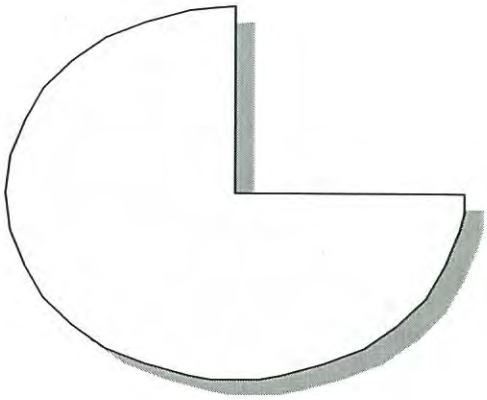
"WHAT DO YOU THINK?"

New Hampshire 2016

Peer Support Outcomes Survey



State Report

January 2017

New Hampshire Bureau of Mental Health Services

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The NH 2016 Peer Outcomes Survey is designed, conducted, and analyzed by the New Hampshire Bureau of Mental health Services in collaboration with state-funded Peer Support Agencies operating in the state mental health regions.

The Alternative Life Center, Conway NH (Region I)

H.E.A.R.T.S., Nashua, NH (Region VI)

Lakes Region Consumer Advisory Board, Laconia, NH (Regions III & IV)

Monadnock Peer Support Agency, Keene, NH (Region V)

On the Road to Recovery, Manchester, NH (Regions VII & X)

Seacoast Consumer Alliance, Portsouth, NH (Region VIII)

Stepping Stone, Claremont, NH (Region II)

Tri-City Cooperative, Rochester, NH (Region IX)

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CONTENTS ii

OVERVIEW:

Background iii

Purpose of the survey iii

Survey description v

Survey general summary vi

Peer Support Director's comments vi

SUVEY FINDINGS: 1

Section I: Demographics 6

Section II: Health 10

Section III: Purpose 14

Section IV: Community 23

GENERAL SATISFACTION 47

NATIONAL OUTCOME MEASURES 49

SAMHSA STRATEGY #4: RECOVERY 53

TECHNICAL INFORMATION 54

PEER SUPPORT AGENCIES 55

OVERVIEW

Background

Peer Support Agencies (PSAs) provide certain community-based, consumer-run, public mental health services, described and governed by state rules under contracts with the Bureau of Behavioral Health (BBH). Services are provided at no cost to consumers. In 2016, eight not-for-profit agencies, operating fourteen physical locations in the state's ten mental health regions, provided an array of on-site supports, several mobile outreach teams, a transitional living program, and, with the addition of a two sites in 2016, four peer-run Planned Respite Programs. Over 1900 adults with serious mental illness (SMI) were served statewide. The agencies serve adults only.

In New Hampshire, the Intentional Peer Support[1] model (IPS), developed by Shery Mead, is selected as the foundational approach to peer support interactions. Peer staffs at every agency have been trained in IPS. Additionally, the Wellness Recovery Action Plan (WRAP)[2], an evidence-based practice developed by Mary Ellen Copeland has been established for use in New Hampshire via PSA staff who are trained as Advanced Facilitators. In turn, they train WRAP Group Facilitators from every PSA around the state. For the purpose of this report, the term "peer support", regarding New Hampshire PSAs, explicitly includes IPS and WRAP as core practices at all agencies.

Peer support occurs when people provide knowledge, experience, and emotional, social, or practical help to each other.[3]

Members and participants at PSAs differ only by member privileges. Participants are not registered members of the PSA. Participants engage in all activities except they do not have member voting privileges and cannot serve on the agencies' consumer-run boards. For the purpose of the survey and this report, the terms "consumers", "members", "participants", and "peers" are used interchangeably. Staffs are also peers. Guests or visitors to the agencies are not included in the survey or in the unduplicated count of peers.

The first "What do you think?" survey was conducted in 2009. The survey is conducted using Survey Monkey but consumers can also submit paper responses for later data entry. Computer access is provided at all PSA locations and consumers are strongly encouraged to participate.

Purpose of the Survey

The purpose of the survey is to receive feedback from participants in peer support that may be used to enhance planning, financing, service delivery, and development of consumer-operated services and programs within a recovery-oriented behavioral health care system throughout New Hampshire.

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[1] http://intentionalpeersupports.org/
[2] http://www.mentalhealthrecovery.com/
[3] Shery Mead, David Hilton, Laurie Curtis, "Peer Support: A Theoretical Perspective". http://mentalhealthpeers.com/pdfs/peersupport.pdf

New Hampshire's PSA Executive Directors, as a group, decided to create a new survey of members that would enable them to assess outcomes and program satisfaction over time. The survey now includes research-based questions about the peer support experience.

The survey includes indicators that measure recovery supports in the priority areas of HEALTH, PURPOSE, COMMUNITY, and GENERAL SATISFACTION. There are 14 indicators measured by 45 survey items. An additional item indicates which PSA the respondent is affiliated with, and is not included in the report. Individuals that did not respond to this item are included in the overall report. Each PSA received their individual results along with the overall report for their own internal quality improvement efforts.

New Hampshire PSAs are largely funded by the NH Mental Health Block Grant and, as such, data on selected priority areas is collected and reported to the Substance Abuse and Mental Health Services Administration (SAMHSA), which issues the block grant funds.

Positive outcomes in these domains, associated with peer support, are commonly believed to result in the reduction and prevention of hospitalization, and increased wellbeing. A primary area of interest is to support the reduction or prevention of psychiatric hospitalization while providing practical supports for life in the community. Specific survey items measure the effectiveness of these goals.

The Peer Outcomes Protocols (POP)[4] instrument and the Mental Health Statistical Improvement Project (MHSIP) survey that includes certain National Outcomes Measures (NOMS) for block grant reporting were used to select the Peer Support Recovery outcomes and identify the survey items to be included, such as General Satisfaction which is embedded within the section for Community. New Hampshire PSAs now have four domains that may be surveyed annually, to help inform the self-directed activities of these consumer-operated services and programs.

Input from members of PSAs is important for shaping the planning process for state-funded peer support programs in New Hampshire. The survey supports the mental health block grant's National Outcome Measure (NOM) #8- Increased Social Support/Social Connectedness. It supports the President's New Freedom Commission Goal #2: Mental Health Care is Consumer and Family Driven, and SAMHSA's Strategy #4: Recovery Supports. The State Mental Health Authority (SMHA) selected Consumer Operated Services and Programs (COSP) for Peer-to-Peer Recovery Supports as the State priority for the block grant.

Individual agencies are able to use the data to inform their own discussions and decisions, guided by the input of the members, to shape future practices. See the Director's Comments for specific examples of how the survey responses are used to benefit the peer support participants. In addition to the overall report, Executive Directors receive a report filtered by PSA location for their organization.

The data supports the associated cost/benefit and effective State utilization management of the mental health block grant funds, to provide an alternative or adjunct to clinical services that would otherwise not exist in the state. Having outcome measures strengthens the rationale for the state to continue to

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[4] http://www.cmhsrp.uic.edu/nrtc/pophome.htm

allocate funds from the NH mental health block grant for contracts with these agencies. The PSAs are funded 60% by NH's mental health block grant and 40% by State general funds. The majority of the mental health block grant is directed to maintaining peer support in NH. Additional funding is provided by donations and fundraising.

The state report will be available on selected websites that serve the peer-to-peer recovery community and interested others. Individual agency reports are provided to each PSA. The agencies' contact information is at htt://www.dhhs.nh.gov/dcbcs/bbh/peer.htm.

Survey Description

The survey is a non-scientific, non-random sample of people who are members of Peer Support Agencies. This year, all eight PSAs chose to participate in the survey. Percentages are based on 100.00% (two decimal points) of responses, and rounded to whole numbers. The survey was open October through December of 2016.

Participation in the survey is voluntary but strongly encouraged. There is no respondent identification in the survey. Although the electronic survey is anonymous and confidential, anonymity and confidentiality cannot be guaranteed when the paper instrument is used. Individual comments are not solicited as they may identify staff, agency, and/or respondent. Data from paper surveys is entered on line by PSA or BBH staff from the Office of Consumer and Family Affairs.

There are 45 items in the four sections of the 2016 "What Do You Think?" NH peer support survey. The sections are:

(1) Demographics
(2) Health
(3) Purpose
(4) Community

The majority of items are from the Peer Outcomes Protocol (POP). The POP was a project of the University of Illinois at Chicago, National Research and Training Center on Psychiatric Disability directed by Judith A. Cook, Ph.D., director of the Program in Consumer Studies of the Program in Consumer Studies and Training at the Missouri Institute of Mental Health.

The POP was selected as the basis for the NH survey because: "The outcomes protocol can be used by peer support and consumer provider organizations to gauge the results of rehabilitation services delivered by and for peers with psychiatric disabilities. Widespread adoption of the protocol will (1)

assist the consumer self-help filed to assess its own outcomes; (2) present service outcomes to public funding authorities and managed care organizations; (3) improve the organization and delivery of peer support programs".[5]

Survey General Summary[6]

The survey was begun by 303 people and completed by 292. It is likely the 303 figure includes some false starts that were later completed. The unduplicated count of PSA members is estimated to be 1900[7] thus providing a 15% response rate compared to 12% in 2015.

The survey was taken by an almost equal number of males (45%) and females (50%). More than 49% of respondents are between the ages of 45 and 64 and 2% are under the age of 25. Veteran's make up 9% of respondents and 86% of respondents are white[8]. These statistics are in line with the 2015 report.

Peer Support Director's Comments

"The survey is an invaluable tool that we can use to reach out to individuals who could use our services"

"This survey plays a very important role in the ongoing assessment of our agency's effectiveness in specific areas. We utilize the data collected in the survey as the basis for internal conversations with staff and membership to see ways to improve our programming"

"The results derived from this survey have been very helpful in determining what areas, as an agency, may need strengthening on behalf of its members".

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[5] Peer Outcomes Protocol (POP): Psychometric Properties of the POP, Jean Campbell, Ph.D. et al., Missouri Institute of Mental Health, University of Missouri-Columbia, 2004, p. 3.

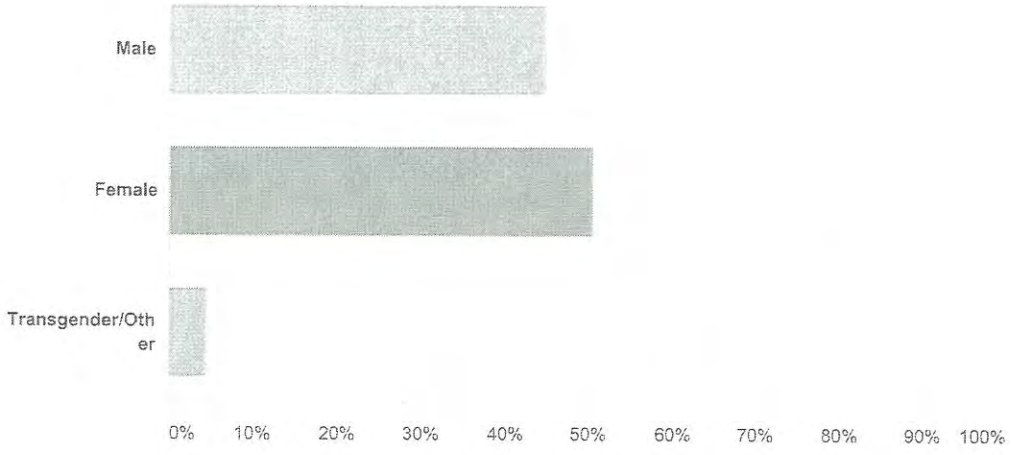
[6] Calculations are based on 100.00% of the cohort being reported. Most items do not include "not applicable" or "no response". Percentages are rounded. Incomplete surveys are not included.

[7] Calculations based on SFY2013 monthly unduplicated onsite participation.

[8] The US Census 2013 estimate for the White population of the state is 94%.

Q1 What gender do you identify as?

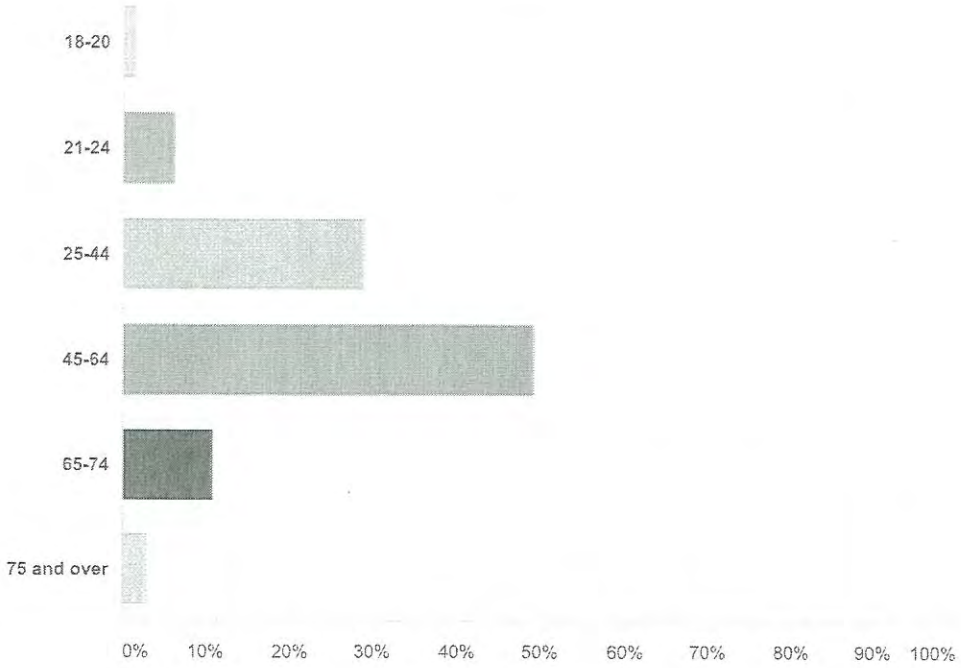
Answered: 303 Skipped: 0



Answer Choices	Responses	
Male	44.88%	136
Female	50.50%	153
Transgender/Other	4.62%	14
Total		**303**

Q2 What is your age, in years?

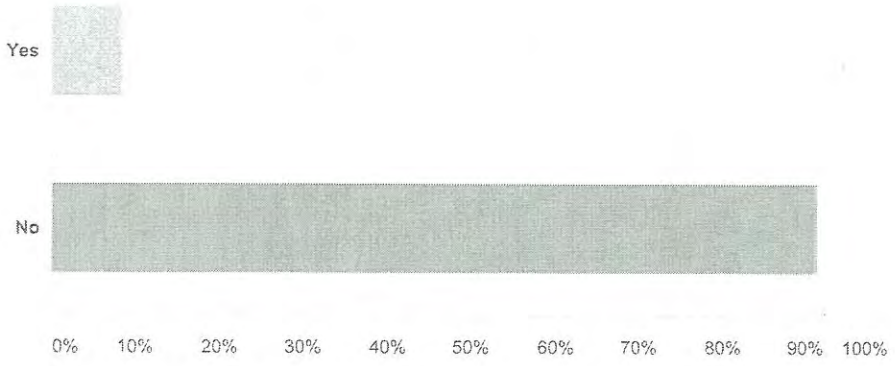
Answered: 303 Skipped: 0



Answer Choices	Responses	
18-20	1.65%	5
21-24	6.27%	19
25-44	29.04%	88
45-64	49.17%	149
65-74	10.89%	33
75 and over	2.97%	9
Total		**303**

Q3 Are you a veteran of the Armed Forces?

