults (Adults = 769 and Youth = 101); county administrators worked hard on outreach activities to inform and motivate their service providers and the increased numbers for youth reflect this effort.

OP/IOP programs accounted for the preponderance of adult forms (43.5%), followed by residential programs (31.6%) then NTPs/OTPs (17.7%). Standalone WM program participation increased in 2023 (3.6%) from 2022 (1.2%). In alignment with adult respondents, the vast majority of surveys from youth clients (88.7.0%) were also returned from OP/IOP programs, while a much lower percentage of surveys were returned from residential programs (6.5%), although this was also an increase from 2022 (4.5%).

Counties have been encouraged with each survey administration to promote the use of online survey links. Nevertheless, substantially more adults completed the 2023 survey via paper version (N = 13,109) than online (N = 3,105) in contrast to 2022. Although youth paper version surveys led the submission entries, it was not by much (paper N = 368 vs online N = 271). No meaningful differences were observed between the online and paper surveys in the average scores by domain among adults and youth. Although the survey is offered to clients both as an online option (for example, provider-specific flyers are distributed with a QR code as a link to the survey) and paper version, clients tend to choose according to their comfort level in each instance.

Demographics

Consistent with previous years' TPS administration, most adult survey respondents identified as male (58.2%); 36.1% identified as female; and 1.2% identified as non-binary or transgender. Likewise, most youth survey respondents identified as male (53.0%); 40.3% identified as female, a slight increase from 2022 (36%); and 1.6% identified as non-binary or transgender. The expanded sexual orientation and gender identity (SOGI) questions were able to capture slight nuanced responses for 2023. Nearly 80.6% of adults reported being heterosexual, 3.9% gay or lesbian, 5.5% as bisexual and 1.6% as queer or another sexual orientation. Similarly, 75.1% youth reported being heterosexual, 2.6% as gay or lesbian, 8.7% as bisexual, and 3.4% as queer or another sexual orientation. For additional details see Tables 4 and 5 in the appendix.

For ethnicity, nearly 38.6% of adults and 74.7% of Youth reported Hispanic origin. For race, a preponderance of adult survey respondents identified as White (46.3%), followed by Another race (16.7%), Black/African American (12.6%), and American Indian/Alaska Native (6.1%). The lowest percentage of adult respondents identified as Asian (2.6%) or Native Hawaiian/Pacific Islander (1.8%). Highest percent of youth survey respondents identified as Another race (38.7%), followed by White (19.7%), Black/African

American (10.7%) and 7.3% identified as American Indian/Alaska Native. The lowest percentage of youth respondents identified as Asian (3.2%), and Native Hawaiian/Pacific Islander (1.7%).

Consistent with previous survey administrations, 96.4% of adult survey forms were returned in English and 3.6% were returned in Spanish. 97.5% of the youth survey forms were returned in English, and 2.5% were returned in Spanish.

Average perceptions of care/satisfaction score by treatment setting

Survey respondents used a 5-point Likert scale (strongly disagree to strongly agree) on which higher numbers indicated more positive perceptions of care/satisfaction. Only those who responded to all questions were included (N = 17,327 for adults and N = 847 for youth). Surveys with an average rating of 3.5 or higher were counted as having a positive rating. The percentage agreement is defined as “strongly agree and agree.”

Adults

As shown below (See Fig. 1), the percentage of responses in agreement for each of the 16 survey items remained above 80% to a high of 93%, indicating overall favorable perceptions of care among adults participating in the survey. Of the two questions with the highest percentages in agreement, one was in the Quality domain (“understood communication”) scoring at 93.4%; the other was in the General Satisfaction domain (“I felt welcomed”) and scored at 92.9%. This was remarkably aligned with scores from 2022 and 2021. Despite the addition of a new item, all three items in the Care Coordination domain scored the lowest percentages in agreement (“staff here work with my physical health care providers to support my wellness,”) at 82.7% and (“staff here work with my mental health care providers to support my wellness”) at 81.1%, and 80.9% (“staff helped to connect with service”). Coordination items have persistently received lower ratings than items in other domains every year.

The overall average score for adult survey respondents across the different treatment settings was 4.4, in alignment with scoring from prior years. The overall average scores by treatment setting were 4.8 for OP/IOP, 4.4 for NTP/OTP, 4.3 for WM (standalone), and 4.2 for residential. Scores for adults in residential settings remain lower this year, compared to other treatment settings. (See Fig. 2) Some comments suggested these ratings may at least in part stem from limited access to the outside world, which is unique to the residential setting. Some examples of suggestions from adult residential participants include the following:

“Job help, let [us] go look for work while in the program at some point... just kicking you out without things fully set up for you increases your chance of failing.”

“I wish we could work in the final stage...”

“Please allow us to work in the world that judges us as addicts, give us a chance to redeem ourselves.”

“...help clients get back in the real world!”

“Limited phone communication with my son and family has left me depressed. I hope my next step is more positive because I am still confused and lost...”

These findings suggest that although ratings remain high overall, there may be some room to improve residential perceptions of care and coordination of services.

Youth

Among youth, the overall average score was 4.3, consistent with last year's ratings. Meanwhile, perception of satisfaction in residential treatment setting dropped to 4.0, compared to last year's score of 4.3. Some suggestions that were mentioned from youth in residential settings include:

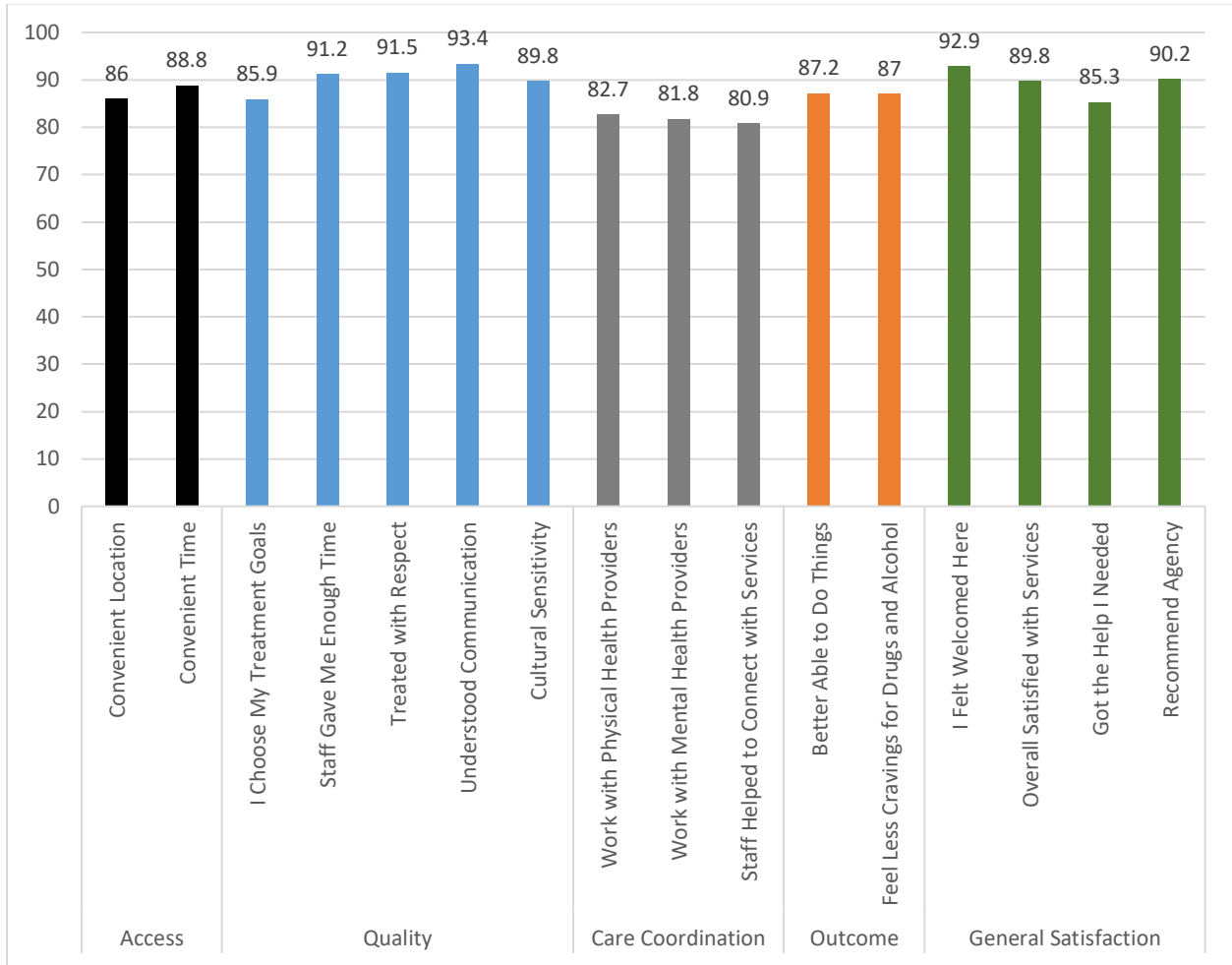
"...more walks, outings."

