

2017-2018

Client and staff
perspectives on
Centro Sávila's
clinical program

15 May 2018



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EXECUTIVE SUMMARY

Centro Sávila is committed to providing mental health care in underserved communities in Albuquerque that is conscious both of the client's cultural background as well as the structural determinants of mental health and mental health care.

The Evaluation Lab worked with Centro Sávila to evaluate its clinical mental health services program. This evaluation sought to understand the perspectives of the two main stakeholder groups in Centro Sávila's clinical program: its clients and its clinicians. Specifically, the evaluation team sought to answer questions about how client and clinician experiences at Centro Sávila compared to experiences receiving and providing mental health services at other mental health organizations.

The primary aim of this evaluation was to assess the extent to which Centro Sávila is meeting its organizational goals of (1) ensuring access to behavioral health care for underserved and immigrant population of the South Valley and International District, (2) providing culturally and linguistically appropriate care for these populations, and to determine (3) whether clinicians' experiences with patients are consistent with Centro Sávila's goals regarding serving the community. To assist in the development of Centro Sávila's internal evaluation capacity, the evaluation team used client and clinician feedback to produce a quantitative instrument that can be administered quickly and easily to Centro Sávila's clients.

The Evaluation Lab conducted five in-depth interviews. Two interviews were with individuals who received or were receiving clinical services from Centro Sávila, and three interviews were with Centro Sávila clinicians with varying levels of clinical experience.

In the course of these interviews, the evaluation team found that clients reported overwhelmingly positive experiences with Centro Sávila's clinical program and that clinicians appreciated the patient-centered and flexible approach that Centro Sávila takes to providing mental health care.

The evaluation team did identify some areas in which Centro Sávila might be able to make changes that could improve their clinical program by facilitating clinicians' ability to provide high quality mental health care. These recommendations include developing a community engagement strategy and a more formalized outline of procedures and expectations in terms of clinical supervision, internships, and certain administrative tasks.

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1. Introduction

Established in 2011, Centro Svila serves South Valley communities by providing high quality behavioral health care, assistance in navigating the healthcare system, and community support services. Services offered are culturally appropriate and available regardless of ability to pay. Centro Svila’s staff aims to cultivate a peaceful and respectful healing space that is accessible to all, especially to marginalized populations such as impoverished, Spanish-speaking, and undocumented individuals. Centro Svila has a Medicaid enrollment program, with stations throughout the city, which helps individuals navigate the enrollment process. The organization is also launching a Critical Time Intervention (CTI) program that hopes to minimize the long-term impact of adverse childhood events ACEs through family counseling. Centro Svila is also involved in the Bernalillo County Pathways program, providing navigators who help fill individuals’ unmet needs and, in so doing, help improve health outcomes and reduce health disparities. The program that will be the focus of this evaluation is Centro Svila’s clinical program.

In October 2017, Samaritan Counseling announced that it would be closing its doors. Samaritan Counseling has asked Centro Svila to take charge of their St. Joseph’s program, which serves clients in Albuquerque’s International District. This merger between St. Joseph’s (newly renamed as The Hopkins Center) has broadened Centro Svila’s efforts to provide holistic, affordable, and culturally and linguistically appropriate care to the immigrant and underserved populations in La Mesa and Trumbull Village neighborhoods in Southeast Albuquerque. The Hopkins Center shares Centro Svila’s commitment to empowering clients by taking a systemic perspective and engaging community and individual resources to encourage and maintain positive mental and behavioral health.

The main goal of this evaluation is to assess the extent to which Centro Svila is meeting its own organizational objectives of providing culturally and linguistically appropriate behavioral health care to underserved and immigrant populations in the South Valley. To accomplish this, we structured the evaluation around the following questions:

1. How do clients’ experiences in looking for and using health care services in traditional settings compare with their experiences at Centro Svila?
2. How can these experiences inform Centro Svila’s ongoing organizational changes?
3. How do clinicians’ experiences overlap or differ with respect to Centro Svila’s goals?
4. What are Centro Svila’s clinicians’ perspectives regarding the organization’s successes and failures in helping clients navigate barriers in access and quality of care?
5. How can clinician experiences inform Centro Svila’s ongoing organizational changes?

Our evaluation team included individuals both from the Evaluation Lab at the University of New Mexico (UNM) and from Centro Sávila. Our team members from the UNM Evaluation Lab were Dr. Claudia Diaz Fuentes, the team lead, Ozlem Barin, the senior fellow, Alena Kuhlemeier, a first-year lab fellow, and Dr. Sonia Bettez, the lab's associate director. Our team members from Centro Sávila were Dr. William Wagner, the organization's founder and director, and Guiovonna Aguirre, the director of operations.

2. Work Performed

The UNM team conducted five interviews with Centro Sávila staff and clients. In total, we interviewed two individuals that have received clinical services from Centro Sávila as well as three individuals who have provided clinical services for Centro Sávila. We developed an interview protocol for staff, and a separate interview protocol for clients. To recruit client participants, we relied on Centro Sávila's clinicians to recommend clients who had especially benefitted from Centro Sávila's services. (See Appendix A for the recruitment script.)

