

Comprehensive Community Services Participant Satisfaction Survey 2025 Results



Introduction

Comprehensive Community Services (CCS) is a voluntary, community-based program funded by the State of Wisconsin Department of Health Services (DHS) and operated by the Dane County Department of Human Services (DCDHS). CCS offers a flexible array of individualized, community-based psychosocial rehabilitation services to individuals with mental health and/or substance use needs.

In 2025, Dane County served over 3,300 CCS participants.

Surveying Overview

The Mental Health Statistical Improvement Project (MHSIP) survey instrument measures key outcomes related to satisfaction, access, quality of services, participation in treatment, functioning and outcomes, and social connection. Items marked with (A) mean the item was only asked on the adult survey. Items marked with (Y/F) were asked only on the Youth and Family surveys. The CCS survey was distributed via Service Facilitators (SFs).

For more information about the survey tool and administration, view the Wisconsin [DHS Participant Guide](#) and the [MHSIP survey instrument](#).

Sample Overview

- 2,402 people surveyed¹
- 891 participants responded
- 37% response rate - highest ever
- Respondent sample sufficiently represented the eligible population
- Participants who had dis-enrolled prior to survey distribution were less likely to respond

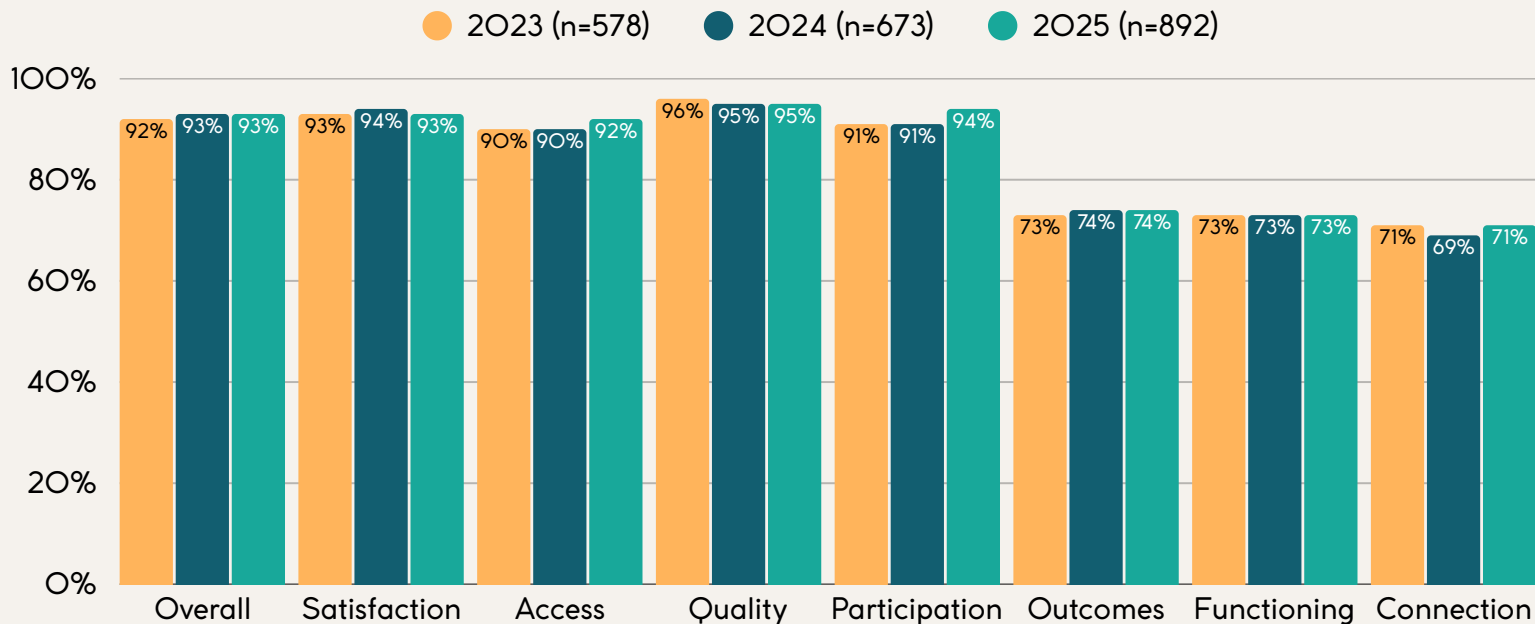
Overall Perception of Care

Domain Scores by Year, 2023-2025

- All domain scores remain about the same or slightly higher than last year (2024).
- CCS participants reported incredibly high scores on the several domains related to service accessibility and quality, indicating the vast majority of participants feel satisfied with their CCS services.
- Two of the domains with the lowest scores, Outcomes and Functioning, measure improvements to emotional and behavioral health.



Percentages in charts represent the percentage of respondents who reported positively on each domain.



Key Findings

- The survey response rate was 37% in 2025, the highest since CCS program began in Dane County in 2015. This is largely attributable to the collaborative partnership and efforts of CCS Service Facilitation agencies in delivering the surveys in person to participants. Participants received a \$10 gift card for completing the survey.
- Participants reported very high scores across most domains - the highest of which for Quality of providers (95%), Participation in treatment planning (94%), and Satisfaction of services (93%), indicating that participants feel well-supported and empowered by their CCS team in the treatment and recovery journey.
- There were very few significant differences in domain and item scores by variables that could impact participant experience like length of enrollment, housing status, whether or not the participant had recently dis-enrolled, and other demographics (race, age, and gender). This means that the participant experience in CCS is consistent, regardless of other factors.



