

1. ACR LME-Consumer/Family Satisfaction Survey

1. Please tell us which category best represents you:

- Adolescent Consumer
- Adult Consumer
- Parent/Guardian
- Other Family Member
- Other (please specify): _____

2. Please tell us about yourself (check all that apply):

- Male
- Female
- Alaskan Native
- Native American
- Asian
- African American
- Multiracial
- Caucasian
- Latin American
- Other Hispanic
- Active Military/Veterans
- Elderly
- Blind
- Hearing Impaired
- English Language
- Spanish Language
- Other Language (please specify): _____
- Other (please specify): _____

3. What county do you live in?

Mobile Crisis	€	€	€	€	€	€
Non-Medical Community Residential Treatment	€	€	€	€	€	€
Partial Hospitalization	€	€	€	€	€	€
Peer Support	€	€	€	€	€	€
Peer Support	€	€	€	€	€	€
Personal Assistance	€	€	€	€	€	€
Personal Care Services	€	€	€	€	€	€
Psychosocial Rehabilitation	€	€	€	€	€	€
Psychiatric/Medication Evaluation and Management	€	€	€	€	€	€
Residential Services	€	€	€	€	€	€
Residential Supports	€	€	€	€	€	€
Respite	€	€	€	€	€	€
Screening	€	€	€	€	€	€
Specialized Consultative Service	€	€	€	€	€	€
Specialized Equipment and Supplies	€	€	€	€	€	€
Supported Employment	€	€	€	€	€	€
Supported Employment Follow Along	€	€	€	€	€	€
Targeted Case Management	€	€	€	€	€	€
Therapy or Counseling	€	€	€	€	€	€
Vehicle Adaptations	€	€	€	€	€	€
Wellness Recovery	€	€	€	€	€	€

6. Please tell us about the availability of the services you receive:

	Available when needed	Available but inconvenient hours	Wait for services (1st appt. too long)	Service available but transportation problems	Service not available	N/A
12-Step Program	€	€	€	€	€	€
Assertive Community Treatment Team (ACTT)	€	€	€	€	€	€
Assessment	€	€	€	€	€	€
Augmentative Communication Devices	€	€	€	€	€	€
Clubhouse	€	€	€	€	€	€
Community Activities and Employment Transition	€	€	€	€	€	€
Community Based Inpatient Psychiatric Treatment	€	€	€	€	€	€
Community Rehabilitation	€	€	€	€	€	€
Community Support Team	€	€	€	€	€	€
Community Support	€	€	€	€	€	€
Comprehensive Outpatient Treatment	€	€	€	€	€	€
Crisis Services	€	€	€	€	€	€
Day Supports	€	€	€	€	€	€
DBT Groups	€	€	€	€	€	€
Detoxification	€	€	€	€	€	€
Developmental Therapy	€	€	€	€	€	€
Diagnostic Assessment	€	€	€	€	€	€
Facility Based Crisis Services	€	€	€	€	€	€
Halfway House	€	€	€	€	€	€
Home and Community Supports	€	€	€	€	€	€
Home Modifications	€	€	€	€	€	€
Individual Caregiver Training and Education	€	€	€	€	€	€
Inpatient Hospital Substance Abuse Treatment	€	€	€	€	€	€
Integrated Treatment for Multi Disorders	€	€	€	€	€	€
Intensive Outpatient	€	€	€	€	€	€
Mobile Crisis	€	€	€	€	€	€
Non-Medical Community Residential Treatment	€	€	€	€	€	€
Partial Hospitalization	€	€	€	€	€	€
Peer Support	€	€	€	€	€	€
Peer Support	€	€	€	€	€	€
Personal Assistance	€	€	€	€	€	€
Personal Care Services	€	€	€	€	€	€
Psychosocial Rehabilitation	€	€	€	€	€	€
Psychiatric/Medication Evaluation and Management	€	€	€	€	€	€

Residential Services	€	€	€	€	€	€
Residential Supports	€	€	€	€	€	€
Respite	€	€	€	€	€	€
Screening	€	€	€	€	€	€
Specialized Consultative Service	€	€	€	€	€	€
Specialized Equipment and Supplies	€	€	€	€	€	€
Supported Employment	€	€	€	€	€	€
Supported Employment Follow Along	€	€	€	€	€	€
Targeted Case Management	€	€	€	€	€	€
Therapy or Counseling	€	€	€	€	€	€
Vehicle Adaptations	€	€	€	€	€	€
Wellness Recovery	€	€	€	€	€	€

7. Are there services you need but, are not available in your area?

- Yes
- No
- Do not know

8. If yes, please describe what services you need that are not available:

9. In your opinion and experience, what are the most pressing housing issues for persons with disabilities? PLEASE SKIP THIS QUESTION IF YOU ARE NOT FAMILIAR WITH HOUSING NEEDS/ISSUES.

