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# MHICM CONSUMER QUESTIONNAIRE

# OMB No. 2900-0770 Estimated Burden: 10 minutes

# Expiration Date: 08/31/2017

**The Paperwork Reduction Act of 1995:** This information is collected in accordance with section 3507 of the Paperwork Reduction Act of 1995. Accordingly, we may not conduct or sponsor and you are not required to respond to, a collection of information unless it displays a valid OMB number. We anticipate that the time expended by all individuals who complete this survey will average 10 minutes. This includes the time it will take to follow instructions, gather the necessary facts and respond to questions asked. Customer satisfaction is used to gauge customer perceptions of VA services as well as customer expectations and desires. The results of this telephone/mail survey will lead to improvements in the quality of service delivery by helping to achieve services. Participation in this survey is voluntary and failure to respond will have no impact on benefits to which you may be entitled.

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| MHICM CONSUMER QUESTIONNAIRE |

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| Questions | Response | Response | Response | Response | Response |
| 1. I am satisfied with the mental health services I receive from MHICM staff. | Strongly  Agree | Agree | No  Opinion | Disagree | Strongly  Disagree |
| 2. Staff and residents are sensitive to my cultural needs. | Strongly  Agree | Agree | No  Opinion | Disagree | Strongly  Disagree |
| 3. I am learning about my medications, their side effects, and how to take them by myself. | Strongly  Agree | Agree | No  Opinion | Disagree | Strongly  Disagree |
| 4. My case manager involves me in decisions about my care based on my needs, abilities,  Preferences. | Strongly  Agree | Agree | No  Opinion | Disagree | Strongly  Disagree |
| 5. People here encourage me to grow, change and strive towards recovery and healthy  life habits. | Strongly  Agree | Agree | No  Opinion | Disagree | Strongly  Disagree |
| 6. Most of the groups I attend are beneficial for my treatment goals. | Strongly  Agree | Agree | No  Opinion | Disagree | Strongly  Disagree |
| 7. My case manager assesses my safety by use of suicide risk assessment with each visit  and/or my safety crisis management plan. | Strongly  Agree | Agree | No  Opinion | Disagree | Strongly  Disagree |
| 8. I am better able to handle things when they go wrong. | Strongly  Agree | Agree | No  Opinion | Disagree | Strongly  Disagree |
| 9. I am better able to do things I want to do. | Strongly  Agree | Agree | No  Opinion | Disagree | Strongly  Disagree |
| 10. I got the services I needed. | Strongly  Agree | Agree | No  Opinion | Disagree | Strongly  Disagree |
| 12. I felt like a valued customer. | Strongly  Agree | Agree | No  Opinion | Disagree | Strongly  Disagree |
| 13. I trust the VA to fulfil our country’s commitment to Veterans. | Strongly  Agree | Agree | No  Opinion | Disagree | Strongly  Disagree |

Use this space for any concerns, feedback, or improvements MHICM could make. Thank you!