By hearing from clients with an overall positive outlook, the evaluation team sought to establish a high baseline from which to work. We believe that hearing positive perspectives can help us to understand what clients find most beneficial about the services they receive from Centro Sávila, as well as what aspects of the services they received were not as helpful.

Interview questions for the clients focused on their experiences accessing and receiving clinical services. Clients were asked about their experience obtaining an appointment with a Centro Sávila clinician. They were asked about their experiences regarding the way that their clinician worked with them and how these experiences compared to any other experiences they had seeking out mental health services. We probed more in-depth about what specific aspects of their experiences at Centro Sávila and other agencies were beneficial and which they would have changed. (See Appendices B & C for the client interview protocols in English and Spanish.)

Based on expertise provided by the evaluation team members from Centro Sávila, our staff participants were selected to represent a broad range of clinical expertise. We interviewed a staff member who is currently serving as an intern at Centro Sávila while she completes her MSW. We also interviewed two full-time clinicians, one of whom has two years of clinical experience, and the other has had over 10 years of clinical experience.

Interview questions asked of the staff focused on their experiences as clinicians at Centro Sávila and their perspective on Centro Sávila's efforts to restructure the organization. Questions attempted to elicit responses that communicated the extent to which staff felt the organization facilitated their ability to provide culturally and linguistically appropriate care. We were also interested in staff members' perceptions of the extent to which their clients felt they received this type of care. In line with Centro Sávila's goal of serving the community of the South Valley, we

also asked staff about their understanding of Centro Sávila's reach and reputation in the South Valley. Our questions for the staff also asked staff to call upon their own expertise to suggest ways that Centro Sávila could work on achieving their organizational goals. (See Appendix B for the clinician interview protocol.)

Each interview was approximately one hour long and most occurred at Centro Sávila's location in the South Valley. The two client interviews were conducted in Spanish by Dr. Diaz Fuentes and Dr. Bettez. At the end of the interviews, clients received \$25 gift cards that had been provided by Centro Sávila.

Staff and client interviews were recorded and at least one interviewer and one notetaker were present at each interview. Members of the UNM team who were not present at interviews listened to the interviews on their own and took notes.

When all of the interviews had been conducted, the UNM team met to reconcile their notes and develop first-line codes. From initial codes, the team developed more streamlined and thematic codes on which to base our analysis.

Finally, using the findings from these qualitative analyses of staff and client interviews, the evaluation team designed a survey instrument that could be easily administered to clients by Centro Sávila staff and that could be used to assess the extent to which Centro Sávila is achieving its own goals of providing culturally and linguistically appropriate care to members of the South Valley community.

3. Data Analysis

Client's opinions about Centro Sávila.

Theme 1: Clients obtained treatment with Centro Sávila through their involvement with other community-based organizations in the area, which also provide bilingual services.

Clients reached out to other community-based organizations for clinical and other services. These organizations referred clients to Centro Sávila. Both clients we interviewed called a clinician directly, who later followed up to make an appointment. One of the clients was placed on the waitlist when she called Centro Sávila. She did not get a call back to make an appointment until the referring organization gave her a Centro Sávila clinician's card:

The first time I called, they told me I had to wait because there was a waitlist, so I figured I'd have to wait since it is the only place they'll see me because it is the only place where I qualified. I told the lady I'd sign up for the waitlist. I kept going to [other organization] and they noticed I was not well, so a social worker gave me the counselor's business cards. I called the [Centro Sávila] counselor, who got back to me within two days.

Both clients interviewed were involved with organizations that provided clinical services in Spanish, either through bilingual staff or an interpreter.

Theme 2. Clients' experience with clinicians were overall positive, and focused on feeling understood, heard, having coping skills to deal with their

symptoms on their own, as well as having easy access to their clinician when symptoms worsened.

Clients shared that they felt free to express themselves with the clinician. They perceived they would be heard and understood.

[Centro Sávila's counselor] inspired a lot of trust (confianza). I trusted to open up because I came here with another problem, that I could not talk, I could not express 100% because it made me feel apprehensive... but [my counselor] made me feel I could trust and talk with her.

For one of the clients, this contrasted with previous experiences with a different organization. At that organization, the clinical staff made key treatment decisions without the client's input.

I told the lady [at a different organization], 'You all met up, but I was the protagonist and I was not there... you made the decision of what you were going to do with me and sent me to [facility] and I am not crazy'... and so I became unable to trust to talk, but here [at Centro Sávila] I could let go.

Besides feeling able to talk openly with their clinician, both clients seemed satisfied with the coping skills they have acquired over the course of treatment.

Once with [my counselor] I took her hand and I told her I was feeling sick. I told her I was afraid because it hurt. My throat hurt, my chest hurt, but with her I learned. She brought me water and I calmed me down... I learned to relax, to meditate, and to accept that this comes, I learned to cope when this problem comes up.

Furthermore, the clinician is accessible whenever clients need to address emergency symptoms, and timed their regular appointments depending on client's progress.

When I feel unwell I call the counselor and she gives me an appointment... when I have my appointments and she sees me doing poorly, she makes my appointment sooner, and when she sees me more at ease, more relaxed, I get the appointment every other week.

Theme 3. Clients feel welcomed and comfortable with clinical and administrative staff. This has to do as much with Centro Savila's bilingual staff, as well as their positive attitude towards clients. Clients linked this to how they felt about the facilities.