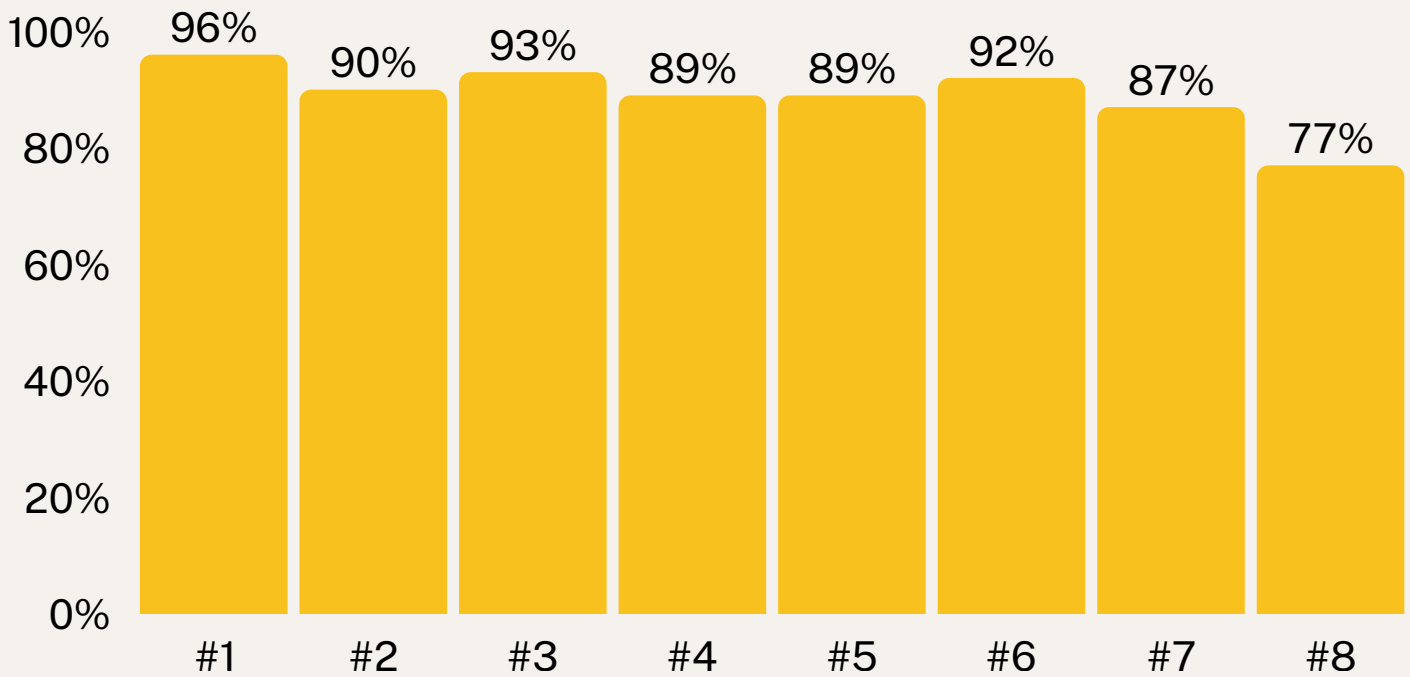
93%

Overall satisfaction with services.

Satisfaction

This domain measures overall satisfaction with services.

- #1 I like the services that I received here.
- #2 If I had other choices, I would still get services from this agency. (A)
- #3 I would recommend this agency to a friend or family member. (A)
- #4 The people helping me stuck with me no matter what. (Y/F)
- #5 I felt I had someone to talk to when I was troubled. (Y/F)
- #6 The services I received were right for me. (Y/F)
- #7 I got the services I wanted. (Y/F)
- #8 I got as much help as I needed. (Y/F)



Key Takeaways

- The Satisfaction domain score (93%) is consistent with previous years (~94%), after a rise from (85%). Participants are exceptionally satisfied with their CCS experience.

Interested in results from prior years?

Read previous reports [here](#).



