



# CalOMS Updates & Treatment Perception Survey (TPS) Key Findings

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Los Angeles County Department of Public Health  
July 15, 2025



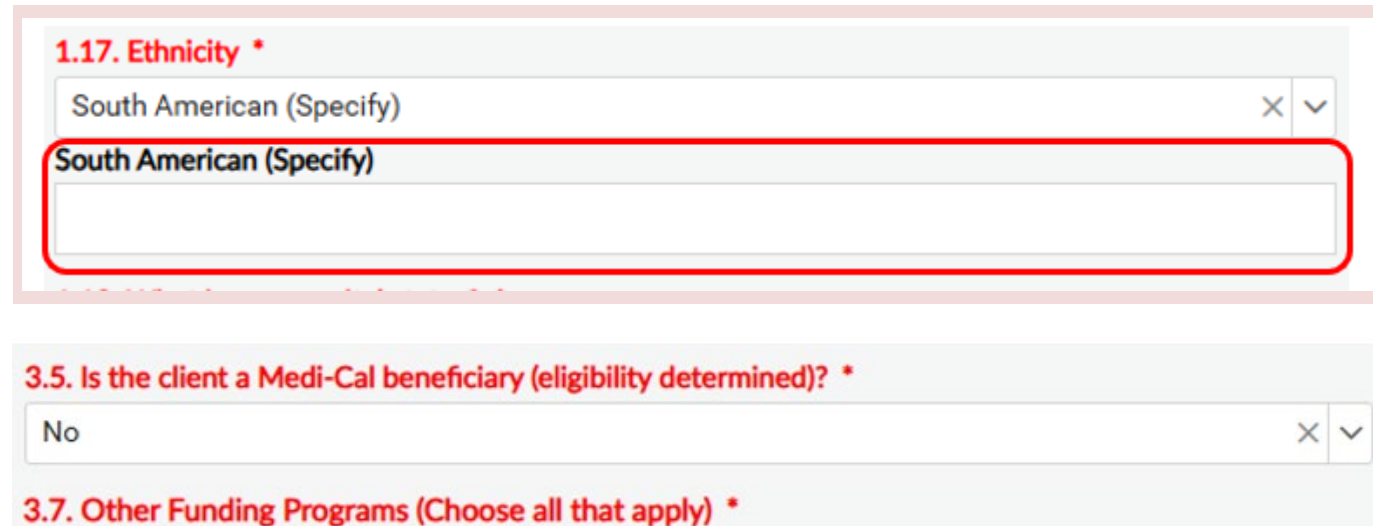
- **Required Fields Implemented**

- They're marked in **red**
- If you skip any required fields, you cannot submit the form.
- Unnecessary items are deactivated
- Some items may not be red but are still required by the system

- **Shorter form logics are implemented**

- Youth, ASAM 0.5, Recovery Service, and OTP-Detoxification

- **CalOMS Open Admissions Episode Report in Sage**



The screenshot displays three form sections from the CalOMS system, each with a red header indicating a required field:

- 1.17. Ethnicity \***: A dropdown menu with "South American (Specify)" selected. Below the dropdown is a text input field, also outlined in red.
- 3.5. Is the client a Medi-Cal beneficiary (eligibility determined)? \***: A dropdown menu with "No" selected.
- 3.7. Other Funding Programs (Choose all that apply) \***: A section for selecting multiple funding programs.

☒ **CalOMS All-Provider Meeting: Thursday, July 17, 10 AM-12 PM**



# 2024 Treatment Perception Survey (TPS): Key Findings



## Adult TPS in 2024: Key Facts

6,972 completed surveys - 3,657 (52%) Comments

79 agencies (197 facilities) participated

63% response rate (58% in 2023)

92% overall satisfaction with services received (89% in 2023)

[TPS Data Brief](#)

## Youth TPS in 2024: Key Facts

195 completed surveys - 86 (44%) Comments

22 agencies (34 facilities) participated

60% response rate (50% in 2023)

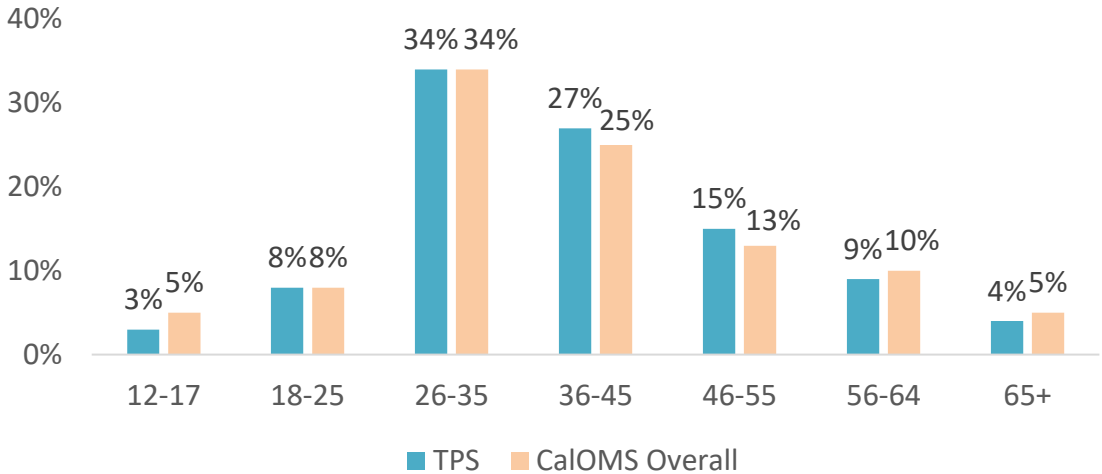
88% overall satisfaction with services received (89% in 2023)