Regarding administrative staff, both clients expressed feeling welcomed and comfortable. For one client, this compared to a previous experience at a different organization in which, though language was not a barrier, administrative staff's negative attitude worsened her symptoms. The other client was satisfied with administrative staff at her other community based organizations as well as Centro Sávila, but was finding it challenging to obtain a referral to other services.

Regarding the physical setting, both clients found Centro Sávila welcoming.

I like the atmosphere, the calming music, the colors, the design of the building, the garden. I tell [my counselor] that just coming here relaxes me. Coming here is like coming to a banquet. I am very grateful to Centro Sávila and my counselor.

Theme 4. Participants agree that Centro Sávila is known among clients of other community organizations, but not necessarily outside those settings.

Clients perceived that Centro Sávila is well-known within a network of other South Valley service providers and their clients. But they also perceived that people outside of those circles are unaware of available services. One client stated that she brings up the services available through Centro Sávila, particularly among people who may be afraid their legal status may be questioned. The client suggested a promotional campaign at churches and food banks, where an individual or fliers could be made available for those interested.

Clinicians' Perspectives

Theme 5. Centro Sávila's vision of social justice and service to the community is consistent with both the career goals and prior work of its clinical staff.

The three clinicians interviewed shared a background in social justice and have, at one point in their careers, made changes to ensure that the clinical work that they do serves a larger vision of working for social and policy justice.

My experience working with Centro Sávila, clients are a priority for the agency, and I really appreciate that. It's part of the agenda 100%. Our services and programs move around the client and that's awesome.

One of the things that attracted me to Centro Sávila is that before we were not really going to Santa Fe or not allowed to do anything else with the legislature but when you really need to do something, Centro Sávila speaks about that in a systematic way.

Theme 6. Clinicians see the ongoing transition at Centro Sávila, including taking on new interns and merging with the Hopkins Center, as steps toward achieving Centro Sávila's service aims and staffing needs.

Adding interns allows for more clients to be served and moved off of the waitlist. From the intern's perspective, Hopkins' senior clinical staff is able to serve as additional role models. Further, the addition of the Hopkins Center is able to serve as another site in which interns can complete their practicum. From the point of view of the more established clinicians, they have now colleagues whom they may approach to discuss any questions or issues regarding their clinical workload.

And now the Hopkins center is involved. That's been more supportive for me, personally because now there are other clinicians that I can talk to.

If you go to Hopkins Center, you're going to have other clinicians and they have a totally different system too. So, there's a lot of possibilities for first year students if that's what they want.

Theme 6. Clinicians discussed the need for clarity in a variety of procedures for all clinicians regarding clinical supervision.

Clinicians called for clarity specifically in terms of establishing consistent clinical supervisors for interns, as well as making clear the expectations of interns in clinical supervision. Participants acknowledged some supervision systems are in place, but some interns might find it unclear who their supervisor is and do not always feel as though they can express their concerns. A participant also suggested that it would be beneficial to establish clear expectations about the intern's role in shaping their own practicum.

I've seen [interns]... be like "I have no clue what I'm doing." That's an issue. Because maybe some of these people are not going to continue here because they need structure. So I think on the most basic level, the interns need a structure.

People are getting frustrated--they're expecting there to be a structure. But this is not a place like that. I mean of course there's structure at certain levels. But at least for the interns, because this is your practicum, you have to choose what you want. If you want to do groups, if want to do life skills, the garden...

This need for clarity in clinical supervision was not limited to interns. Established clinicians are often able to find a colleague to discuss clinical issues (see Theme 5), but expressed the need to be able to consult other clinicians about their caseload outside of structured, weekly clinical meetings.

Theme 7. Clinicians also appreciated Centro Savila's flexibility in setting schedule and their focus on clinicians providing a high quality, rather than a high quantity, of care.

Clinicians were grateful to Centro Sávila for the flexibility to set their schedule around their own needs and the needs of their academic program. Centro Sávila, unlike other organizations, does not ask clinicians to see an unreasonably high caseload of clients. It asks its clinicians to only provide care to as many clients as the clinicians feel that they can provide high quality mental health care.

Seeing client after client after client from 8-5, you go crazy, you burn out really fast. That's not healthy for any clinician at all. So I said I wasn't going to do that. That's why I came here [to Centro Sávila]. It's more about quality than quantity.

It is a really independent, flexible organization in a way. I could decide how I wanted to set up my day. Having that autonomy is perfect for me because I am very much my own person. I don't like too many rules... I like working in cooperation.

Theme 8. Administrative processes and expectations regarding various issues, ranging from the waitlist to billing and professional training, are not well defined to clinicians.

Clinicians at Centro Sávila agreed on the need for clearer procedures for managing the client waitlist. For instance, clinicians felt that it is important for someone to make regular calls to individuals on the waitlist to confirm they were still interested in receiving services or had found care elsewhere. One clinician suggested that it would be helpful if there was one point-person who was responsible for this task. Also, clinicians and interns were unclear regarding who should be responsible for setting up appointments.

I believe that people that are on our waiting list need to be informed that they are on the waiting list and if they are on the waiting for a period of over 6 months, they need to be told that they are off the waiting list and if they still want to be they need to call back... Because phone numbers change, people find other services, so, in the waiting list appears like they are waiting for us -all these people- and they are not.