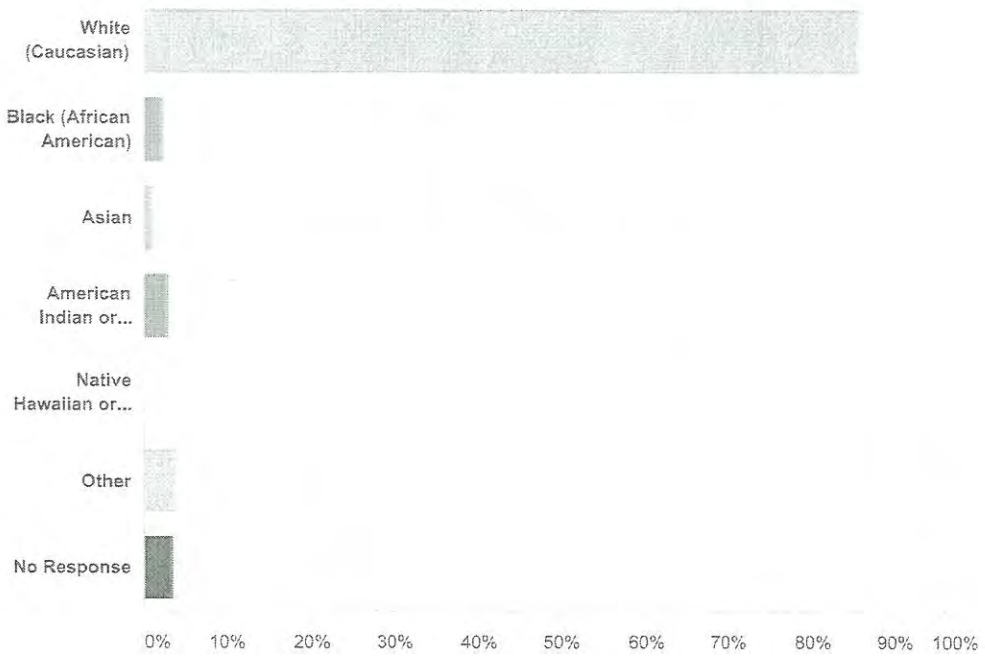
Answered: 303 Skipped: 0



Answer Choices	Responses	
Yes	8.58%	26
No	91.42%	277
Total		**303**

Q4 What race do you consider yourself to be?

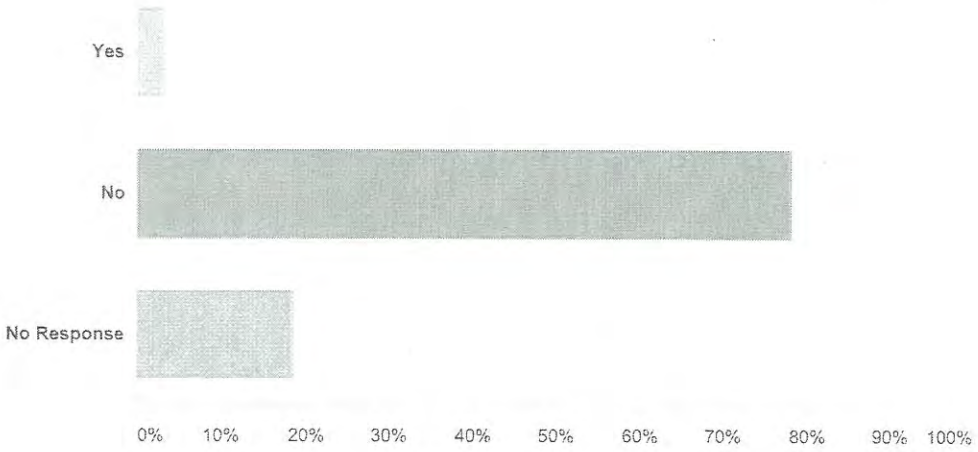
Answered: 303 Skipped: 0



Answer Choices	Responses	
White (Caucasian)	85.81%	260
Black (African American)	2.31%	7
Asian	1.32%	4
American Indian or Alaska Native	2.97%	9
Native Hawaiian or Other Pacific Islander	0.00%	0
Other	3.96%	12
No Response	3.63%	11
Total		**303**

Q5 Are you of Hispanic, Spanish, or Latino origin?

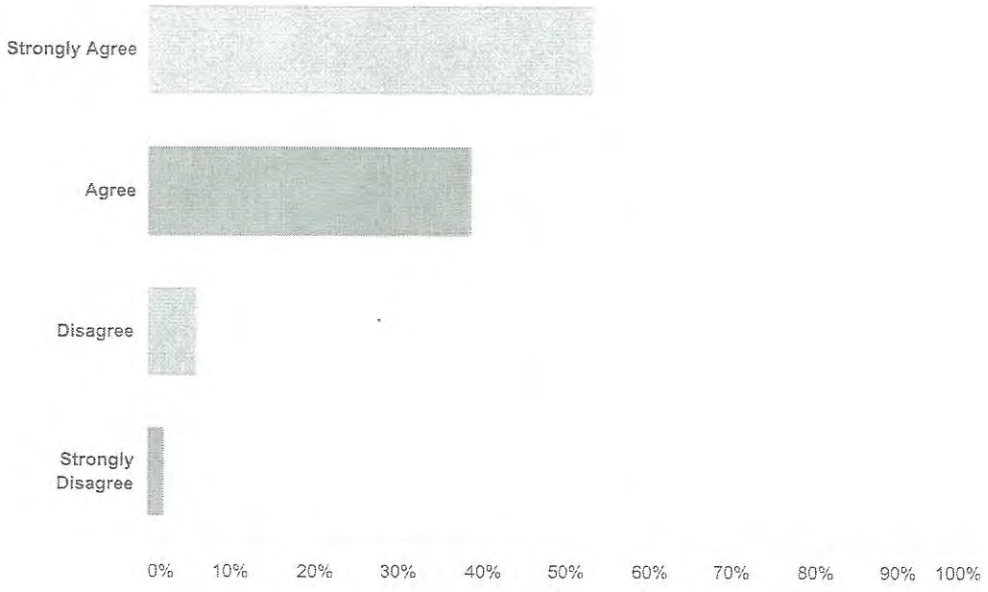
Answered: 303 Skipped: 0



Answer Choices	Responses	
Yes	3.30%	10
No	78.22%	237
No Response	18.48%	56
Total		**303**

Q6 I take an active role in decisions about my mental health care.

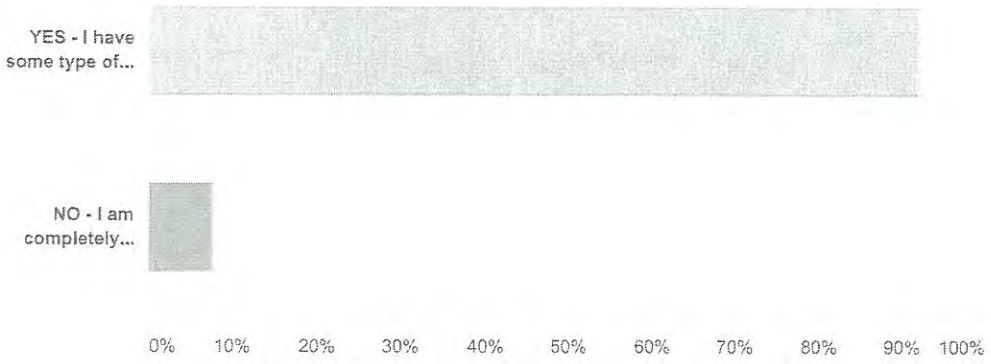
Answered: 295 Skipped: 8



Answer Choices	Responses	
Strongly Agree	53.22%	157
Agree	38.64%	114
Disagree	6.10%	18
Strongly Disagree	2.03%	6
Total		**295**

Q7 Do you have any health insurance coverage?

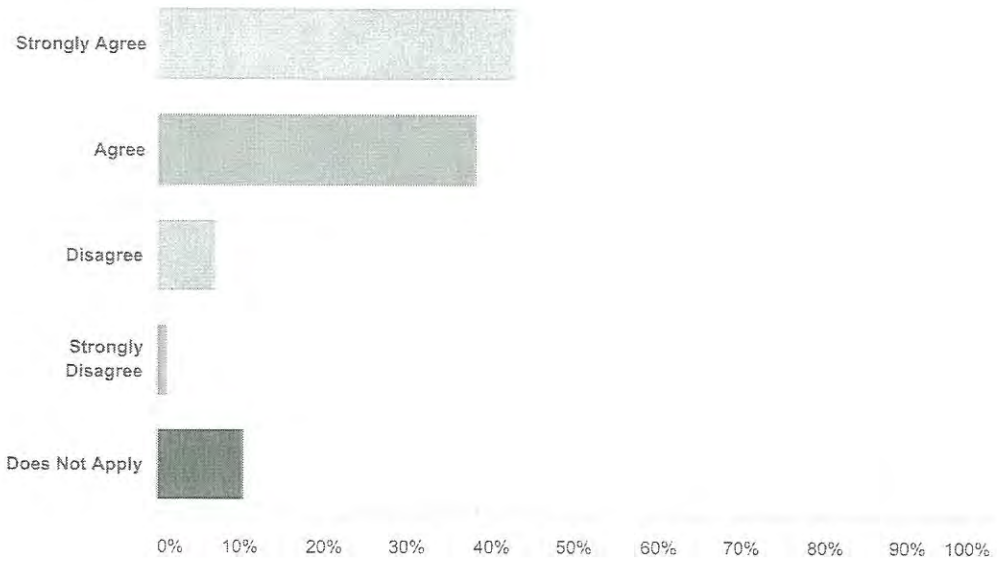
Answered: 295 Skipped: 8



Answer Choices	Responses	
YES - I have some type of health insurance, such as private, self-pay, employer-sponsored, Medicaid, Medicare, military, or other coverage.	92.20%	272
NO - I am completely without any kind of health insurance coverage; I am uninsured.	7.80%	23
Total		**295**

Q8 Do you think this peer support center helped prevent emotional difficulties from turning into a psychiatric crisis during the past six months?

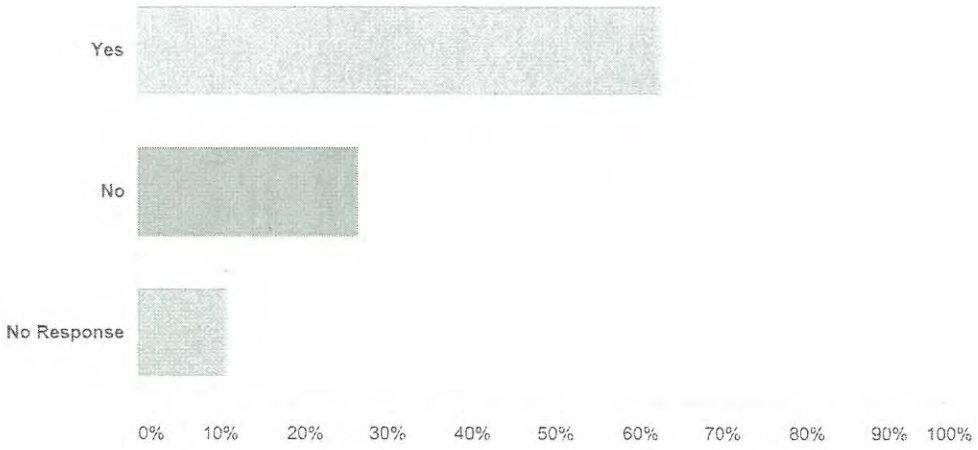
Answered: 295 Skipped: 0



Answer Choices	Responses	
Strongly Agree	42.71%	126
Agree	38.31%	113
Disagree	7.12%	21
Strongly Disagree	1.36%	4
Does Not Apply	10.51%	31
Total		**295**

Q9 Have you ever been in the hospital for psychiatric reasons?

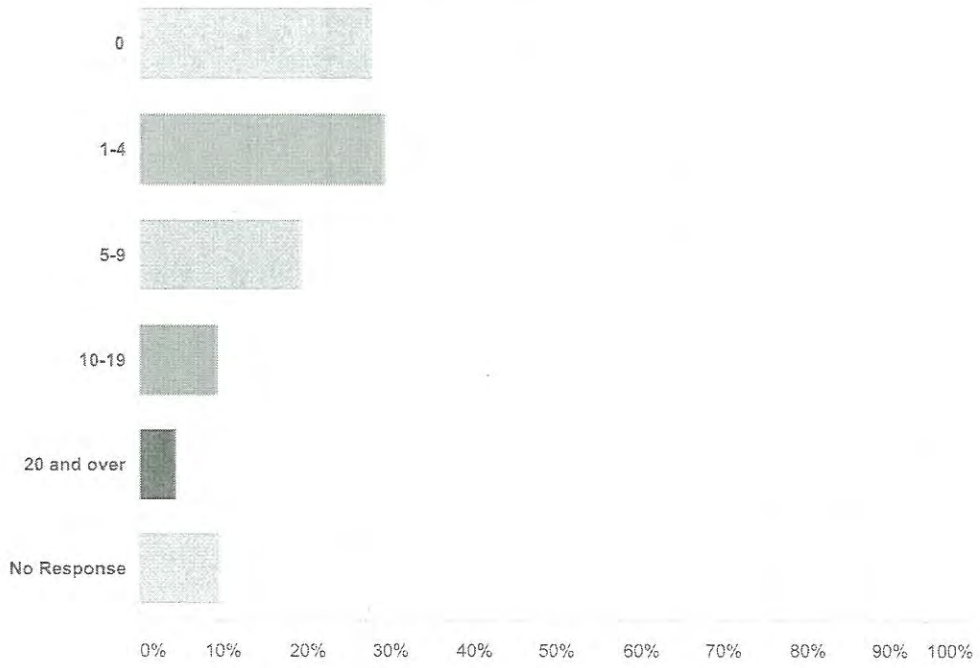
Answered: 295 Skipped: 8



Answer Choices	Responses	
Yes	62.71%	185
No	26.44%	78
No Response	10.85%	32
Total		**295**

Q10 How many times in your life have you been in the hospital for psychiatric reasons?

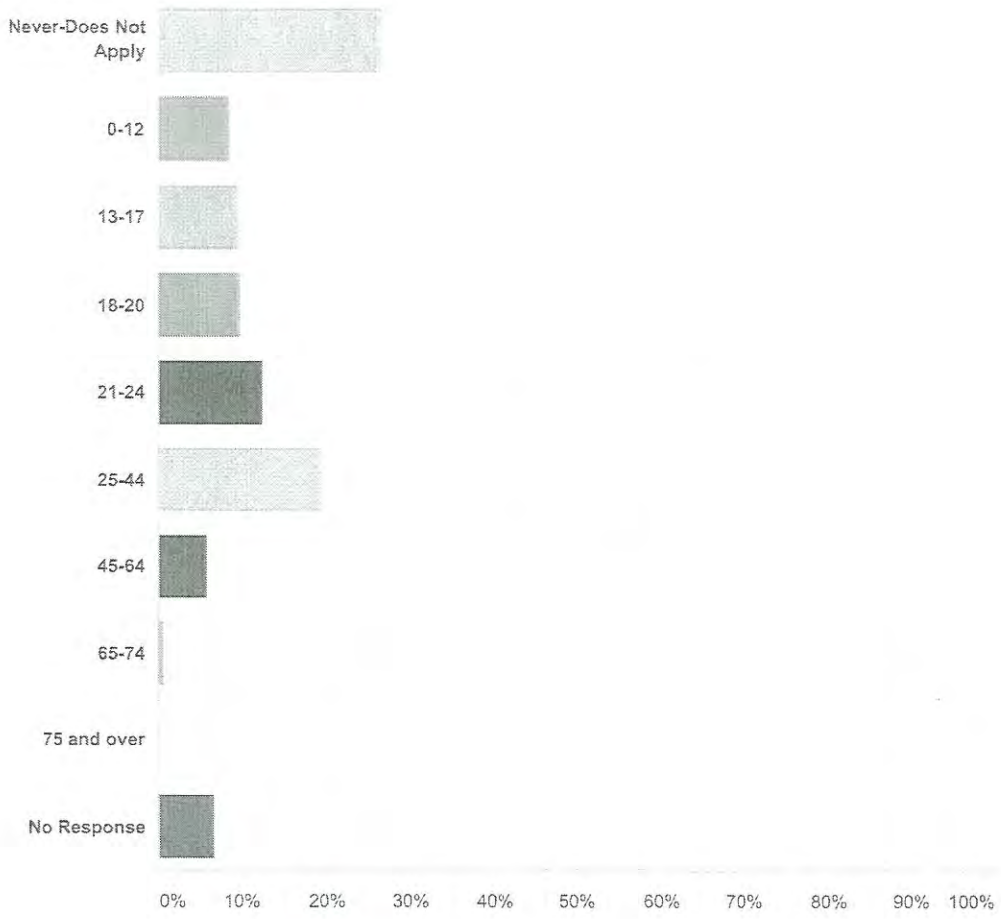
Answered: 295 Skipped: 8



Answer Choices	Responses	
0	27.80%	82
1-4	29.15%	86
5-9	19.32%	57
10-19	9.49%	28
20 and over	4.41%	13
No Response	9.83%	29
Total		**295**

Q11 How old were you the first time you were in the hospital for psychiatric reasons?