"Way too many meetings, I think they don't help, all they do is talk about drugs and I think that makes me and other people crave more..."

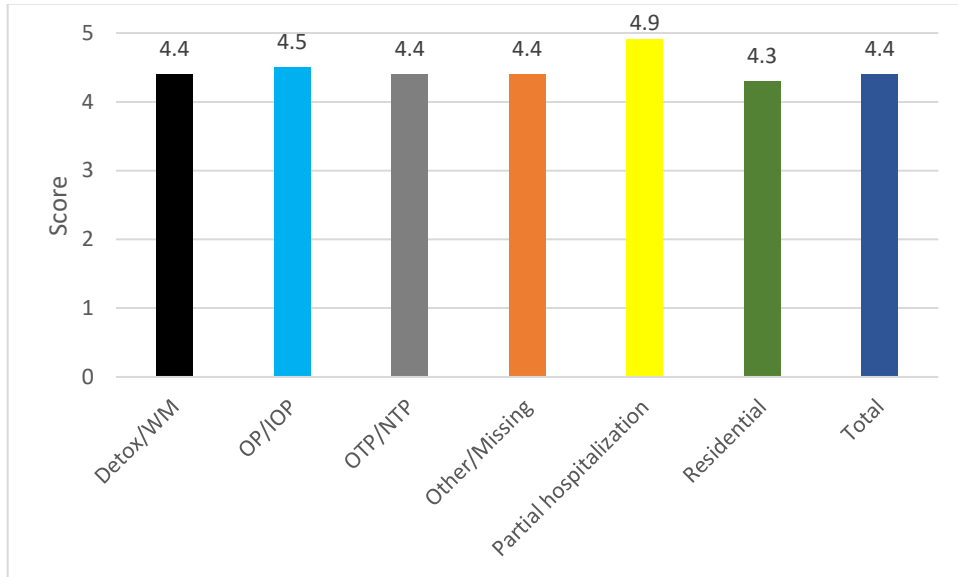
Although the number of residential youth participants was low (29), these sentiments may also suggest that providers could seek greater opportunities for improving treatment services in residential settings. (See Fig. 3)

The percentage of responses among youth in agreement for each of the 19 survey items were at least 73% (See Fig. 4). The survey items showing the highest percentages in agreement were in the Quality domain at 91.9% ("treated with respect") and in the Therapeutic Alliance domain at 89.4% ("counselor listened"). The item with the lowest percentage in agreement is a new question in the Outcome domain ("felt less craving") at 72.9% followed by two items in the Quality domain ("provided family services" and "cultural sensitivity"). These Quality domain items continue to persist in the lower rankings from prior survey periods, but fell to 73.9% and 76.9%, respectively this year. While youth reported lower cultural sensitivity among treatment staff, they also reported high degrees of being treated overall with respect by their counselors. This duality may offer opportunities to explore ways to navigate nuances surrounding these continued cultural sensitivity concerns. Additionally, it will be important to monitor and compare scores of newer items for 2024.

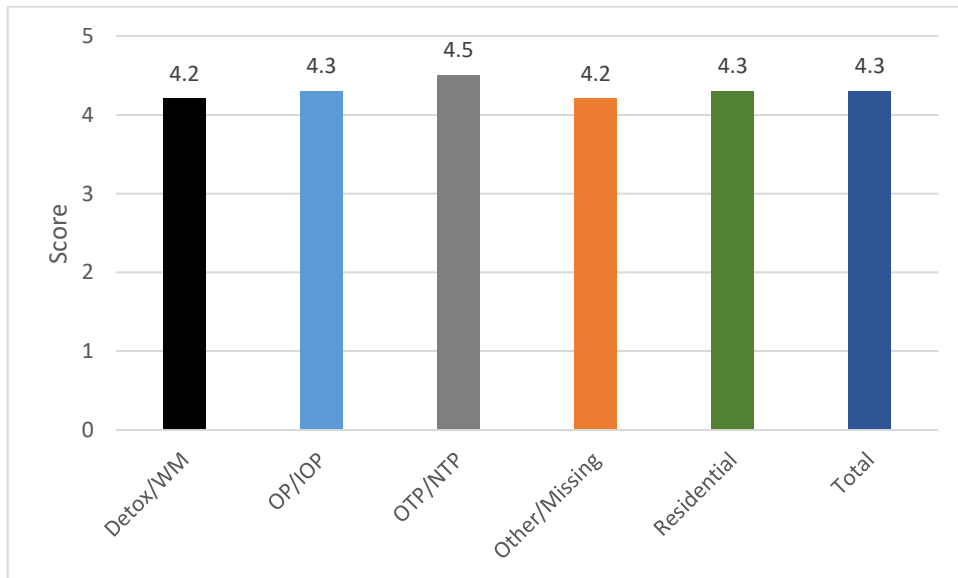
2023 Figure 1. Percent in agreement for each survey item by domain – Adults



