



**YES-CMO**

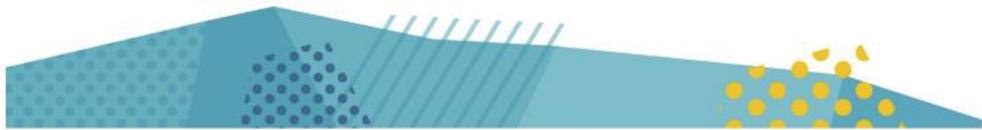


Your Experience of Service -  
Community Managed Organisations

JUNE 2021

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# Pilot Project Report





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Participant Members:

Aftercare  
Being  
Flourish  
Grand Pacific Health  
ICLA  
Mission Australia

Neami  
New Horizons  
OneDoor  
Open Minds  
Parramatta Mission  
Wellways



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# YES - CMO: Your Experience of Service - Community Managed Organisations

The **Your Experience of Service - Community Managed Organisations (YES-CMO) Pilot Project** is a joint initiative between NSW Health and the Mental Health Coordinating Council (MHCC). The aim was to collect feedback from consumers about their experience of community managed mental health services. This project demonstrates the commitment of the NSW Ministry of Health and Community Managed Organisations (CMOs) to working in partnership with consumers to improve services.

## Background

Over the last decade a suite of national consumer and carer experience tools have been developed for Australian mental health services. The Your Experience of Service (YES) questionnaire was originally developed for public specialist mental health services, was co-designed, and named in partnership with consumers and is based on the recovery principles of the Australian National Standards for Mental Health Services (2010).

YES was developed and tested between 2011 and 2013 through extensive national consultation and was released to NSW public mental health services in 2015. In 2017, a CMO version was made available for use in the CMO sector. This version included some wording changes and the removal of questions in order to ensure it was suitable to use in CMOs. The survey is anonymous, and information collected cannot be used to identify individuals.

For further information about the development of the surveys click [here](#)

## The YES-CMO Pilot in NSW

In 2018, NSW Health, the Mental Health Coordinating Council (MHCC) and Being, the NSW peak organisation for people with a lived experience of mental health issues, partnered to pilot the survey with interested CMOs. The YES-CMO Working Group was established to support the pilot with representatives from participating CMOs, MHCC, Being, Mental Health Carers NSW and the NSW Ministry of Health (InforMH).

CMO services were invited to participate in the if those services:

- provided specialist mental health support or care
- were funded by the NSW Ministry of Health (either directly or via Local Health Districts)

## Development of the YES-CMO survey in NSW

The NSW pilot included a number of small changes to the version of the survey used in public specialist services (YES):

- Addition of a single question that asks people how likely they would be to recommend the service to family or friends. This allows the calculation of a net promoter score (NPS) which is a measure often used in assessing consumer experience or loyalty in commercial settings or government agencies
- Additional questions to make the survey more inclusive. Response options for gender identity were expanded to include non-binary/gender fluid and different identity, with an option to provide additional information using free text. An additional question was also added which asks people about their sexuality. The addition of these questions will further help to identify if different groups of people have a different experience of service.

## The YES-CMO pilot process

A process was established to support the use of the survey. The working group oversaw the development of supporting resources and structures to be used throughout the pilot.

Throughout the pilot, it was important that CMO services were not identifiable to the NSW Ministry of Health. To achieve this, the MHCC provided each team with an individual code. This code allowed feedback to be linked to the specific team without identifying the team name or CMO. The code was stamped or handwritten on the survey.

- [Resources](#)

An online ordering platform was built to enable CMOs to order YES-CMO resources as required. As new CMOs joined the pilot they were provided with a username and password to access the platform. The following resources were made available for order:

- Survey artwork and reply-paid envelopes
- Brochure
- Poster
- Service guide (available digitally)

- [Offering the survey](#)

YES-CMO was offered to consumers aged 18 years and above. However, CMOs could choose to offer the survey to younger consumers if they determined it was appropriate.

YES-CMO was offered when a consumer left a service, or routinely (e.g. every quarter) for consumers engaged with services for a longer period of time. The survey was not mandatory, and consumers could choose whether to complete it or not. Staff could assist consumers to complete the survey if needed.

- [Scanning and data collection](#)

Once complete, surveys were placed in a reply-paid envelope and posted to a PO box. Each week the PO box was emptied by a scanning company who scanned each survey and extracted the data. Once per month the data was sent to the NSW Ministry of Health and stored in a purpose-built database.

- [Analysis and reporting](#)

Quarterly reports were available to each team which returned surveys in the period. These reports included the average rating of each question and how this compared to other CMOs participating in the pilot. A separate word document was provided with any responses to the free text questions. The NSW Ministry of Health provided these reports to the MHCC who then used the service codes to distribute them to the relevant CMOs.

The following sections explore the feedback received from consumers and CMOs throughout the pilot.

## Findings from the data analysis

### How many YES-CMO surveys were completed?

#### Across 10 CMOs, 46 teams participated in the pilot

YES-CMO was made available in NSW from October 2019. From October 2019 - December 2020 1,189 surveys were returned from 46 teams. The largest number of returns were in the first quarter of the pilot (380 surveys). YES-CMO was offered on a continuous basis to provide all consumers with an opportunity to give feedback about their experience.

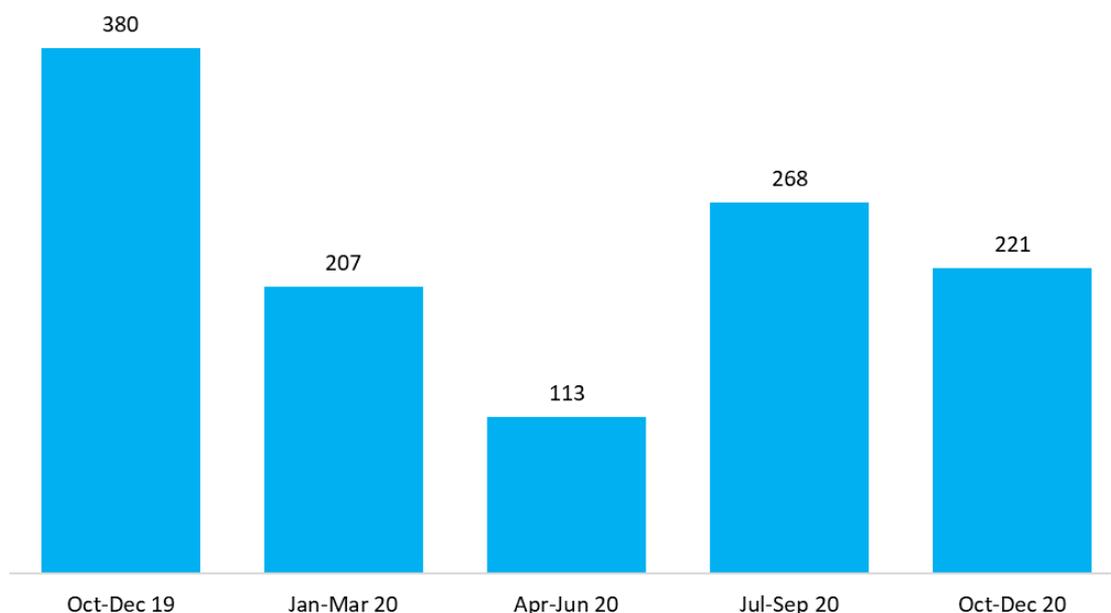
For services to be able to use the feedback for quality improvement, the service must be correctly identified on the survey. 100 surveys did not include a service code and therefore could not be linked to a specific service.

#### COVID-19 impacted how consumer feedback was collected

Services have made many adjustments to their usual care and support during the COVID-19 pandemic. Many services provided a much greater proportion of care by telephone or video throughout this time. Because YES-CMO is currently only available on paper, YES-CMO became less accessible to consumers and there was a drop in the number of surveys completed from April-June 2020.