Answered: 295 Skipped: 9

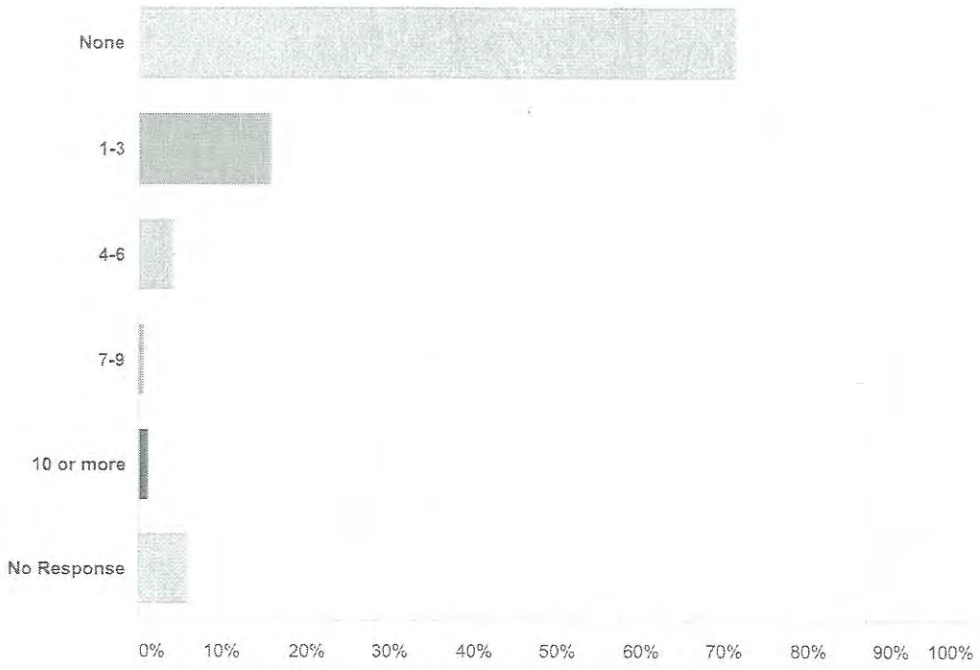


Answer Choices	Responses	
Never-Does Not Apply	26.44%	78
0-12	8.47%	25
13-17	9.83%	29
18-20	9.83%	29
21-24	12.54%	37
25-44	19.66%	58
45-64	5.76%	17
65-74	0.68%	2
75 and over	0.00%	0
No Response	6.78%	20

Total	295

Q12 How many times have you been in the hospital for psychiatric reasons during the past 12 months?

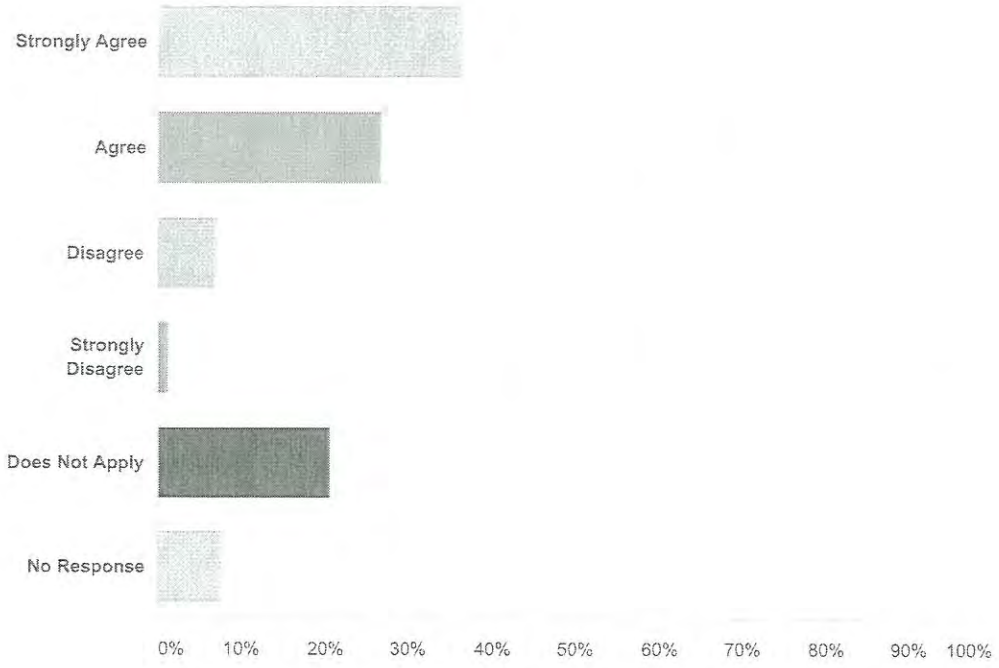
Answered: 295 Skipped: 8



Answer Choices	Responses	
None	71.53%	211
1-3	15.93%	47
4-6	4.41%	13
7-9	0.68%	2
10 or more	1.36%	4
No Response	6.10%	18
Total		**295**

Q13 This peer support center helped me to stay out of the hospital for psychiatric reasons during the last 6 months.

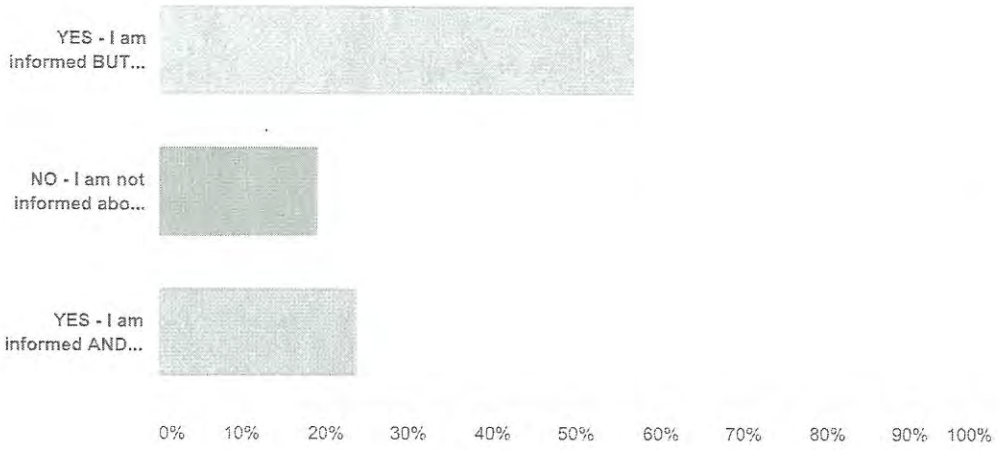
Answered: 295 Skipped: 0



Answer Choices	Responses	
Strongly Agree	36.27%	107
Agree	26.78%	79
Disagree	7.12%	21
Strongly Disagree	1.36%	4
Does Not Apply	20.68%	61
No Response	7.80%	23
Total		**295**

Q14 Are you informed about Peer-Run Crisis Respite?

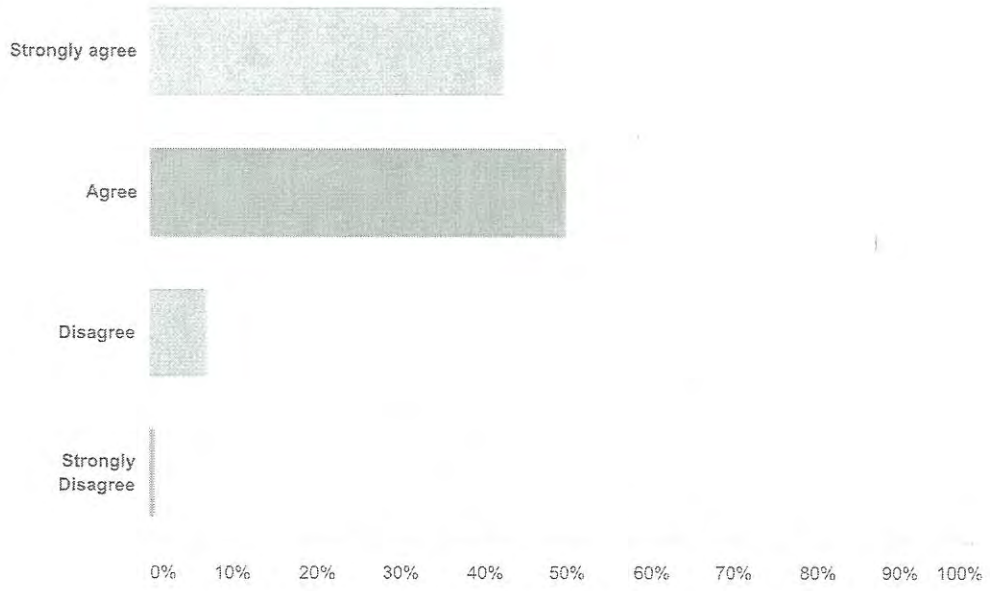
Answered: 295 Skipped: 5



Answer Choices	Responses	
YES - I am informed BUT I do not have a pre-crisis plan.	57.29%	169
NO - I am not informed about Crisis Respite	18.98%	56
YES - I am informed AND I have set up a pre-crisis plan.	23.73%	70
Total		**295**

Q15 This peer support center helps me understand what recovery involves for me.

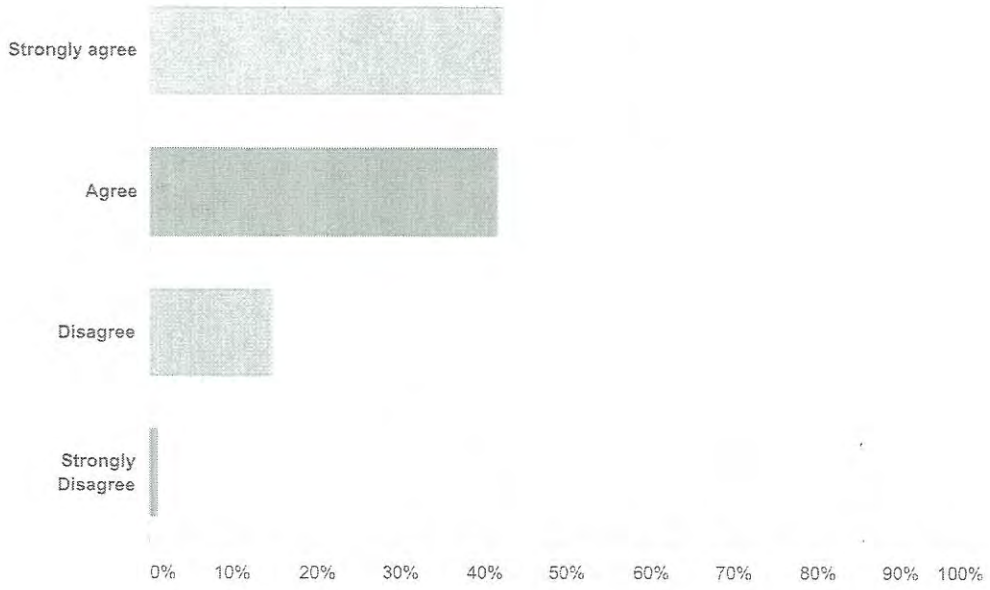
Answered: 295 Skipped: 8



Answer Choices	Responses	
Strongly agree	42.37%	125
Agree	49.83%	147
Disagree	7.12%	21
Strongly Disagree	0.68%	2
Total		**295**

Q16 This peer support center gives me hope that I will recover from mental illness.

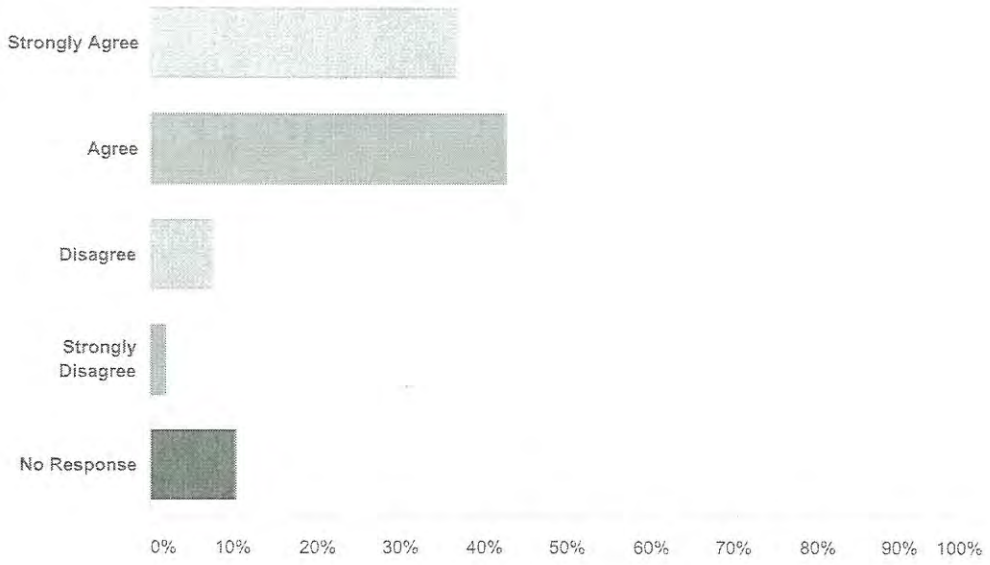
Answered: 295 Skipped: 8



Answer Choices	Responses	
Strongly agree	42.37%	125
Agree	41.69%	123
Disagree	14.92%	44
Strongly Disagree	1.02%	3
Total		**295**

Q17 Because of this peer support center my symptoms are not bothering me as much.

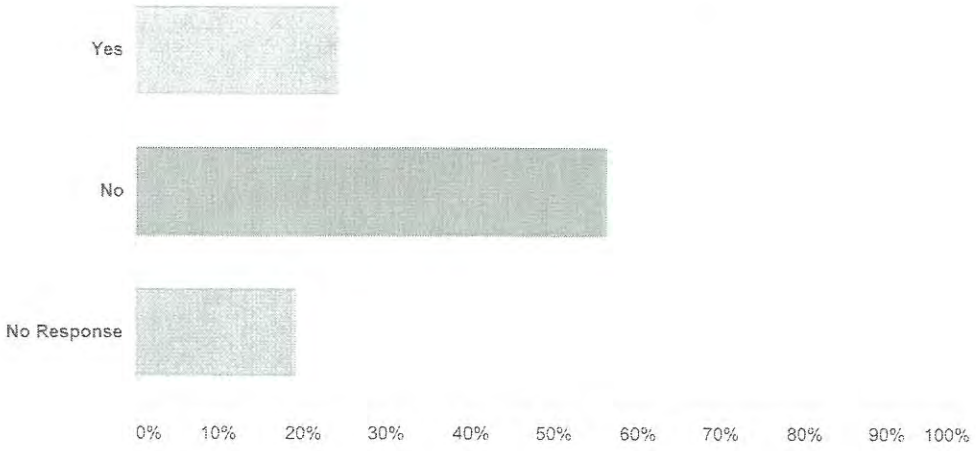
Answered: 295 Skipped: 0



Answer Choices	Responses	
Strongly Agree	36.95%	109
Agree	42.71%	126
Disagree	7.80%	23
Strongly Disagree	2.03%	6
No Response	10.51%	31
Total		**295**

Q18 Have you had any problems associated with alcohol or drug use in the past year?

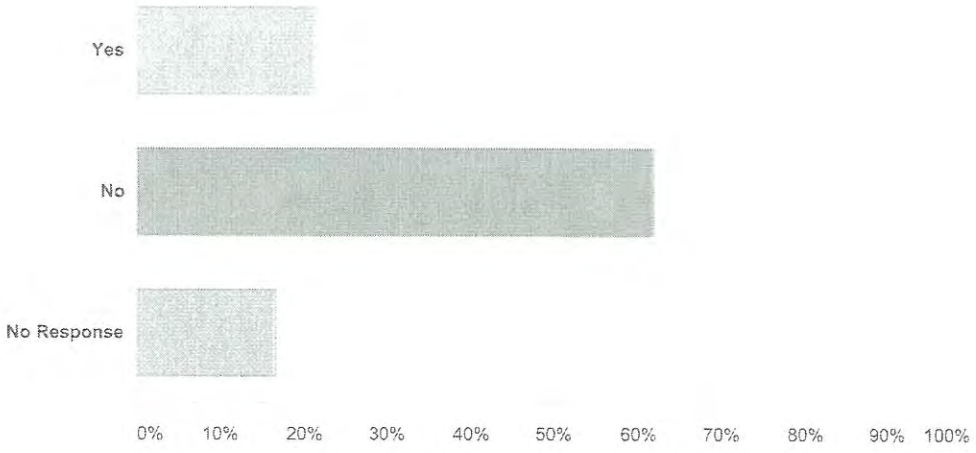
Answered: 291 Skipped: 12



Answer Choices	Responses	
Yes	24.40%	71
No	56.36%	164
No Response	19.24%	56
Total		**291**

Q19 Have you used crisis respite?