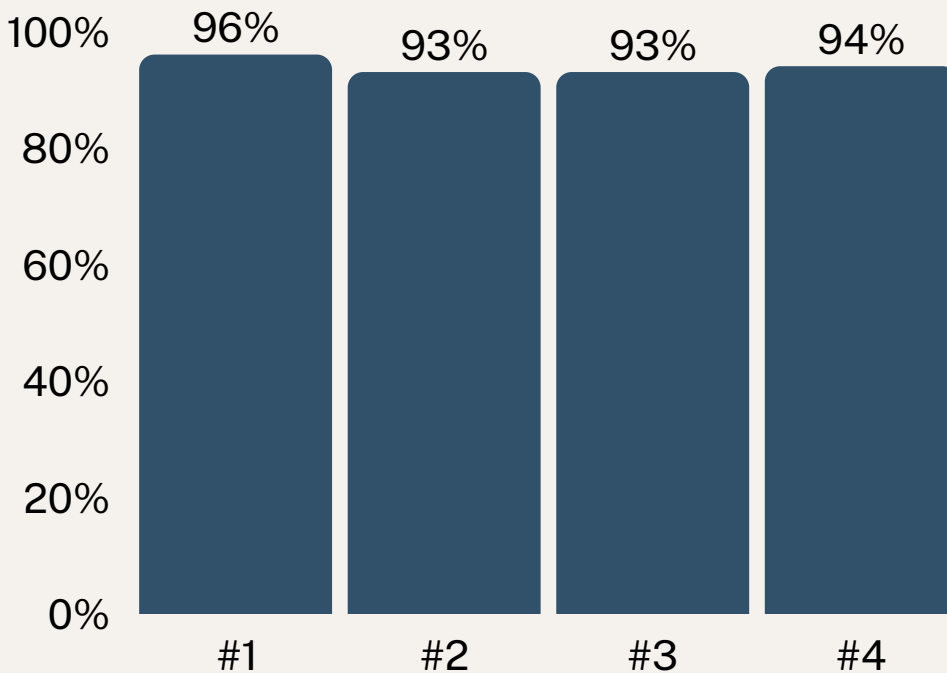
94%

Participant engagement in treatment planning

Participation

This domain measures how well participants were integrated into their treatment planning.

- #1 I felt comfortable asking questions about my treatment and medication. (A)
- #2 I, not staff, decided my treatment goals.
- #3 I helped choose my services. (Y/F)
- #4 I participated in my own treatment. (Y/F)



Recovery is driven by empowered participants actively engaged in their treatment planning.

Key Takeaways

- The Participation domain score rose slightly (94%) from last year (91%).
- A key component of the CCS program is that each and every participant defines their own goals and designs their unique path toward those goals. These results reinforce that CCS participants feel empowered in making informed decisions about their treatment and recovery planning and building their strengths as they see fit.



92%

Timely, convenient, and accessible services



Scheduling



Location



Transportation

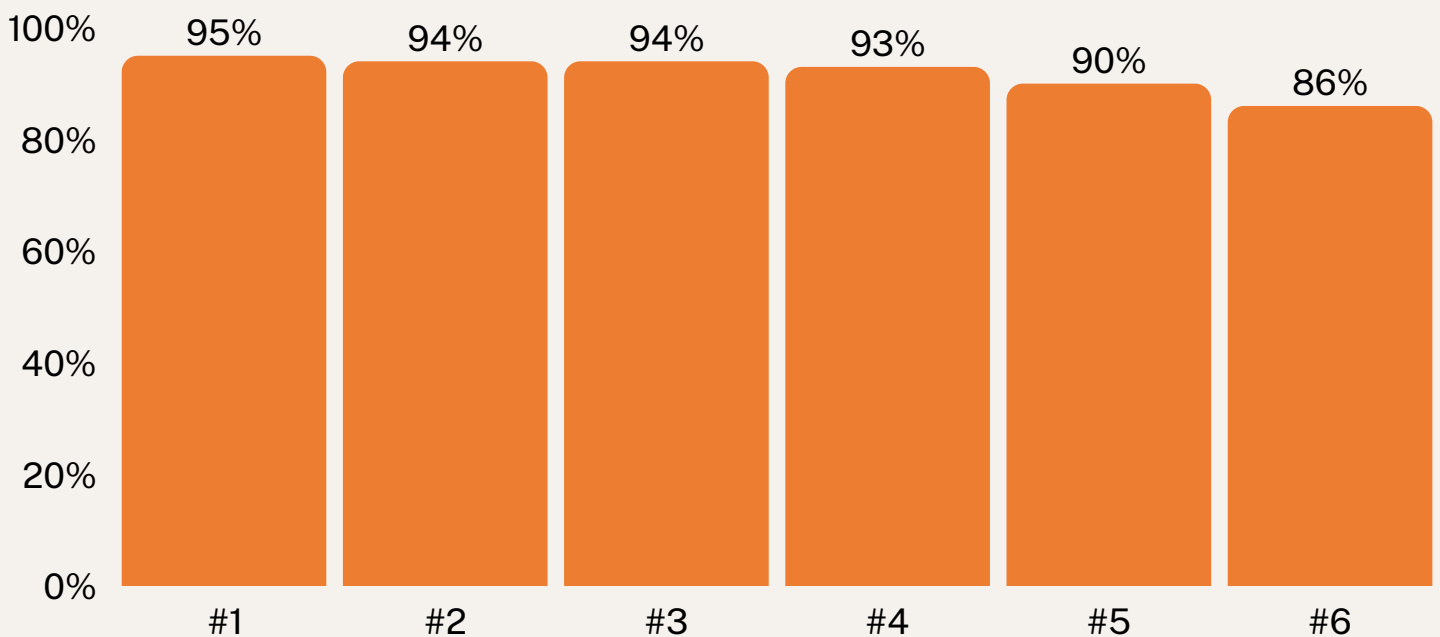


Availability

Access

This domain measures the logistical and operational components of services.