**My experience would have been better if...**  
"I had more input into the service and could share my thoughts"

The number of YES-CMO surveys returned each quarter



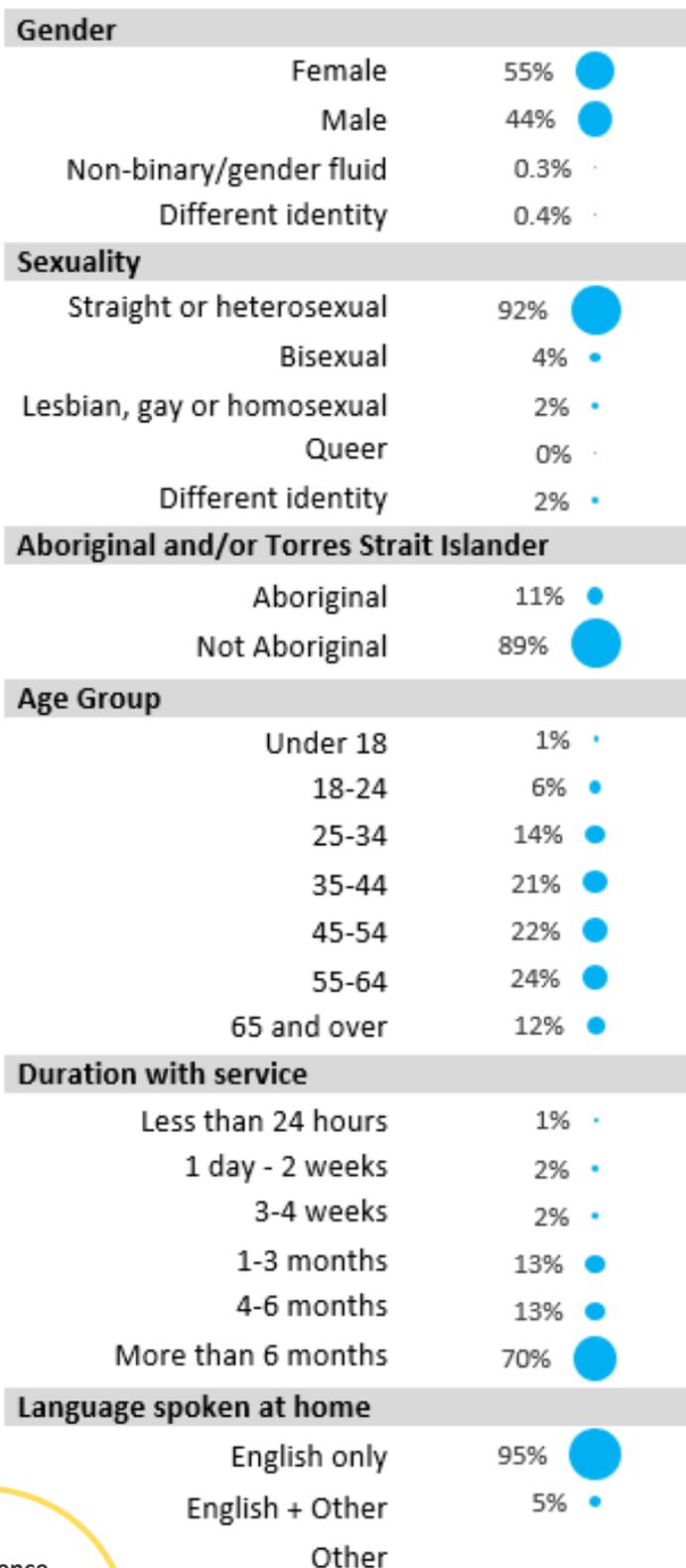
## Which consumers completed a YES-CMO survey?

Before looking at a person's experience, it is important to know which groups of consumers are completing a YES-CMO. This will tell us whether the results are representative of as many consumers as possible, and whether there are some groups of consumers whose views are not being heard. The graph below shows the proportion of YES-CMO returns from different groups.

### A diverse range of consumers completed YES-CMO during the pilot

Around 11% of YES-CMO surveys were completed by people of Aboriginal and/or Torres Strait Islander background. While we do not have access to the number of Aboriginal people accessing CMO services, this figure is similar to that reported in public community mental health services. People across a range of age groups completed the survey however, less surveys were returned by younger consumers. Most consumers (70%) reported that they were engaged with the service for more than 6 months. Less than 1% of people identified their gender as non-binary/gender fluid or different identity and around 8% listed their sexuality as bisexual, lesbian, gay, homosexual, queer or different identity. Data from services is required to understand whether the surveys returned are representative of the consumers accessing services.

### Proportion of YES-CMO returns from different groups



**The best things about this service were...**

"There is always someone to talk to"

**My experience would have been better if...**

"I had known about this service earlier"

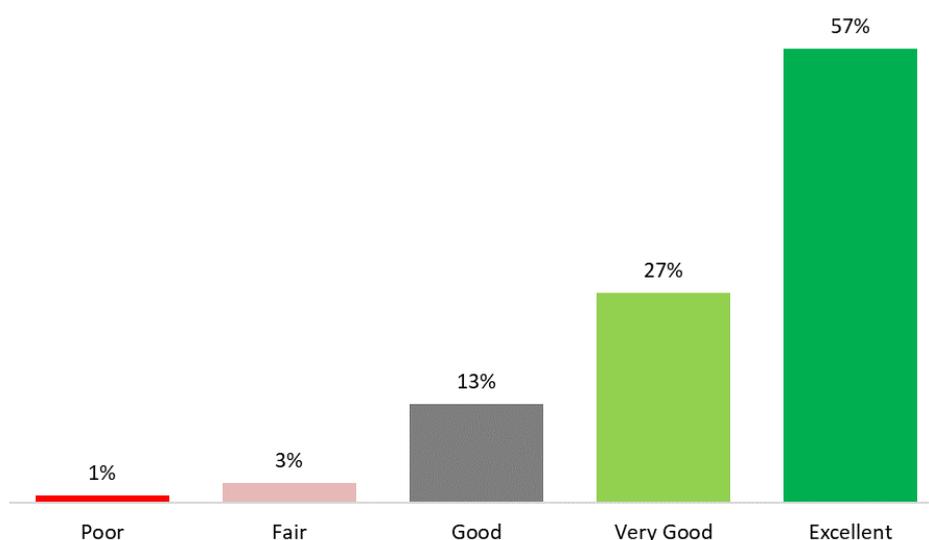
## What did consumers say about their experience of CMO's?

### Most people reported a positive experience of care

The YES-CMO provides two ways of summarising people's overall experience - a single summary question (Q28) or an overall experience index. The overall experience index combines the scores of questions 1-23. This ensures that different areas of experience are included in the overall score.

Using the overall experience index, 89 per cent of people reported an excellent or very good experience. Using question 28, around 85 per cent rated their experience as excellent (57%) or very good (27%).

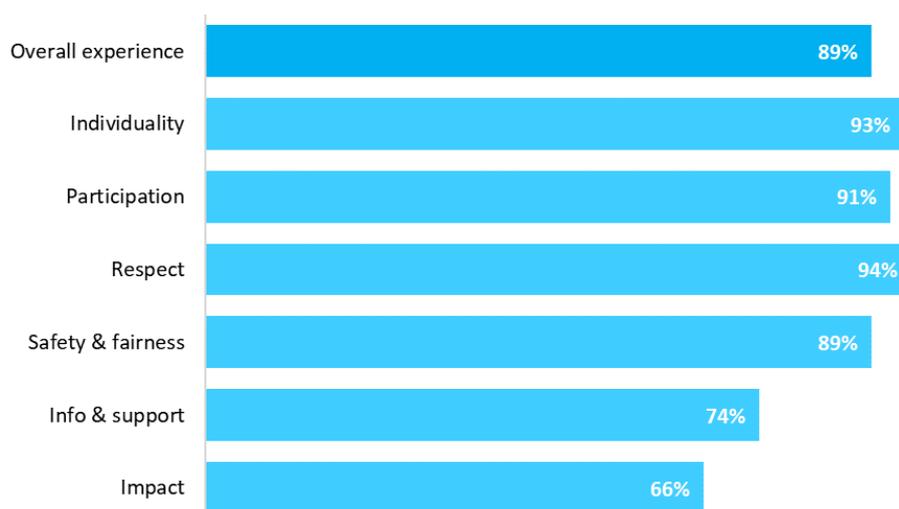
### Q28. Overall, how would you rate your experience with this service in the last 3 months?