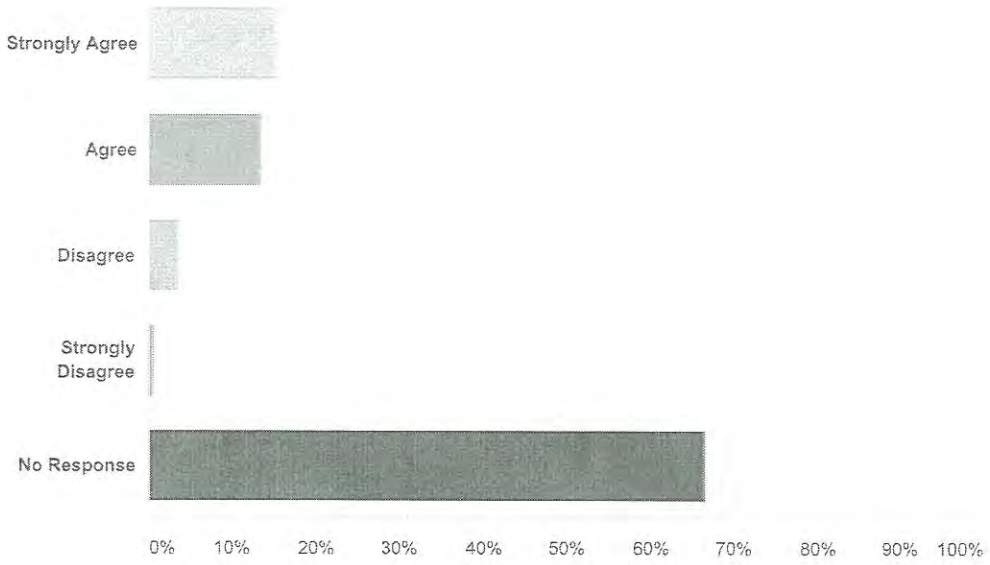
Answered: 295 Skipped: 8



Answer Choices	Responses	
Yes	21.36%	63
No	62.03%	183
No Response	16.61%	49
Total		**295**

Q20 Crisis respite prevented my emotional difficulties from turning into a psychiatric crisis

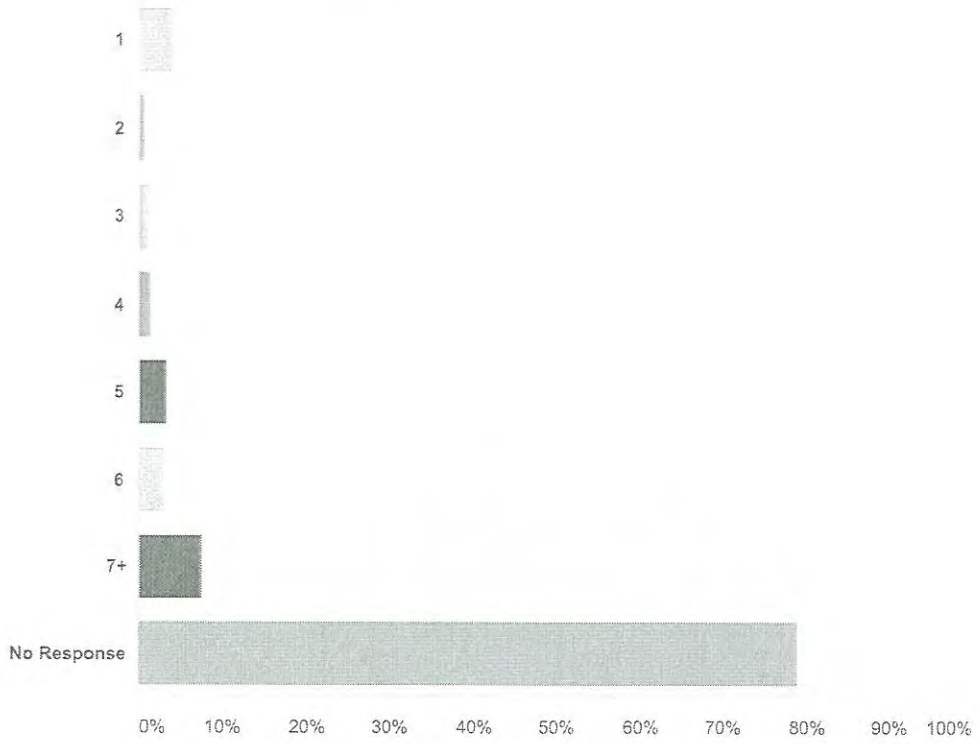
Answered: 293 Skipped: 10



Answer Choices	Responses	
Strongly Agree	15.36%	45
Agree	13.65%	40
Disagree	3.75%	11
Strongly Disagree	0.68%	2
No Response	66.55%	195
Total		**293**

Q21 I spent ____ days at crisis respite.

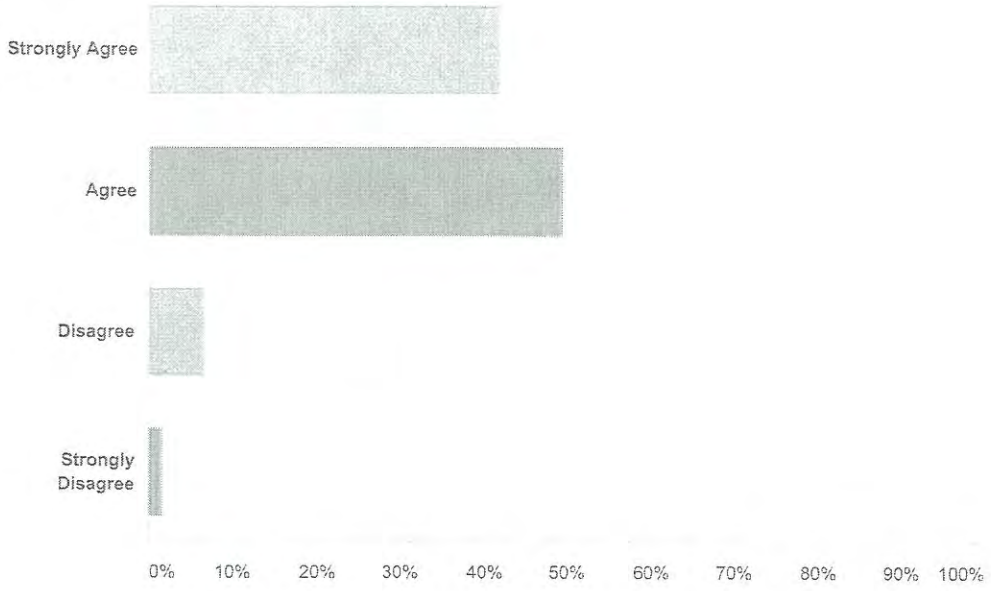
Answered: 293 Skipped: 10



Answer Choices	Responses	
1	4.10%	12
2	0.68%	2
3	1.02%	3
4	1.37%	4
5	3.41%	10
6	3.07%	9
7+	7.51%	22
No Response	78.84%	231
Total		**293**

Q22 Because of this peer support center I am better able to take care of my needs.

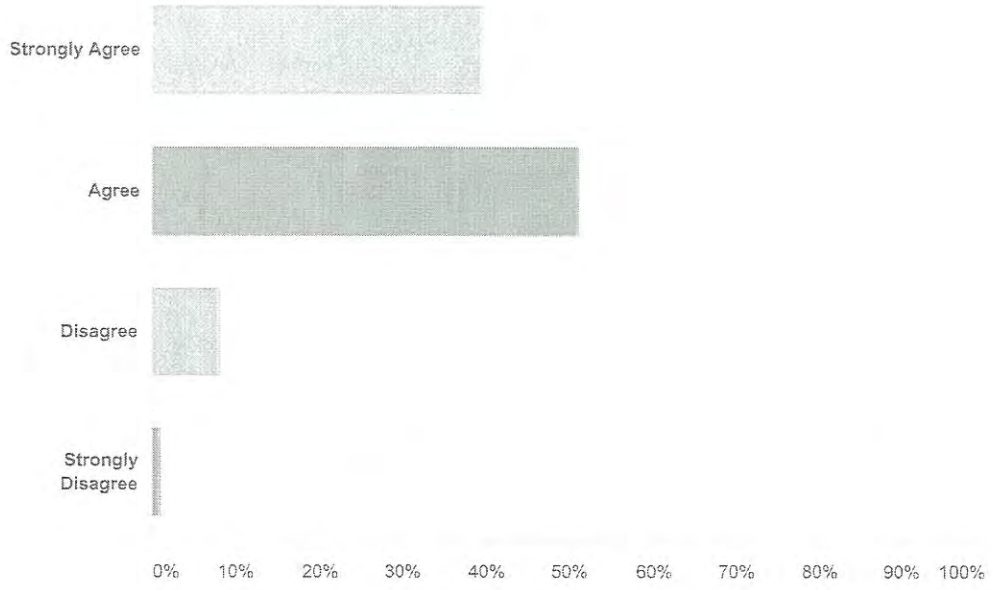
Answered: 295 Skipped: 8



Answer Choices	Responses	
Strongly Agree	42.03%	124
Agree	49.49%	146
Disagree	6.78%	20
Strongly Disagree	1.69%	5
Total		**295**

Q23 Because of this peer support center I am better able to do things that I want to do.

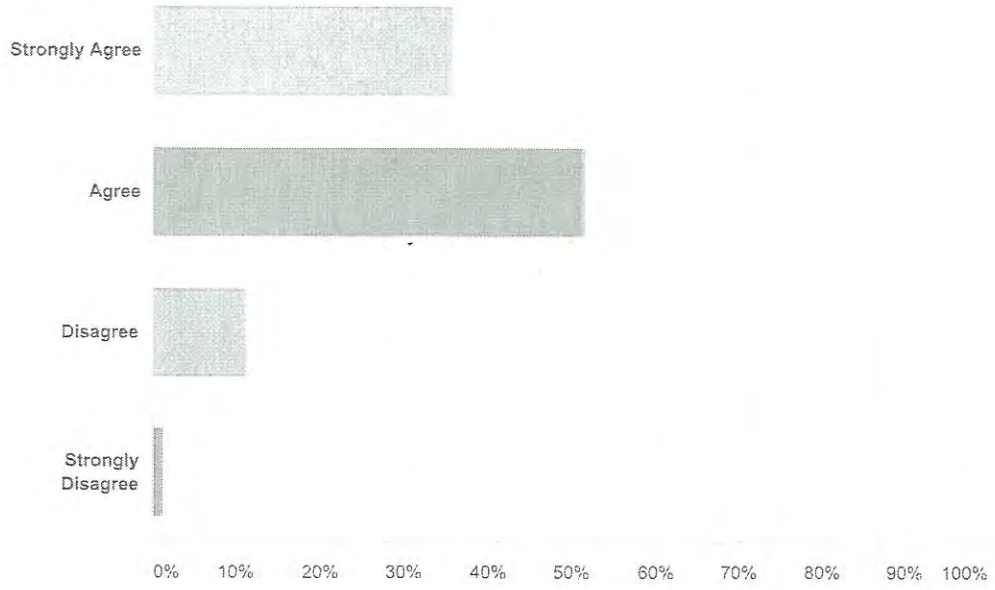
Answered: 295 Skipped: 0



Answer Choices	Responses	
Strongly Agree	39.66%	117
Agree	51.19%	151
Disagree	8.14%	24
Strongly Disagree	1.02%	3
Total		**295**

Q24 Because of this peer support center I am better able to handle things when they go wrong.

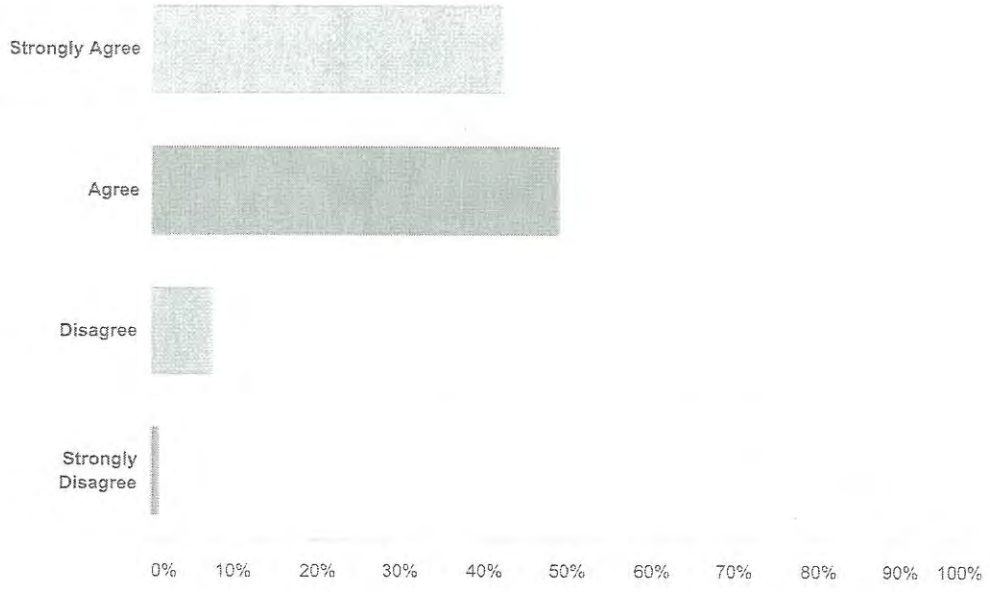
Answered: 295 Skipped: 8



Answer Choices	Responses	
Strongly Agree	35.93%	106
Agree	51.53%	152
Disagree	11.19%	33
Strongly Disagree	1.36%	4
Total		295

Q25 Because of this peer support center I do things that are more meaningful to me.

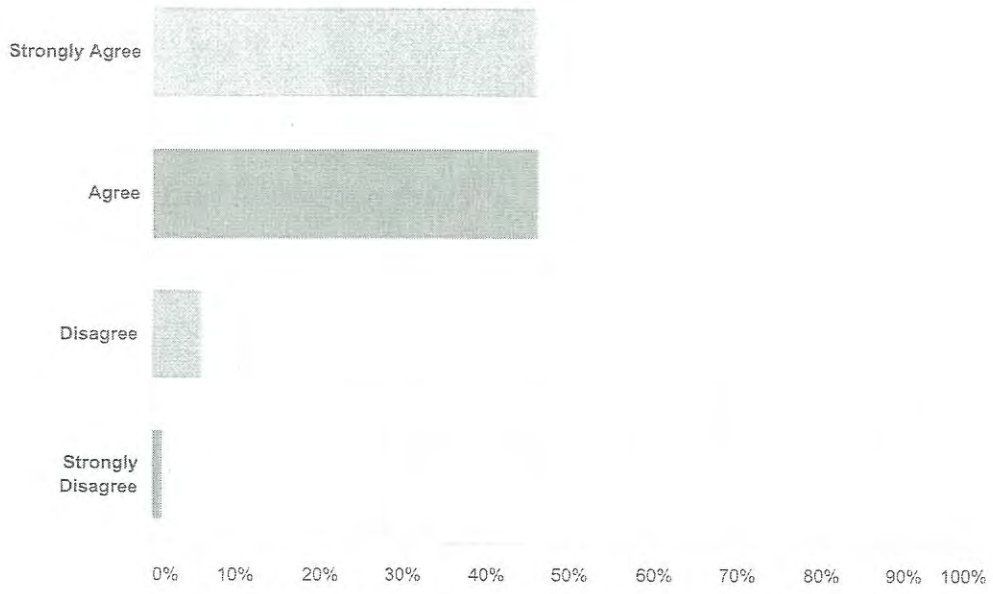
Answered: 295 Skipped: 0



Answer Choices	Responses	
Strongly Agree	42.37%	125
Agree	49.15%	145
Disagree	7.46%	22
Strongly Disagree	1.02%	3
Total		**295**

Q26 I feel that I have contributions to make in life.