Discussion of the need for clarity on administrative procedures also touched on issues related to continuing education and training. Staff is unclear about Centro Sávila's policies regarding payment for the continuing education credits and payment for their time. There were concerns regarding billing procedures, particularly on how to meet requirements for seeing a certain number of billable clients.

Theme 9. Clinicians generally see Centro Sávila's physical space and location as a strength. Although, as the organization grows, it has become increasingly evident that the space has certain limitations.

Clinicians at Centro Sávila found the infrastructure to be soothing for clients, but are concerned about space for incoming clinicians. Sometimes, there is not a room for a clinician to see their client, and clinicians have to get creative with finding space. Also, participants have noticed that the small space, combined with lack of soundproofing, opens the possibility of clients' privacy being compromised

Providing a facility that is comfortable for the client. It's clean, it smells good. When you get into the building. My clients say they feel relaxed. It always smells good, people are always smiling, there's not tension or stress.

Sometimes when I'm seeing my clients there is no space. So I have to kind of do magic or take my clients out. That's fine, I can be creative. But when you're caseload keeps increasing, you can't take all your clients to the park. You need a place to see your clients.

4. Recommendations

1. Develop a community engagement strategy.

Community engagement helps organizations to provide services and solutions that address the needs of the community. It also enables community members to contribute and give feedback to the organizations. Thus, it creates a sustainable environment for the organization. Centro Sávila has taken some of the first steps toward developing such a strategy through their participation in the Marigold Parade. But based on the feedback from participants, the community would benefit from the development of a comprehensive strategy for promoting the organization's services. For example, Centro Sávila could reach out to schools, churches, and food banks to make these organizations aware of their services. Additionally, Centro Sávila could participate in other ongoing South Valley community events or health fairs. The Evaluation Lab does understand, however, that Centro Sávila's clinical program is already dealing with a high caseload and a long waitlist. If more extensive community outreach is not possible for Centro Sávila given its current limitations, the best way to ensure that the organization is meeting the needs of the community that it serves is to consistently implement the client experience survey and analyze the results of that survey.

2. Define clear procedures for interns and clinicians, regarding how to receive clinical supervision.

Centro Sávila's clinicians are the backbone of their clinical program and ensuring that their clinical supervision needs are met is a critical aspect of Centro Sávila's mission to provide high quality, culturally relevant care in the South Valley and International District. The ability to provide supervision improves clinical outcomes as well as providing professional and emotional support for the clinicians (Fallon *et al.* 1993; Schmidt *et al.* 2008). Based on the results of the evaluation, clinicians and interns would benefit from receiving more frequent and accessible clinical supervision. It would be ideal if Centro Sávila could hire an individual that would act as a full-time clinical supervisor. Scheduling brief one-on-one meetings between supervisors and supervisees and developing written meeting schedules may provide the clinicians and interns with a clearer sense of how to conduct their clinical practice, both substantively and administratively.

The evaluation team recognizes that Centro Sávila continues to recruit applicants for a newly-created Clinical Director position and has developed a more structured supervisory system for interns based on the specific program in which they work. These are both incredibly important, and the evaluation team does still recommend a slightly more formal system of supervision.

3. Set the expectations for incoming interns regarding scheduling and training.

To ensure that Centro Sávila meets its own organizational goal of helping train clinicians that are well-versed in the social and structural determinants of mental health in the communities that it serves, Centro Sávila might benefit from a more organized and comprehensive plan for training a diverse group of interns. Centro Sávila accepts interns from various academic institutions and programs. Each of

these programs has a different curriculum and requirements for the internship/practicum. It would be best to establish communication with the schools about specific candidates and their expectations from the organization. A work schedule, supervisory hours including peer supervisory, number of cases/clients that the intern is required to see, and other training opportunities can be planned before the internship starts. This would help in avoiding miscommunication between Centro Sávila, interns, and their academic programs. One way this could be accomplished would be through an orientation or joint meeting held at the beginning of an academic semester to allow both Centro Sávila and interns to express their expectations and needs for each other.

The evaluation team acknowledges that Centro Sávila has been making great strides to address some of these issues. For instance, Centro Sávila has hired someone who is working to develop a manual for all interns that will orient them to the organization and its expectations.

4. **The evaluation team also recommends that Centro Sávila works to create clearer administrative processes in specific areas. Clarity in these processes will help clinicians to work more effectively and confidently. Specifically, we recommend clarifying administrative policies and processes regarding:**

- a) **Professional training**

It would be helpful for Centro Sávila to develop a written guideline that includes the organization's decisions regarding provision of financial support for the employees' training opportunities and training hours. For instances in which Centro Sávila is able to provide clinicians with financial support for training, it would be helpful to establish an annual budget. In addition, we highly recommend that Centro Sávila ensure that all employees of the organization receive formal HIPAA training to ensure the proper management of client information.

- b) **Waiting list**

We recommend that Centro Sávila develop a formal procedure for dealing with the waiting list and that one or two employees be responsible for overseeing that process. Specifically, we suggest that the waiting list be reviewed regularly (every 4 or 6 months) to identify and remove people who cannot be reached, are receiving services elsewhere, or do not require services anymore. As before, clients on the waiting list and clients referred from other organizations can be evaluated and served based on the urgency of their situation.