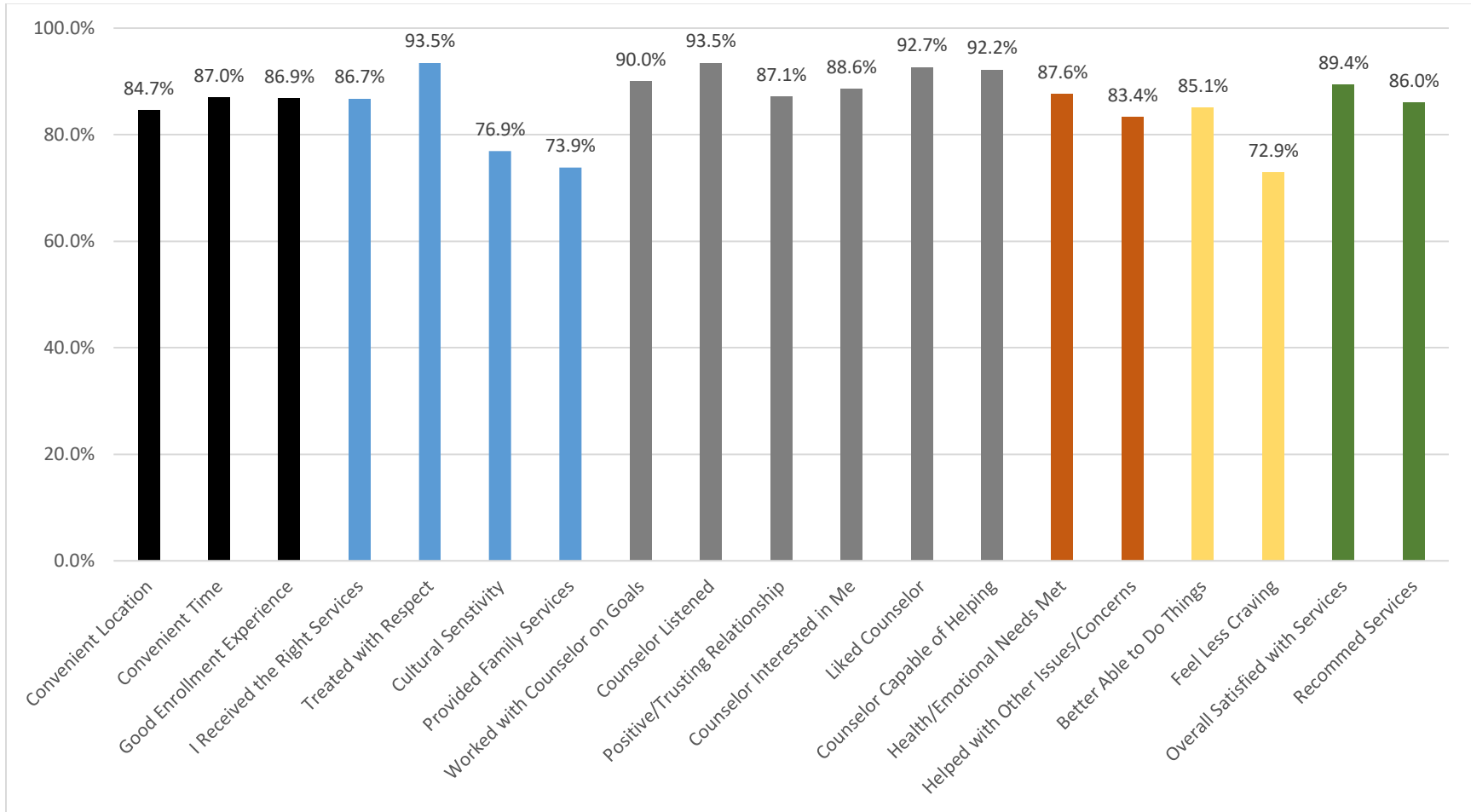
2023 Figure 2. Average Score for all Counties by treatment settings – Adults



2023 Figure 3. Average Score for all Counties by treatment settings – Youth



2023 Figure 4. Percent in agreement for each survey item by domain – Youth



Average Perceptions of Care/Satisfaction Score by Domain

Among adults, the overall average scores for each of the five domains were high. Quality and General Satisfaction domains yielded the highest scores (both 4.5), followed by Outcome and Access (both 4.4) and Care Coordination domain (4.3). Among youth, the average scores for all the domains were also high, and most were slightly higher than those of 2022 and 2021, except for some items, i.e. cultural sensitivity. Therapeutic Alliance had the highest average score (4.4), followed by three domains, Access, Care Coordination and General Satisfaction (all three 4.3), then Quality (4.2) and finally Outcome (4.1), also noted earlier as lower satisfaction regarding lessening cravings.

Average Perceptions of Care/Satisfaction Score by Treatment Setting, Domains, and Demographic Characteristics

Statewide, the highest average score for adults in OP/IOP settings was observed for the Quality and General Satisfaction domains (4.6 and 4.5, respectively). Meanwhile the lowest average score was for the Care Coordination domain (4.3). In the residential settings, the highest average score was for the General Satisfaction and Quality domains (4.3 and 4.3); however, the lowest average score was also for the Care Coordination domain (4.1). In NTP/OTP settings, the Quality and General Satisfaction domains yielded the highest average scores (both 4.5), and Outcome was close behind at 4.4, while Care Coordination domain had the lowest average score again (4.3). For WM settings, the General Satisfaction and Quality domains had the highest average score (both 4.4), and the lowest average score was for the Care Coordination domain (4.2). Although Quality and General Satisfaction domains received the highest scores across all the treatment settings among adults, Care Coordination received the lowest score across all treatment settings. This is aligned with earlier commentary regarding lower agreement of satisfaction scores for the three items of this domain: *Staff here work with my Physical Health care providers to support my wellness. Staff here work with my Mental Health care providers to support my wellness. Staff here helped me to connect with other services as needed (social services, housing, etc.)*

Among youth, Therapeutic Alliance had the highest average scores in residential settings and NTP/OTP (both 4.6) followed by OP/IOP (4.4). However, the Outcome domain showed the lowest score in OP/IOP and Access (both 4.1). The highest score across all treatment settings was General Satisfaction in WM (5.0). Nevertheless, it is important to note the low number of participation overall in WM and NTP/OTP.

Finally, a review of General Satisfaction scores among adults by demographic characteristics showed slightly lower satisfaction scores for nonbinary, and another gender identity as compared with males and females. By sexual orientation for adults, queer and another sexual orientation reported slightly lower satisfaction scores. There were no discernable differences by race/ethnicity and age categories for general satisfaction among adults. Youth scores on general satisfaction by demographic characteristics showed slightly lower scores for nonbinary, transgender from female to male, and another gender identity as compared with males and females. There were no discernable differences in general satisfaction scores by sexual orientation, race/ethnicity, and age categories among youth.

Receipt of Services Using Telehealth

Due to COVID-19 and the increased need to provide services via telehealth (telephone or video-conferencing platforms), the 2020 TPS added an item asking, “*How much of the services you received was by telehealth?*” The question has remained on the survey and, due to the continuation of telehealth and to better understand the utility of telehealth to consumers of services, an additional question was added in 2023 – “*How helpful were your telehealth visits compared to traditional in-person visits?*”

Among adults in 2023, 54.4% reported receiving at least some services by telehealth. The percentage of adults who received at least some telehealth was highest in NTP/OTP settings (39.9%), followed by OP/IOP at 35.8% and WM at 0.8%. No meaningful differences were found between White, Black, or Latinx clients (all ranging from 55.3-55.6%). AI/AN and Asian clients received it at a slightly higher rate (60.4% and 60.7%, respectively). Further investigation is needed to better understand these trends.

Among youth, half (50.1%) reported receiving at least some services by telehealth, a similar to 2022 (49.4%). Among youth, telehealth use was similar across residential (50.0%) and OP/IOP at (49.0%).

Telehealth continues to be an important mechanism for receiving services in this ongoing pandemic milieu as telehealth is still widely used by youth and adults across all race/ethnic groups; however, there may be regional differences in availability, use and preference. Therefore, this is something we will continue to monitor.

