

Virginia DBHDS Recovery-Oriented Systems Indicator (ROSI) Project

ROSI Provider Survey–

Organization Name: _____

Contact: _____ **Phone** _____ **Email** _____

Reporting Period From: _____ **To:** _____

1. **There is at least one freestanding peer/consumer operated program in our community. (Yes/No) _____.**

2. **The number of annual slots specifically funded for training consumers in relevant educational and training programs to become mental health providers = _____.**

3. **Our agency has an affirmative action hiring policy regarding consumers. (Yes/No) _____.**

4. **Our agency has an established mechanism to help consumers develop advance directives. (Yes/No) _____.**

5. **The ratio of adult mental health direct care staff to consumers in the provider agency = _____.**
 - *Numerator: The total number of full-time-equivalent (FTE) adult mental health direct care staff (unduplicated) during the reporting period _____.*
 - *Denominator: The total number of adult mental health consumers (unduplicated) during the reporting period _____.*

6. **Our agency’s mission statement explicitly includes a recovery orientation. (Yes/No) _____.**

7. **Our agency has an office of consumer affairs. (Yes/No) _____.**

Virginia DMHMRSAS Recovery-Oriented Systems Indicator (ROSI) Project

ROSI Provider Survey–

Organization Name: _____

Contact: _____ **Phone** _____ **Email** _____

Reporting Period From: _____ **To:** _____

8. The percentage of our agency’s board membership that are primary MH consumers (i.e., individuals receiving mental health services) = _____.

- *Numerator: The number of primary MH consumers (unduplicated) who serve on our board during the reporting period _____.*
- *Denominator: The total number board members (unduplicated filled appointments) during the reporting period _____.*

9. The percentage of consumers under involuntary inpatient commitments = _____.

- *Numerator: The number of consumers who received involuntary inpatient commitments during the reporting period _____.*
- *Denominator: The total number of consumers who received inpatient services during the reporting period _____.*

10. The percentage of consumers under involuntary outpatient commitments = _____.

- *Numerator: The number of consumers who received involuntary outpatient commitments during the reporting period _____.*
- *Denominator: The total number of consumers who received outpatient services during the reporting period _____.*

11. Jail diversion services are available in our community for mental health consumers. (Yes/No) _____.

12. Integrated substance abuse and mental health services are available in our community for mental health consumers. (Yes/No) _____.

13. Trauma services are available in our community for mental health consumers. (Yes/No) _____.