### YES-CMO questions are grouped into six domains

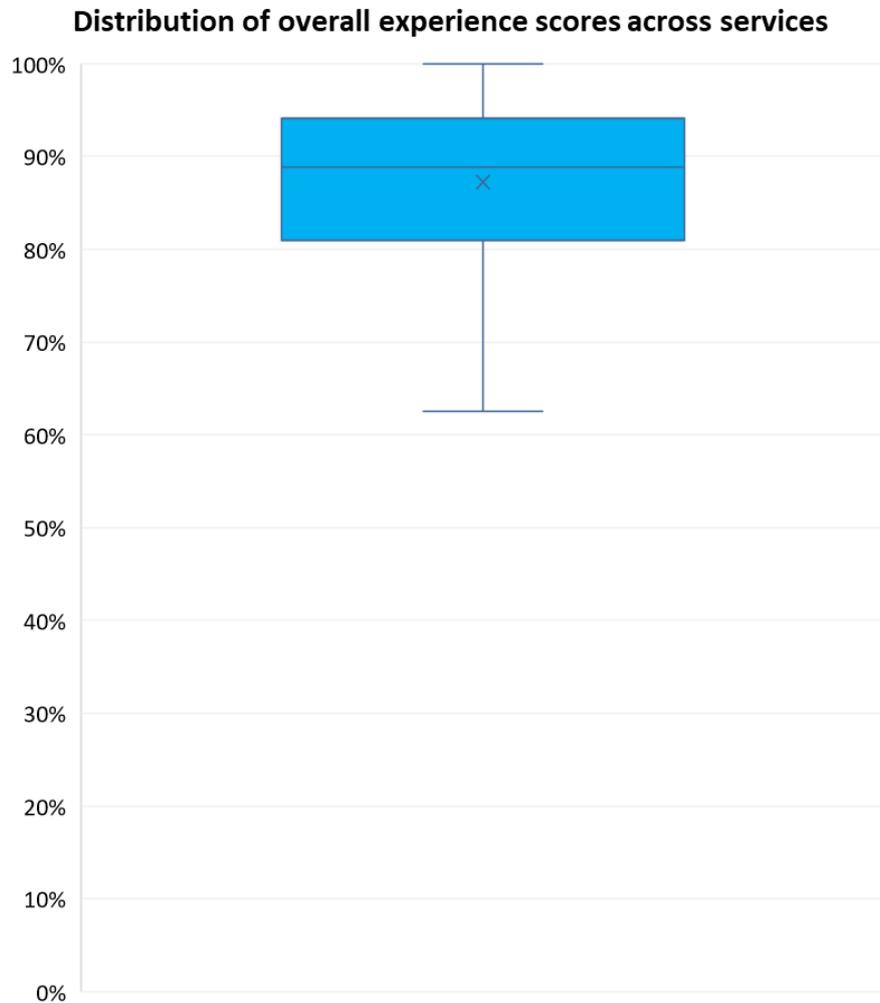
The most positive experiences were reported for questions related to respect, individuality, participation and safety and fairness. Fewer people rated questions related to information and support and impact as excellent or very good.

### Per cent Excellent or Very good



## Overall experience was varied across services

We compared average scores for 34 teams with 10 or more valid CMO-YES returns. The per cent of consumers rating their overall experience as excellent or very good, using the overall experience index ranged from 63% to 100%. Most services fell between 81% and 94%.



**The best things about this service were...**

“It was a great environment where people work together as a team and don’t discriminate”

**My experience would have been better if...**

“There were more activities”

## Which groups of consumers reported a different experience?

The following graph shows the percent of consumers reporting an excellent or very good overall experience using the experience index. Testing of significant differences between groups was conducted using 95% confidence intervals which were calculated using the Wald formula for proportions. There were no statistically significant differences across groups. Whether a difference is significant is influenced by the average score and the number of responses. While some groups may appear to have a lower score, the difference may not be significant due to a small number of returns.

### No groups reported a significantly different experience

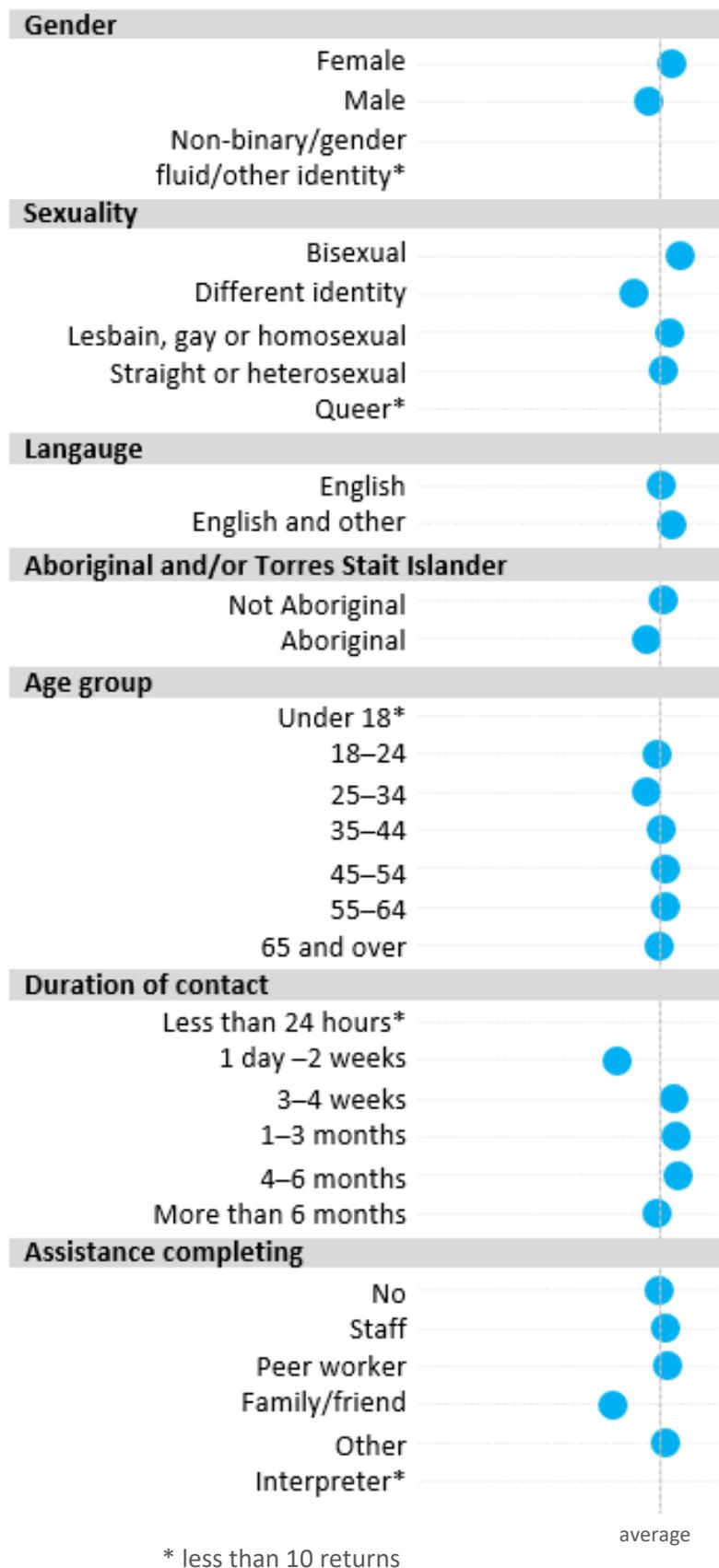
Overall, most groups of consumers accessing CMO services reported a similar overall experience.

People who had contact with the service between 1 day–2 weeks, those assisted by family/friends to complete the survey and those who identified their sexuality as “Different identity”, rated their overall experience as less positive. Please note these were not statistically significant differences.

A breakdown showing the per cent of consumers reporting an excellent or very good experience in each group is available in Appendix 4 – Technical summary.