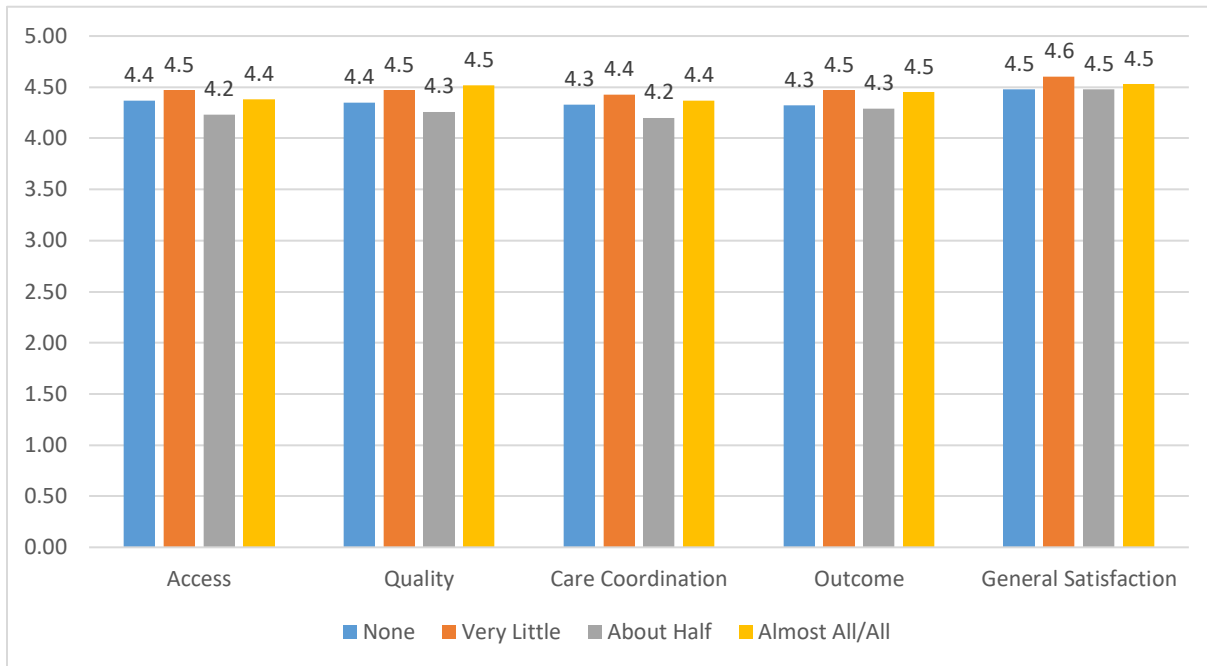
Telehealth and Perceptions of Care/Satisfaction by Domain

In 2023, adult respondents indicated very little variation in General Satisfaction whether they received “None” or more services via telehealth, and most scores were between 4.4 and 4.5. For other domains, adults continue to indicate less satisfaction for Access, Quality, Care Coordination, and Outcome domains, and most scores were between 4.2 and 4.3 when services were provided via telehealth. Still, there continues to be little variation whether services are exclusively provided by telehealth or not at all (See Fig. 5).

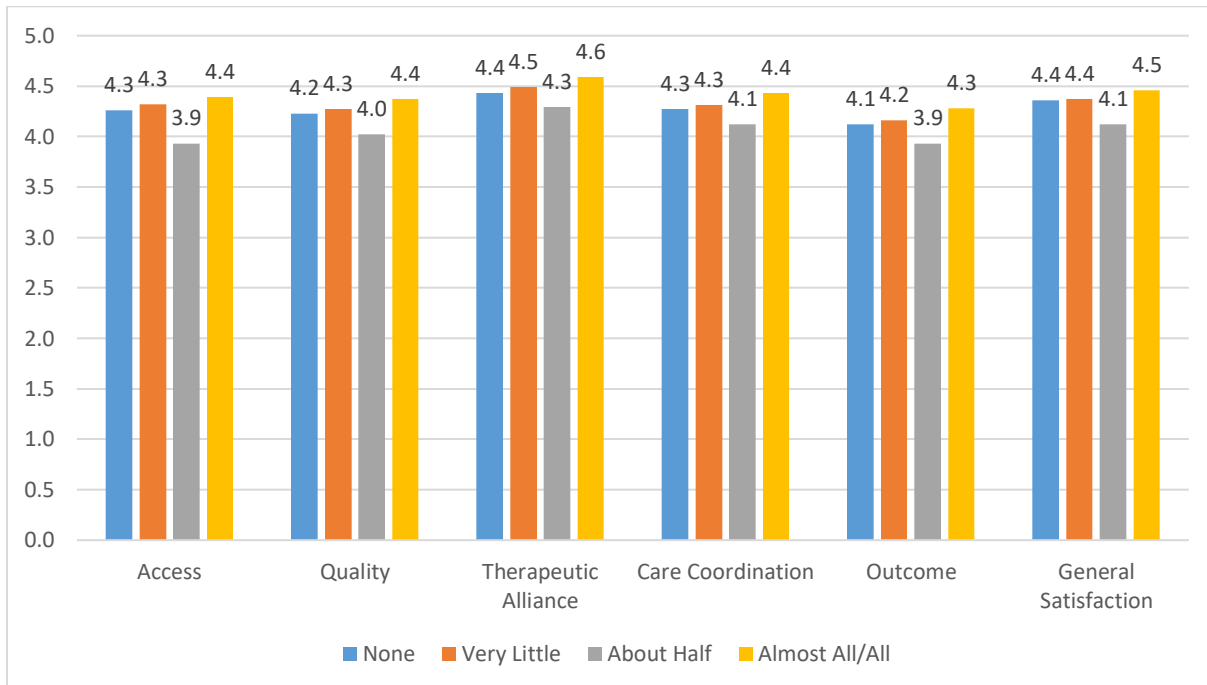
For youth respondents, there was more variability among the scores; the General Satisfaction domain among youth showed the slightly highest average score when “All” and “Almost All” of the services received were via telehealth (4.4), and yet on the other end of the spectrum, when “None” or “Very Little” services were provided via telehealth, scores were similar (4.3). The lowest scores were found in the “Access” and “Outcome” domains when youth received “About Half” of services via telehealth. (See Fig. 6).

Although there were no meaningful differences in perceptions of care/satisfaction between telehealth and in-person services for adults, youth scores indicate less satisfaction in certain domains even as telehealth use continues to be offered as a service delivery for them. These results suggest that the transition of services to telehealth has had mixed results and yet continues to be an important part of service delivery. It is not clear yet if we are seeing a transition from use of telehealth back to in-person services. Nevertheless, given the general satisfaction and perceived comfort level and engagement with counselors, providers should continue to offer telehealth to those adults and youth who prefer to seek it out.

2023 Fig. 5. Average Score by Degree of Telehealth Use and Satisfaction Domain - Adult



2023 Fig. 6. Average Score by Degree of Telehealth Use and Satisfaction Domain – Youth



APPENDIX:
Survey V10 and
Additional Tables and Figures

Treatment Perceptions Survey (Adult)

Print PDF as needed. 2023
Do not photocopy!

**County / Provider
Use Only**

CalOMS Provider ID (required)

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Program Reporting Unit (if required by your county):

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Treatment Setting (required): OP/IOP Residential OTP/NTP Detox/WM (standalone) Partial hospitalization

• Please answer these questions about your experience at this program to help improve services. Use "Not applicable" if the question is about something you have not experienced. Your answers are confidential and will not influence current or future services you receive.

