

MH-CoPES questionnaire for people using community services

Your opinion will help create better services and better outcomes: this is your opportunity to help services improve in the North Coast Area Health Service.

This questionnaire will gather your views about the community mental health service you have used in the last six months. *Filling in this questionnaire is voluntary.*

Privacy guarantee:

If you choose to complete the questionnaire, NSW Health guarantees that your privacy will be maintained.

- Your completed questionnaire will go to an organisation independent of the health service – your community mental health service will not see your completed questionnaire.
- No names will be used on the questionnaires.
- Reports will not identify individuals in any way.

How will the information I give be used to improve services?


- Every Area Mental Health Service will receive a summary report showing all the things people have said need improvement.
- Each service is then expected to work with consumers to make improvements based on the summary report.
- Summaries of the information will be publicly reported.

How do I fill it in?




- You will be asked to say what needs to be improved, from YOUR OWN EXPERIENCE.
- To answer most of the questions, just choose the coloured circle that is the best answer for you:

 The red circle means *this needs major improvement*

 The yellow circle means *this needs some improvement*

 The green circle means *this needs no improvement*

For example, Q1 says:

The ease of getting the services and supports I need ...   

If you feel this was something that needed some improvement, you would mark the yellow circle with a cross, like this:   

To return the questionnaire

- Please do not give it to back to the service
- Put it in the return envelope included and return by mail.

If you want help to fill in the questionnaire you could: **(options to come later)**

If you want your opinions to be included in a summary report to the specific service you used, please complete this section. If you only want your opinion to be included in the summary for the whole Area, please go to Q1.

• How long have you been using mental health services? Tick which fits best:

1–12 months

more than 12 months

• In which suburb/town is the community mental health service? _____

Based on your experiences with THIS community mental health service in the last six months, rate how you feel about each, indicating if you think it needs major improvement, some improvement, or no improvement.

Needs major improvement
Needs some improvement
Needs no improvement



These first few items are about improving access to the care you need:

- | | | | | |
|----------|---|--|--|--|
| 1 | The ease of getting the services and supports I need ... | | | |
| 2 | The ease of accessing help from the service in a crisis ... | | | |




These next few items are about improving the treatment and care you receive at the service:




- | | | | | |
|----------|---|--|--|--|
| 3 | How well the doctor listens to me ... | | | |
| 4 | The ease of seeing a doctor when I need to ... | | | |
| 5 | The amount of time staff spend with me ... | | | |
| 6 | The level of respect staff show for me ... | | | |
| 7 | How well staff listen to me ... | | | |
| 8 | The sense of hope staff show for my future ... | | | |
| 9 | The opportunities for me to have input into my own care ... | | | |









Needs major improvement
Needs some improvement
Needs no improvement






- 10 The encouragement staff give me to join consumer focussed programs (for example: support groups, drop-in centres, phone lines, self-help, peer support, consumer advocacy groups) ...   




- 11 The opportunities for my family/carer to be involved in my treatment when I want ...   




- 12 How safe I feel when I am in contact with this mental health service ...   




- 13 How safe I feel in raising concerns with the service when I have a problem ...   




- 14 The service's willingness to address problems ...   




The next few questions are about improving the information provided by services:




- 15 The amount of information I get about my mental illness and treatment ...   

- 16 Information about my rights and responsibilities ...   

- 17 Information about mental health services and programs available ...   

- 18 Information about other support services (eg: housing, employment, family support, Centrelink etc) ...   




- 19 Information about how to maintain my mental health ...   




- 20 Information about who to contact in a crisis ...   

The next question is about improving privacy:

- 21 How well my personal information is kept private ...   

The next questions are about improving choice of treatment:

- 22 The amount of information I get about different types of treatments available ...   

- 23 The choices I have about the treatment I receive ...   

... continued overleaf

In this last section, please feel free to make any comments about the community mental health service you receive:

24 Overall, what do you think of the support you receive from this community mental health service?

25 What do you like least about the services you receive here?

26 What do you like most about the services you receive here?

27 Do you have any other suggestions for how the service could improve?

These last questions come from the NSW Health Survey and are about your overall view:

28 In the last three months have you attended a hospital emergency department (or casualty) for your own mental health care?

- Yes No Don't know

If yes, overall what do you think of the care you received at this emergency department?

- Excellent Very good Good Fair Poor Don't know

29 Overall, what do you think of the care you received at the community health centre?

- Excellent Very good Good Fair Poor Don't know

Thank you for your time and comments.