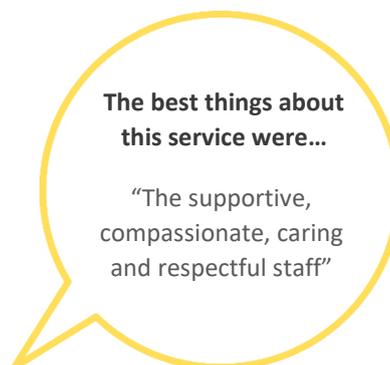
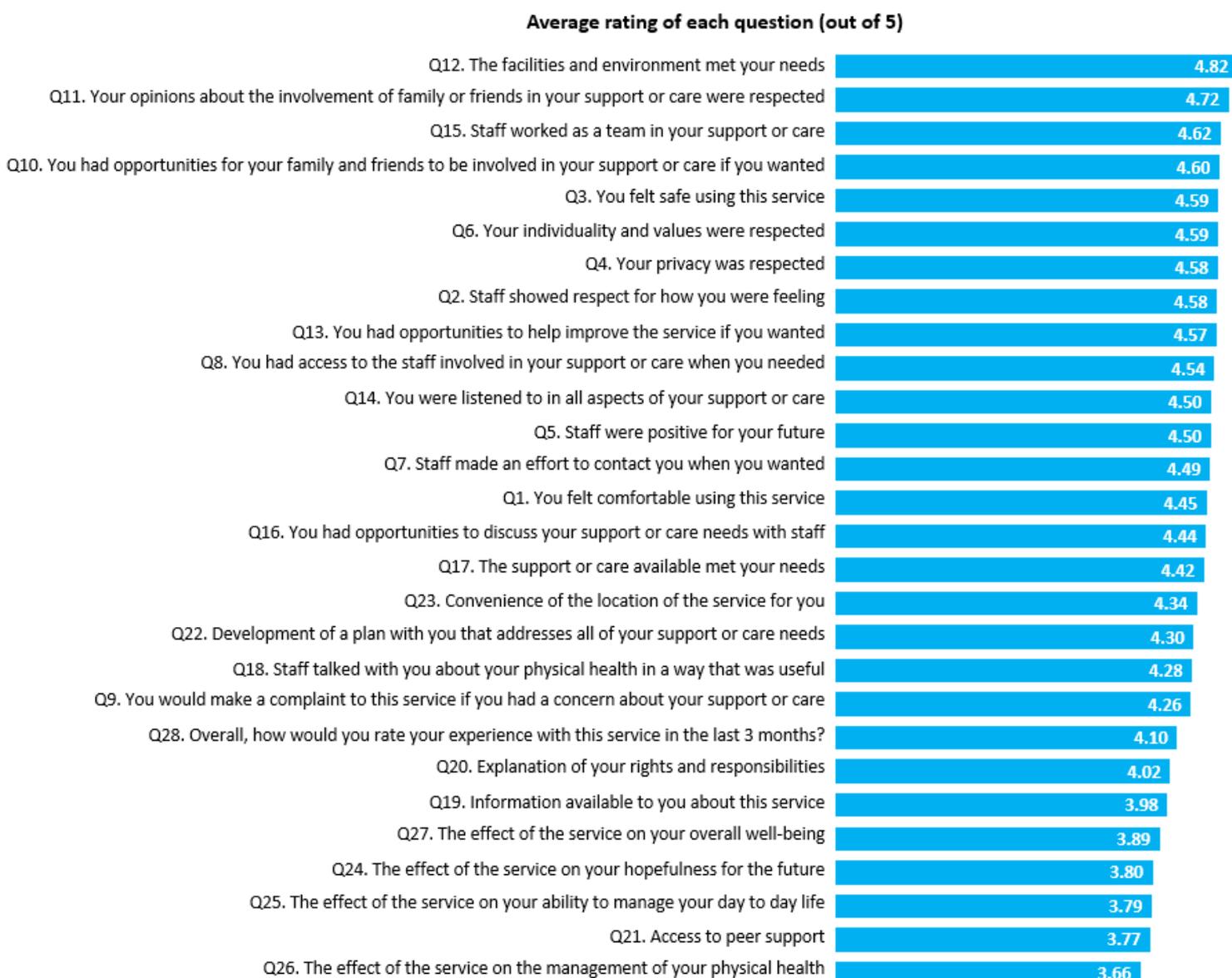


## The overall experience of different groups



## How were individual questions rated?

The individual question ratings provide more information about what CMOs are doing well and what could be improved. The following graph shows the average question ratings from highest to lowest.

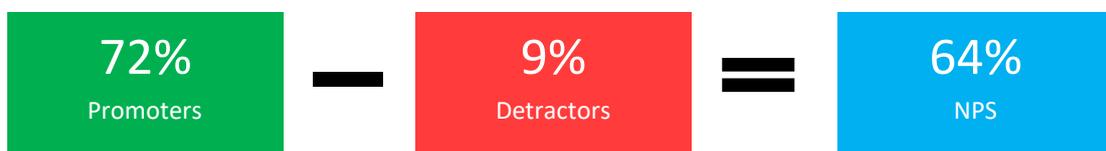


## Net promoter score

The YES-CMO working group added a question to the survey to allow calculation of a net promoter score (NPS). This question was developed in business settings to measure customer loyalty. The NPS is calculated from a single question where people rate on a scale of 0-10 how likely they would be to recommend the service to family or friends. In marketing, they use the terms 'Promoters', 'Passives' and 'Detractors' to describe the three types of ratings.

- Scores 9–10 represent people who are likely to recommend the service
- Scores 7–8 represent people who are satisfied but unlikely to recommend the service
- Scores 0–6 represent people who are unsatisfied and unlikely to recommend the service

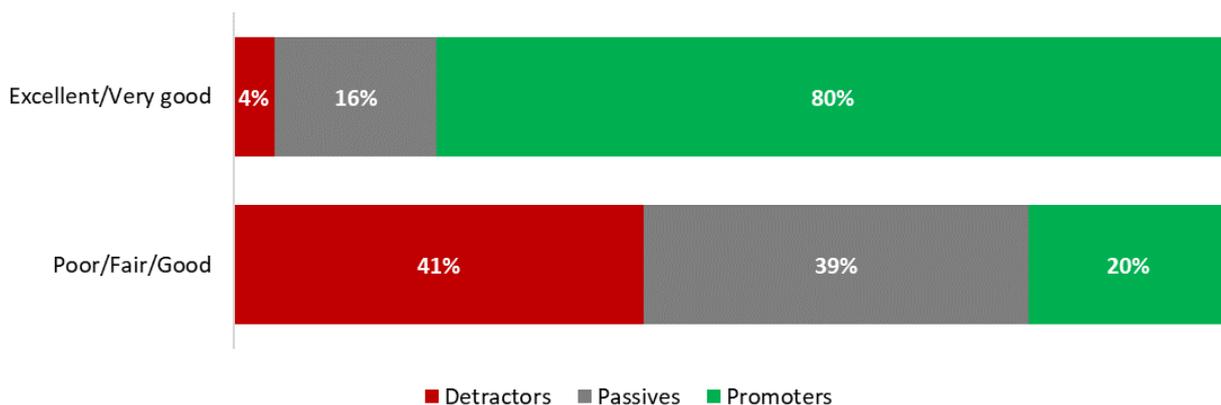
To calculate the NPS, the percentage of 'Detractors' (scores 0-6) are subtracted from the percentage of 'Promoters' (scores 9-10).



