



State of California—Health and Human Services Agency  
Department of Health Care Services



EDMUND G. BROWN JR.  
GOVERNOR

July 18, 2013

MHSD INFORMATION NOTICE NO.: 13- 14

TO: LOCAL MENTAL HEALTH DIRECTORS  
LOCAL MENTAL HEALTH PROGRAM CHIEFS  
LOCAL MENTAL HEALTH ADMINISTRATORS  
COUNTY ADMINISTRATIVE OFFICERS  
CHAIRPERSONS, LOCAL MENTAL HEALTH BOARDS

SUBJECT: DEPARTMENT OF HEALTH CARE SERVICES CONSUMER  
PERCEPTION SURVEY DATA COLLECTION

REFERENCE: IMPLEMENTATION OF THE CONSUMER PERCEPTION SURVEY,  
WELFARE AND INSTITUTIONS CODE SECTION 5898 AND  
CALIFORNIA CODE OF REGULATIONS, TITLE 9,  
SECTION 3530.40

This Department of Health Care Services (DHCS) Information Notice provides guidance to Counties<sup>1</sup> for the submission of data for the Consumer Perception Survey (CPS) Data Collection requirement. The goal of this survey is to collect data for reporting on the federally determined National Outcome Measures (NOMs). Reporting on these NOMs are required by the Substance Abuse Mental Health Services Administration (SAMHSA), and receipt of federal Community Mental Health Services Block Grant (MHBG) funding is contingent upon the submission of this data. Counties are required to conduct the survey and submit data per California Code of Regulations, Title 9, § 3530.40.

The survey period will take place from **August 26 (Monday) through August 30 (Friday), 2013**. DHCS has contracted with the California Institute for Mental Health (CiMH) to scan and process the submitted forms and aggregate the data.

Once the survey forms have been completed and collected, they must be submitted to CiMH no later than **September 13, 2013**. Persons at the county/local level responsible for data collection and reporting are asked to do the following:

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<sup>1</sup> "County" means the County Mental Health Department, two or more County Mental Health Departments acting jointly, and/or city-operated programs receiving funds per Welfare and Institutions Code Section 5701.5. (Cal Code Regs., tit. 9, § 3200.090).

1. Click on the direct link at <http://www.cimh.org/Services/MHSA/Consumer-Perception-Survey.aspx> to download the data collection materials, including instructions and each of the CPS forms. Forms are available for Adults, Older Adults, Youth, and Family/Parents of Youth. Adult and Older Adult forms are available with or without *Quality of Life survey items*, and counties may choose to use either type of form.
2. Conduct the survey during the collection period specified above.
3. Please mail the completed surveys no later than **September 13, 2013**, to the following address:

California Institute for Mental Health  
2125 19th Street, 2nd Floor,  
Sacramento, CA 95818  
Attention: Stephanie Oprendeck, Ph.D.

Please note the forms must be printed directly from the PDF documents on the CiMH website; photocopied forms will not be accepted as they will not correctly scan. Other survey types or forms that have been modified in any way by the counties to collect this data will also not be accepted, as they cannot be aggregated with the standard forms.

For counties who have Teleform software and wish to print forms locally from their Teleform Designer software, Teleform form definition files (Version 8.2 and Version 10.6) are also available on the CiMH website. Counties who choose to scan/enter data locally must aggregate their data according to the data dictionaries available on the DHCS Information Technology Web Services (ITWS) website at <https://itws.dhcs.ca.gov/>. Resulting data files should be uploaded to county DHCS ITWS folders no later than **5:00 pm on Friday, October 18, 2013**. Data files received after that time cannot be utilized in statewide reporting. Please notify one of the CiMH staff below if your county plans to upload data files to the ITWS.

Counties will be able to retrieve electronic data files of their survey submissions by logging onto the DHCS ITWS website. The data will be posted in county-specific folders for download.

If you have any questions regarding the CPS Data Collection process, please contact the following staff at CiMH:

Candice Medina Program Support Specialist <a href="mailto:cmedina@cimh.org">cmedina@cimh.org</a> (916) 556-3480 ext. 160	Stephanie Oprendeck, Ph.D. Program Manager <a href="mailto:soprendeck@cimh.org">soprendeck@cimh.org</a> (916) 284-8146
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Sincerely,

Original signed by

Brenda Grealish, Chief  
Mental Health Services Division