• Please fill in bubbles completely

Correct: ●

Incorrect: ○ ⊗ ⊙

	Strongly Agree	Agree	I Am Neutral	Disagree	Strongly Disagree	Not Applicable
1. The location was convenient (public transportation, distance, parking, etc.).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Services were available when I needed them.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. I chose the treatment goals with my provider's help.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Staff gave me enough time in my treatment sessions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Staff treated me with respect.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Staff spoke to me in a way I understood.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Staff were sensitive to my cultural background (race/ethnicity, religion, language, etc.).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. I felt welcomed here.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. As a direct result of the services I am receiving, I am better able to do things that I want to do.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. As a direct result of the services I am receiving, I feel less craving for drugs and alcohol.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. Staff here work with my physical health care providers to support my wellness.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. Staff here work with my mental health care providers to support my wellness.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. Staff here helped me to connect with other services as needed (social services, housing, etc.).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. Overall, I am satisfied with the services I received.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15. I was able to get all the help/services that I needed.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16. I would recommend this agency to a friend or family member.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

17. Now thinking about the services you received, how much of it was by telehealth (by telephone or video-conferencing)?

None Very little About half Almost all All

18. How helpful were your telehealth visits compared to traditional in-person visits?

Much better Somewhat better About the same Somewhat worse Not applicable

19. Please let us know your comments. What was most helpful about this program? What would you change about this program?

Please do not write any information that may identify you. For example, DO NOT write your name or phone number.

NOW TELL US A LITTLE ABOUT YOURSELF

20. What is your gender (Please select all that apply)?

- Male
- Female
- Transgender: Female to Male
- Transgender: Male to Female
- Non-Binary (neither Male nor Female)
- Another Gender Identity

21. Do you think of yourself as (Please select all that apply):

- Straight/Heterosexual
- Gay or Lesbian
- Bisexual
- Queer
- Another sexual orientation
- Unknown

22. Are you of Mexican/Hispanic/Latinx descent?

- Yes No Unknown

23. Race/Ethnicity (Please select all that apply):

- American Indian/Alaska Native
- Asian
- Black/African-American
- Native Hawaiian/Other Pacific Islander
- White/Caucasian
- Another race
- Unknown

24. Age Range:

- 18-25 26-35 36-45
- 46-55 56-64 65+

42469



Thank you for taking the time to answer these questions!

Treatment Perceptions Survey (Youth)

Print PDF as needed. 2023

Do not photocopy!

County / Provider Use Only

CalOMS Provider ID (required)

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Program Reporting Unit (if required by your county):

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Treatment Setting (required): OP/IOP Residential OTP/NTP Detox/WM (standalone) Partial hospitalization

• Please answer these questions about your experience at this program to help improve services. Use “Not applicable” if the question is about something you have not experienced. Your answers are confidential and will not influence current or future services you receive.

• Please fill in bubbles completely

Correct: ●

Incorrect: ⊙ ⊗ ⊙

Strongly Agree
Agree
I Am Neutral
Disagree
Strongly Disagree
Not Applicable

1. The location of services was convenient for me.
2. Services were available at times that were convenient for me.
3. I had a good experience enrolling in treatment.
4. My counselor and I worked on treatment goals together.
5. I received services that were right for me.
6. Staff treated me with respect.
7. I feel my counselor took the time to listen to what I had to say.
8. I developed a positive, trusting relationship with my counselor.
9. Staff were sensitive to my cultural background (race/ethnicity, religion, language, etc.).
10. I feel my counselor was sincerely interested in me and understood me.
11. I liked my counselor here.
12. My counselor is capable of helping me.
13. Staff here make sure that my health and emotional health needs are being met (physical exams, depressed mood, etc.).
14. Staff here helped me with other issues and concerns I had related to legal/probation, family and educational systems.
15. My counselor provided necessary services for my family.
16. As a direct result of the services I am receiving, I am better able to do things that I want to do.
17. As a direct result of the services I am receiving, I feel less craving for drugs and alcohol.
18. Overall, I am satisfied with the services I received.
19. I would recommend the services to a friend who is in need of similar help.
20. Now thinking about the services you received, how much of it was by telehealth (by telephone or video-conferencing)?
 None Very little About half Almost all All
21. How helpful were your telehealth visits compared to traditional in-person visits?
 Much better Somewhat better About the same Somewhat worse Not applicable

22. Please let us know your comments. What was most helpful about this program? What would you change about this program?

Please do not write any information that may identify you. For example, DO NOT write your name or phone number.

NOW TELL US A LITTLE ABOUT YOURSELF

23. What is your gender (Please select all that apply)?
 Male
 Female
 Transgender: Female to Male
 Transgender: Male to Female
 Non-Binary (neither Male nor Female)
 Another Gender Identity
24. Do you think of yourself as (Please select all that apply):
 Straight/Heterosexual
 Gay or Lesbian
 Bisexual
 Queer
 Another sexual orientation
 Unknown
25. Are you of Mexican/Hispanic/Latinx descent?
 Yes No Unknown
26. Race/Ethnicity (Please select all that apply):
 American Indian/Alaska Native
 Asian
 Black/African-American
 Native Hawaiian/Other Pacific Islander
 White/Caucasian
 Another race
 Unknown
27. Age:

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Thank you for taking the time to answer these questions!

Table 1. Respondents to the Treatment Perception Survey by County-Adults and Youth

County Name	Adult	Adult Percent	Youth	Youth Percent	Total	Total percent
Alameda	559	3.2%	25	3.0%	584	3.2%
Contra Costa	560	3.2%	57	6.7%	617	3.4%
El Dorado	42	0.2%	0	0.0%	42	0.2%
Fresno	455	2.6%	189	22.3%	644	3.5%
Imperial	245	1.4%	14	1.7%	259	1.4%
Kern	117	0.7%	8	0.9%	125	0.7%
Los Angeles	4,969	28.7%	150	17.7%	5119	28.2%
Marin	161	0.9%	0	0.0%	161	0.9%
Mariposa	22	0.1%	0	0.0%	22	0.1%
Merced	256	1.5%	14	1.7%	270	1.5%
Monterey	170	1.0%	4	0.5%	174	1.0%
Napa	67	0.4%	14	1.7%	81	0.4%
Nevada	121	0.7%	0	0.0%	121	0.7%
Orange	760	4.4%	27	3.2%	787	4.3%
Placer	122	0.7%	9	1.1%	131	0.7%
Riverside	1,237	7.1%	45	5.3%	1282	7.1%
Sacramento	270	1.6%	9	1.1%	279	1.5%
San Benito	29	0.2%	0	0.0%	29	0.2%
San Bernardino	461	2.7%	14	1.7%	475	2.6%
San Diego	1,862	10.7%	89	10.5%	1951	10.7%
San Francisco	1,063	6.1%	5	0.6%	1068	5.9%
San Joaquin	523	3.0%	20	2.4%	543	3.0%
San Luis Obispo	176	1.0%	2	0.2%	178	1.0%
San Mateo	252	1.5%	8	0.9%	260	1.4%
Santa Barbara	466	2.7%	47	5.5%	513	2.8%
Santa Clara	339	2.0%	22	2.6%	361	2.0%
Santa Cruz	240	1.4%	25	3.0%	265	1.5%
Stanislaus	658	3.8%	19	2.2%	677	3.7%
Tulare	161	0.9%	15	1.8%	176	1.0%
Ventura	367	2.1%	11	1.3%	378	2.1%
Yolo	90	0.5%	0	0.0%	90	0.5%
PHC Regional Model	507	2.9%	5	0.6%	512	2.8%
Total	17,327	100.0%	847	100.0%	18,174	100.0%

Table 2. Survey Responses by Treatment Program – Adults

	N	Percent
Treatment Program*		
Outpatient/intensive outpatient	343	43.5%
Residential	249	31.6%
Narcotic/opioid treatment program	140	17.7%
Detoxification/Withdrawal management	28	3.6%
Partial hospitalization	1	0.1%
Missing***	28	3.6%
Total	769	100.0%
Number of respondents**		
Outpatient/intensive outpatient	7,260	41.9%
Residential	4,323	25.0%
Narcotic/Opioid treatment program	5,392	31.1%
Detoxification/Withdrawal management	207	1.2%
Partial hospitalization	5	0.0%
Missing***	140	0.8%
Total	17,327	100.0%

* In this report, a program is defined as a unit having a unique combination of CalOMS Provider ID and treatment setting and/or Program Reporting Unit ID (optional) as indicated on the survey forms or in the data file submitted to UCLA.