- #1 The location of the services was convenient.
- #2 Staff were willing to see me as often as I felt was necessary. (A)
- #3 Staff returned my calls within 24 hours. (A)
- #4 Services were available at times that were good for me.
- #5 I was able to get all the services I thought I needed. (A)
- #6 I was able to see a psychiatrist when I wanted to. (A)



Key Takeaways

- The Access domain score was (92%) was similar to previous years (90%).
- Participants reported significantly higher on Item #1 (95%) - the location of the services are convenient - compared to the previous year (89%), indicating that the CCS network is doing a better job reaching people across the community.²
- Historically, participants in CCS and across the behavioral health array have struggled to access psychiatry services (Item #6). The CCS Quality Improvement Plan aimed to address this challenge in recent years. After a significant increase in 2023 (84%) and 2024 (86%) from previous years (~67%), participants in 2025 continued to report a higher score on the item (86%). This goal will continue to be monitored as the CCS provider network grows and more participants enroll in CCS.



74%

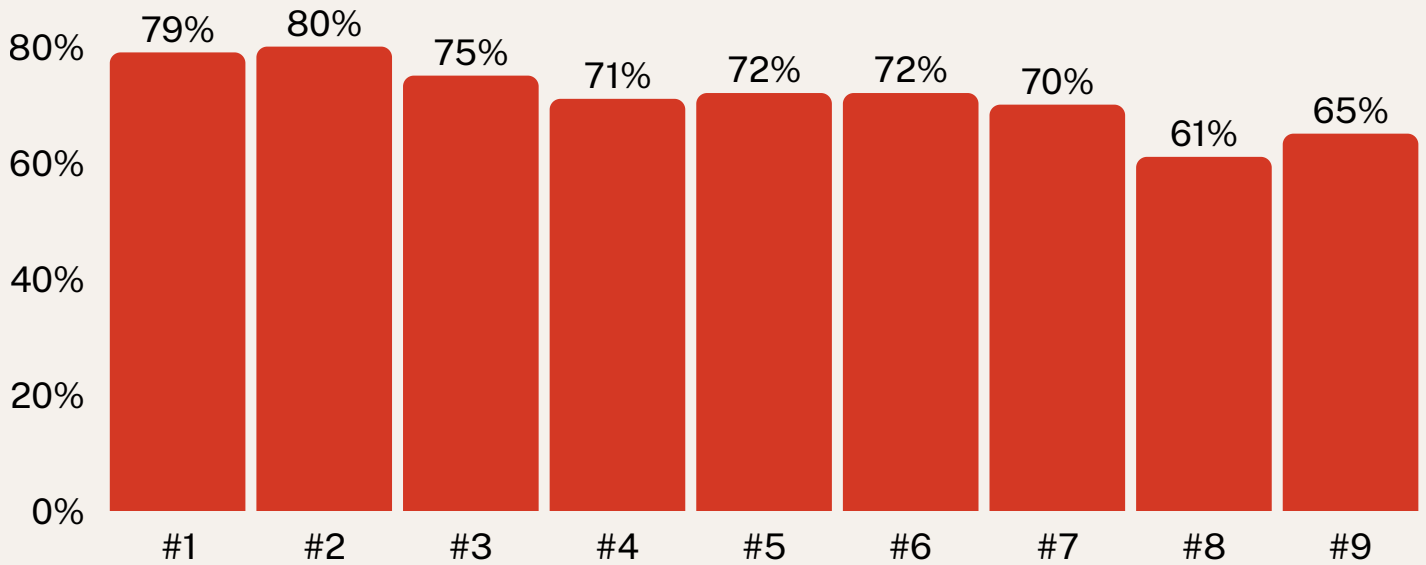
Improvements in emotional and behavioral outcomes

Improvements in long-term emotional and behavioral health can be challenging to measure and sustain.

Outcomes

This domain measures changes in emotional and behavioral outcomes targeted by intervention and treatment.

- #1 I am better able to control my life. (A)
- #2 I deal more effectively with daily problems.
- #3 I am better able to deal with crisis. (A)
- #4 I do better in social situations.
- #5 My housing situation has improved. (A)
- #6 I am getting along better with my family.
- #7 I do better in school and/or work.
- #8 My symptoms are not bothering me as much. (A)
- #9 I am satisfied with my family life right now. (Y/F)



Key Takeaways

- The Outcomes domain score remained consistent (~74% since 2023). Participants scores on the item “My housing situation has improved” were significantly higher in 2025 (72%) compared to the prior year (66%).³
- This domain has comparatively lower scores to other domains. This domain goes beyond “process” measures such as service accessibility and provider quality to assess whether a participant feels their treatment plan is improving core components of wellness and recovery.
- One of the most challenging aspects on this domain is symptom management (#8, 61%). Controlling and reducing symptoms can lead to marked improvement on other domains, especially the Functioning and Social Connectedness domains that contribute to a well-rounded and balanced lifestyle.⁴