☒ **DHCS's TPS Data Collection Period: October 20-24, 2025**

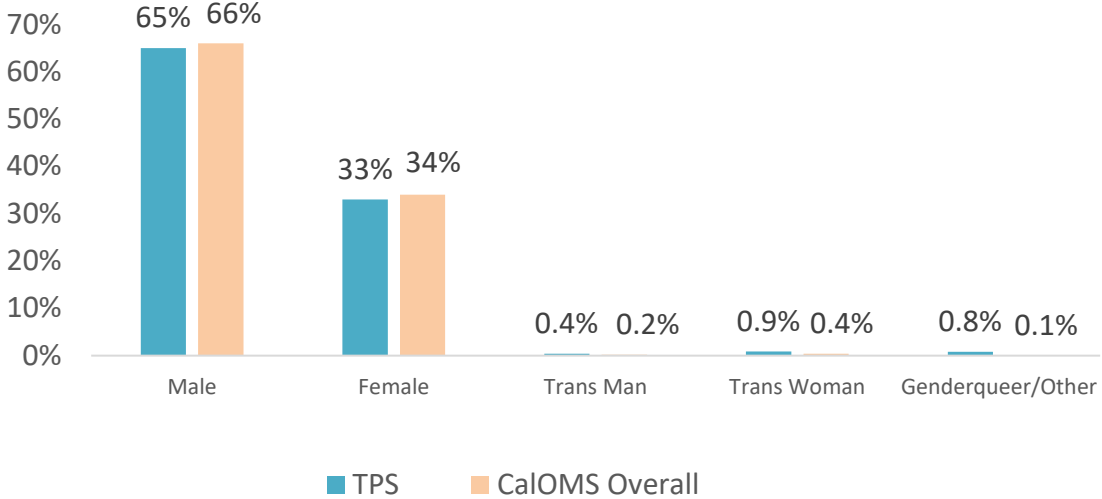
# Client Characteristics: TPS Participants vs. CalOMS Overall