### People with an excellent or very good overall experience were more likely to recommend services

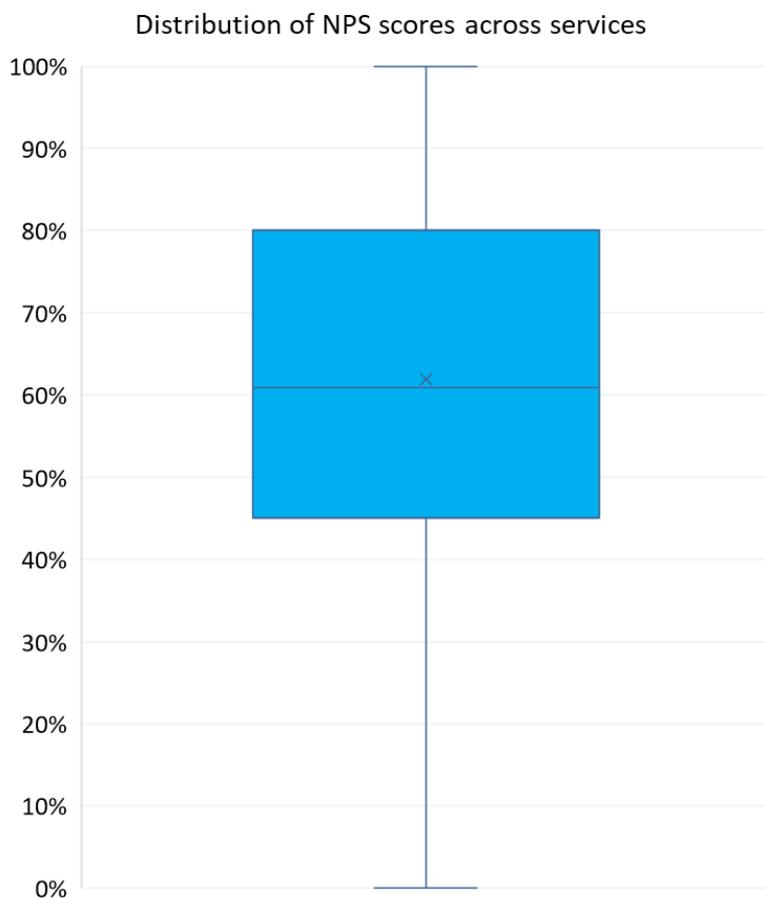
When people rated their overall experience as excellent or very good, they were more likely to recommend the service to others (NPS 76%). The NPS was much lower for people whose overall experience was rated as poor, fair or good (NPS -21%).

#### Overall experience and the net promoter score



### NPS scores varied across services

Scores ranged the entire span with some teams receiving a 0% rating and others receiving 100%. Most services NPS scores fell between 55% and 80%.



**The best things about this service were...**  
“Flexibility of the service to meet my needs”

### How does CMO feedback compare to public community mental health services

#### Experience was rated more positively in CMOs

There were 1,189 YES-CMO surveys as compared with 7,855 YES surveys from public community mental health services in the same period. The per cent of consumers rating overall experience as excellent or very good was higher in CMOs (89%) compared with responses to the public YES survey offered in community mental health services (80%).

Nevertheless, it is important to interpret this with caution, because of the number of respondents who completed the survey, as well as the possible difference in mix of consumers or types of services. For example, in public community mental health services, consumers may be treated involuntarily, and this group typically report a less positive experience.

## Consumer experience of CMOs during COVID-19

In July 2020 the working group decided to add four COVID-19 specific questions to the survey to understand the potential impacts of COVID-19 on a consumer's experience of service. These questions were added as a separate A4 sheet to be offered temporarily alongside the YES-CMO survey. From August 2020 to March 2021 there were 68 responses to these questions.

- **The shift to telehealth was reflected in the responses**

Approximately 93% of people reported that some or all their care was provided by phone or online. Only 7% of people reported only face to face contact with the service.

- **More than one-third of people reported less contact with services during COVID-19**

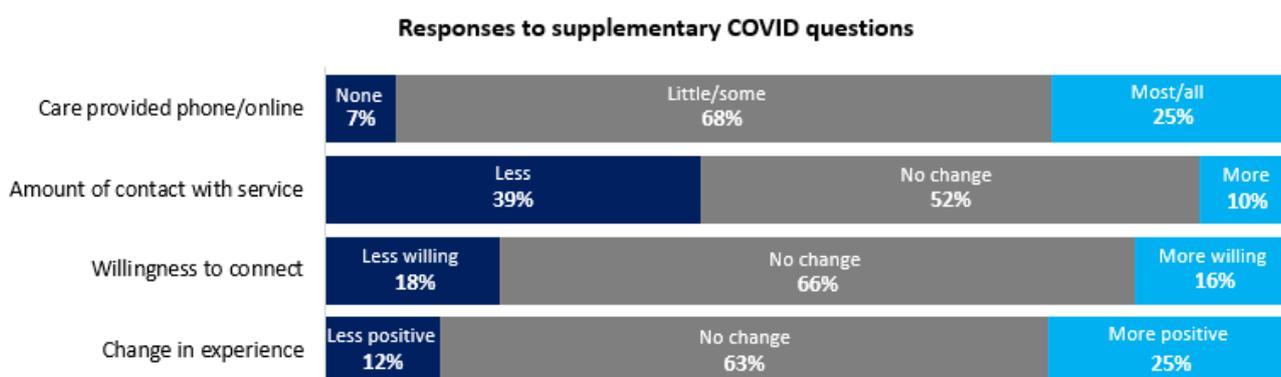
Many people (52%) reported no change in the amount of contact with the service during COVID-19. Around 39% of people reported less contact with CMO services and around 10% reported more contact.

- **Generally, people (66%) reported no change in their willingness to connect with the service**

Where people did report a change, views were mixed with some people reporting more (16%) and others reporting less (18%) willingness to connect with the service as a result of COVID-19.

- **Generally, people (63%) reported no change in their experience during COVID-19**

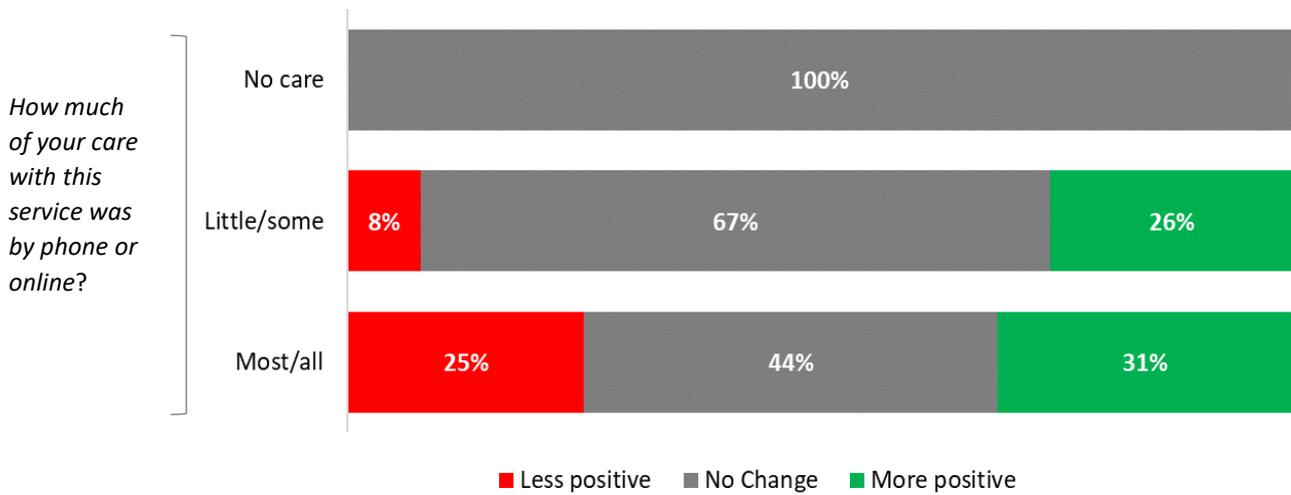
Where people did report a change, they were more likely to have a more positive experience (25%) compared to a less positive experience (12%).



- **People had mixed views about telehealth**

Where people reported that most or all of their care was provided by phone or online, they were more likely to report a change in experience. Around 31% of people reported a more positive experience and slightly less (25%) reported a less positive experience.

### How the method of contact impacted overall experience



- **The amount of contact with the service had an impact on experience**

The more contact with the service, the more positive the experience. Of the people who reported more contact with the service throughout COVID-19, half (50%) stated that they had a more positive experience, and none reported a less positive experience.