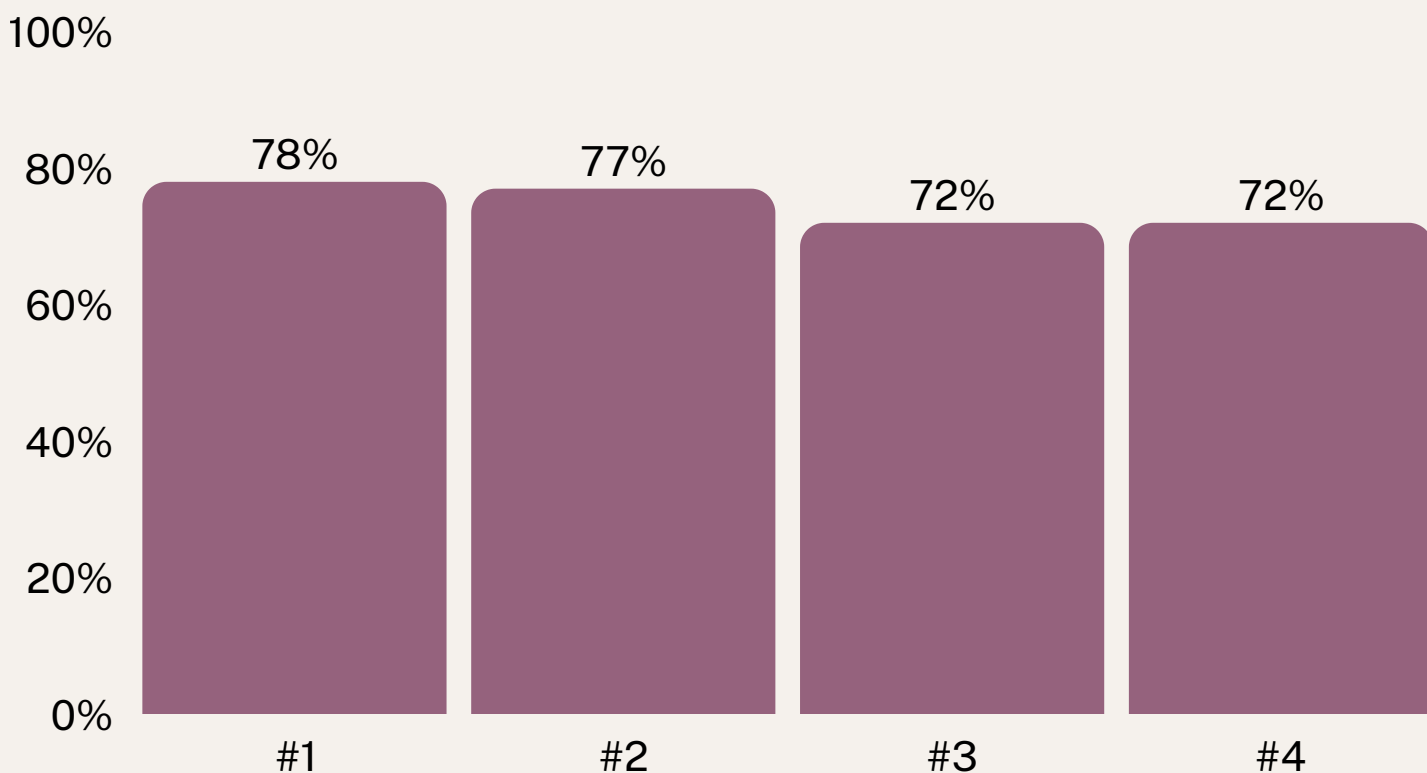
73%

Impact of treatment on day-to-day coping.

Functioning

This domain measures the extent to which services have a positive impact on participant's coping skills and regulation, both in acute crises and daily challenges.

- #1 I do things that are more meaningful to me. (A)
- #2 I am better able to take care of my needs. (A)
- #3 I am better able to handle things when they go wrong. (A)
- #4 I am better able to do things that I want to do. (A)



Key Takeaways

- The Functioning domain score (73%) is the same as the previous year. Item scores were also similar to recent years.
- While the item scores are modestly lower than items on other domains, results still indicate CCS consumers feel more equipped to cope with stress and feel empowered in their life.