** Only includes survey forms when at least one of the 16 questions is answered. (Excluded forms: *N* = 627.)

*** Includes records where CalOMS Provider ID or treatment setting were missing in the paper or the online survey.

Table 3. Survey Respondents by Treatment Program – Youth

	N	Percent
Treatment Program*		
Outpatient/intensive outpatient	110	88.7%
Residential	8	6.5%
Detoxification/Withdrawal management	1	0.8%
OTP/NTP	2	1.6%
Missing***	3	2.4%
Total	101	100.0%
Number of respondents**		
Outpatient/intensive outpatient	790	93.3%
Residential	29	3.4%
Detoxification/Withdrawal management	1	0.1%
OTP/NTP	18	2.1%
Missing***	9	1.1%
Total	579	100.0%

* In this report, a program is defined as a unit having a unique combination of CalOMS Provider ID and treatment setting and/or Program Reporting Unit ID (optional) as indicated on the survey forms or in the data file submitted to UCLA.

** Only includes survey forms when at least one of the 19 questions is answered. (Excluded forms: *N* = 40.)

*** Includes records where CalOMS Provider ID or treatment setting were missing in the paper or the online survey.

Table 4. Demographic Characteristics - Adults (N=17,327)

Gender (Multiple responses allowed)	Number	Percent
Female	6,250	36.1%
Male	10,078	58.2%
Non-Binary	90	0.5%
Transgender: Female to Male	58	0.3%
Transgender: Male to Female	73	0.4%
Another Gender	67	0.4%
Decline to answer/missing	813	4.7%
Sexual Orientation (Multiple responses allowed)		
Heterosexual	13,957	80.6%
Gay	671	3.9%
Bisexual	959	5.5%
Queer	96	0.6%
Another	166	1.0%
Unknown	334	1.9%
Decline to answer/Missing	1,341	7.7%
Age group		
18-25	1,208	7.0%
26-35	5,315	30.7%
36-45	4,701	27.1%
46-55	2,532	14.6%
56-64	1,832	10.6%
65+	781	4.5%
Decline to answer/missing	958	5.5%
Race/ethnicity (Multiple responses allowed)		
American Indian/Alaska Native	1,059	6.1%
Asian	446	2.6%
Black/African American	2,175	12.6%
Latinx	6,690	38.6%
Native Hawaiian/Pacific Islander	318	1.8%
White	8,025	46.3%
Another	2,894	16.7%
Unknown	1,266	7.3%
Decline to answer/missing	1,475	8.5%
Surveys received by language		
English	16,695	96.4%
Spanish	625	3.6%
Farsi	2	0.0%
Armenian - East & West	2	0.0%
Chinese	1	0.0%
Korean	1	0.0%
Russian	1	0.0%

Table 5. Demographic Characteristics - Youth (N=847)

Gender (Multiple responses allowed)	Number	Percent
Female	341	40.3%
Male	449	53.0%
Non-Binary	3	0.4%
Transgender: Female to Male	6	0.7%
Transgender: Male to Female	4	0.5%
Another Gender	3	0.4%
Decline to answer/missing	49	5.8%
Sexual Orientation (Multiple responses allowed)		
Heterosexual	636	75.1%
Gay	22	2.6%
Bisexual	74	8.7%
Queer	8	0.9%
Another	21	2.5%
Unknown	32	3.8%
Decline to answer/Missing	70	8.3%
Age group		
12-13	70	8.3%
14	89	10.5%
15	191	22.6%
16	184	21.7%
17+	231	27.3%
Decline to answer/Missing	82	9.7%
Race/ethnicity (Multiple responses allowed)		100.0%
American Indian/Alaskan Native	62	7.3%
Asian	27	3.2%
Black/African American	91	10.7%
Latinx	633	74.7%
Native Hawaiian/Pacific Islander	14	1.7%
White	167	19.7%
Another	328	38.7%
Unknown	100	11.8%
Decline to answer/Missing	48	5.7%
Surveys received by language		
English	826	97.5%
Spanish	21	2.5%

*Includes EPSDT youth ages 18-20 who received services in the youth programs

Table 6. Average Score for General Satisfaction and Percent of Positive Scores by Treatment Setting – Adults

	Average Score* (Standard Deviation)	Percent of Respondents with Positive Score**
Outpatient/intensive outpatient	4.5 (0.6)	93.8%
Residential	4.3 (0.8)	86.4%
Narcotic/opioid treatment program	4.5 (0.6)	93.1%
Withdrawal management (standalone)	4.4 (0.7)	90.8%
Other/Missing	4.6 (0.6)	93.5%

*All 16 questions were used to calculate the average score (standard deviation, SD). Scores ranged from 1.0 to 5.0, with higher scores indicating greater satisfaction. Only clients who responded to all 16 questions were included (N=15,059).

**Overall positive rating was calculated using all 16 questions. Surveys with an average rating of 3.5 or higher were counted as having a POSITIVE rating. Only clients who responded to all 16 questions were included (N=15,059).

Table 7. Average Score for General Satisfaction and Percent of Positive Scores by Treatment Setting –Youth

	Average score* (Standard deviation)	Percent of respondents with positive score**
Outpatient/intensive outpatient	4.3 (0.7)	90.0%
Residential	4.5 (0.7)	92.9%
Detoxification/Withdrawal management (N=1)	5.0 (0.6)	100.0%
OTP/NTP	4.5 (0.6)	93.7%

*All 19 questions were used to calculate the average score (standard deviation, SD). Scores ranged from 1.0 to 5.0, with higher scores indicating greater satisfaction. Only clients who responded to all 19 questions were included (N=750).

**Overall positive rating was calculated using all 19 questions. Surveys with an average rating of 3.5 or higher were counted as having a POSITIVE rating. Only clients who responded to all 18 questions were included (N=750).