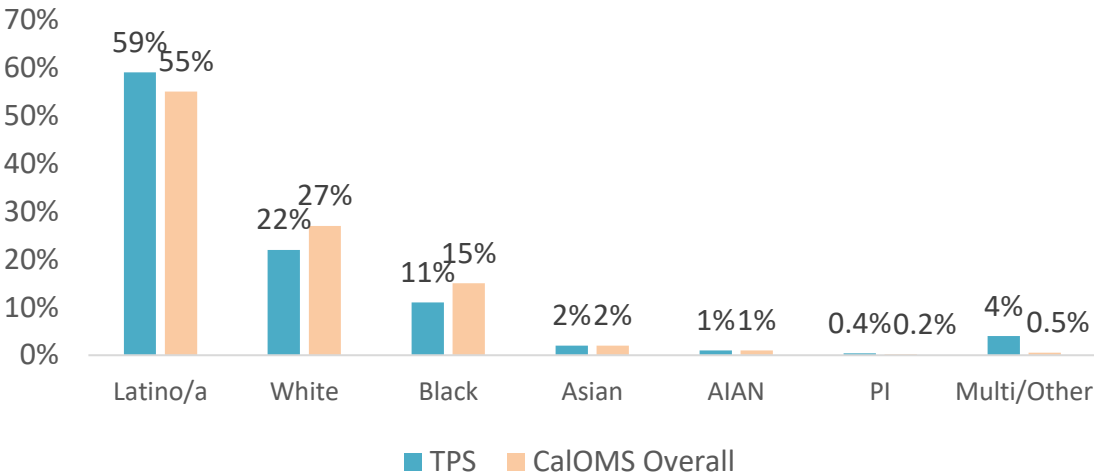
Age Range



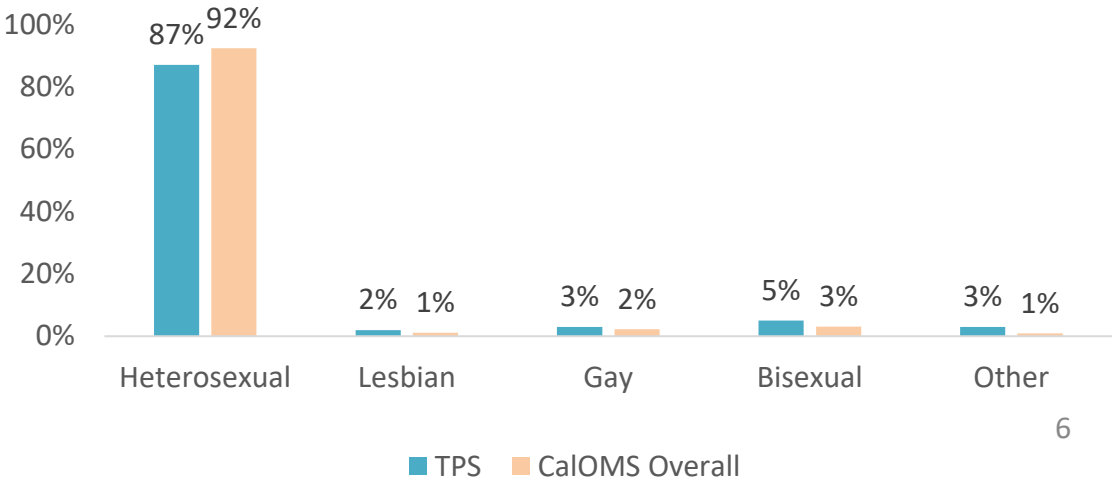
Gender Identity



Race Ethnicity

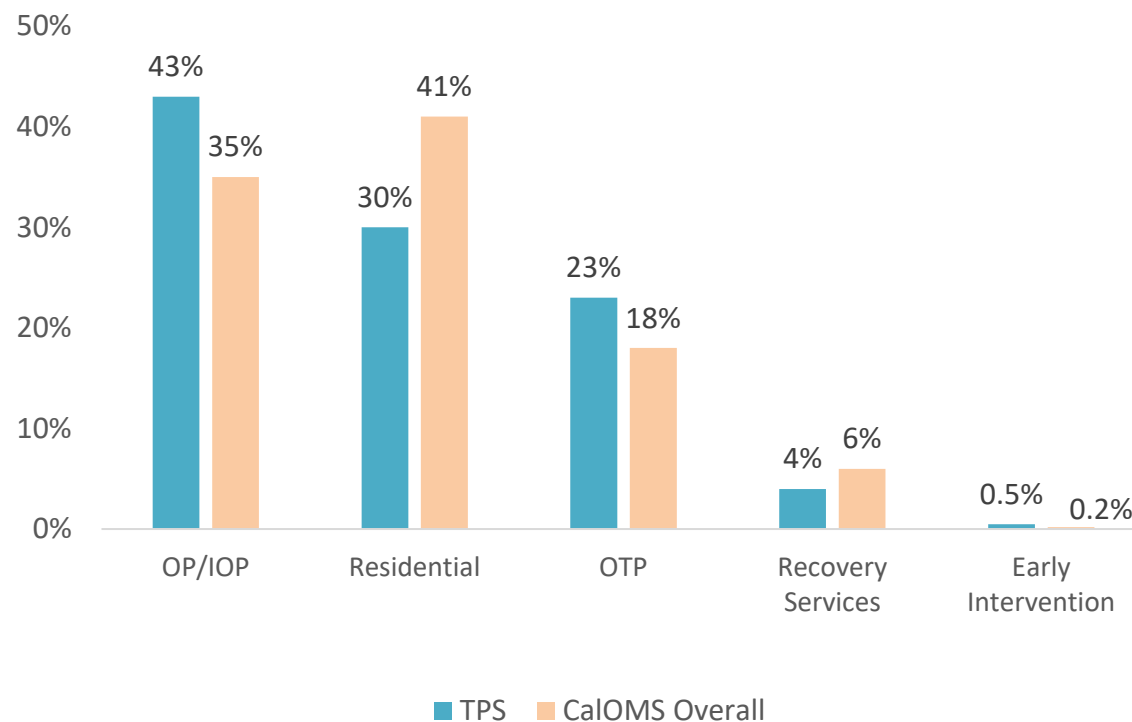


Sexual Orientation

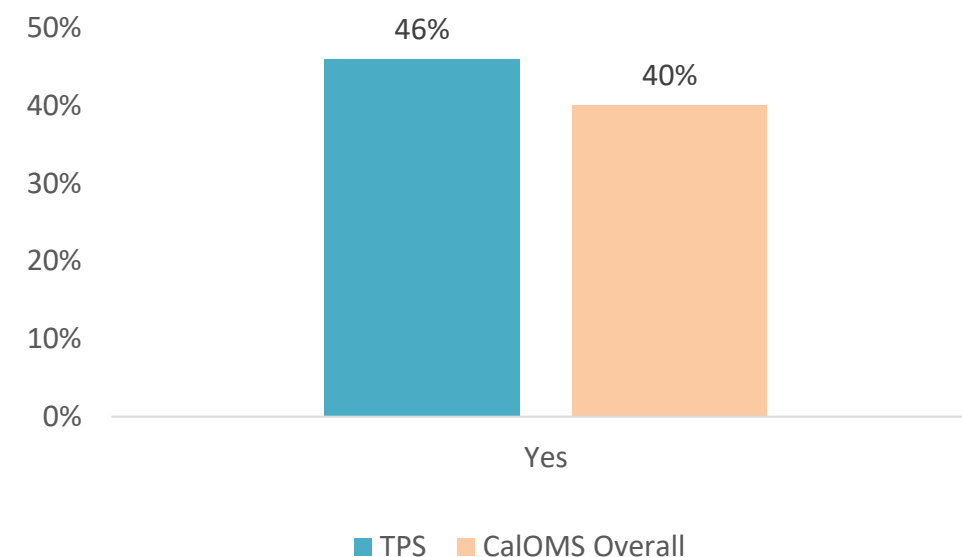


# Client Characteristics: TPS Participants vs. CalOMS