	ALWAYS	USUALLY	SOMETIMES	SELDOM	NEVER	DO NOT KNOW
Rental subsidies	€	€	€	€	€	€
Group Homes	€	€	€	€	€	€
Funding for deposits	€	€	€	€	€	€
Housing applications	€	€	€	€	€	€
Tenant rights/fair housing knowledge	€	€	€	€	€	€
Support services for individuals in housing	€	€	€	€	€	€
Rental readiness trainings for tenants (eviction prevention)	€	€	€	€	€	€
Affordable housing	€	€	€	€	€	€
Housing in safe neighborhoods(no drugs, violence,or crime)	€	€	€	€	€	€
Sober housing alternatives	€	€	€	€	€	€
Other (please specify): _____	€	€	€	€	€	€

10. In your opinion and experience, what are the most pressing employment related issues for persons with disabilities? PLEASE SKIP THIS QUESTION IF YOU ARE NOT FAMILIAR WITH EMPLOYMENT NEEDS/ISSUES.

	ALWAYS	USUALLY	SOMETIMES	SELDOM	NEVER	DO NOT KNOW
Sheltered workshop	€	€	€	€	€	€
Employment training	€	€	€	€	€	€
Assistance finding community employment	€	€	€	€	€	€
Ongoing support with community employment	€	€	€	€	€	€
Transitional support with community employment	€	€	€	€	€	€
Peer support with community employment	€	€	€	€	€	€
Peer transition support with community employment	€	€	€	€	€	€
Help with problems on the job	€	€	€	€	€	€
Community volunteer opportunities	€	€	€	€	€	€
Peer run employment	€	€	€	€	€	€
Peer owned business	€	€	€	€	€	€
Other (please specify): _____	€	€	€	€	€	€

11. In your opinion and experience, what are the most pressing transportation related issues for persons with disabilities? PLEASE SKIP THIS QUESTION IF YOU ARE NOT FAMILIAR WITH TRANSPORTATION NEEDS/ISSUES.

	ALWAYS	USUALLY	SOMETIMES	SELDOM	NEVER	DO NOT KNOW
Able to transport self	€	€	€	€	€	€
Public transportation at times/locations that are needed to access services	€	€	€	€	€	€
Public transportation vouchers	€	€	€	€	€	€
Family and other natural supports provide transportation	€	€	€	€	€	€
Agency staff provider transportation	€	€	€	€	€	€
Peer run transportation	€	€	€	€	€	€
Other (please specify): _____	€	€	€	€	€	€

12. In your opinion and experience, what are the most pressing barriers to getting the services you need:

	ALWAYS	USUALLY	SOMETIMES	SELDOM	NEVER	DO NOT KNOW
Transportation issues	€	€	€	€	€	€
Childcare needs	€	€	€	€	€	€
Housing issues	€	€	€	€	€	€
Insurance coverage issues	€	€	€	€	€	€
Stigma/Embarrassment/Fear	€	€	€	€	€	€
Legal issues	€	€	€	€	€	€
Immigration related issues	€	€	€	€	€	€
Belief that services will not be helpful	€	€	€	€	€	€
Financial issues	€	€	€	€	€	€
Medical issues	€	€	€	€	€	€
Unaware of services available	€	€	€	€	€	€
Unaware of how to access services	€	€	€	€	€	€

13. Please provide comments regarding the barriers identified above or others that were not listed:

14. Please tell us your experience and opinion about the following areas for the services you are currently receiving:

	Strongly Agree	Agree	Disagree	Strongly Disagree	Not Applicable
The staff is friendly, helpful, and respectful.	€	€	€	€	€
I believe my confidentiality is protected and I am comfortable discussing my needs.	€	€	€	€	€
Appointments are scheduled when needed.	€	€	€	€	€
My concerns, ideas, and suggestions are included in my services/treatment.	€	€	€	€	€
The hours of the program is open meets my needs.	€	€	€	€	€
The facility location is convenient to me.	€	€	€	€	€
I understand my rights and feel they are respected.	€	€	€	€	€
Staff providing my services have the skills and training to help me with my needs.	€	€	€	€	€
My progress is discussed with me regularly.	€	€	€	€	€
I participate in my treatment planning and know what goals I am working towards.	€	€	€	€	€
My questions are answered and I get all information that I need.	€	€	€	€	€

I know who to call in the event of a crisis or emergency situation.	€	€	€	€	€
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The facility is clean and easily accessible.	€	€	€	€	€
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15. Have you called the Alamanace Caswell Rockingham Local Management Entity within the last year for services?

	Agree
Yes, during business hours	jn
Yes, after hours	jn
NO	jn

16. If yes, please tell us about your experience in working with the Alamance Caswell Rockingham Local Management Entity:

	Strongly Agree	Agree	Disagree	Stronlgy Disagree	Not Applicable
The LME Staff were friendly, helpful, and respectful.	€	€	€	€	€
I felt my confidentiality was protected and was comfortable discussing my needs.	€	€	€	€	€
An appointment was scheduled when I needed it.	€	€	€	€	€
My concerns and suggestions were considered in connecting me to the services I needed.	€	€	€	€	€
The staff were knowledgeable and able to help me.	€	€	€	€	€
I was offered a choice of providers to receive services from.	€	€	€	€	€
My questions were answered and I received all the information I needed.	€	€	€	€	€
An appointment was scheduled at the time I called.	€	€	€	€	€