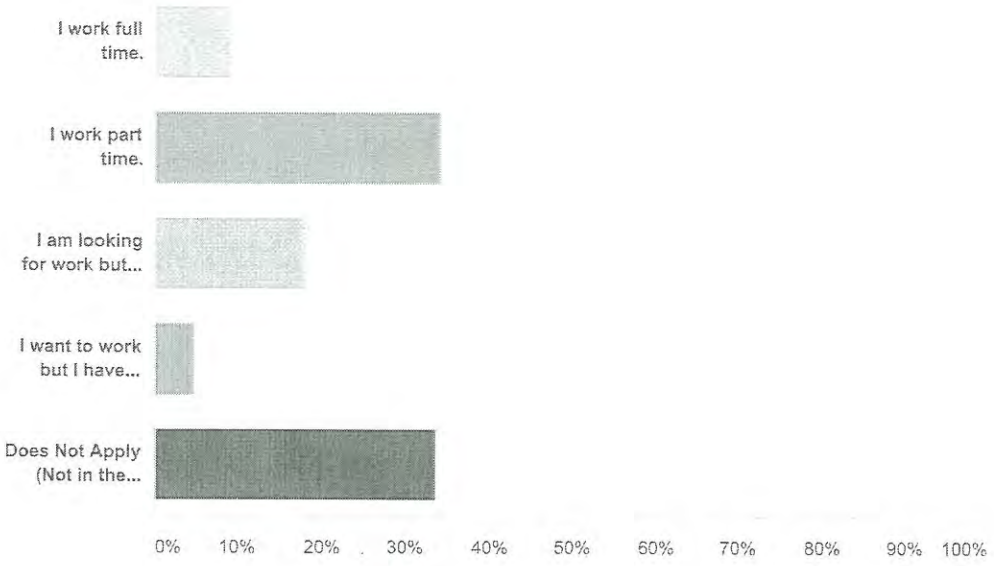
Answered: 295 Skipped: 0



Answer Choices	Responses	
Strongly Agree	46.10%	136
Agree	46.44%	137
Disagree	6.10%	18
Strongly Disagree	1.36%	4
Total		**295**

Q27 Are you currently working for pay?

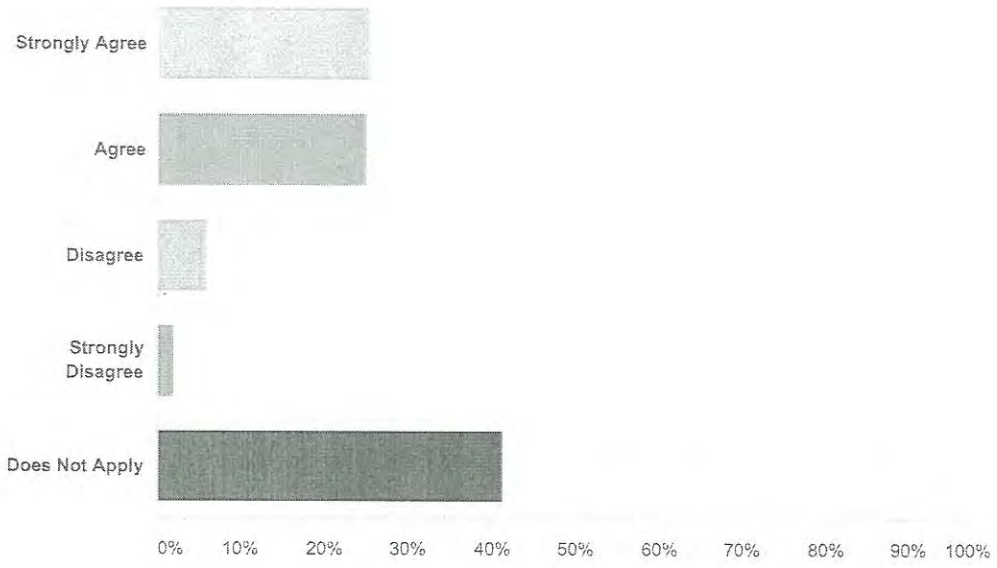
Answered: 295 Skipped: 8



Answer Choices	Responses	
I work full time.	9.49%	28
I work part time.	34.24%	101
I am looking for work but not working .	17.97%	53
I want to work but I have stopped looking.	4.75%	14
Does Not Apply (Not in the labor force)	33.56%	99
Total		295

Q28 This program is helpful with my employment needs.

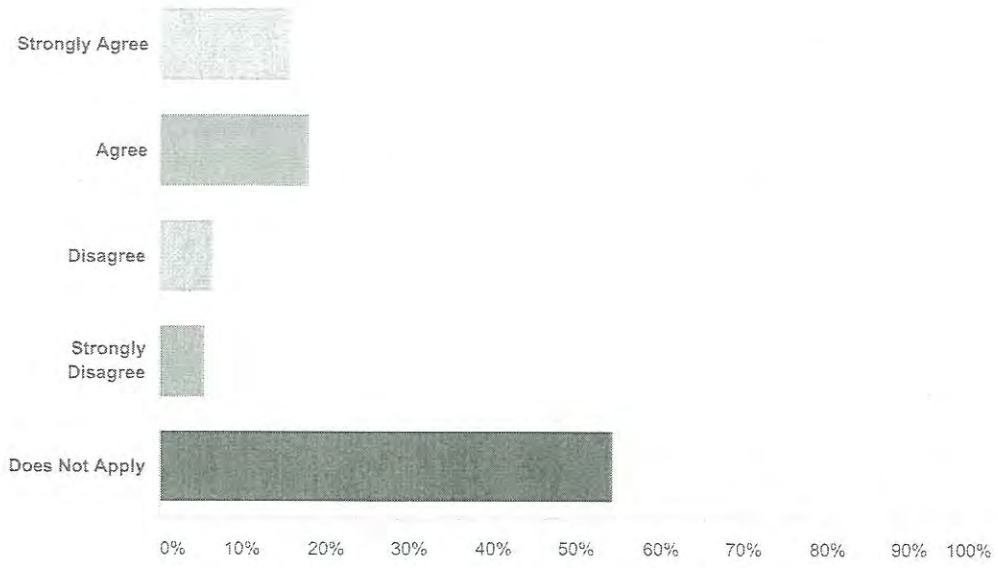
Answered: 295 Skipped: 8



Answer Choices	Responses	
Strongly Agree	25.42%	75
Agree	25.08%	74
Disagree	6.10%	18
Strongly Disagree	2.03%	6
Does Not Apply	41.36%	122
Total		**295**

Q29 This peer support center helps me with my housing needs.

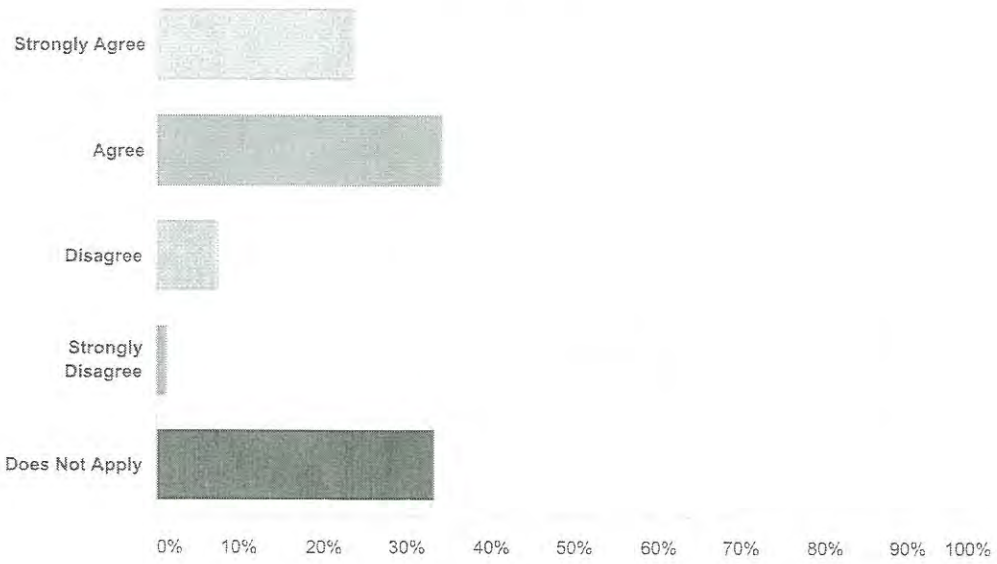
Answered: 295 Skipped: 0



Answer Choices	Responses	
Strongly Agree	15.93%	47
Agree	17.97%	53
Disagree	6.44%	19
Strongly Disagree	5.42%	16
Does Not Apply	54.24%	160
Total		**295**

Q30 This peer support center helps me conduct important personal business (for example, appointments, applications, navigating an appeal, managing or organizing things I need to do.)

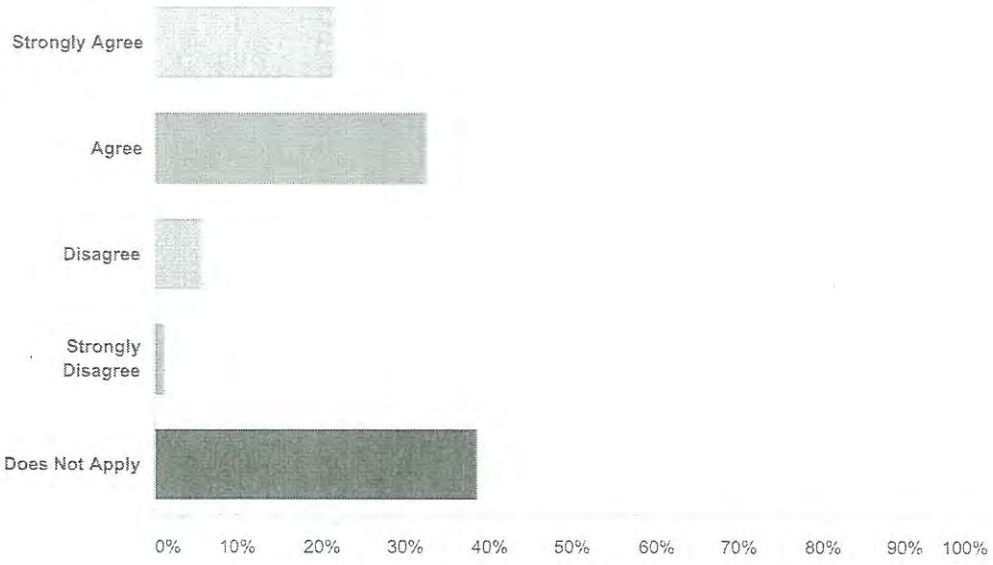
Answered: 295 Skipped: 8



Answer Choices	Responses	
Strongly Agree	23.73%	70
Agree	34.24%	101
Disagree	7.46%	22
Strongly Disagree	1.36%	4
Does Not Apply	33.22%	98
Total		**295**

Q31 This peer support center helps me with my educational or training needs.

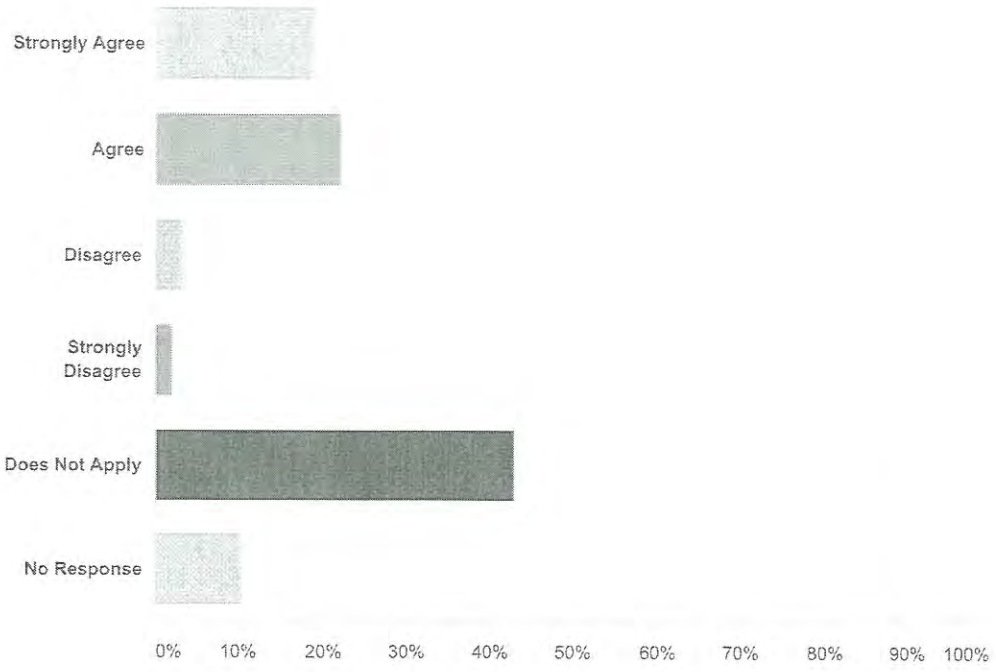
Answered: 295 Skipped: 8



Answer Choices	Responses	
Strongly Agree	21.69%	64
Agree	32.54%	96
Disagree	5.76%	17
Strongly Disagree	1.36%	4
Does Not Apply	38.64%	114
Total		**295**

Q32 This peer support center helps me find resources for dealing with an alcohol or drug problem.

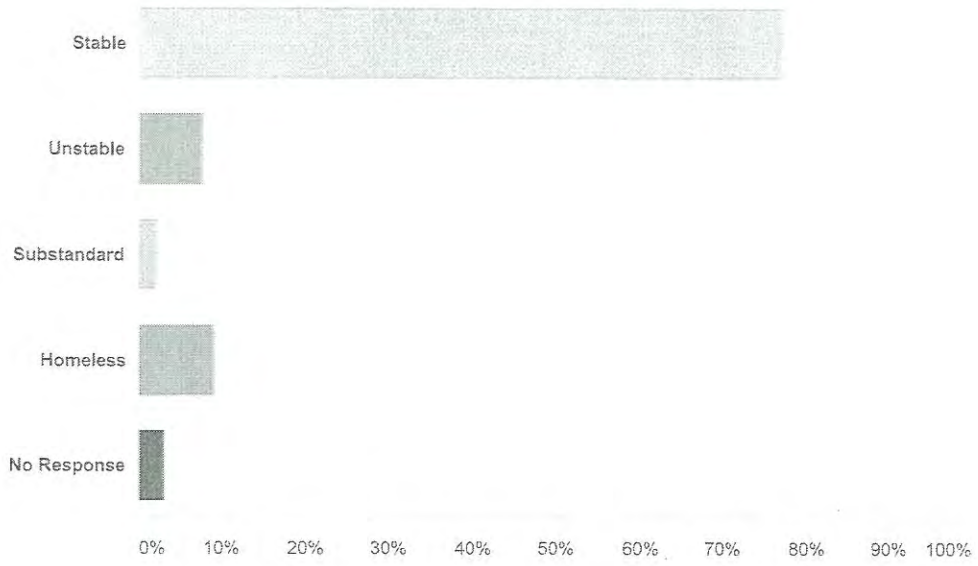
Answered: 295 Skipped: 8



Answer Choices	Responses	
Strongly Agree	18.98%	56
Agree	22.03%	65
Disagree	3.39%	10
Strongly Disagree	2.03%	6
Does Not Apply	43.05%	127
No Response	10.51%	31
Total		**295**

Q33 My current housing situation is:

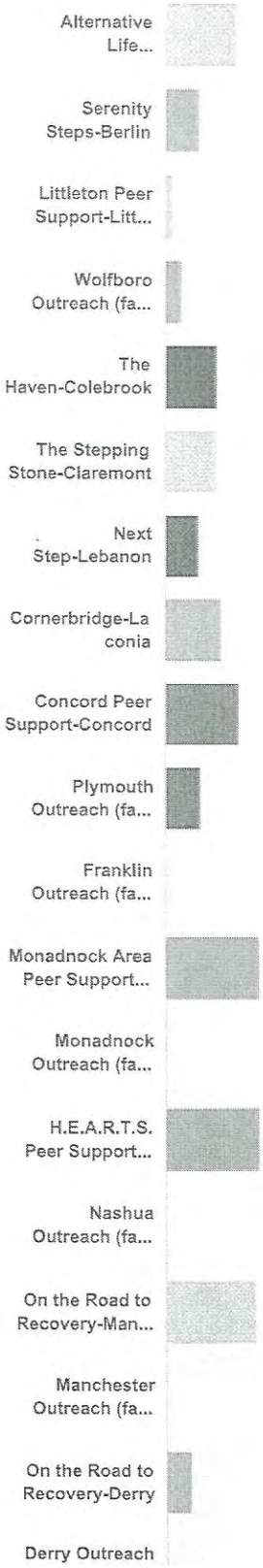
Answered: 294 Skipped: 9

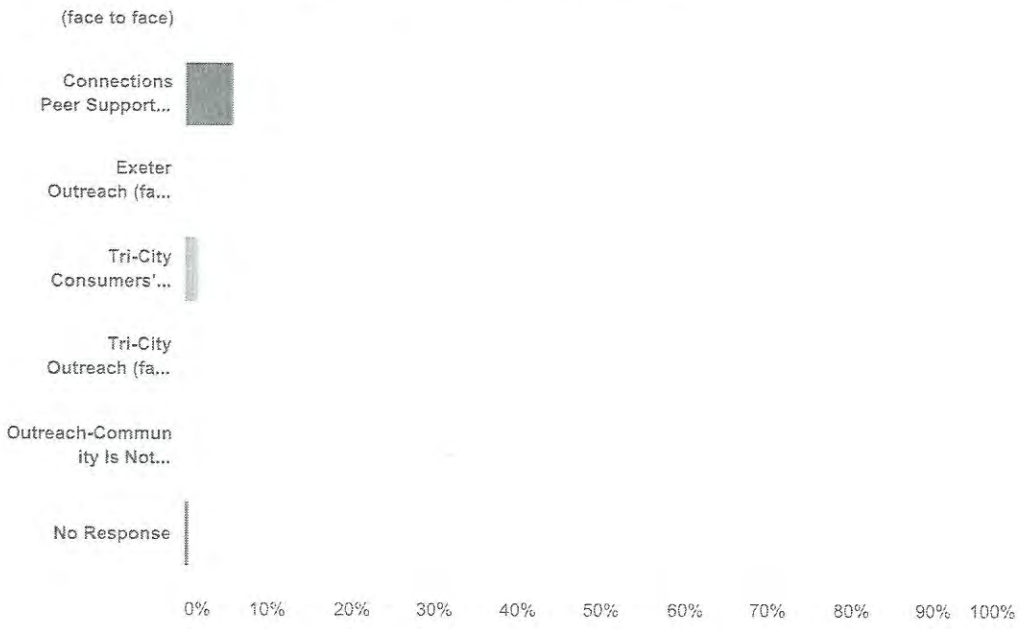


Answer Choices	Responses	
Stable	77.55%	228
Unstable	7.82%	23
Substandard	2.38%	7
Homeless	9.18%	27
No Response	3.06%	9
Total Respondents: 294		

Q34 Which Peer Support Center do you use? (Drop down menu)

Answered: 292 Skipped: 11



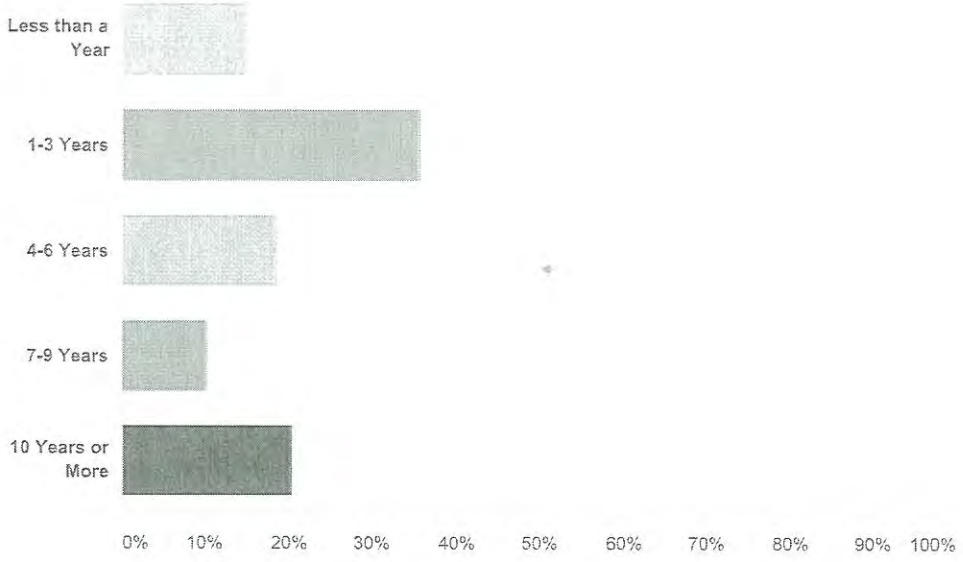


Answer Choices	Responses	
Alternative Life Center-Conway	8.90%	26
Serenity Steps-Berlin	4.11%	12
Littleton Peer Support-Littleton	1.03%	3
Wolfboro Outreach (face to face)	2.05%	6
The Haven-Colebrook	6.51%	19
The Stepping Stone-Claremont	6.51%	19
Next Step-Lebanon	4.11%	12
Cornerbridge-Laconia	7.19%	21
Concord Peer Support-Concord	9.25%	27
Plymouth Outreach (face to face)	4.45%	13
Franklin Outreach (face to face)	0.00%	0
Monadnock Area Peer Support Agency-Keene	11.64%	34
Monadnock Outreach (face to face)	0.00%	0
H.E.A.R.T.S. Peer Support Center of Greater Nashua	11.64%	34
Nashua Outreach (face to face)	0.00%	0
On the Road to Recovery-Manchester	11.30%	33
Manchester Outreach (face to face)	0.00%	0
On the Road to Recovery-Derry	3.08%	9
Derry Outreach (face to face)	0.00%	0
Connections Peer Support Center-Portsmouth	5.82%	17

Exeter Outreach (face to face)	0.00%	0
Tri-City Consumers' Action Cooperative-Rochester	1.71%	5
Tri-City Outreach (face to face)	0.00%	0
Outreach-Community Is Not Listed (face to face)	0.00%	0
No Response	0.68%	2
Total		**292**

Q35 How long have you been coming to this peer support agency? (Or particpate via Outreach)

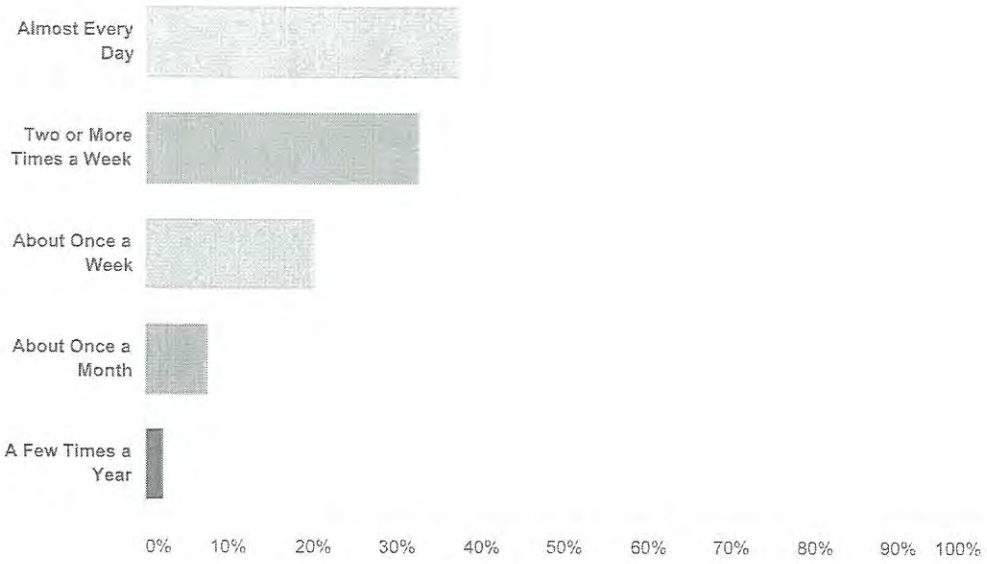
Answered: 292 Skipped: 11



Answer Choices	Responses	
Less than a Year	15.07%	44
1-3 Years	35.62%	104
4-6 Years	18.49%	54
7-9 Years	10.27%	30
10 Years or More	20.55%	60
Total		**292**

Q36 During a typical week, how often to you come to the peer support center? (Or participate via Outreach)

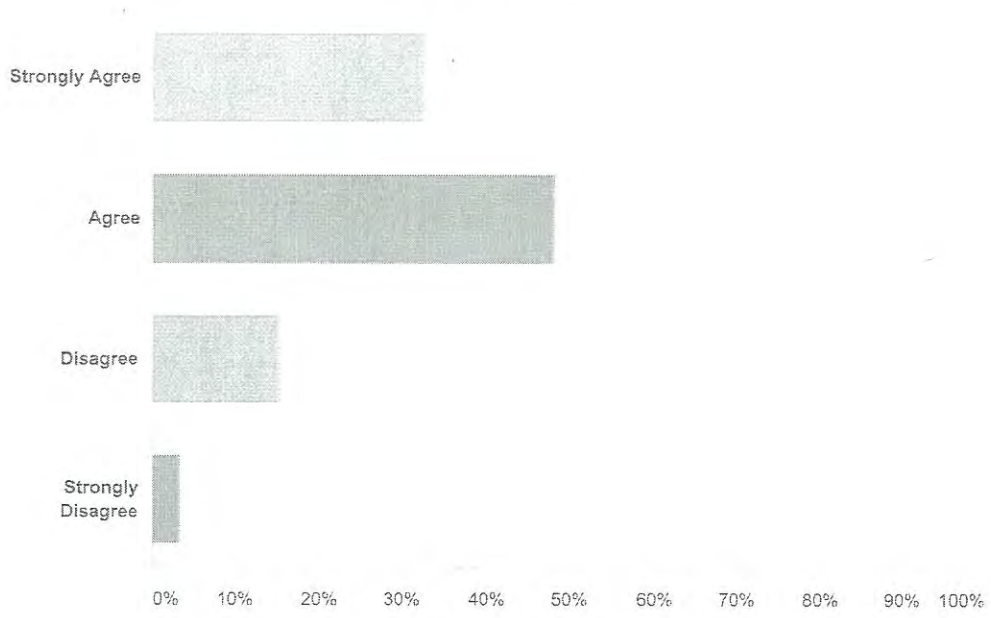
Answered: 292 Skipped: 11



Answer Choices	Responses	
Almost Every Day	37.33%	109
Two or More Times a Week	32.53%	95
About Once a Week	20.21%	59
About Once a Month	7.53%	22
A Few Times a Year	2.40%	7
Total		**292**

Q37 I feel that I am involved in the planning for this peer support center.

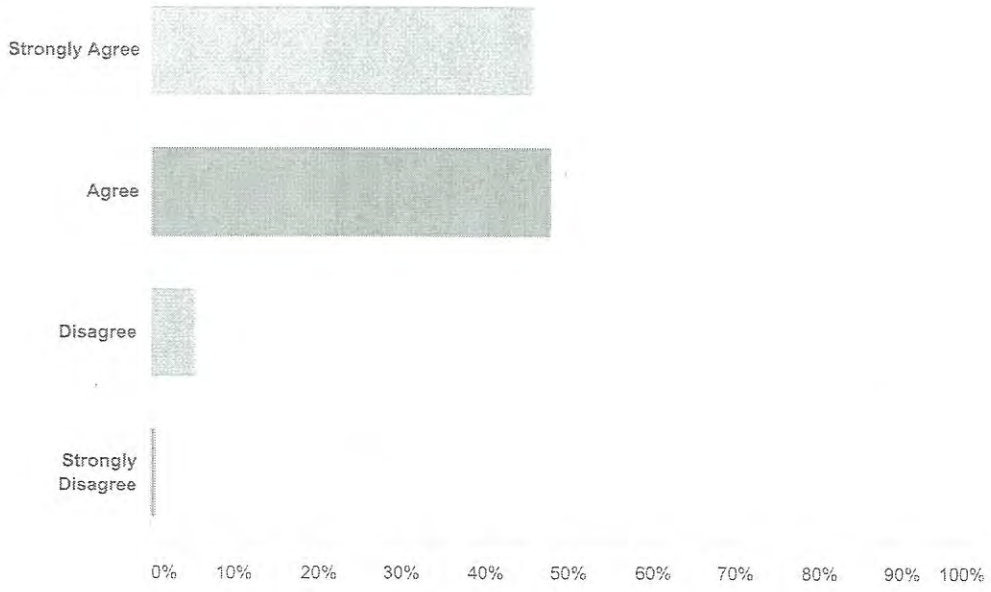
Answered: 292 Skipped: 11



Answer Choices	Responses	
Strongly Agree	32.88%	96
Agree	48.29%	141
Disagree	15.41%	45
Strongly Disagree	3.42%	10
Total		**292**

Q38 The peer support program services are useful to me.

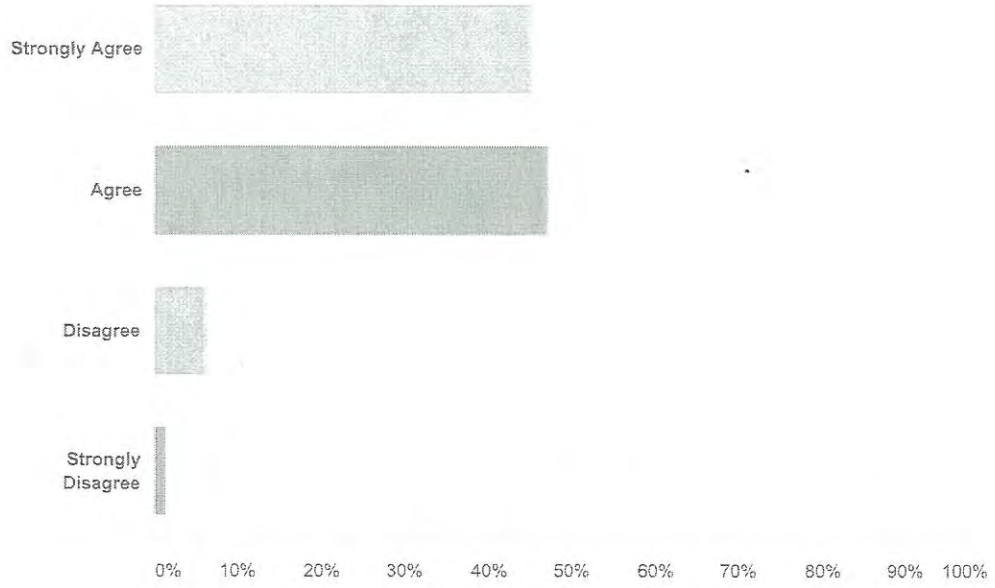
Answered: 292 Skipped: 11



Answer Choices	Responses	
Strongly Agree	45.89%	134
Agree	47.95%	140
Disagree	5.48%	16
Strongly Disagree	0.68%	2
Total		**292**

Q39 I have people I can do enjoyable things with.

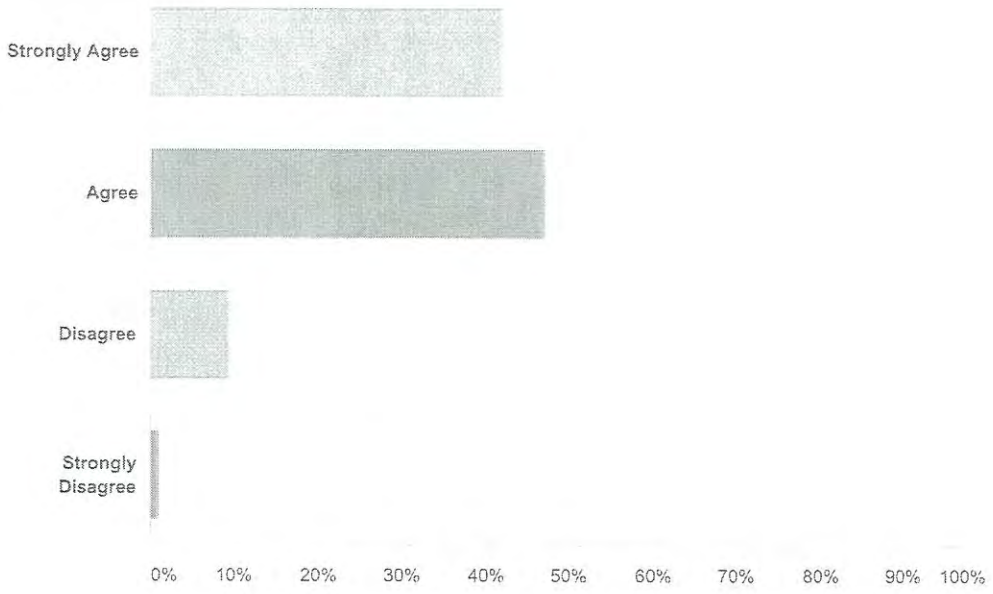
Answered: 292 Skipped: 11



Answer Choices	Responses	
Strongly Agree	45.21%	132
Agree	47.26%	138
Disagree	6.16%	18
Strongly Disagree	1.37%	4
Total		292

Q40 I am happy with the friendships I have.