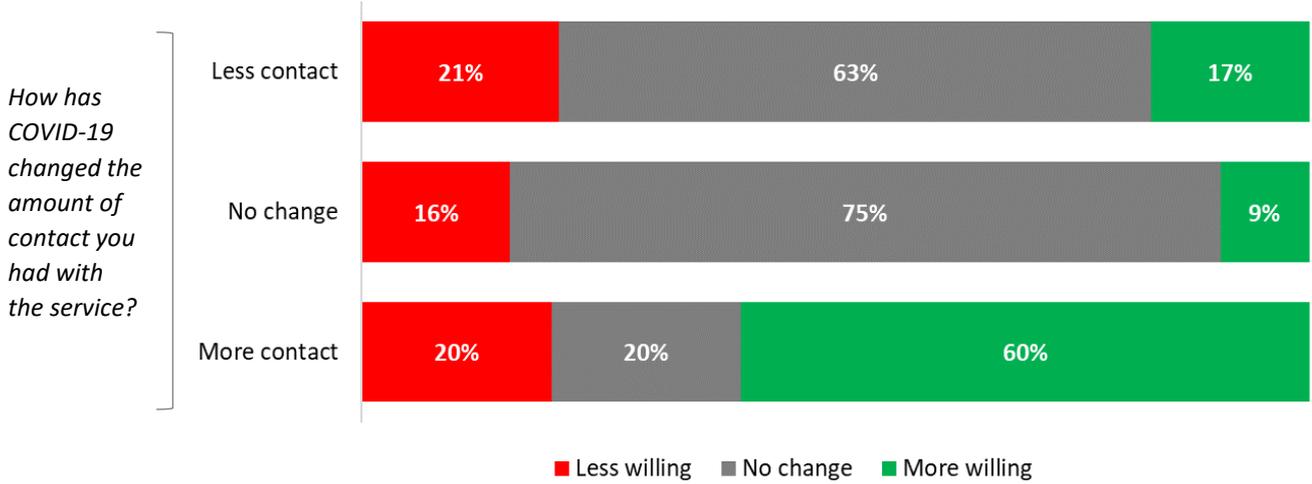
### How the amount of contact impacted overall experience



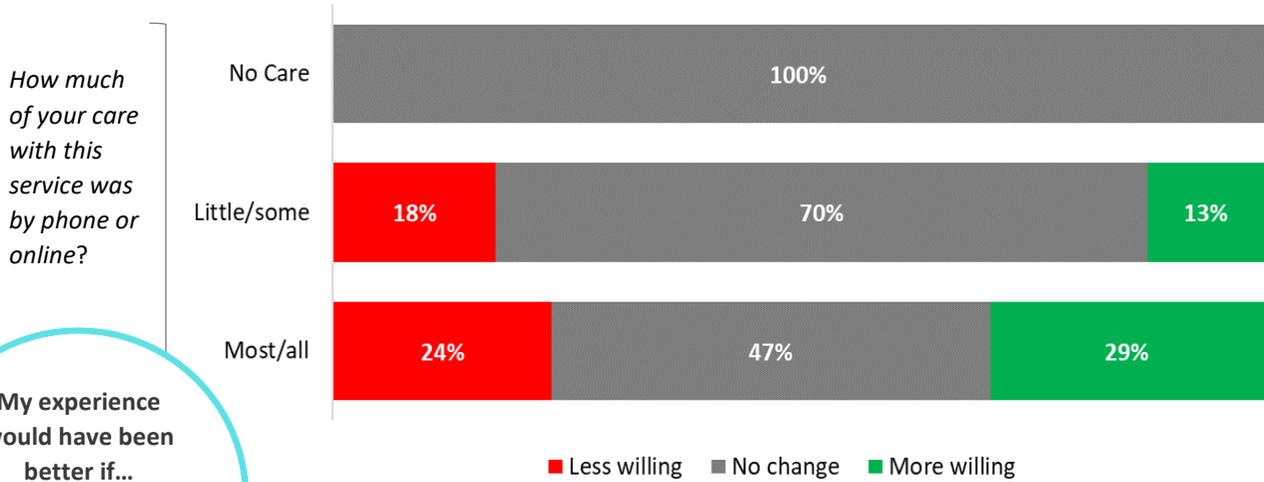
- **Where people had a more positive experience, they were more willing to connect with the service**

Peoples willingness to connect with the service was impacted by the amount of contact. Where people had more contact with the service, most (60%) reported that they were more willing to connect with the service. Whether that contact was face to face or by phone or online had less of an impact and views were mixed. Around 29% of people who had most or all of their contact by phone or online reported that they were more willing to connect with the service, however, 24% stated that they were less willing. Where people were more willing to connect with the service, 67% reported a more positive experience and none reported a less positive experience.

### How the amount of contact impacted willingness to connect

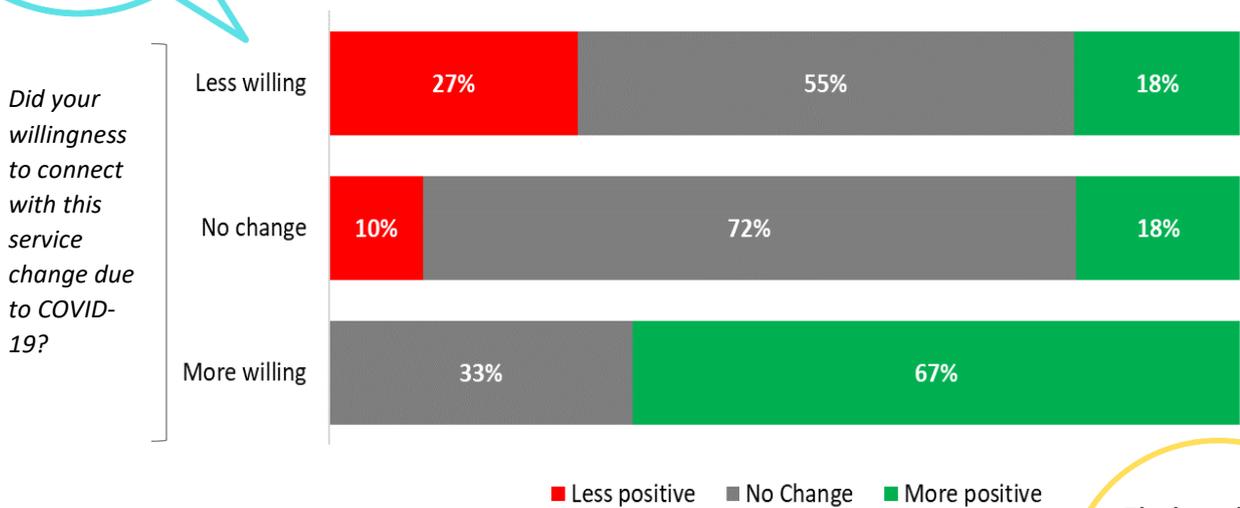


### How the method of contact impacted willingness to connect



**My experience would have been better if...**  
 "COVID-19 restrictions weren't in place"

### How the willingness to connect impacted overall experience



**The best things about this service**  
 "The availability of staff and regular contact"

## MHCC survey feedback

To understand CMO experience, MHCC conducted a survey of the CMOs that participated in the pilot project. Of the 10 CMOs participating in the pilot, seven responded to the survey. CMOs were asked one slightly different question depending on whether they had been able to return enough surveys to receive the quarterly reports.

The following feedback was provided:

- **Overall CMOs found participating in the pilot useful**

CMOs were asked 'How useful has participation in the YES/CMO pilot been to your organisation?'. Of those CMOs who answered this question, 100% selected that participation in the pilot has been 'Very useful'.

- **Comparable reporting**

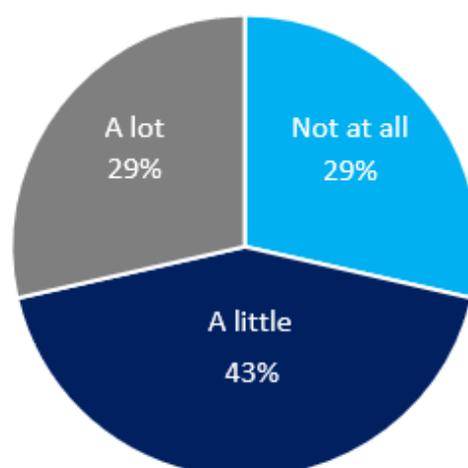
Responders stated that they would like comparable data so that they can better compare data across their teams.