- c) **Billing**

Since Centro Sávila, on the whole, serves clients that are not able to pay, billing procedures and expectations remain unclear. We believe that the smooth operation of the organization would benefit from more structured communication about billing between clinicians and administrators. Specifically, clinicians would benefit from a better understanding of their provider status in insurance networks, best billing practices, and administrative expectations regarding number of billable clients that should be served.

5. Next Steps

Centro Svila has made great strides in a short period of time to restructure the organization in ways that honor its mission and help to achieve their social justice-oriented organizational goals. Their multisystemic approach to understanding their clients' mental health needs and providing culturally appropriate care has shaped clinicians' practice, and benefitted clients' experiences receiving clinical services.

This evaluation served as an initial step in building Centro Svila's own capacity to assess the extent to which they are achieving their organizational goals for their clinical program. Through interviews with clients and clinicians, the evaluation team sought to establish those aspects of Centro Svila's clinical program that are especially beneficial or salient for the clients as well as ways in which Centro Svila clinicians can best be supported to provide this high quality of care. In line with these broad aims, the evaluation team has used the results of the qualitative data analysis to develop a quantitative instrument that can be easily and quickly administered to clients at to-be-specified intervals. These data can subsequently be compiled, entered, and analyzed by the organization in the course of a more streamlined evaluation. (See Appendices E and F.)

As such, the evaluation team suggests a number of steps that could be the focus in future evaluations. First, the quantitative instrument will need to be shared with Centro Svila's clinical staff. Per the suggestion of the members of the evaluation team from Centro Svila, Evaluation Lab team members should present the survey to clinical staff and ask for their feedback. This will not only familiarize Centro Svila clinicians with the survey, but allow the evaluation team to ensure that the survey represents the mission of the organization and clinicians' experiences of providing mental health care to their clients.

Second, after incorporating clinician feedback, the survey will need to be beta tested. It is important that a few clients be administered the survey in the presence of a clinician or Centro Svila employee that can take notes on the clients' receptivity to each item and any confusion that arose in the course of administration. We recommend administering the survey to between 5 and 10 clients. It is ideal to select a diverse group of clients that have had different experiences with Centro Svila as well as outside the organization. For instance, we would recommend surveying clients that have been seeing a clinician for a few years as well as those who have been seeing a clinician for a few weeks. Also, it might be helpful to survey clients who have participated in other Centro Svila programs as well as those who have just received clinical services. After the survey has been beta tested, it will need to be edited to address the survey administrator's notes.

Third, the evaluation team also believes that, after an initial testing period, this survey might prove useful for administration to clients who participate in some of Centro Svila's other programs. The instrument might need to be tailored in certain cases (Medicaid enrollment services, or services involving minor children), but could be used in other cases, as is. The evaluation team suggests

that Centro Sávila consider using this instrument for ongoing evaluation across the programs and services that they offer.

Fourth, since Centro Sávila's clinicians and interns work with the clients that Centro Sávila's mission is to serve, we recommend that a subsequent evaluation look into developing a quantitative instrument based on our results that would be able to regularly assess clinicians' perspectives about the operation of the organization. Our results point to similarities and differences between the different types of clinicians at Centro Sávila, so it would be beneficial to develop separate instruments for interns and full-time clinicians.

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Appendix A: Recruitment Script for Clinicians

UNM – Evaluation Lab
Centro Svila Clinician Recruitment Script

A group of students and teachers from UNM is working with us at Centro Svila to learn how we can do better to serve residents in the South Valley.

A couple of people from that group would like to interview you to listen to your experiences working with Centro Svila. We would appreciate if you could talk to them and be completely candid in discussing your experience. Anything you say in the interview will be anonymous. That means Centro Svila only receives a summary without any names.

The interview would take about an hour, and you would be given a \$25 gift card at the end to say thank you for taking time out of your day to talk to them.

Gua de reclutamiento para personal clnico:

Centro Svila est trabajando con un grupo de estudiantes y maestros de UNM para aprender cmo mejorar nuestros servicios para la gente del South Valley.

El grupo de UNM quisiera conversar con usted/entrevistar(a) para escuchar sobre sus experiencias con Centro Svila. Le agradeceramos mucho si usted hablara con ellos y compartiera sinceramente cmo ha sido su experiencia. Todo lo que les diga es annimo. Eso significa que Centro Svila solo ve un resumen sin nombres.

La entrevista tomara ms o menos una hora y usted recibira una tarjeta de regalo de \$25 para agradecerle por su tiempo y ayuda.

Appendix B: Clinician Interview Protocol

Thank you for agreeing to talk to me about your experiences at Centro Sávila. We are from the Evaluation Lab at UNM, and we work with organizations to help them figure out how they are doing and where they might improve. We know that, as a staff member, you have a unique perspective on how Centro Sávila operates and the extent to which it is serving the communities it serves. We are particularly interested in, and value that perspective.

The interview will take about an hour. Your participation is voluntary and what you choose to share is totally up to you. Sonia will take notes and record the discussion to make sure we understand what you said. We won't share the recording with Centro Sávila. Once we have reviewed the recording to make sure our notes are accurate, we will destroy it. If you would rather we not record the interview, then we won't.