Table 8. Average TPS General Satisfaction Score by Gender, Race, and Age – Adult

	Average Score (Standard Deviation)
Gender Identity	
Female	4.5 (0.7)
Male	4.4 (0.7)
NonBinary	4.2 (1.0)
Transgender-Female to Male	4.5 (0.6)
Transgender-Male to Female	4.4 (0.7)
Another Gender	3.9 (1.0)
Decline to answer/Missing	4.3 (0.8)
Sexual Orientation	
Heterosexual	4.5 (0.7)
Gay	4.4(0.8)
Bisexual	4.4(0.8)
Queer	4.3(0.9)
Another	4.3(0.8)
Unknown	4.2(0.9)
Decline to answer/Missing	4.4(0.7)
Race/Ethnicity	
American Indian/Alaska Native	4.4 (0.7)
Asian	4.4 (0.7)
Black/African American	4.4 (0.7)
Latinx	4.5 (0.6)
White	4.5 (0.7)
Native Hawaiian/Pacific Islander	4.6 (0.6)
Another	4.5 (0.6)
Unknown	4.3 (0.8)
Decline to answer/missing	4.4(0.8)
Age	
18-25	4.4 (0.7)
26-35	4.5 (0.7)
36-45	4.5 (0.7)
46-55	4.5 (0.6)
56-64	4.4 (0.6)
65+	4.4 (0.6)
Decline to answer/missing	4.4 (0.8)

Table 9. Average TPS General Satisfaction Score by Gender, Race, and Age – Youth

	Average Score (Standard Deviation)
Gender	
Female	4.4 (0.7)
Male	4.3 (0.7)
Non Binary	4.0 (1.3)
Transgender-Female to Male	3.9 (1.4)
Transgender-Male to Female	4.4 (0.5)
Another Gender	3.8 (0.8)
Decline to answer/missing	4.3 (0.7)
Sexual Orientation	
Heterosexual	4.3 (0.7)
Gay	4.5 (0.8)
Bisexual	4.4 (0.6)
Queer	4.8 (0.4)
Another	4.3 (0.7)
Unknown	4.3 (0.7)
Decline to answer/missing	4.3 (0.7)
Race/Ethnicity	
American Indian/Alaska Native	4.3 (0.7)
Asian	4.5 (0.6)
Black/African American	4.3 (0.9)
Latinx	4.3 (0.7)
White	4.4 (0.7)
Native Hawaiian/Pacific Islander	4.4(0.7)
Another	4.4 (0.7)
Unknown	4.2 (0.7)
Decline to answer/missing	4.4 (0.7)
Age	
12-13	4.3 (0.6)
14	4.3 (0.7)
15	4.4 (0.7)
16	4.4 (0.6)
17	4.3 (0.8)
Decline to answer/missing	4.3 (0.8)

Table 10. Telehealth Usage by Treatment Modality – Adult

Telehealth	Outpatient/ Intensive Outpatient		Residential		Opioid/Narcotic Treatment Program		Detoxification/ Withdrawal Management		Partial Hospitalization		Unknown		Total	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
None	3,506	48.3%	2,034	47.1%	1,291	23.9%	108	52.2%	5	100.0%	52	37.1%	6,996	40.4%
Any telehealth	3,373	35.8%	2,132	22.6%	3,763	39.9%	80	0.8%	0	0	80	0.8%	9,428	54.4%
Very little	1810	24.9%	1,365	31.6%	1,620	30.0%	35	16.9%	0	0	43	30.7%	4,873	28.1%
About half	733	10.1%	424	9.8%	1,353	25.1%	20	9.7%	0	0	21	15.0%	2,551	14.7%
Almost all	480	6.6%	174	4.0%	525	9.7%	10	4.8%	0	0	10	7.1%	1,199	6.9%
All	350	4.8%	169	3.9%	265	4.9%	15	7.2%	0	0	6	4.3%	805	4.6%
Missing	381	5.2%	157	3.6%	338	6.3%	19	9.2%	0	0	8	5.7%	903	5.2%

Table 11. Telehealth Usage by Treatment Modality – Youth

Telehealth	Outpatient/ Intensive Outpatient		Residential		Opioid/Narcotic Treatment Program		Detoxification/ Withdrawal Management		Partial Hospitalization		Other		Total	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
None	337	42.7%	16	55.2%	1	5.6%	1	100.0%	0	0	6	66.7%	361	42.9%
Any telehealth	391	49.1	12	50.0	17	0	0	0	0	0	2	0.5%	422	50.1%
Very little	222	28.1%	9	31.0%	4	22.2%	0	0	0	0	1	11.1%	236	28.0%
About half	93	11.8%	2	6.9%	4	22.2%	0	0	0	0	1	11.1%	100	11.9%
Almost all	45	5.7%	0	0	5	27.8%	0	0	0	0	0	0	50	5.9%
All	31	3.9%	1	3.4%	4	22.2%	0	0	0	0	0	0	36	4.3%
Missing	58	7.3%	0	0	0	0	0	0	0	0	1	11.1%	59	7.0%

Table 12. Average score of five satisfaction domains by treatment setting – Adult

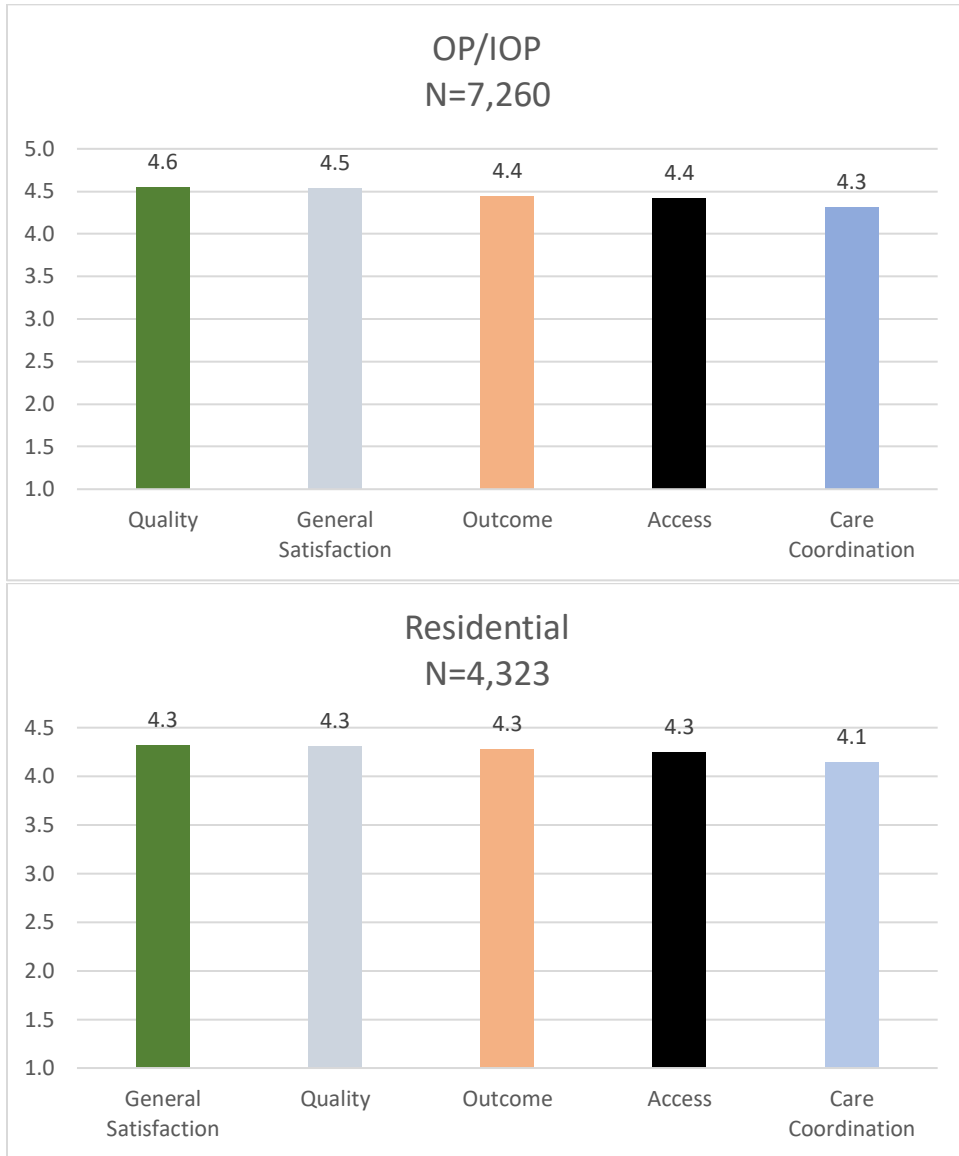
	Access	Quality	Care Coordination	Outcome	General Satisfaction
Outpatient/ Intensive Outpatient	4.4	4.6	4.3	4.4	4.5
Residential	4.3	4.3	4.1	4.3	4.3
Opioid/Narcotic Treatment Program	4.4	4.5	4.3	4.4	4.5
Detoxification/ Withdrawal Management	4.3	4.4	4.2	4.3	4.4
Partial hospitalization	4.8	4.8	4.9	4.9	4.9
Unknown	4.4	4.5	4.3	4.3	4.5