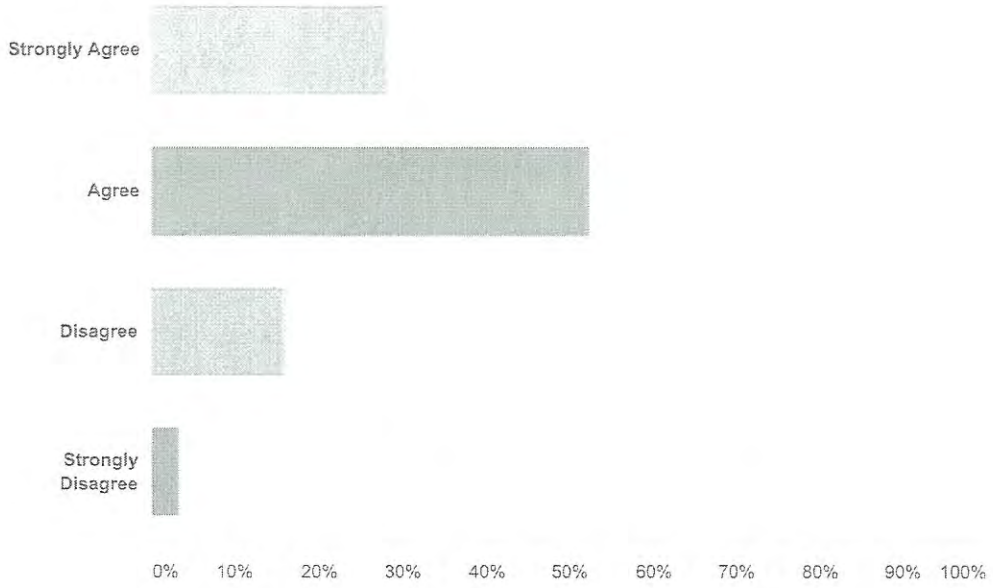
Answered: 292 Skipped: 11



Answer Choices	Responses	
Strongly Agree	42.12%	123
Agree	47.26%	138
Disagree	9.59%	28
Strongly Disagree	1.03%	3
Total		**292**

Q41 The social relationships I have with my neighbors are what I want them to be.

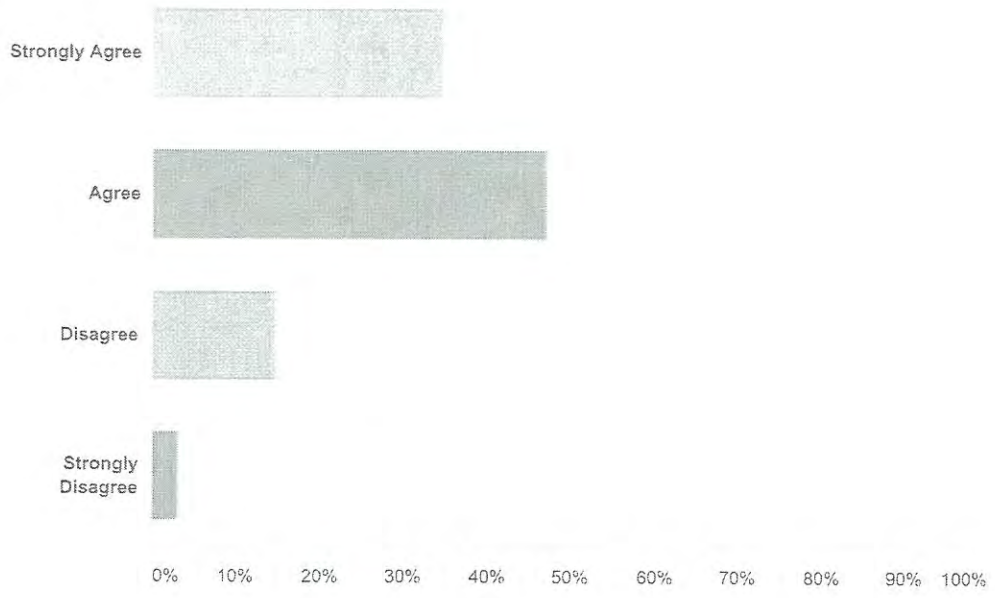
Answered: 292 Skipped: 11



Answer Choices	Responses	
Strongly Agree	28.08%	82
Agree	52.40%	153
Disagree	16.10%	47
Strongly Disagree	3.42%	10
Total		**292**

Q42 I feel I belong in my community.

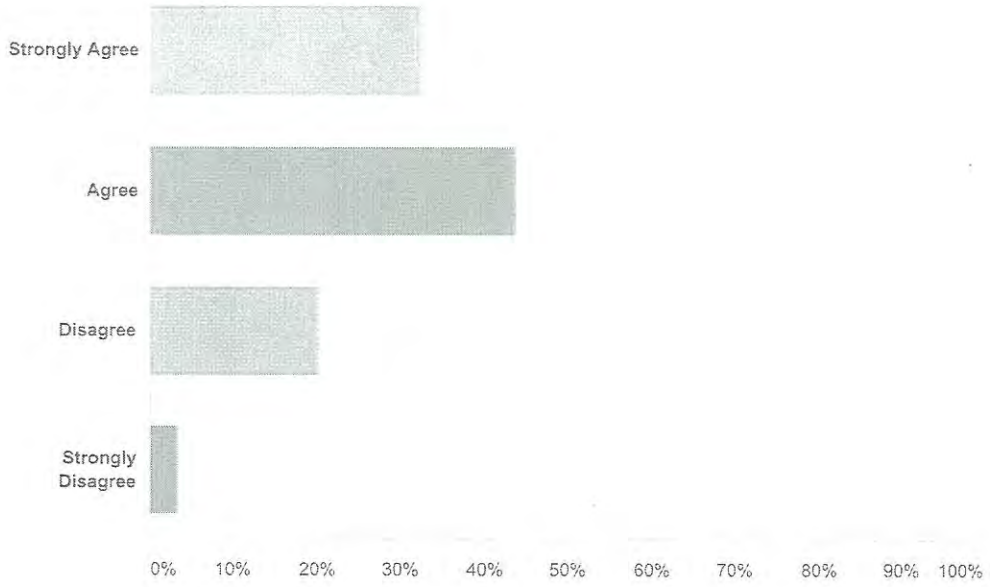
Answered: 292 Skipped: 11



Answer Choices	Responses	
Strongly Agree	34.93%	102
Agree	47.26%	138
Disagree	14.73%	43
Strongly Disagree	3.08%	9
Total		**292**

Q43 I am involved in activities that are not connected to being a participant in the peer support center, like sports, volunteer work, clubs, church events, or other types of community life.

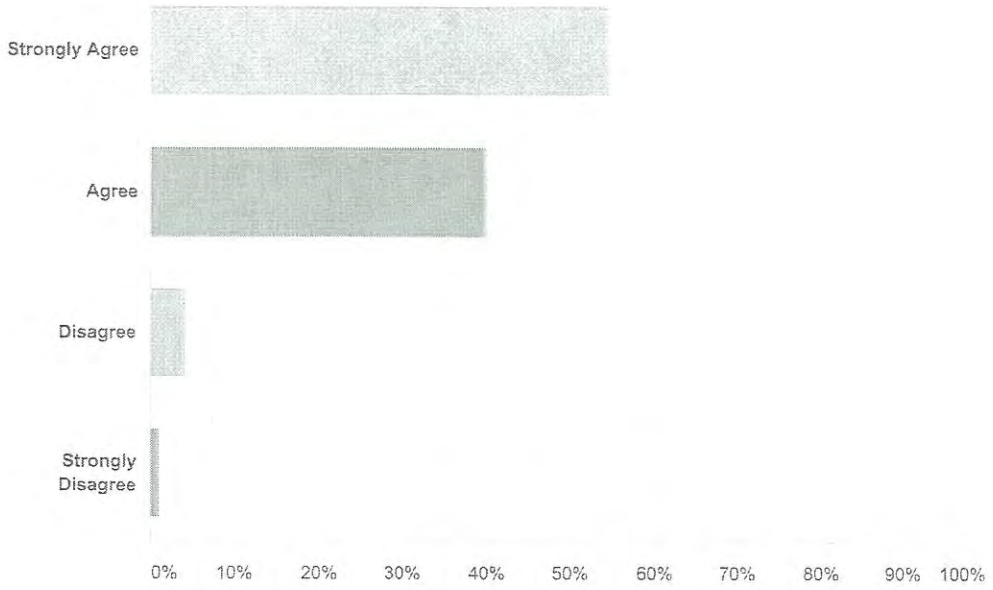
Answered: 292 Skipped: 11



Answer Choices	Responses	
Strongly Agree	32.53%	95
Agree	43.84%	128
Disagree	20.21%	59
Strongly Disagree	3.42%	10
Total		**292**

Q44 Overall, I am satisfied with this peer support center.

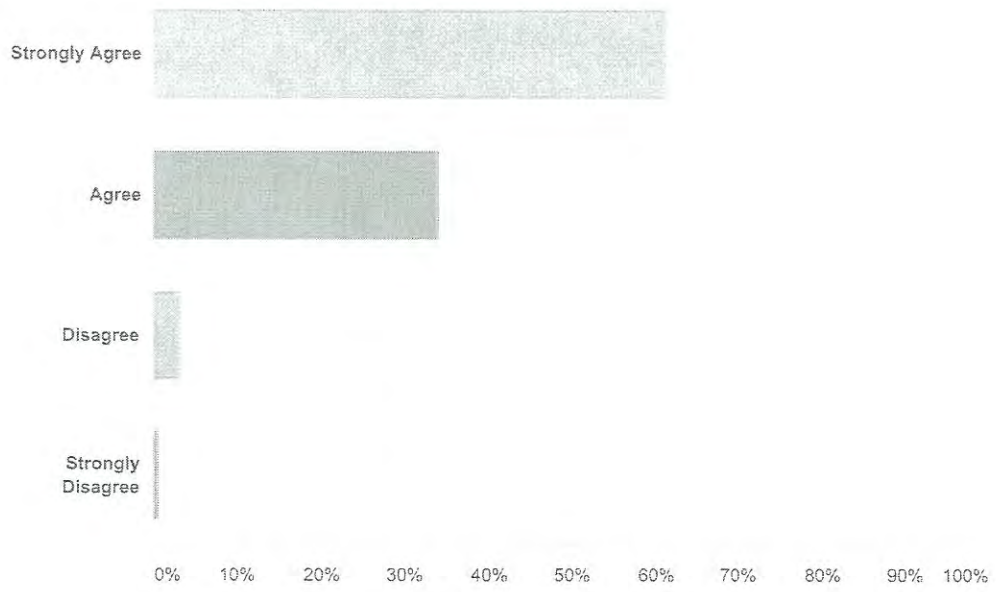
Answered: 292 Skipped: 11



Answer Choices	Responses	
Strongly Agree	54.79%	160
Agree	40.07%	117
Disagree	4.11%	12
Strongly Disagree	1.03%	3
Total		**292**

Q45 I would recommend this peer support center to others dealing with serious mental health issues.

Answered: 292 Skipped: 11



Answer Choices	Responses	
Strongly Agree	61.64%	180
Agree	34.25%	100
Disagree	3.42%	10
Strongly Disagree	0.68%	2
Total		**292**

New Hampshire 2015 Mental Health National Outcome Measures (NOMS): SAMHSA Uniform Reporting System

Utilization Rates/Number of Consumers Served	U.S.	State	U.S. Rate	States
Penetration Rate per1,000 population	7,448,380	34.28	23.07	58
Community Utilization per 1,000 population	7,288,614	34.28	22.57	57
State Hospital Utilization per 1,000 population	137,956	1.51	0.44	51
Other Psychiatric Inpatient Utilization per 1,000 population	331,124	-	1.29	36

Adult Employment Status	U.S.	State	U.S. Rate	States
Employed (Percent in Labor Force)*	757,780	56.2%	45.4%	57
Employed (percent with Employment Data)**	757,780	38.7%	21.7%	57

Adult Consumer Survey Measures	State	U.S. Rate	States
Positive About Outcome	54.6%	72.3%	49

Child/Family Consumer Survey Measures	State	U.S. Rate	States
Positive About Outcome	53.9%	69.7%	48

Readmission Rates:(Civil "non-Forensic" clients)	U.S.	State	U.S. Rate	States
State Hospital Readmissions: 30 Days	7,612	10.5%	8.2%	50
State Hospital Readmissions: 180 Days	17,077	22.8%	18.5%	50
State Hospital Readmissions: 30 Days: Adults	7,069	11.7%	8.4%	49
State Hospital Readmissions: 180 Days: Adults	15,814	25.6%	18.9%	49
State Hospital Readmissions: 30 Days: Children	462	6.4%	5.6%	17
State Hospital Readmissions: 180 Days: Children	1,127	13.3%	13.6%	21

Living Situation	U.S.	State	U.S. Rate	States
Private Residence	4,120,639	90.6%	76.2%	58
Homeless/Shelter	184,710	3.8%	3.4%	54
Jail/Correctional Facility	77,670	0.2%	1.4%	53

Adult EBP Services	U.S.	State	U.S. Rate	States
Supported Housing	71,533	-	2.6%	33
Supported Employment	62,500	14.1%	2.0%	41
Assertive Community Treatment	61,215	7.8%	1.9%	36
Family Psychoeducation	27,706	0.7%	1.8%	14
Dual Diagnosis Treatment	208,811	-	10.5%	24
Illness Self Management	273,289	6.3%	17.3%	21
Medications Management	367,769	71.6%	21.5%	19

Child/Adolescent EBP Services	U.S.	State	U.S. Rate	States
Therapeutic Foster Care	11,562	-	1.3%	24
Multisystemic Therapy	29,635	-	4.6%	18
Functional Family Therapy	26,949	2.7%	4.8%	13

Change in Social Connectedness	State	U.S. Rate	States
Adult Improved Social Connectedness	60.1%	71.3%	49
Child/Family Improved Social Connectedness	74.1%	85.9%	45

*Denominator is the sum of consumers employed and unemployed.
**Denominator is the sum of consumers employed, unemployed, and not in labor force.

