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Report on Findings

		Orgar	nization	: Cer	ntre for	Ado	liction	and N	lental	Health			
	Program: All Programs												
	Registered Clients with mental health, substance abuse, addiction, and/or gambling-related problems Registered Client who is a family member/significant other/supporter of a person with a mental health, substance abuse, addiction, and/or gambling-related problems									Total number of respondents			
Number of respondents			7	76							14		791
			y Agree 4	Ag	ree 3	Dis	agree 2	Stro Disa 1	gree	Not App	blicable	Number of Total Responses	Response Rate
Items	Average Score	n	%	n	%	n	%	n	%	n	%	Ν	%
Access/Entry to Services	-		-						-			-	-
1. The wait time for services was reasonable for me.	2.95	203	25.7%	390	49.3%	118	14.9%	62	7.8%	14	1.8%	787	99.5%
2. When I first started looking for help, services were available at times that were good for me.	2.99	218	27.6%	375	47.4%	120	15.2%	53	6.7%	21	2.7%	787	99.5%
3. The location of services was convenient for me.	3.00	223	28.2%	380	48.0%	122	15.4%	50	6.3%	10	1.3%	785	99.2%
4. I was seen on time when I had appointments.	3.13	263	33.2%	374	47.3%	90	11.4%	37	4.7%	21	2.7%	785	99.2%
5. I felt welcome from the start.	3.33	374	47.3%	314	39.7%	53	6.7%	33	4.2%	8	1.0%	783	99.0%
 I received enough information about the programs and services available to me. 	3.13	268	33.9%	380	48.0%	88	11.1%	38	4.8%	12	1.5%	786	99.4%
Services Provided													
I had a good understanding of my treatment services and support plan.	3.11	222	28.1%	432	54.6%	87	11.0%	27	3.4%	17	2.1%	785	99.2%
 Staff and I agreed on my treatment and support plan. 	3.18	238	30.1%	424	53.6%	68	8.6%	18	2.3%	33	4.2%	781	98.7%
 Responses to my crises or urgent needs were provided when needed. 	3.15	229	29.0%	325	41.1%	79	10.0%	25	3.2%	119	15.0%	777	98.2%
10. I received clear information about my medication (i.e., side effects, purpose, etc.)	3.08	213	26.9%	273	34.5%	104	13.1%	31	3.9%	157	19.8%	778	98.4%
11. I was referred or had access to other services when needed (including alternative approaches).	3.02	194	24.5%	316	39.9%	114	14.4%	33	4.2%	123	15.5%	780	98.6%
Participation/Rights													-
12. I was involved as much as I wanted to be in decisions about my treatment and support.	3.14	231	29.2%	415	52.5%	79	10.0%	24	3.0%	30	3.8%	779	98.5%
 I understood I could discuss options to participate in certain activities. 	3.12	197	24.9%	447	56.5%	62	7.8%	23	2.9%	46	5.8%	775	98.0%
14. I was assured my personal information was kept confidential.	3.38	366	46.3%	328	41.5%	44	5.6%	19	2.4%	14	1.8%	771	97.5%
 I felt comfortable asking questions about my treatment services and support, including medication. 	3.29	322	40.7%	344	43.5%	65	8.2%	20	2.5%	24	3.0%	775	98.0%
16. If I had a serious concern, I would know how to make a formal complaint to this organization.	2.79	174	22.0%	297	37.5%	210	26.5%	58	7.3%	37	4.7%	776	98.1%