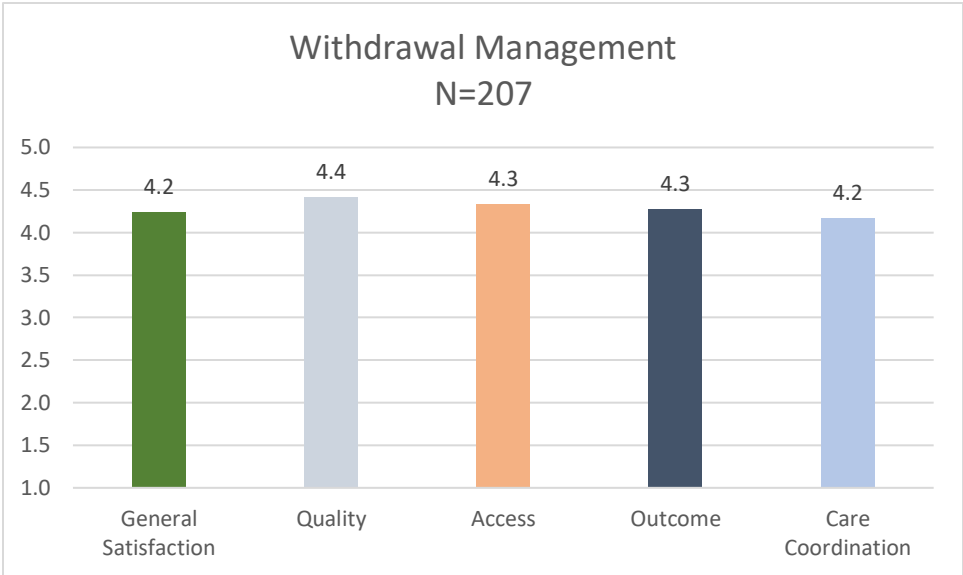
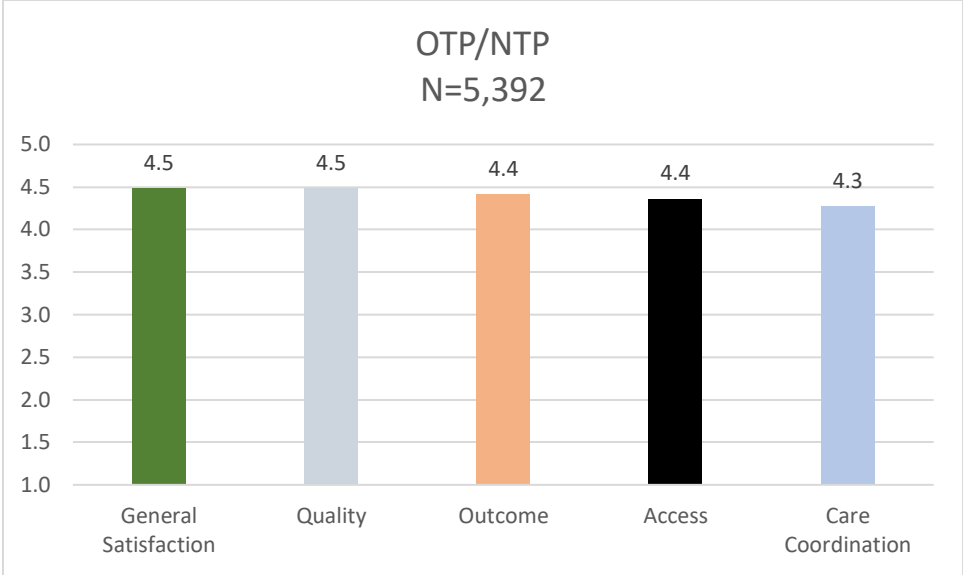
Table 13. Average score of six satisfaction domains by treatment setting – Youth

	Access	Quality	Therapeutic Alliance	Care Coordination	Outcome	General Satisfaction
Outpatient/ Intensive Outpatient	4.3	4.2	4.4	4.3	4.1	4.2
Residential	4.1	4.3	4.6	4.3	4.2	4.5
Opioid/Narcotic Treatment Program	4.5	4.5	4.6	4.5	4.5	4.5
Detoxification/ Withdrawal Management	4.0	4.0	4.0	4.0	5.0	5.0
Partial hospitalization	0	0	0	0	0	0
Other/Missing	4.0	4.1	4.3	4.4	4.3	4.6

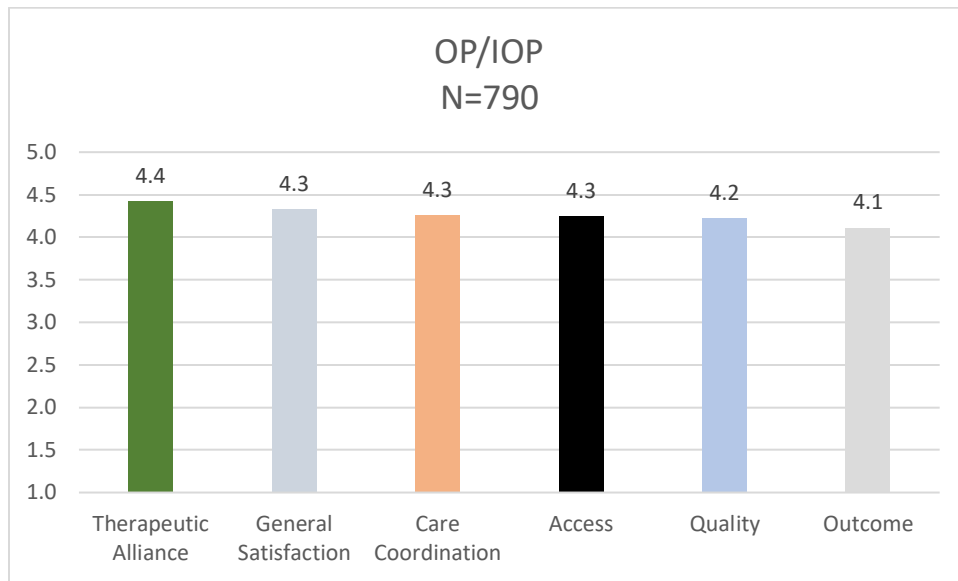
Average Scores of All Counties by Treatment Setting and Domain—Adults

(Highest to Lowest)





**Average Scores of All Counties for Outpatient* and Domain–Youth
(Highest to Lowest)**



*No youth surveys were returned for W/M and Residential data was not reported due to small *n* = 29