Do you have any questions before we get started?

Career:

1) How did you get into this career?

Probe: What do you like about it?

What are the challenges?

Career at Centro Sávila and work load:

2) Could you please tell us about your work here? Responsibilities, programs involved ...etc.

Probe: How long have you been working at CS?

About how many clients do you see per week?

Clients:

3) How would you define your patient population?

Career before Centro Sávila (if applicable):

4) Did you work at another mental health clinic before?

Probe: If yes, can you reflect on your experience: how was it different than CS?

Appendix C: Client Interview Protocol (English)

Thank you for agreeing to talk to me about your experiences at Centro Sávila. We are from the Evaluation Lab at UNM, and we work with organizations to help them figure out how they are doing and where they might improve. Centro Sávila values your perspective and wants to learn how people experience its services. You are the expert of your own experience at Centro Sávila, and we are here to learn from you.

The interview will take about an hour. Your participation is voluntary and what you choose to share is totally up to you. Sonia will take notes and record the discussion to make sure we understand what you said. We won't share the recording with Centro Sávila. Once we have reviewed the recording to make sure our notes are accurate, we will destroy it. If you would rather we not record the interview, then we won't.

Do you have any questions before we get started?

1. Could you walk me through your experience when you first walked into Centro Sávila?

Probe: Can you tell me a little about your experience at Centro Sávila?
How did you find out about Centro Sávila (CS)?

Probes: Have you been involved in other CS programs? Are there any parts of the service that you like at CS more than others? How about less?
Once you contacted CS, how was your experience getting service?
For example, can you walk me through your experience getting an appointment?
How about any challenges obtaining services (financial, transportation, family, etc.)?
How did CS help you with any of these challenges, if at all?
How long did it take for you to schedule your first appointment?

2. How about before coming to CS? Have you ever obtained medical services elsewhere or tried to? Why?

Probe: If you did not seek services elsewhere, were you concerned you would not get them or was there any other reason?
At any point, did you scheduled or try to schedule an appointment at another mental health clinic?
How was that experience compared to CS?

3. How was your experience working with your clinician?

Probe: How does your clinician take into account for your cultural background?
Can you provide examples to such situations?

4. If you look back from your first day at Centro Sávila to now, how have things changed for you?
5. If you could change something about your experience here, what would you change?

Appendix D: Client Interview Protocol (Spanish)

Gracias por venir y por conversar con nosotros sobre sus experiencias en Centro Sávila. Venimos del Evaluation Lab en UNM. Nosotros trabajamos con organizaciones que quieren saber cómo están haciendo su trabajo, y cómo mejorar sus servicios. Centro Sávila valora sus opiniones y quiere aprender de su experiencia como paciente. Estamos aquí para aprender de lo que usted comparta con nosotros.

La entrevista tomará más o menos una hora. Su participación es voluntaria y puede compartir con nosotros lo que usted decida. Sonia tomará notas y grabará la conversación para asegurarnos de no perdernos de nada. No vamos a compartir la grabación o nuestras notas con Centro Sávila. Sólo las vamos a revisar para asegurarnos que entendimos todo correctamente y luego las vamos a destruir. Si usted prefiere que no grabemos la entrevista, está bien.

¿Tiene alguna pregunta antes de empezar?

1. Cuénteme cómo fue la primera vez que vino a Centro Sávila?

Probes:

¿Puede contarme un poco de su experiencia en Centro Sávila?

¿Cómo se enteró de Centro Sávila?

¿Ha participado en otros programas en Centro Sávila? Si ha participado, ¿hay servicios que usted disfrute/ que le gusten más que otros?

Después de llamar por primera vez a Centro Sávila, ¿cómo fue para usted hacer la cita?

¿Tuvo alguna dificultad para venir a su cita? Por ejemplo problemas de dinero, transporte, guardería para los niños. ¿Le comentó a alguien en CS sobre estos restos? ¿Y le ayudaron?

2. Antes de venir a CS ¿buscó ayuda en otra parte/en otra clínica?

Probes:

Si responde sí: ¿la trataron de una manera diferente? (cuénteme más)

Si responde no: ¿Por qué no buscó servicios en otra parte? ¿Le preocupaba que no le atendieran o hubo otra razón?

¿Alguna vez trató de hacer una cita en otra clínica con servicios de salud mental?

¿Cómo fue esa experiencia?

3. ¿Cómo le ha ido con su consejera? (terapeuta?)

Probes:

¿Es fácil comunicarse con su consejera?

¿Cree que ella le comprende?

4. ¿Qué ha cambiado para usted desde que empezó a venir a CS?

5. ¿Qué es lo que más le ha gustado de CS?

6. Si usted pudiera cambiar algo de su experiencia en CS, ¿qué cambio haría?

Appendix E: Client Survey of CS Clinical Services (English)

Centro Sávila





Questionnaire for counseling services clients

Thank you for answering this questionnaire. Your participation is voluntary. Your answers are anonymous and will help us improve our counseling services.