Overall

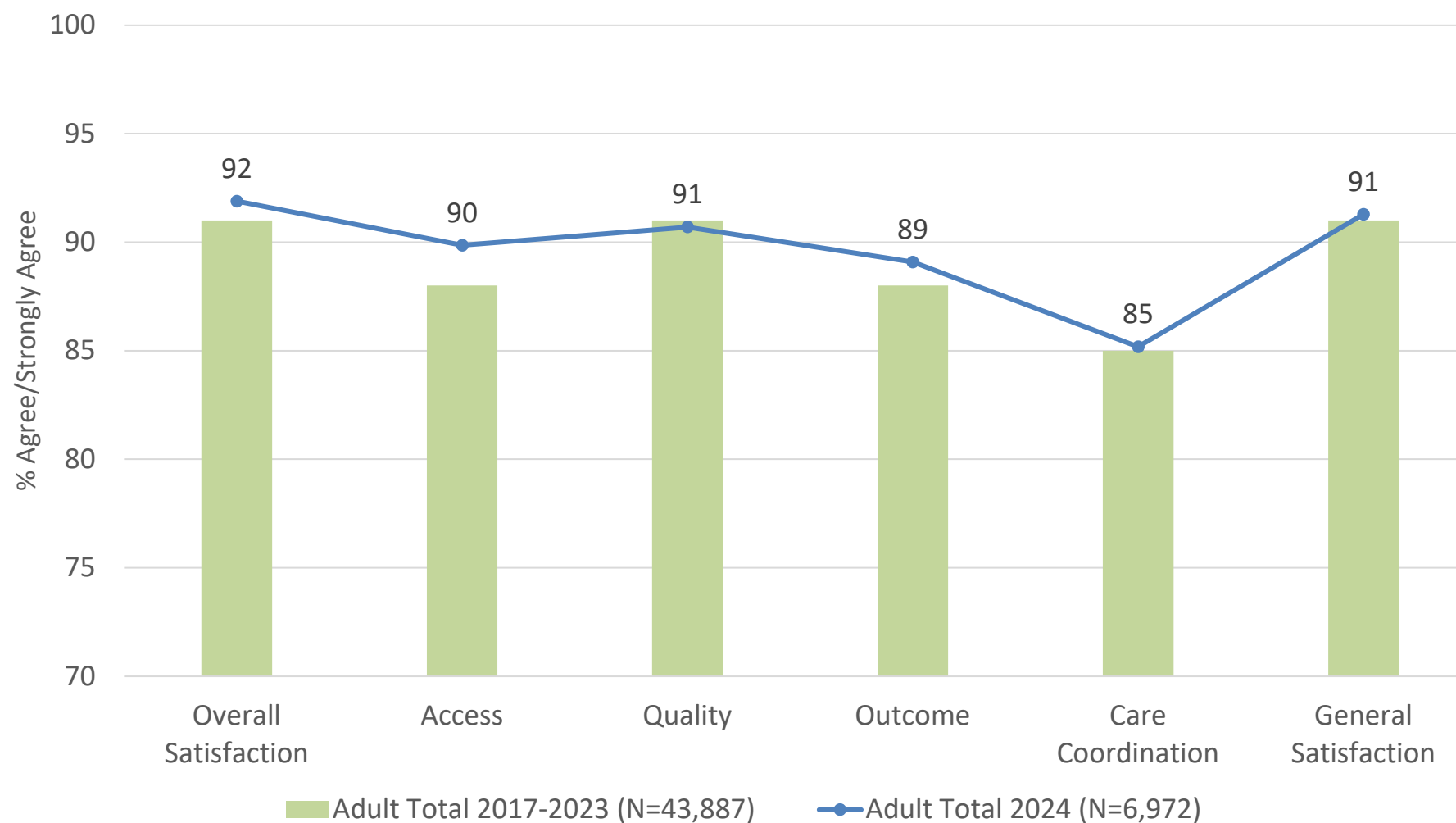
Level of Care



Homelessness

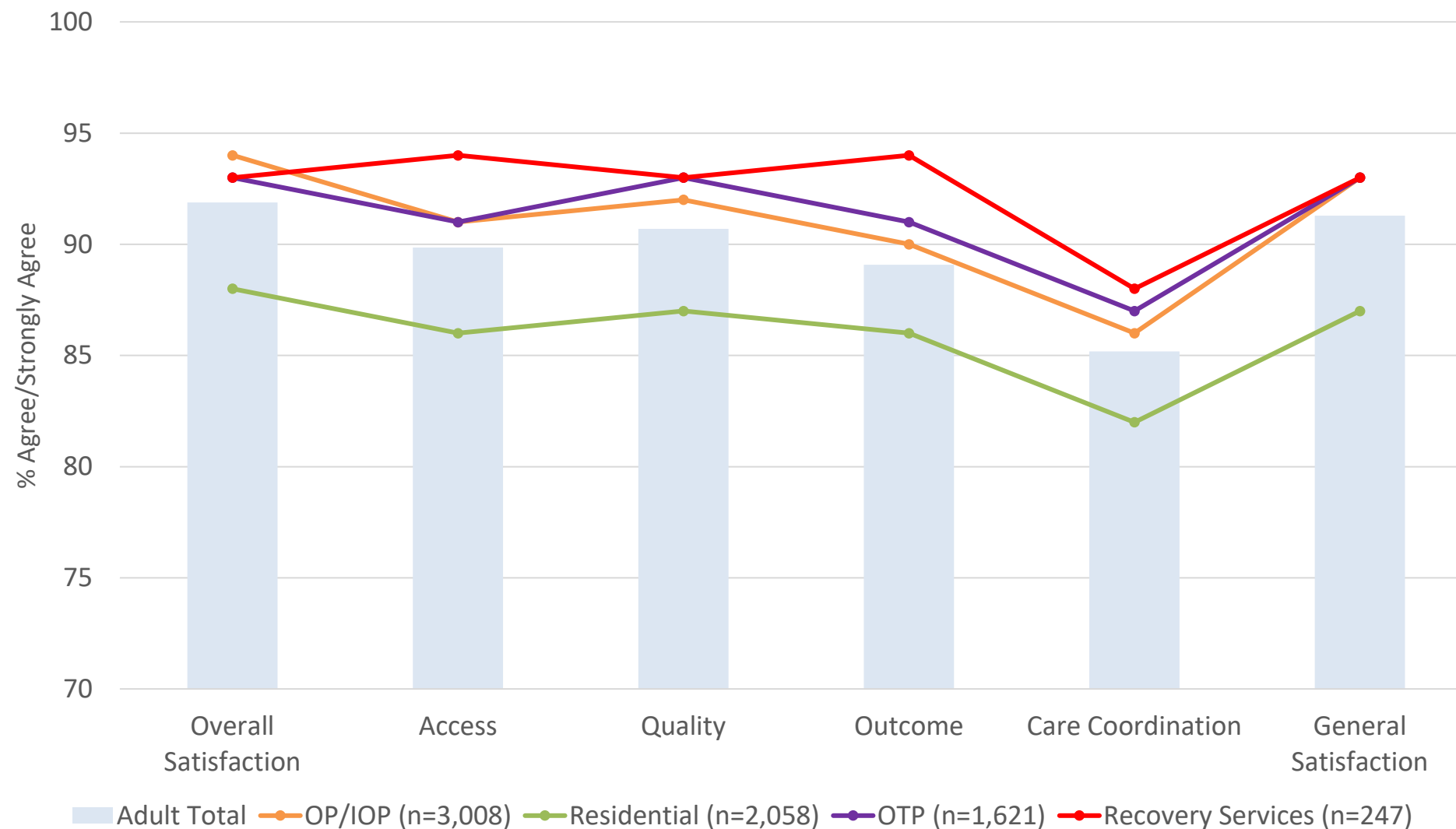


## Adult Satisfaction by Domain (N=6,972)

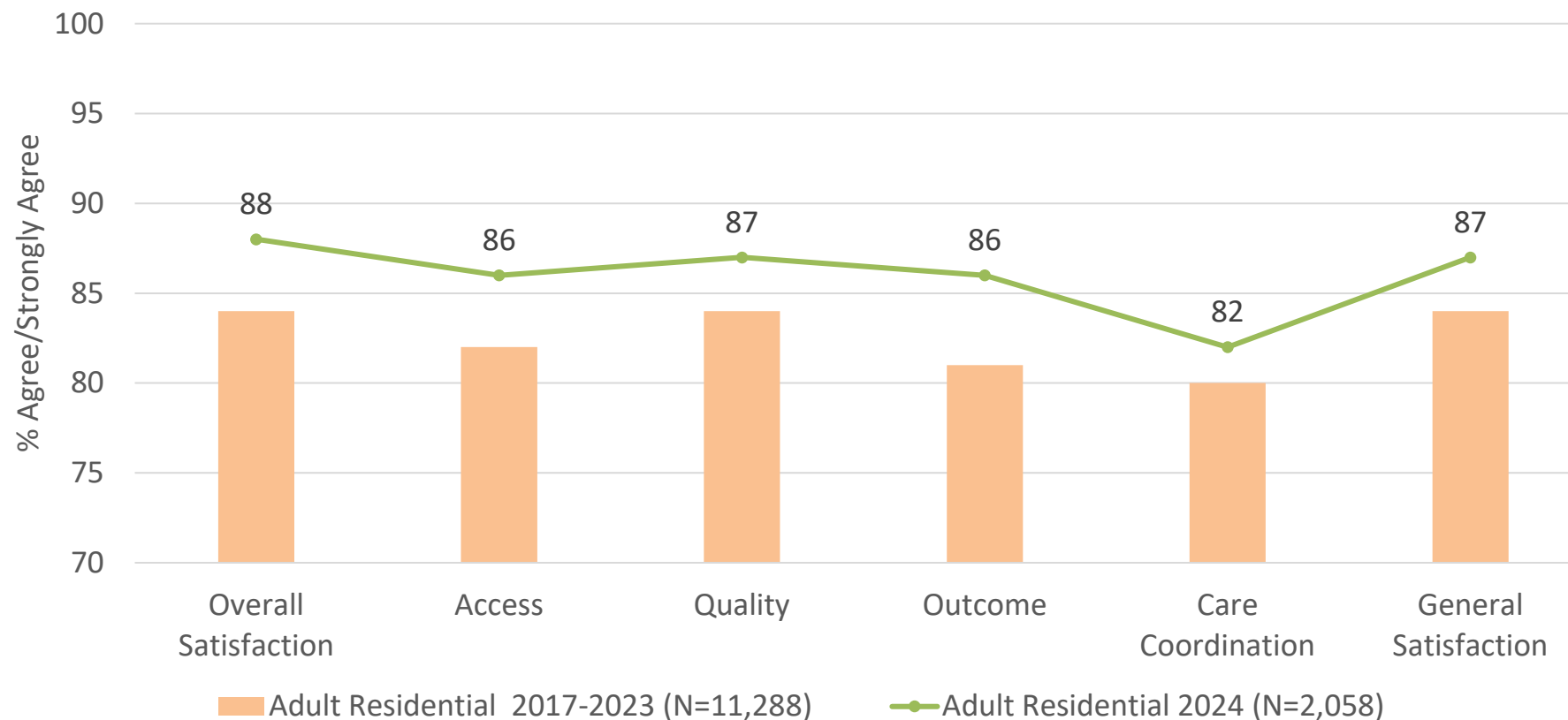




## Adult Satisfaction by Domain and Level of Care (N=6,972)

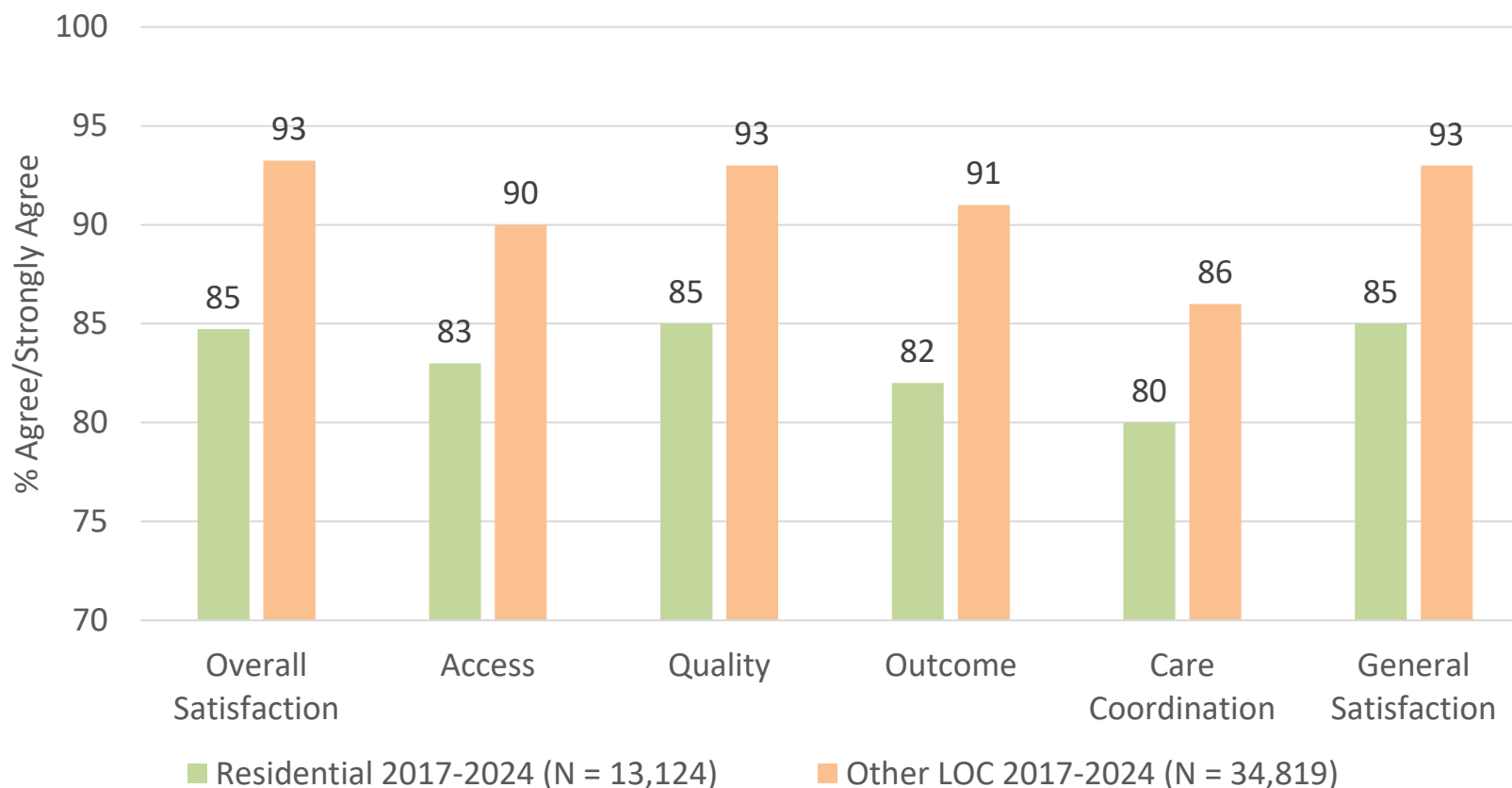


## Adult Residential Satisfaction by Domain: 2024 vs. 2017-2023



Adult clients in residential settings reported higher satisfaction scores across all domains in 2024 compared to the combined scores from 2017 to 2023.

## Adult Residential Satisfaction by Domain (2017-2024): Comparison with Other LOC



However, clients in residential settings have consistently reported lower satisfaction than those in other levels of care (LOC) across multiple domains—including access, quality of care, care coordination, outcomes, and overall satisfaction—from 2017 to 2024.