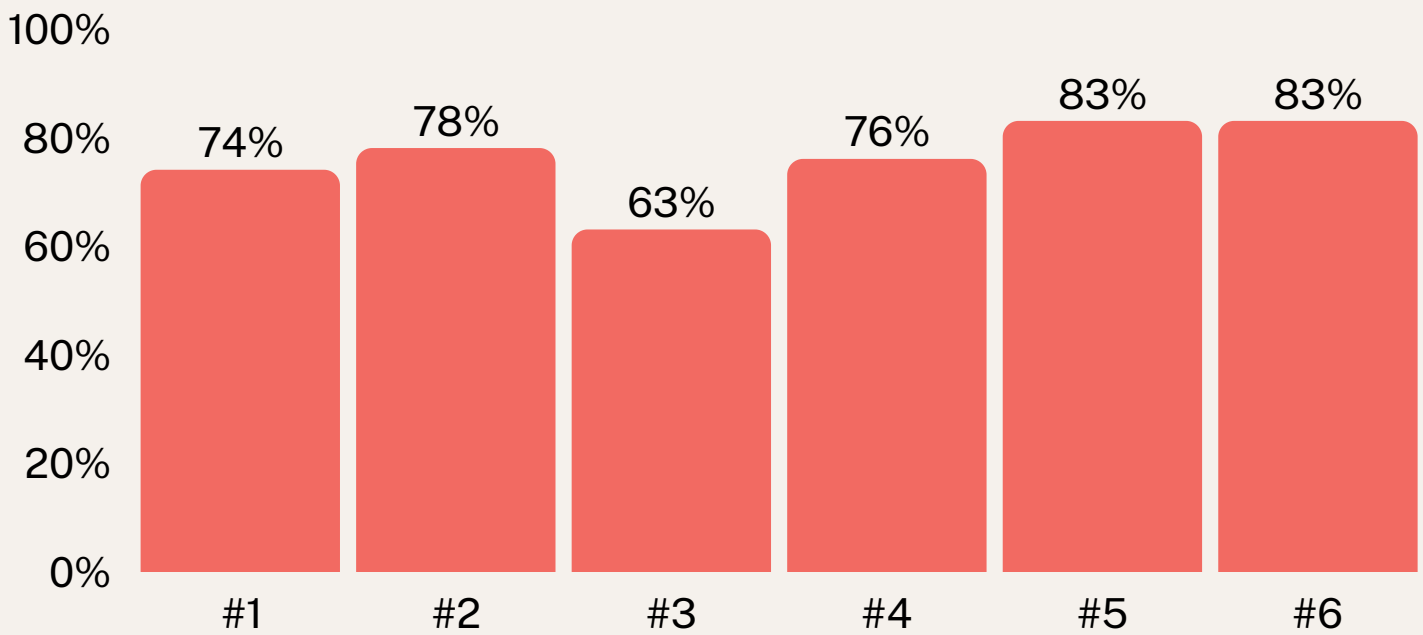
71%

Connections to social support from loved ones and community

Connectedness

This domain measures formal and informal supports in place from loved ones and participants' communities that bolster and sustain recovery.

- #1 I am happy with the friendships I have.
- #2 I have people with whom I can do enjoyable things.
- #3 I feel I belong in my community.
- #4 In a crisis, I would have the support I need from family or friends.
- #5 I know people who will listen and understand me when I need to talk.
- #6 I have people that I am comfortable talking with about my problems.



Key Takeaways

- The Social Connectedness domain score (71%) was consistent with previous years. This was the lowest scored domain.
- A driving principle of CCS is participant-driven treatment and recovery planning. Recovery is bolstered by both loved ones and a community that sees, respects, and values community members with different needs, experiences, and goals. While the narrative comments suggest participants feel very well-supported within the CCS network, a sense of belonging in the larger community lacks.



95%

Cultural sensitivity, acceptance, and empowering participants

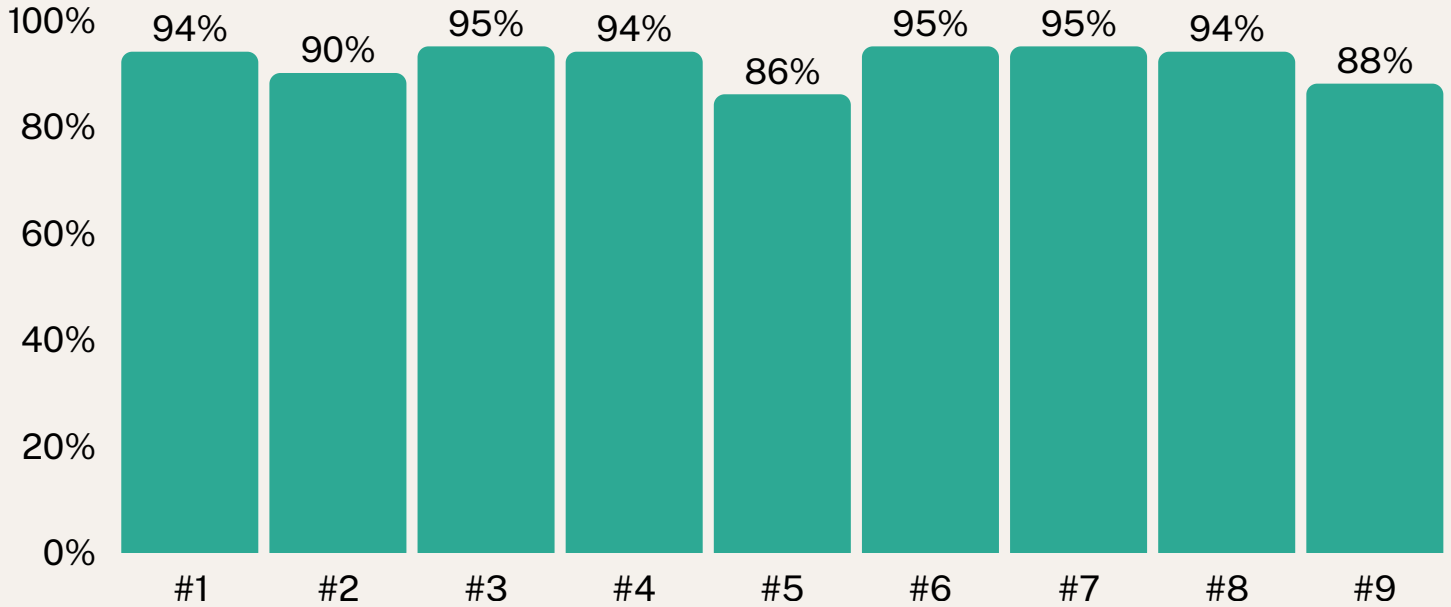
The CCS Way

Providers support participants while respecting each individual's values, traditions, beliefs, and pathway to recovery.