1. How did you first learn about Centro Sávila/The Hopkins Center?
 - Another organization referred me (for example, Enlace Comunitario, Casa de Salud, my doctor/hospital)
 - Friend or acquaintance told me about it.
 - Other _____
2. Besides seeing your counselor, do you receive or have you received any other services here?
 - The therapeutic garden
 - Help obtaining health insurance (Medicaid, Blue Cross, Molina, etc.)
 - Help finding other services such as housing, health care or employment
 - Help finding a lawyer
 - Other _____
3. For how long have you been seeing your counselor?
 - Less than 1 month
 - 1 to 2 months
 - 3 to 6 months
 - 6 months or more
4. Were you ever on the waitlist before seeing your counselor?
 - Yes. How long did you wait? _____
 - No.

Now, we are going to ask questions about your feelings about Centro Sávila or Hopkins Center, in general.

5. Please tell us how true the statements below are for you. Use a 0 to 3 scale, where 0 is not true at all, and 3 means very true.

	<u>Not at all true</u>	<u>A little true</u>	<u>Somewhat true</u>	<u>Very true</u>	<u>Don't know</u>
	 0	 1	 2	 3	<input type="radio"/>
The staff here treat me with dignity.	0	1	2	3	<input type="radio"/>

UNM Evaluation Lab

The staff here understand the challenges faced by people who are immigrants.	0	1	2	3	<input type="radio"/>
Centro Sávila/Hopkins Center is well known among people who speak Spanish.	0	1	2	3	<input type="radio"/>
Staff at Centro Sávila is supportive when I feel stressed or overwhelmed.	0	1	2	3	<input type="radio"/>
I trust that Centro Sávila/Hopkins Center will protect the information that I give them.	0	1	2	3	<input type="radio"/>
I trust the staff at Centro Sávila/Hopkins Center	0	1	2	3	<input type="radio"/>
When I am at Centro Sávila/Hopkins Center, I feel like I am in a safe place.	0	1	2	3	<input type="radio"/>

6. How satisfied are you with your services at Centro Sávila? You can use a 1 to 5 scale, where 1 is not satisfied at all and 5 is very satisfied.

Not satisfied at all					Very Satisfied
1	2	3	4	5	
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

7. Compared to the first time you saw your counselor, how do you feel now?

Worse	Same	A little better	Better	Much Better
1	2	3	4	5
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

8. In the past, have you ever seen another counselor that was not at Centro Sávila or the Hopkins Center?

- Yes.
- No.

9. If yes, what did you like best about the counseling services that you received before you came to Centro Sávila/Hopkins Center?

10. What do you like best about the counseling services that you now receive at Centro Sávila?

Now, we're going to ask you a few questions about yourself.

<p>You are:</p>	<p><input type="radio"/> Male</p> <p><input type="radio"/> Female</p> <p><input type="radio"/> Specify: _____</p> <p><input type="radio"/> Prefer not to say</p>
<p>How old are you?</p>	<p>_____ years of age</p>
<p>Would you say your health is:</p>	<p><input type="radio"/> Excellent</p> <p><input type="radio"/> Very good</p> <p><input type="radio"/> Good</p> <p><input type="radio"/> Fair</p> <p><input type="radio"/> Poor</p>
<p>What was the last grade or level of schooling that you passed?</p>	<p><input type="radio"/> Did not finish elementary school</p> <p><input type="radio"/> Finished elementary school</p> <p><input type="radio"/> Middle school</p> <p><input type="radio"/> High school</p> <p><input type="radio"/> Some college</p> <p><input type="radio"/> Bachelors degree or higher</p> <p><input type="radio"/> Other _____</p>
<p>How many years have you lived in the United States?</p>	<p><input type="radio"/> All my life</p> <p><input type="radio"/> More than 5 years</p> <p><input type="radio"/> 1-5 years</p> <p><input type="radio"/> Less than 1 year</p>
<p>Do you have health insurance? For example, Medicare, Medicaid, Presbyterian, Molina, Tricare?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> I don't know</p>

Appendix F: Client Survey of CS Clinical Services (Spanish)

Centro Sávila





Cuestionario para clientes de servicios de consejería





Gracias por contestar este cuestionario. Su participación es anónima y voluntaria. Sus respuestas nos ayudarán a mejorar nuestros servicios de consejería.

1. ¿Cómo se enteró por primera vez sobre aquí?
 - Me refirieron de otra organización (por ejemplo Enlace Comunitario, Casa de Salud, mi doctor/hospital)
 - Amigo o conocido me contó.
 - Otro _____
2. Además de ver a su consejera, ¿Cuáles otros servicios recibe o ha recibido aquí?
 - Jardín/huerta
 - Ayuda para obtener su seguro médico o aseguranza (Medicaid, Blue Cross, Molina, etc.)
 - Ayuda con referencia a otros servicios como vivienda o referencias para servicios de salud o empleo.
 - Referencia a un abogado
 - Otro _____
3. ¿Cuánto tiempo tiene viniendo a su consejera(o)?
 - Menos de 1 mes
 - 1 a 2 meses
 - 3 a 6 meses
 - 6 meses o más
4. ¿Estuvo alguna vez en lista de espera para ver a su consejera(o) por primera vez?
 - Sí. ¿Cuánto tiempo esperó? _____
 - No.

Ahora, vamos a preguntarle sobre servicios de Centro Sávila o Hopkins Center, en general.