Report on Findings

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		Strong	y Agree 4		ree 3	Dis	agree 2	Stroi Disa 1	gree	Not App	licable	Number of Responses	Response Rate
He	Average	n	%	n	%	n	%	n	%	n	%	n	%
Items Therapists/Support Workers/Staff	Score												
17. I found staff knowledgeable and competent.	3.39	368	46.5%	337	42.6%	35	4.4%	19	2.4%	16	2.0%	775	98.0%
18. I was treated with respect by	3.34	399	50.4%	306	39.1%	31	3.9%	22	2.8%	12	1.5%	773	97.7%
program staff. 19. Staff were sensitive to my	0.04	555	50.470	300	55.170	51	5.570	22	2.070	12	1.570		01.170
cultural needs (e.g., language, ethnic background, race).	3.32	269	34.0%	288	36.4%	32	4.0%	21	2.7%	163	20.6%	773	97.7%
20. Staff believed I could change and grow.	3.45	376	47.5%	321	40.6%	20	2.5%	13	1.6%	40	5.1%	770	97.3%
21. Staff understood and responded to my needs and concerns.	3.33	337	42.6%	358	45.3%	46	5.8%	20	2.5%	14	1.8%	771	97.5%
Environment													
 Overall, I found the facility welcoming, non-discriminating and comfortable (e.g., entrance, waiting room, décor, posters, my room if applicable). 	3.29	311	39.3%	379	47.9%	62	7.8%	14	1.8%	16	2.0%	782	98.9%
 Overall, I found the program space clean and well maintained (e.g., meeting space, bathroom, and your room if applicable). 	3.34	350	44.2%	353	44.6%	50	6.3%	18	2.3%	9	1.1%	780	98.6%
 I was given private space when discussing personal issues with staff. 	3.45	378	47.8%	310	39.2%	29	3.7%	12	1.5%	46	5.8%	775	98.0%
25. I felt safe in the facility at all times.	3.31	352	44.5%	328	41.5%	74	9.4%	19	2.4%	5	0.6%	778	98.4%
26. The program accomodated my needs related to mobility, hearing, vision and learning, etc.	3.33	239	30.2%	292	36.9%	28	3.5%	12	1.5%	205	25.9%	776	98.1%
Discharge or Finishing the Progra	m/Treatmer	nt											
27. Staff helped me develop a plan for when I finish the program/treatment	3.03	146	18.5%	260	32.9%	84	10.6%	24	3.0%	252	31.9%	766	96.8%
28. I have a plan that will meet my needs after I finish the	2.98	148	18.7%	245	31.0%	104	13.1%	28	3.5%	236	29.8%	761	96.2%
program/treatment. 29. Staff helped me identify where to get support after I finished the program/treatment.	2.98	142	18.0%	246	31.1%	106	13.4%	24	3.0%	242	30.6%	760	96.1%
Overall Experience													
30. The services I have received have helped me deal more effectively with my life's challenges.	3.22	251	31.7%	384	48.5%	66	8.3%	14	1.8%	53	6.7%	768	97.1%
31. I think the services provided here are of high quality.	3.37	339	42.9%	340	43.0%	46	5.8%	11	1.4%	34	4.3%	770	97.3%
32. If a friend were in need of similar help I would recommend this service.	3.43	387	48.9%	299	37.8%	37	4.7%	15	1.9%	30	3.8%	768	97.1%
ONLY completed if client was rec	eivina servi	ces in a	residenti	ial or in	oatient r	progra	um (resr	ond rate	e calcul	lated for	this sub	paroup of clients)	
,			y Agree	-	ree	-	agree	Stro	ngly			Number of Responses	Response Rate
			4		3	2.0	2	Disa 1	-	Not App	licable		
Items	Average Score	n	%	n	%	n	%	n	%	n	%	n	%
33. There were enough activities of interest to me during free time.	2.63	25	13.1%	81	42.4%	58	30.4%	17	8.9%	10	5.2%	191	94.1%
34. Rules or guidelines concerning my contact with my family and friends were appropriate to my needs.	2.98	39	20.4%	97	50.8%	27	14.1%	8	4.2%	20	10.5%	191	94.1%
35. The layout of the facility was suitable for visits with my family and friends (e.g., privacy, comfort level).	2.92	34	17.7%	92	47.9%	30	15.6%	9	4.7%	27	14.1%	192	94.6%
36. The area in and around my room was comfortable for sleeping (e.g., noise level, lighting.	2.84	41	21.6%	92	48.4%	37	19.5%	17	8.9%	3	1.6%	190	93.6%
37. The quality of the food was acceptable.	2.66	33	17.2%	88	45.8%	36	18.8%	30	15.6%	5	2.6%	192	94.6%
38. My special dietary needs were met (e.g., diabetic, halal, vegetarian, kosher).	2.86	40	20.8%	62	32.3%	28	14.6%	16	8.3%	46	24.0%	192	94.6%



Report on Findings

САМН QIP											
		Poor	1	Fa	air 2	G	ood 3	Very (4		Number of Responses	Response Rate
ltem	Average Score	n	%	n	%	n	%	n	%	n	%
Overall, how would you rate the services/care you are receiving?	3.28	24	3.0%	88	11.1%	244	30.8%	329	41.6%	685	86.6%

OPOC Subscales						
Scales	Average Score	Percentage of Participants that had a positive perception (average score of 3 or greater)				
Overall Perception of Care	3.29	78.27%				
Experience accessing services	3.10	68.76%				
Experience within services	3.34	81.10%				

Ontario Perception of Care Tool for Mental Health and Addiction Services



Report on Findings

Section C:

1. Gender	n	%
Male	388	51.9%
Female	335	44.8%
Trans-Male to Female and Female to Male	16	2.2%
Other	8	1.1%
Total	747	100%
Response Rate		95%

2. Age	n	%
18 and under	25	3.4%
19-25 years	84	11.4%
26-34 years	179	24.2%
35-44 years	156	21.1%
45-54 years	125	16.9%
55-64 years	121	16.4%
65 + years	50	6.8%
Total	740	100%
Response Rate		94%

3. Population Group	n	%
White	477	66.2%
First Nations	19	2.6%
Asian	68	9.4%
Black	55	7.6%
Middle Eastern	19	2.6%
Latin American	21	2.9%
Multiple/Mixed	62	8.6%
Total	721	100%
Response Rate		92%

4. Sexual Orientation	n	%
Asexual/Non Sexual	35	5.0%
Bisexual	51	7.3%
Gay	39	5.5%
Heterosexual/Straight	507	72.1%
Lesbian	7	1.0%
Not sure/Questioning	15	2.1%
Queer	14	2.0%
Two-Spirited	*	*
Other	32	4.6%
Total	700	100%
Resonse Rate		89%

* = If n was smaller than 10 no information was provided to ensure client anonymity was not compromised

Ontario Perception of Care Tool for Mental Health and Addiction Services



Report on Findings

6. Formal Conditions of Treatment	n	%
Medical certificate	15	8.2%
Community Treatment Order	19	10.4%
Legal requriement	51	27.9%
Condition/pressure of employment, school, family	38	20.3%
Other	41	23.4%
Don't know	19	10.4%
Total	183	100%

7. Timing of questionnaire completion in	n	%
Just getting started	136	19.0%
Treatment serivces/support is in progress	364	50.8%
Completed or almost completed	112	15.6%
Completed but still receiving some services	77	10.8%
Left Early	7	1.0%
Other	20	2.8%
Total	716	100%
Response Rate		91%

* = If n was smaller than 10 no information was provided to ensure client anonymity was not compromised