Quality & Culture

This domain measures participant interactions with staff and providers' culture of acceptance and empowerment of participants.

- #1 Staff believed that I could grow, change, and recover. (A)
#2 I felt free to complain. (A)
#3 I was given information about my rights. (A)
#4 Staff encouraged me to take responsibility for how I live my life. (A)
#5 Staff told me what side effects to watch out for. (A)
#6 Staff respected my wishes about who is and who is not to be given information about my treatment.
#7 Staff were sensitive to my cultural background.
#8 Staff helped me obtain the info I needed so that I could take charge of managing my mental health and/or substance use condition. (A)
#9 I was encouraged to use consumer-run programs. (A)



Key Takeaways

- The Quality domain score (95%) remained consistent to previous years. This was the highest scored domain in 2025.
CCS participants scored significantly higher on this domain compared to participants in other DCDHS behavioral health programs, indicating that service components that are unique to the CCS model, such as building a participant-driven Recovery Plan, are integral to participant empowerment.
These outstanding scores illustrate how integral 'The CCS Way' is to participant success and satisfaction with their treatment and recovery plan. Participants feel empowered to make informed decisions and build on their strengths with their team.

What Participants Say...

Positive

Relationship-based supports are a strong asset:

Participants consistently credit service facilitators, case managers, therapists, and teams for being dependable, responsive, and respectful. Several describe staff as “above and beyond,” trusted, and even “like family,” which aligns with CCS’s recovery-oriented, person-centered model.

CCS as a stabilizer and crisis-prevention support:

Some participants explicitly frame CCS as “life-saving,” crediting therapy/support and structured services with preventing crisis or hospitalization and helping them cope through high-symptom periods (e.g., severe anxiety/depression, isolation, grief, major life transitions).

The program supports real-world stability, not just symptom management:

Participants link CCS to concrete improvements — housing stability, getting tasks done, navigating disability/income disruptions, and avoiding higher levels of care. CCS appears to be effective when it combines emotional support with practical problem-solving.

Mixed

Service challenges for complex needs that fall outside of the scope of CCS:

Participants describe being “in-between” systems, needing more ongoing help related to long-term care needs, which fall outside the scope of CCS. They express appreciation for Service Facilitators who are doing their best and note CCS has helped prevent immediate crisis (including homelessness), while also emphasizing persistent unmet needs around autism and other long-term care services.