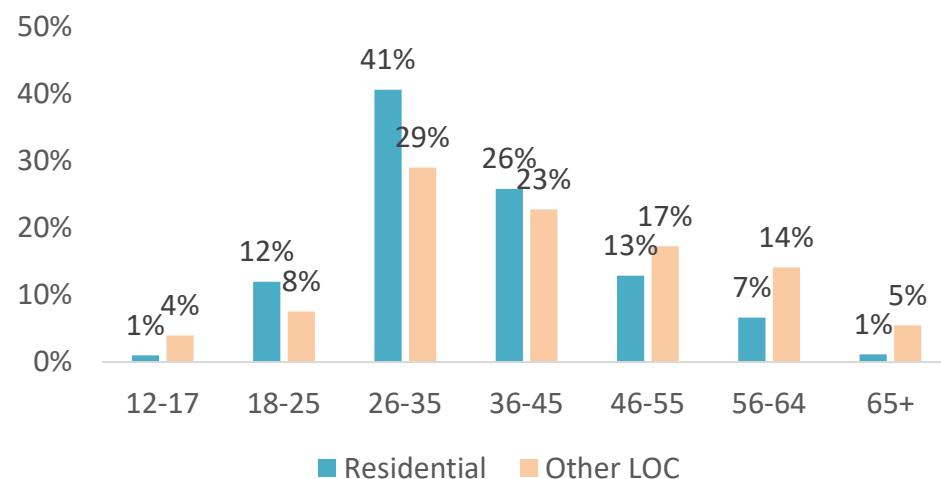


# Why Are Satisfaction Scores Consistently Lower in Residential Programs?

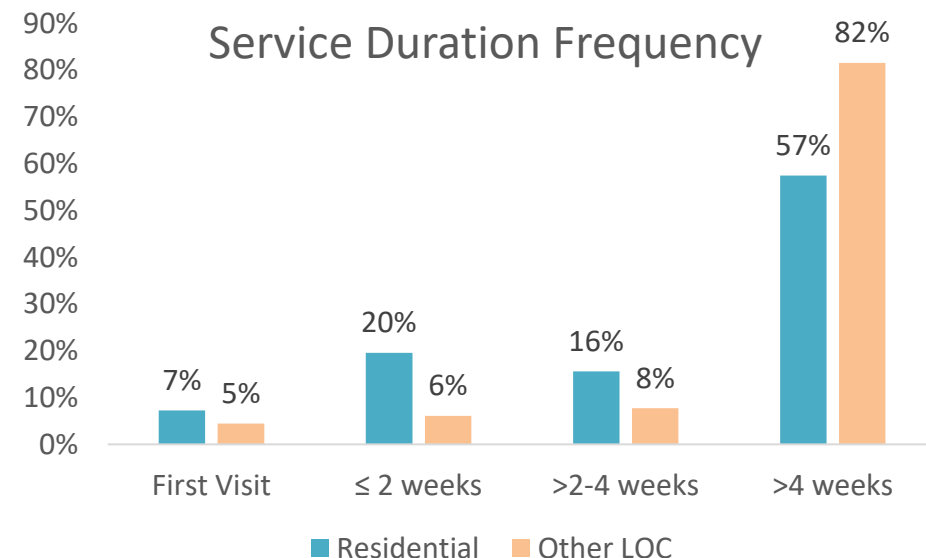


# Adult Residential Satisfaction: Exploring Client Profiles Compared to Other LOC (TPS)

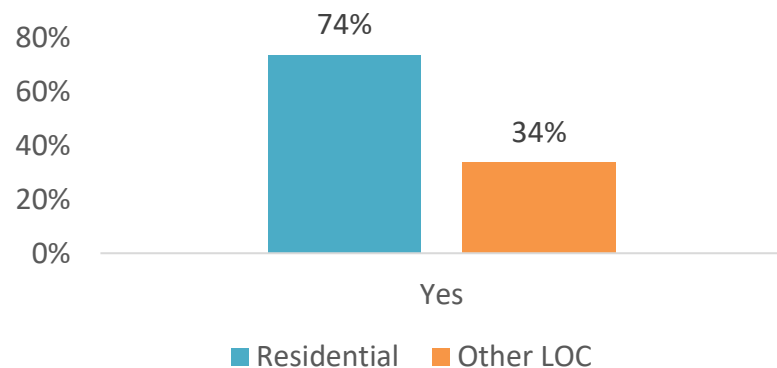
## Age Frequency



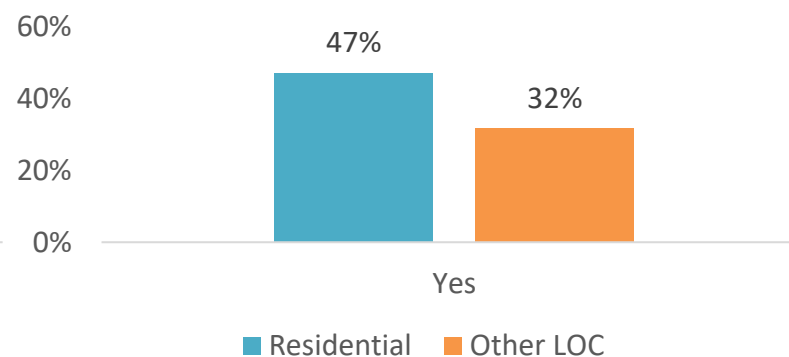
## Service Duration Frequency



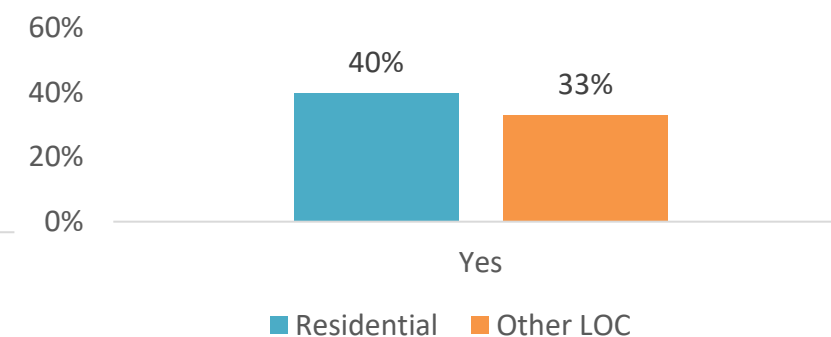
## Homelessness



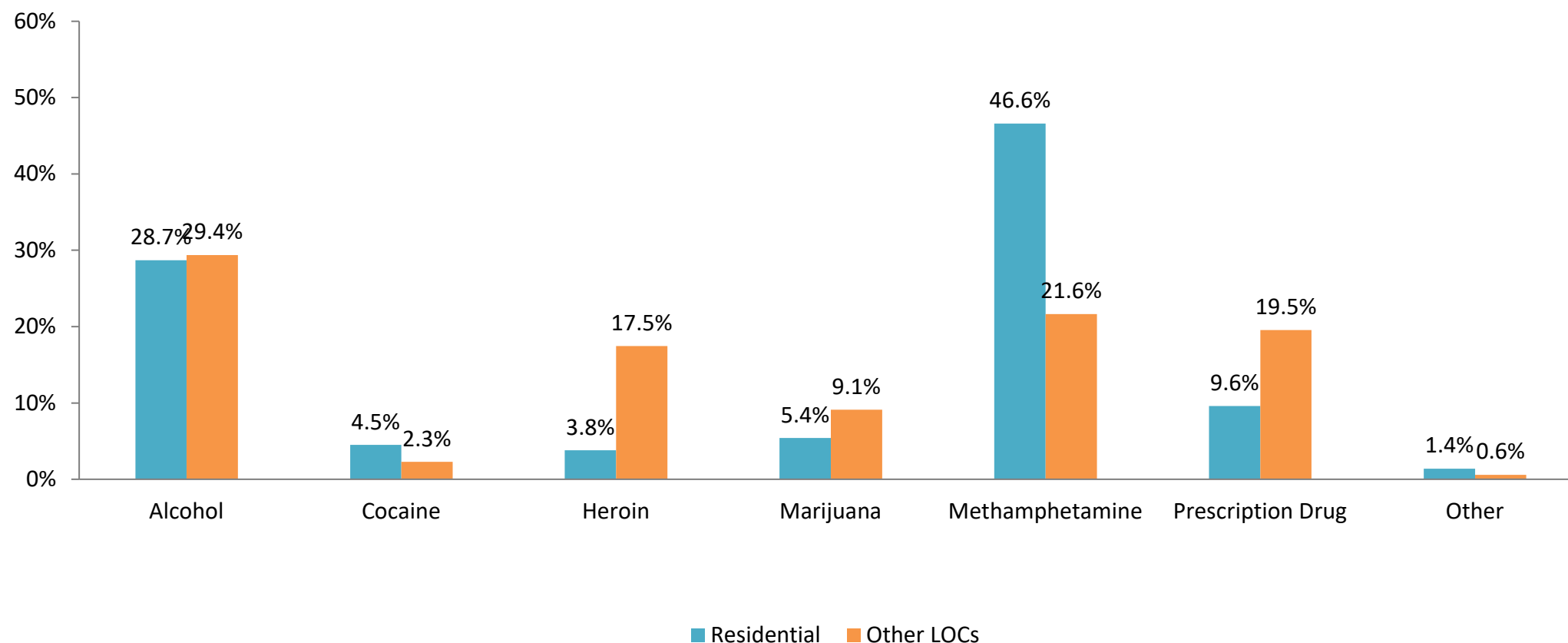
## Criminal Justice Involvement



## Disability



# Adult Residential Satisfaction: Exploring Patterns of Primary Substance Use Compared to Other LOC (CalOMS)



The following client feedback from the TPS comments section in residential settings may help shed light on potential factors contributing to this trend. Most suggestions centered around the following themes: food quality, availability of recreational activities, phone access, coordination of physical and mental health care, and family-related policies and practices.

- *Food could take a more health conscious approach.*
- *Food is horrible and extremely lacking in nutrition, the portions are very small.*
- *I would like more outings, even just seven-eleven visits and more extra curricular activities to keep people motivated and busy. That's a big deal for me, I feel like I'm trapped.*
- *I think implementing more exercise/ walking/ yoga would be beneficial to the program.*
- *We should be allowed our own personal phones after a set black out period to be able to take care of own legal and personal issues.*
- *I feel like my needs, physical health issues are being neglected. Too long to see a doctor, see a psych, to get a therapist.*
- *We should be allowed to go to the dentist when needed rather than being told we can only go if it's an emergency.*
- *Child visits should not be subject to sitting in family group in the weekend.*
- *I would change the 30 day "blackout" period to being able to communicate with my family with a supervised counselor.*