5. Por favor díganos qué tan ciertas son estas frases en una escala de 0 a 3, donde 0 significa nada cierto y 3 muy cierto.

	No es cierto	Poco cierto	Algo cierto	Muy cierto	No sé
					
El personal aquí me trata con dignidad.	0	1	2	3	<input type="radio"/>
El personal comprende las dificultades de los inmigrantes.	0	1	2	3	<input type="radio"/>
Centro Sávila/Hopkins Center es bien conocido entre la gente que habla español en mi comunidad.	0	1	2	3	<input type="radio"/>

	<u>No es cierto</u>  0	<u>Poco cierto</u>  1	<u>Algo cierto</u>  2	<u>Muy cierto</u>  3	<u>No sé</u>
El personal me apoya si me siento abrumada(o) o estresada(o).	0	1	2	3	<input type="radio"/>
Confío en que Centro Sávila/Hopkins Center no comparte la información que les doy	0	1	2	3	<input type="radio"/>
Confío en el personal de Centro Sávila/Hopkins Center	0	1	2	3	<input type="radio"/>
Cuando estoy en Centro Sávila/Hopkins Center siento que estoy en un lugar seguro	0	1	2	3	<input type="radio"/>

6. ¿Qué tan satisfecha(o) está con los servicios de Centro Sávila? Puede dar una calificación del 1 al 5, donde 1 es **nada satisfecha(o)** y 5 es **muy satisfecha(o)**.

Nada Satisfecha(o)					Muy Satisfecha(o)
1	2	3	4	5	
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

7. Comparado a su primera visita, ¿cómo se siente ahora? ¿Diría que se siente peor, igual, un poco mejor, algo mejor o mucho mejor?

Peor	Igual	Un poco mejor	Algo mejor	Mucho Mejor
1	2	3	4	5
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

8. ¿Recibió servicios de consejería en otro lugar antes de venir a Centro Sávila?

- Sí.
- No.

9. Si respondió **Sí**, ¿qué es lo que más le gustó de los servicios de consejería que recibió antes de venir a Centro Sávila?

10. ¿Qué es lo que más le gusta de los servicios de consejería que recibe en Centro Sávila?

11. Ahora le vamos a hacer algunas preguntas sobre usted

<p>Usted es:</p>	<p> <input type="radio"/> Hombre <input type="radio"/> Mujer <input type="radio"/> Especifique: _____ <input type="radio"/> Prefiero no responder </p>
<p>¿Cuántos años tiene?</p>	<p>_____ años</p>
<p>Diría usted que su salud es:</p>	<p> <input type="radio"/> Excelente <input type="radio"/> Muy Buena <input type="radio"/> Buena <input type="radio"/> Regular <input type="radio"/> Mala </p>
<p>¿Cuál es el último grado o nivel educativo que usted aprobó?</p>	<p> <input type="radio"/> Algunos grados pero no terminó la primaria <input type="radio"/> Terminó la escuela primaria <input type="radio"/> Escuela secundaria <input type="radio"/> Preparatoria / bachillerato <input type="radio"/> Algunos años de Universidad, pero no se graduó <input type="radio"/> Se graduó de la Universidad o más <input type="radio"/> Otro _____ </p>
<p>¿Cuantos años viven en los Estados Unidos?</p>	<p> <input type="radio"/> Todo mi vida <input type="radio"/> Más de 5 años <input type="radio"/> 1-5 años <input type="radio"/> Menos de 1 año </p>
<p>¿Tiene seguro médico o aseguranza? Por ejemplo, Medicare, Medicaid, Presbyterian, Molina, Tricare?</p>	<p> <input type="radio"/> Sí <input type="radio"/> No <input type="radio"/> No sé </p>

Appendix G: Recommendations for Administering Survey

The survey's goal is to help Centro Sávila:

- Identify how clients have become involved in their clinical services (i.e., referrals, waitlist, length of wait) and how often they see their counselor
- Understand how clinical services' clients engage with other services at Centro Sávila
- Assess whether clients feel safe and trust the staff
- Measure client satisfaction with clinical services
- Assess client perceived effectiveness of treatment.
- Provide a brief demographic profile of clinical services clients

Suggestions for Administering Clinical Services Survey

- Aim to administer the survey every 6 months/twice a year
- Include all facilities providing clinical services
- Designate a 2-3 week period to administer the survey during these two time periods
- Designate one staff member to collect the surveys and to store the finalized paper version in a locked box or cabinet.
- Designate staff with familiarity with Excel to enter the data and issue relevant results.
- Allow clients to self-administer if possible, or administer if clients need assistance.
- Administering the survey before client appointment is preferable since clients may need to leave quickly after their appointment.
- Counselors may ask clients if they filled the survey and, if not, remind them to do so after the session.
- Aim to collect surveys from all clients during the 2 to 3 week period.
 - This will ensure your sample represents clients with diverse demographic characteristics, who have been receiving clinical services for various lengths of time, and with different levels of involvement with non-clinical services.

Suggested script for staff in charge:

We are asking if you could fill out a brief survey to help us improve the clinical services that we provide. The survey is anonymous and completely voluntary. You can skip any questions that you don't want to answer. You can fill it out yourself, or I am happy to walk you through it.

[After survey has been completed: Thank you! We really appreciate your help!]