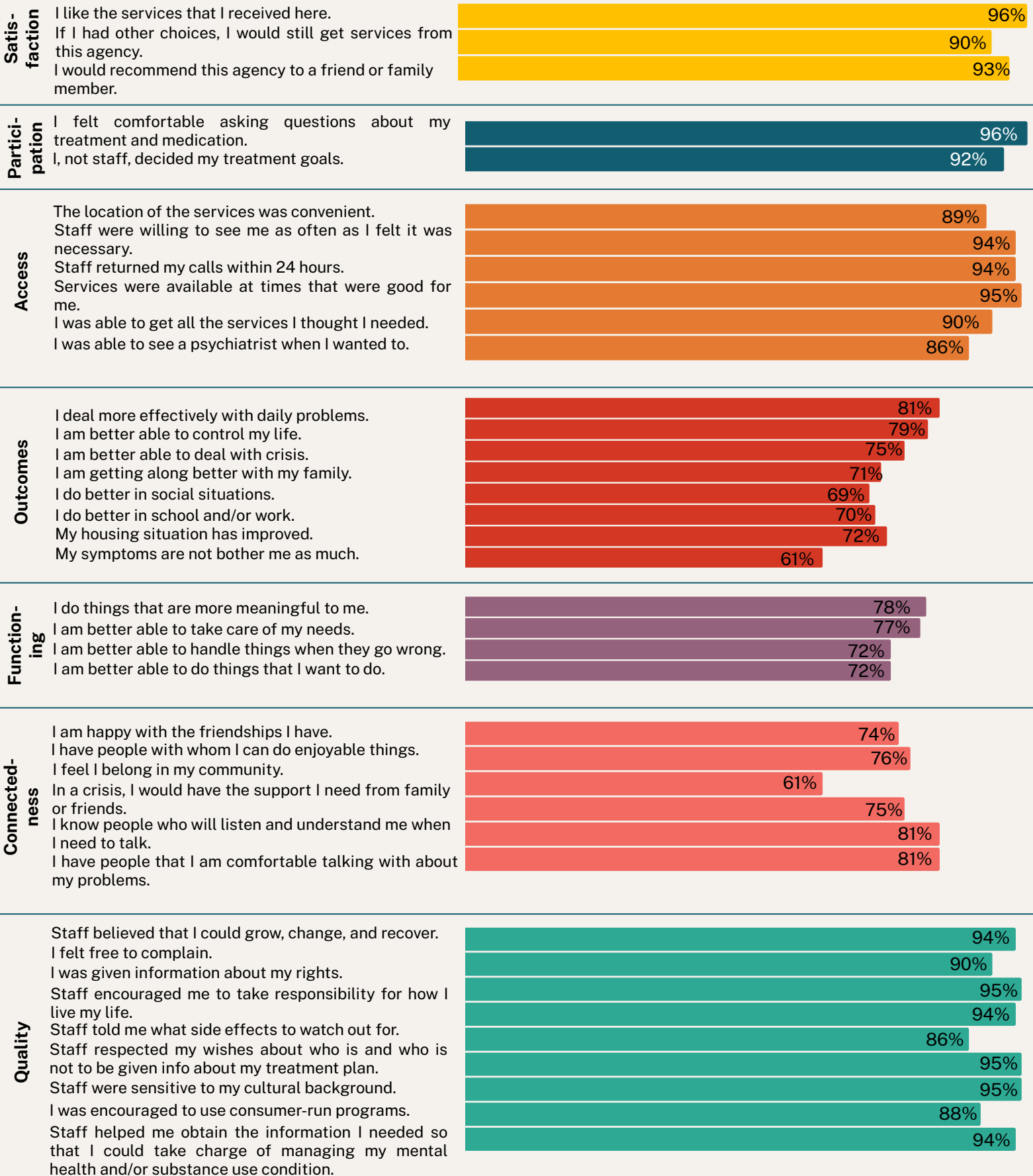
Negative

Provider turnover disrupts continuity and should be communicated more transparently:

Participants describe provider departures — sometimes abrupt — after trust and rapport were built. The resulting handoff feels disruptive, leaving participants feeling unsettled and under-supported, and creating a desire for clearer communication and a more planful transition.

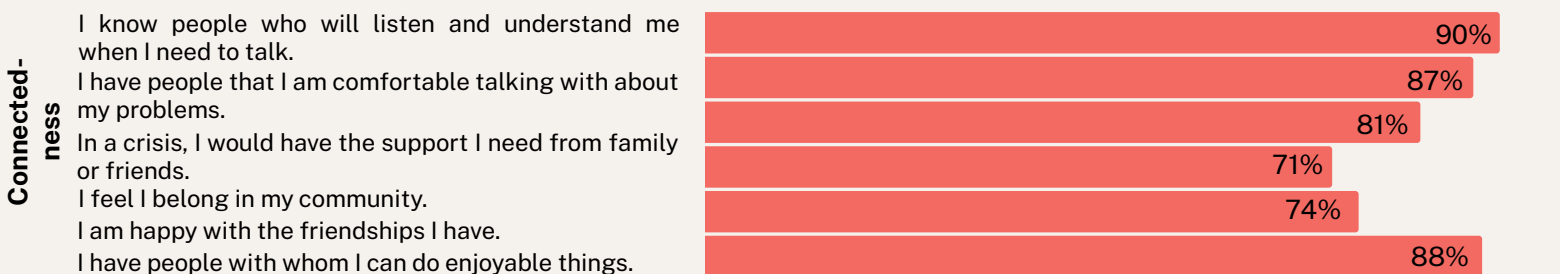
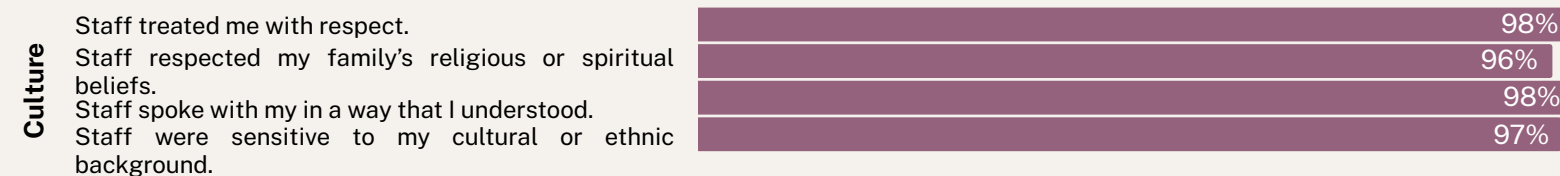
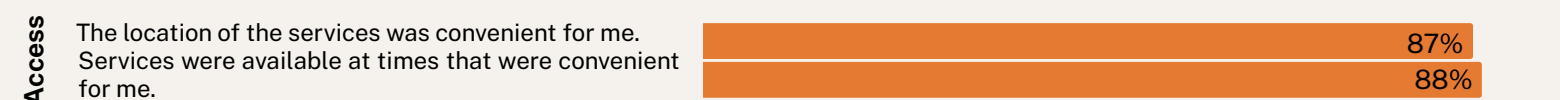
Appendix A - Adult Responses

Percent of Respondents Rating Item "Strongly Agree" or "Agree"



Appendix A - Youth & Family Responses ⁶

Percent of Respondents Rating Item “Strongly Agree” or “Agree”



Footnotes

- 1 All other behavioral health (BH) participants are not included in this sample population.
- 2 $z = 4.37, p < 0.0001$
- 3 $z = 2.09, p = 0.036$
- 4 Van Os et al., 2019. "The evidence-based group-level symptom-reduction model as the organizing principle for mental health care: time for change?" *World Psychiatry* Volume 18, Issue 1. Accessed April 8, 2025.
<https://onlinelibrary.wiley.com/doi/epdf/10.1002/wps.20609>
- 5 $z = 5.17, p < 0.0001$
- 6 The statements listed are from the Youth survey in first-person. The Family survey asks identical questions, but replaces "I" and "me" with "my family" and/or "my child."