SAMHSA Uniform Reporting System - 2015 State Mental Health Measures

STATE: New Hampshire

Utilization	State Number	State Rate	U.S.	U.S. Rate	States
Penetration Rate per 1,000 population	45,461	34.28	7,448,380	23.07	58
Community Utilization per 1,000 population	45,461	34.28	7,288,614	22.57	57
State Hospital Utilization per 1,000 population	1,999	1.51	137,956	0.44	51
Medicaid Funding Status	16,660	54%	4,951,678	69%	55
Employment Status (percent employed)	8,321	39%	757,780	22%	57
State Hospital Adult Admissions	1,521	1.00	103,703	0.82	51
Community Adult Admissions	14,821	0.43	10,824,986	2.29	49
Percent Adults with SMI and Children with SED	20,423	45%	5,265,828	71%	58

Utilization	State Rate	U.S. Rate	States
State Hospital LOS Discharged Adult patients (Median)	8 Days	75 Days	50
State Hospital LOS for Adult Resident patients in facility <1 year (Median)	8 Days	76 Days	49
Percent of Client who meet Federal SMI definition	34%	72%	54
Adults with Co-occurring MH/SA Disorders	11%	23%	53
Children with Co-occurring MH/SA Disorders	1%	7%	49

Adult Consumer Survey Measures	State Rate	U.S. Rate	States
Access to Services	75%	83%	49
Quality/Appropriateness of Services	81%	88%	49
Outcome from Services	55%	72%	49
Participation in Treatment Planning	67%	82%	49
General Satisfaction with Care	81%	88%	49

Child/Family Consumer Survey Measures	State Rate	U.S. Rate	States
Access to Services	78%	85%	48
General Satisfaction with Care	74%	86%	49
Outcome from Services	54%	70%	48
Participation in Treatment Planning	87%	87%	49
Cultural Sensitivity of Providers	92%	93%	48

Consumer Living Situations	State Number	State Rate	U.S.	U.S. Rate	States
Private Residence	23,654	90.6%	4,120,639	76.2%	58
Jail/Correctional Facility	43	0.2%	77,670	1.4%	53
Homeless or Shelter	1,005	3.8%	184,710	3.4%	54

Hospital Readmissions	State Number	State Rate	U.S.	U.S. Rate	States
State Hospital Readmissions: 30 Days	218	10.5%	7,612	8.2%	50
State Hospital Readmissions: 180 Days	472	22.8%	17,077	18.5%	50
Readmission to any psychiatric hospital: 30 Days	-	-	27,405	13.5%	23

State Mental Health Finance (FY2014)	State Number	State Rate	U.S.	U.S. Rate	States
SMHA Expenditures for Community MH *	$135,963,768	69.6%	$30,599,889,110	74.9%	52
SMHA Revenues from State Sources **	$43,575,549	22.5%	$15,925,507,100	39.5%	52
Total SMHA Expenditures	$195,443,878	-	$40,831,941,068	-	52

Adult Evidence-Based Practices	State Number	State Rate	U.S.	U.S. Rate	States
Assertive Community Treatment	921	7.8%	61,215	1.9%	36
Supported Housing	-	-	71,533	2.6%	33
Supported Employment	1,668	14.1%	62,500	2.0%	41
Family Psychoeducation	78	0.7%	27,706	1.8%	14
Integrated Dual Diagnosis Treatment	-	-	208,811	10.5%	24
Illness Self-Management and Recovery	744	6.3%	273,289	17.3%	21
Medications Management	8,503	71.6%	367,769	21.5%	19

Child Evidence Based Practices	State Number	State Rate	U.S.	U.S. Rate	States
Therapeutic Foster Care	-	-	11,562	1.3%	24
Multisystemic Therapy	-	-	29,635	4.6%	18
Functional Family Therapy	251	2.7%	26,949	4.8%	13

Outcome	State Number	State Rate	U.S.	U.S. Rate	States
Adult Criminal Justice Contacts	56	7.7%	27,710	4.8%	36
Juvenile Justice Contacts	4	0.8%	7,705	3.6%	36
School Attendance (Improved)	74	31.1%	17,459	35.3%	26

* Includes Other 24 -Hour expenditures for state hospitals.
** Revenues for state hospitals and community MH

Mental Health Community Services Block Grant: 2015 State Summary Report

New Hampshire

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105 Pleasant St, Concord, NH 03301
603-271-5075
beth.nichols@dhhs.state.nh.us

State Revenue Expenditure Data	Amount
FY 2014 Mental Health Block Grant Revenues	$1,391,267
FY 2014 SMHA Community MH Expenditures	$135,963,768
FY 2014 Per Capita Community MH Expenditures	$102.58
FY 2014 Community Percent of Total SMHA Spending	69.57%
FY 2014 Total SMHA Mental Health Expenditure	$195,443,878
FY 2014 Per Capita Total SMHA Mental Health Expenditures	$147.46

Statewide Mental Health Agency Data*

Measure	Number of Clients	Utilization Rate Per 1,000 Population
Total Clients Served by SMHA System	45,461	34.3
Clients Served in Community Settings	45,461	34.3
Clients Served in State Hospitals	1,999	1.5

Gender	Percent
Female	54.5%
Male	44.1%
Not Available	1.4%

Age	Percent
0 to 12	11.6%
13 to 17	11.9%
18 to 20	5.6%
21 to 24	5.8%
25 to 44	30.4%
45 to 64	27.5%
65 to 74	4.8%
75 and over	2.4%
Not Available	-

Race/Ethnicity	Percent
American Indian or Alaska Native	0.4%
Asian	0.4%
Black or African American	1.4%
Native Hawaiian or Other Pacific Islander	0.0%
White	84.0%
Hispanic or Latino	3.3%
More Than One Race	2.0%
Not Available	11.8%

Living Situation (with Known Status)	Percent
Private Residence	90.6%
Foster Home	0.4%
Residential Care	1.7%
Crisis Residence	0.2%
Residential Treatment Center	-
Institutional Setting	0.6%
Jail (Correctional Facility)	0.2%
Homeless (Shelter)	3.8%
Other	2.6%
Not Available	-

Employment With Known Status (Adults)	Percent
Employed	38.7%
Unemployed	30.2%
Not In Labor Force	31.1%

Medicaid Funding Status of Consumers	Percent
Medicaid Only	41.7%
Non-Medicaid	46.2%
Both Medicaid and Other Funds	12.0%

Consumer Perception of Care: (Adults)	Percent
Access to Services	74.7%
Quality/Appropriateness of Services	81.2%
Outcome from Services	54.6%
Participation in Treatment Planning	66.9%
Overall Satisfaction with Care	80.5%

Consumer Perception of Care: (Children/Adolescents)	Percent
Access to Services	78.3%
Overall Satisfaction with Care	73.9%
Outcome from Services	53.9%
Participation in Treatment Planning	87.0%
Cultural Sensitivity of Providers	92.3%

Implementation of Evidence-Based Practices	Percent
Assertive Community Treatment	7.8%
Supported Housing	-
Supported Employment	14.1%
Family Psychoeducation	0.7%
Integrated Dual Diagnosis Treatment	-
Illness Self-Management and Recovery	6.3%
Medications Management	71.6%
Therapeutic Foster Care	-
Multisystemic Therapy	-
Functional Family Therapy	2.7%

Outcome Measures Developmental	Percent
Adults Arrested this Year	7.7%
Youth Arrested this Year	0.8%
Improved School Attendance	31.1%

Hospital Readmissions (Civil Status Patients)	Percent
State Hospital Readmissions: 30 Days	10.5%
State Hospital Readmissions: 180 Days	22.8%
Readmission to any psychiatric hospital: 30 Days	-

* Based on 2015 URS data provided by US States and Territories per annual reporting guidelines.

The Community Mental Health Block Grant is administered by the Center for Mental Health Services within the Substance Abuse and Mental Health Services Administration of the US Department of Health and Human Services

Access Domain: Demographic Characteristics of Persons Served by the State Mental Health Authority, FY 2015

New Hampshire

Demographics	Total Served				Penetration Rates (per 1,000 population)			States Reporting
	States		US					
	n	%	n	%	State	Northeast	US	
Total	**45,461**	**100.0%**	**7,448,380**	**100.0%**	**34.3**	**35.4**	**23.1**	**58**
0-12	5,251	11.6%	1,190,211	16.0%	28.6	36.1	22.6	58
13-17	5,407	11.9%	875,802	11.8%	64.6	57.3	41.9	58
18-20	2,562	5.6%	324,105	4.4%	44.0	35.7	25.0	58
21-24	2,627	5.8%	431,757	5.8%	37.4	34.5	23.3	58
25-44	13,838	30.4%	2,274,325	30.5%	44.3	38.5	27.1	58
45-64	12,496	27.5%	1,982,464	26.6%	30.7	36.6	23.7	58
65-74	2,188	4.8%	240,502	3.2%	17.7	19.6	9.1	57
75 and over	1,092	2.4%	121,440	1.6%	12.5	16.2	6.1	55
Age Not Available	-	-	7,774	0.1%	-	-	-	28
Female	24,786	54.5%	3,862,676	51.9%	36.9	35.8	23.5	58
Male	20,035	44.1%	3,576,125	48.0%	30.6	34.9	22.5	58
Gender Not Available	640	1.4%	9,579	0.1%	-	-	-	36
American Indian/Alaskan Native	178	0.4%	89,822	1.2%	46.2	23.7	22.7	52
Asian	201	0.4%	92,867	1.2%	6.0	7.5	5.4	54
Black/African American	622	1.4%	1,443,784	19.4%	31.6	53.4	34.2	52
Native Hawaiian/Pacific Islander	11	0.0%	16,829	0.2%	17.3	50.5	23.0	54
White	38,178	84.0%	4,588,378	61.6%	30.6	27.6	18.6	55
Hispanic or Latino Race	*	*	68,501	0.9%	*	-	3.6	11
Multi-Racial	910	2.0%	189,933	2.5%	43.0	25.2	24.8	51
Race Not Available	5,361	11.8%	958,266	12.9%	-	-	-	54
Hispanic or Latino Ethnicity	1,514	3.3%	1,029,735	14.4%	34.8	41.9	18.7	52
Not Hispanic or Latino Ethnicity	32,724	72.0%	5,537,361	77.2%	25.5	32.6	21.5	57
Ethnicity Not Available	11,223	24.7%	605,941	8.4%	-	-	-	48

* Reported under Hispanic Origin.

Note:

Are Client Counts Unduplicated? Unduplicated **Number of States with Unduplicated Counts** 43

This table uses data from URS Table 2a, Table 2b and from the US Census Bureau. All denominators use US Census data from 2014

US totals are calculated uniquely for each data element based on only those states who reported clients served.

Regional groupings are based on SAMHSA's Block Grant Regions.

State Notes:

Table 2a

Age	Counts of children decreased from 2014 due to internal data QA data findings. Queries were reconstructed and resulted in apparently outsize decreases in numbers served.
Gender	One of our providers was unable to provide accurate gender information for 600+ of their clients in time for the 2015 report.
Race	None
Overall	None

Table 2b

Age	Counts of children decreased from 2014 due to internal data QA data findings. Queries were reconstructed and resulted in apparently outsize decreases in numbers served.
Gender	One of our providers was unable to provide accurate gender information for 600+ of their clients in time for the 2015 report.
Race	None
Overall	None

SAMHSA Strategy #4 - Recovery

This strategy, particularly the elements of Health, Purpose, and Community, inform the NH State priority areas for the MHBG and the indicators for data collection via the annual "What Do You Think?" Peer Support Outcomes survey for New Hampshire's grant funded peer support agencies. Below is the text from the FY14-FY15 MHBG Guidance for this strategy:

State authorities are encouraged to implement, track, and monitor recovery-oriented, quality behavioral health care services within their states as authorized under the SABG and MHBG.

Behavioral health care recovery support services include the following four major dimensions that support a life in recovery (the dimensions of recovery):

1. **Health: Overcoming or managing one's disease(s) or symptoms- for example, abstaining from use of alcohol, illicit drugs, and non-prescribed medications if one has an addiction problem- and for everyone in recovery, making informed, healthy choices that support physical and emotional wellbeing.**
    - Promote health and recovery support services for individuals with mental and/or substance use disorders
    - Promote health, wellness, and resiliency
    - Promote recovery-oriented service systems
    - Engage individuals in recovery and their families in self-directed care, shared decision-making, and person centered planning.
    - Promote self-care alternatives to traditional care
2. **Home: Stable and safe place to live**
    - Ensure that supported independent housing, and recovery housing are available for individuals with mental and/or substance use disorders
    - Improve access to mainstream benefits, housing assistance programs, and supportive services for people with mental and/or substance use disorders
    - Build leadership, promote collaborations, and support the use of evidence-based practices related to permanent supportive housing and recovery housing
    - Increase knowledge of the behavioral health filed about housing and homelessness among people with mental and/or substance use disorders
3. **Purpose: Meaningful daily activities, such as job, school, volunteerism, family caretaking, or creative endeavors, and the independence, income, and resources to participate in society.**
    - Increase gainful employment and educational opportunities for individuals with or in recovery from mental and/or substance use disorders
    - Increase the proportion of individuals with mental and/or substance use disorders who are gainfully employed and/or participating in self-directed educational services
    - Develop employer strategies to address national employment and education disparities among people with identified behavioral health problems
    - Implement evidence-based practices related to employment and education for individuals with mental and/or substance use disorders
4. **Community: Relationships and social networks that provide support, friendship, love, and hope**
    - Promote peer support and the social inclusion of individuals with or in recovery from mental and/or substance use disorders
    - Increase the number and quality of consumer/peer recovery support specialists and consumer-operated/peer-run recovery support service provider organizations
    - Promote the social inclusion of people with mental and/or substance use disorders

These elements – health, home, purpose, and community – are central to recovery from mental and/or substance use disorders. Recovery support services include efforts such as self-directed care, shared decision making, peer-operated services, peer specialists and recovery coaches, wellness activities, supported housing, recovery housing, self-care, supported employment, supported education, warm lines, person-centered planning and family support, social inclusion, and rights protection.

Technical information

Representation of Peer Participants

It is important to note that while the survey respondents are believed to be representative of the larger PSA population, this is not a random sample. Opinions of non-respondents may differ from those of survey respondents.

Agency Non-participation

With strong encouragement, all agencies participated this year unlike in previous years. We did not, however, receive any responses from those only participating in Outreach.

Early Exits

Two hundred twenty-nine (229) respondents completed the survey to the end. All statistics are calculated from the completed surveys. There is no information as to why people exited the survey before finishing it, or exiting when they did. It is possible that some of the exits indicate false starts before returning to complete the survey.

Cross Tabbed Data

The survey contained 45 discrete items. Agency directors may request cross tabbing for items of interest, providing there are sufficient numbers of respondents to protect identity. Agency directors also receive individualized reports with the results for their agency, again, assuming there are sufficient numbers of respondents to protect identity.

A Note About Research

This is neither a scientific survey nor a research paper. The reader interested in learning more about peer support is encouraged to contact the Office of Consumer and Family Affairs at (603) 271-5045 or at 105 Pleasant St., Concord, NH 03301.

PEER SUPPORT AGENCIES OF NEW HAMPSHIRE

Region I

Conway Peer Support Center
Executive Director: Lauara Mekinona
6 Main Street
PO Box 241
Conway, NH 03818
Phone: (603)447-1765
Website: www.alccenters.org/conwayctr
Email: alccenters@gmail.com

Wolfeboro Outreach Program
Team Leader: Robin Liakos
Wolfeboro, NH 03896
Phone: (603)662-2140
Email:wolfeboroootreach@gmail.com

The Haven
Team Leader: Joanne Hill
27 Lombard Street
Colebrook, NH 03576
Phone: (603)237-4353
Website: www.alccenters.org/colebrookctr
Email: colebrookhaven@gmail.com

Serenity Steps
Team Leader: Ellen Tavino
567 Main Street
Berlin, NH 03570
Phone: (603)752-8111
Website: www.alccenters.org/berlinctr
Email: serenitysteps@gmail.com

Littleton Peer Support
Team Leader:
267 Main Street
Littleton, NH 03561
Website: www.alccenters.org/littletonctr
Email: littletonpsc@gmail.com

Main Website: www.alccenters.org
Warmline: 1-866-447-1765

Region II

Stepping Stone
Executive Director: Susan Seidler
108 Pleasant Street
Claremont, NH 03743
Phone: (603)543-1388

Next Step
Program Director: Mark Nichols
109 Bank Street
Lebanon, NH 03766
Phone: (603)448-6941

Website: www.steppingstonenextstep.org
Warm Line: 1-888-582-0920

Region III and IV

Concord Peer Support
(Lakes Region Consumer Advisory Board)
Executive Director: Patt Fancy
55 School Street
Concord, NH 03301
Phone: (603)224-0083
Website: www.nhcornerbridge.org
Email: lrcab1@metrocast.net

Cornerbridge of Laconia
Program Director:
328 Union Ave
Laconia, NH 03247
Phone: (603)528-7742
Email: cornerbridge@comcast.net

Region V

Monadnock Area Peer Support Agency
Executive Director: Polly Morris
64 Beaver Street
PO Box 258
Keene, NH 03431
Phone: (603)352-5093
Website: www.monadnockpsa.org
Email: dlicata@monadnockpsa.org
Warm Line: 1-866-352-5093

Region VI

HEARTS Peer Support Center of Greater Nashua
Executive Director: Ken Lewis
5 Pine Street Extension
PO Box 1564
Nashua, NH 03061
Phone: (603)882-8400
Website: www.heartspsa.org
Email: kenl-hearts@comcast.net
Warm Line: 1-800-306-4334

Region VII

On The Road To Wellness
Executive Director: Warren Bouchard
13 Orange Street
Manchester, NH 03104
Phone: (603)623-4523
Website: www.otrtw.org
Email: Manchester@otrtw.org
Warm Line: 1-800-306-4334

Region VIII

Seacoast Consumer Alliance Peer Support Center
Executive Director: Karen Blass
544 Islington Street
Portsmouth, NH 03801
Phone: (603)427-6966
Email: scapeersupportcenter@comcast.net
Warm Line: 1-800-809-6262

Region IX

Tri-City Consumers' Action Alliance
Executive Director: Martha Jo Hewitt
36 Wakefield Street
Rochester, NH 03867
Phone: (603)948-1046
Website: www.tricitycoop.org
Email: tricitycoop@metrocast.net

Region X

On The Road To Wellness
Program Manager: David Blacksmith
12 Birch Street
Derry, NH 03038
Phone: (603)552-3177
Website: www.otrtr.org
Email: derry@otrtr.org