- **CMOs had different experiences of offering the survey**

People were asked if their organisation had difficulty distributing the YES-CMO Survey during the pilot (including because of COVID-19). Responses ranged from "Not at all" to "A lot" with most organisations (43%) stating that they had 'A little' difficulty distributing the survey.

In the comments several CMOs mentioned the length/complexity of the survey as something that was challenging. All CMOs stated that an online version would make a difference in their ability to distribute YES-CMO and obtain feedback.

### Did your organisation have difficulty distributing the YES survey during the pilot, including because of COVID-19?



- **CMOs are at different stages with implementing quality improvement projects**

Four of the CMOs who responded received enough data to receive regular reports. Two CMOs (50%) stated that they were able to implement 'A great deal' of quality improvements because of the data provided. Of the remaining two CMOs, one reported that they implemented "a little" and the other stated that they have not yet implemented any quality improvements.

Overall, feedback from CMOs about the pilot was positive. There was strong support for an online version of the survey to be made available and it was suggested useful to explore simplified and shorter versions of the survey.

## Summary of survey findings

The data gathered over 15 months provides good evidence of positive consumer experience in the participating CMO services. Although COVID-19 has an impact on the pilot, organisations were still able to gather 1,189 surveys from 48 teams. The largest number of returns were received in the first quarter of the pilot before COVID-19. The survey was offered on a continuous basis to provide consumers with an opportunity to give feedback about their experience. Offering the survey during the height of COVID-19 restrictions was more challenging with many services moving to virtual service delivery. An online version of the survey was not available during the pilot, but we expect that this would have made YES-CMO more accessible, especially where services were delivered virtually.

Overall, 89% of consumers reported a positive experience of CMOs during the pilot. The domains of Respect, Individuality and Participation were rated the highest while access to Information and Support and Impact were rated less positively.

## Additional information

### YES-CMO Online

An online version of the YES-CMO (eYES-CMO) has been developed. This tool is in its final stages of testing and will be made available later in-2021.

- The questions utilised in the online version of YES-CMO are identical to those used in the paper version.
- The design of the website was based on the public version and included consultation with members of the YES-CMO working group and consumers of CMOs.
- The paper version will continue to be available alongside the online version to ensure YES-CMO is accessible to as many consumers as possible.
- The YES-CMO brochure has been updated to include information about how to complete YES-CMO online. This updated brochure will be made available for order when the eYES-CMO is live.

To support the implementation of eYES-CMO, QR codes will be available for each team. Updated brochures will be made available with information about the online version and a place to apply the QR code. Developing translated versions of the survey will also be explored in the future.

## From pilot to implementation

The experience of the CMOs both from survey responses and from consultation with the Advisory Working Group indicates encouraging support for moving towards implementation. Some organisations described providing consumers with the survey as “business as usual”.

InforMH and MHCC are working together to explore options for how the survey might be administered and supported in the future. While considering the next steps it is important to reflect on the resource implications. In the meantime, the project will continue to collect this invaluable data and other CMOs and their teams will be encouraged to participate.

InforMH support the collection of YES-CMO across the sector. MHCC are keen to continue to support CMOs to participate in the survey and believe the survey will be best supported if member organisations are encouraged but not mandated to collect YES-CMO.

## Appendix 1 YES- CMO Survey

Service:

# YES-CMO

## Your Experience of Service - Community Managed Organisations

Your feedback is important. This questionnaire was developed with mental health consumers. It is based on the Recovery Principles of the Australian National Standards for Mental Health Services. It aims to help mental health services and people accessing such services to work together to build better services. If you would like to know more about the questionnaire, please ask for an information sheet.

Completion of the questionnaire is voluntary. All information collected in this questionnaire is anonymous. None of the information collected will be used to identify you. It would be helpful if you could answer all questions, but please leave any question blank if you don't want to answer it.

Please put a cross in just one box for each question, like this...

### These questions ask *how often* we did the following things...

Thinking about the care you have received from this service within the last 3 months or less, what was your experience in the following areas:

	Never	Rarely	Sometimes	Usually	Always	Not Applicable
1. You felt comfortable using this service	<input type="checkbox"/>					
2. Staff showed respect for how you were feeling	<input type="checkbox"/>					
3. You felt safe using this service	<input type="checkbox"/>					
4. Your privacy was respected	<input type="checkbox"/>					
5. Staff were positive for your future	<input type="checkbox"/>					
6. Your individuality and values were respected (such as your culture, faith or gender identity, etc.)	<input type="checkbox"/>					
7. Staff made an effort to contact you when you wanted	<input type="checkbox"/>					
8. You had access to the staff involved in your support or care when you needed	<input type="checkbox"/>					
9. You would make a complaint to this service if you had a concern about your support or care	<input type="checkbox"/>					
10. You had opportunities for your family and friends to be involved in your support or care if you wanted	<input type="checkbox"/>					

### These questions ask *how often* we did the following things...

Thinking about the care you have received from this service within the last 3 months or less, what was your experience in the following areas:

	Never	Rarely	Sometimes	Usually	Always	Not Applicable
11. Your opinions about the involvement of family or friends in your support or care were respected	<input type="checkbox"/>					
12. The facilities and environment met your needs (such as cleanliness, private space, toilets, access to facilities to make a drink, meeting rooms, etc.)	<input type="checkbox"/>					
13. You had opportunities to help improve the service if you wanted (such as attending meetings to give your opinions or views)	<input type="checkbox"/>					
14. You were listened to in all aspects of your support or care	<input type="checkbox"/>					
15. Staff worked as a team in your support or care (for example, sharing information and attending meetings with you)	<input type="checkbox"/>					
16. You had opportunities to discuss your support or care needs with staff	<input type="checkbox"/>					
17. The support or care available met your needs	<input type="checkbox"/>					
18. Staff talked with you about your physical health in a way that was useful	<input type="checkbox"/>					

### These questions ask *how well* we did the following things...

Thinking about the care you have received from this service within the last 3 months or less, what was your experience in the following areas:

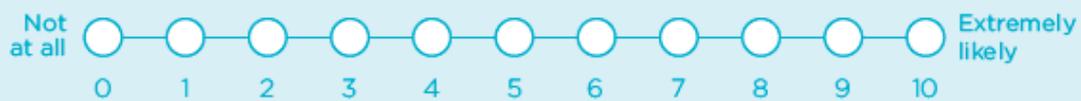
	Poor	Fair	Good	Very Good	Excellent	Not Applicable
19. Information available to you about this service (such as how the service works, what to expect, how to make a complaint, upcoming changes that may affect you, etc.)	<input type="checkbox"/>					
20. Explanation of your rights and responsibilities	<input type="checkbox"/>					
21. Access to peer support (such as information about peer workers, referral to peer programs, advocates, etc.)	<input type="checkbox"/>					
22. Development of a plan with you that addresses all of your support or care needs (such as accommodation, advocacy, employment, health, etc.)	<input type="checkbox"/>					
23. Convenience of the location of the service for you (such as access to parking or transport, distance from your home, etc.)	<input type="checkbox"/>					

As a result of your experience with the service in the last 3 months or less please rate the following:

Poor Fair Good Very Good Excellent

- |     |   |                          |                          |                          |                          |                          |
|-----|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 24. | The effect of the service on your hopefulness for the future                        | <input type="checkbox"/> |
| 25. | The effect of the service on your ability to manage your day to day life            | <input type="checkbox"/> |
| 26. | The effect of the service on the management of your physical health                 | <input type="checkbox"/> |
| 27. | The effect of the service on your overall well-being                                | <input type="checkbox"/> |
| 28. | Overall, how would you rate your experience with this service in the last 3 months? | <input type="checkbox"/> |

29. How likely would you be to recommend this service to your family or friends if they required a similar service?



Please provide any extra comments

30. My experience would have been better if...

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---

---

31. The best things about this service were...

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The information in this section helps us to know if we are missing out on feedback from some groups of people. It also tells us if some groups of people have a better or worse experience than others. Knowing this helps us focus our efforts to improve services. No information collected in this section will be used to identify you.

Which of the following best describes your gender identity?

- Male
  Female
  Non-binary/gender fluid  
 Different identity (please specify) \_\_\_\_\_

Do you consider yourself to be?

- Lesbian, gay or homosexual
  Straight or heterosexual
  Bisexual  
 Queer
  Different identity (please specify) \_\_\_\_\_

What is the main language you speak at home?

- English
  Other (please specify) \_\_\_\_\_

Are you of Aboriginal or Torres Strait Island origin?

- No
  Yes - Aboriginal
  Yes - Torres Strait Islander  
 Yes - Aboriginal and Torres Strait Islander

What is your age?

- Under 18 years
  18 to 24 years
  25 to 34 years  
 35 to 44 years
  45 to 54 years
  55 to 64 years  
 65 years and over

How long have you been receiving support or care from this service?

- Less than 24 hours
  1 day to 2 weeks
  3 to 4 weeks  
 1 to 3 months
  4 to 6 months
  More than 6 months

Did someone help you complete this questionnaire?

- No
  Yes - family or friend
  Yes - language or cultural interpreter  
 Yes - consumer worker or peer worker
  Yes - another staff member from the service
  Yes - someone else

Version 1.0



Thank you for your time and comments.  
Please place the completed questionnaire in the envelope provided and return by mail:

YES/CES  
Reply Paid 3975  
Sydney NSW 2001



© 2016 The Secretary to the Department of Health (Vic) developed with funding from the Australian Government Department of Health

## Tell us about your experience during COVID-19

How much of your care with this service was by phone or online (e.g. videoconferencing such as Pexip or Skype)

None of my care

A little of my care

Some of my care

Most of my care

All of my care

How has COVID-19 changed the amount of contact you have with the mental health service (including face to face and phone/online)

No contact

A lot less contact

A little less contact

No change in contact

A little more contact

A lot more contact

N/A  
(started with service during COVID-19)

Did your willingness to connect with this service change due to COVID-19

*I was...*

Not willing

A lot less willing

A little less willing

No change

A little more willing

A lot more willing

N/A  
(started with service during COVID-19)

How has your experience of care with this service changed during COVID-19?

*My experience has been...*

A lot worse

A little worse

No change

A little better

A lot better

N/A  
(started with service during COVID-19)

**Thank you for your feedback**

**Service Code:**

## Appendix 3 - MHCC Organisational Experience Survey

### YES/CMO Survey Pilot Project: Evaluation

We appreciate your time and effort in taking part in this evaluation of the YES/CMO pilot project. Your feedback will help inform us on how to progress to implementation.

#### Question Title

1. Please provide the name of your organisation. This is to ensure all YES CMO participants have completed the survey. Your individual responses will remain anonymous.

#### Question Title

2. How useful has participation in the YES/CMO pilot been to your organisation?

- Extremely useful
- Very useful
- Somewhat useful
- Not so useful
- Not at all useful

Alternative question - if your organisation hasn't been able to complete the YES CMO Survey. Please tell us what you think was the reason for this? For example, was it because consumers were not interested, workers too busy, COVID-19 restrictions, or some other reason.

#### Question Title

3. Have you been able to implement any quality improvements to your service or program because of InforMH's analysis of the data your collected?

- A great deal
- A lot
- A moderate amount
- A little
- None at all

#### Question Title

4. In 50 words or less, please describe one quality improvement as a result of being part of the pilot.

#### Question Title

5. Would you be willing to share de-identified data with other participants if this initiative is rolled out across all CMO services?

- Yes
- No

**Question Title**

6. Would you support comparative reporting which allows CMOs to compare their results with other CMOs?

- Definitely would
- Probably would
- Probably would not
- Definitely would not

**Question Title**

7. How do you think consumers value the YES/ CMO survey?

Consumers think criticism might affect the services they receive

- Consumers think criticism might affect the services they receive

Consumers do not have a view

- Consumers do not have a view

Consumers appreciate their voice and opinions being valued

- Consumers appreciate their voice and opinions being valued

**Question Title**

8. Did your organisation have difficulty distributing the YES Survey during the pilot, including because of COVID-19?

- A great deal
- A lot
- A moderate amount
- A little
- Not at all

**Question Title**

9. If you were unable to distribute the YES Survey, would it have made a difference to have it available online?

- Yes
- No

**Question Title**

10. Is there anything more that InforMH or MHCC could do to better support you?

## Appendix 3 – Technical information

### YES-CMO development and validation

Information about the development, validation and psychometric properties of the YES-CMO questionnaire is available at <https://www.amhocn.org/your-experience-service-survey-cmo-version>

### Identification of CMO services

The YES-CMO questionnaire is anonymous and contains no identifying information. Therefore, in order to report on services, all services must be accurately identified on the questionnaire.

When a CMO service decided to participate in the pilot they were registered by MHCC and provided with a unique service code. The details which service codes belong to which CMO services is kept anonymous from the NSW Ministry of Health. If services codes are missing or invalid, the response cannot be attributed to an individual CMO or service.

Throughout the pilot, 100 surveys did not include a service code and therefore could not be linked to a specific service.

### Analysis

Missing, invalid or duplicate answers were recorded as null. YES-CMO returns with less than 12 of the first 23 questions completed were excluded when calculating the overall experience index and domain scores. Overall scores and domain scores were constructed following the methods prepared during the national YES development. Testing of significant differences between groups was conducted using 95% confidence intervals. These were calculated using the WALD formula for proportions. Non-overlapping confidence intervals were used to identify significant differences.

### YES-CMO questions use three scoring scales

Frequency scale	Performance scale	Numerical score
Always	Excellent	5
Usually	Very Good	4
Sometimes	Good	3
Rarely	Fair	2
Never	Poor	1

The Net Promotor score (NPS) is rated on a scale of 0 (Not at all) to 10 (Extremely likely). To calculate the NPS, the percentage of detractors (scores 0-6) are subtracted from the promoters (scores 9-10).

## Comparison of subgroups

For subgroup comparisons, 95% confidence intervals were calculated using the WALD formula for proportions. Non-overlapping confidence intervals (CI) were used to identify significant differences. The below table summarises these figures.

Subgroup	Valid returns	% excellent/ very good	95% CI
<b>Gender</b>			
Female	602	91%	88.6–93.2
Male	492	86%	83.4–89.4
Non-binary, Gender fluid/Other identity	7	71%	38.0–104.9
<b>Sexuality</b>			
Bisexual	41	93%	84.7–100.7
Different identity	18	83%	66.1–100.6
Lesbian, gay or homosexual	21	90%	77.9–103.0
Straight or heterosexual	918	89%	87.1–91.1
Queer	3	67%	13.3–120.0
<b>Language</b>			
English	1026	89%	86.8–90.6
English + Other	54	91%	83.0–98.5
Other	0		
<b>Aboriginal and or Torres Strait Islander</b>			
Aboriginal and/or Torres Strait Islander	120	86%	79.6–92.1
Not Aboriginal	977	89%	87.4–91.3
<b>Age group</b>			
Under 18 years	7	100%	100.0–100.0
18–24	67	88%	80.3–95.8
25–34	150	86%	80.4–91.6
35–44	233	89%	84.8–92.9
45–54	249	90%	85.8–93.4
55–64	264	90%	86.1–93.4
65 and over	136	88%	82.8–93.7
<b>Duration of contact</b>			
Less than 24 hours	6	100%	100.0–100.0
1 day–2 weeks	20	80%	62.5–97.5
3–4 weeks	23	91%	79.8–102.8
1–3 months	143	92%	87.1–96.2
4–6 months	138	92%	87.5–96.5
More than 6 months	762	88%	85.8–90.4
<b>Assistance completing</b>			
No	728	89%	86.3–90.9
Staff member	192	90%	85.3–93.9
Consumer worker	141	90%	85.1–95.0
Family/friend	24	79%	62.9–95.4
Interpreter	1	100%	100.0–100.0
Someone else	19	89%	75.7–103.3





Mental Health Coordinating Council  
Building 125, Corner of Church & Glover Streets  
Lilyfield NSW 2040

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Rozelle NSW 2039

For further information please contact us at:  
Tel: (02) 9060 9627  
E: [info@mhcc.org.au](mailto:info@mhcc.org.au)

