

CHARACTERISTICS OF ADULT RESPONDENTS

Gender:	Male		21%
	Female		79%
Age:	21 - 24		7%
	25 - 34		26%
	35 - 44		17%
	45 - 54		35%
	55 - 64		12%
	65 & Over		3%
Survey Method	Face to Face	38	58%
	Telephone	28	42%
		66	100%
Services	Mental Health		82%
	Drug & Alcohol		11%
	Mental Health and Drug & Alcohol		7%

CHARACTERISTICS OF YOUTH RESPONDENTS

Gender:	Male		44%
	Female		56%
Age:	14 - 15		37%
	16-17		44%
	18-20		13%
	20 & Over		6%
Survey Method	Face to Face	0	0%
	Telephone	16	100%
			100%
Services	Mental Health	16	100%
	Drug & Alcohol		0%
	Mental Health and Drug & Alcohol		0%

CHARACTERISTICS OF PARENT/FAMILY RESPONDENTS

Gender:	Male		17%
	Female		83%
M. Age:	5 or under		28%
	6 - 8		47%
	9 - 13		22%
	14 & Over		3%
Survey Method	Face to Face	5	14%
	Telephone	31	86%
		36	100%
Services	Mental Health	36	100%
	MH & D&A		0%
			100%

Contact Information

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Survey Administration and Evaluation Services
 provided by:

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Somerset Bedford
 HealthChoices



245 West Race Street
Somerset, Pennsylvania 15501

Somerset-Bedford
 Recipients
 Rate Their
 Behavioral
 Health Services

January-March 2016 Consumer and Family
 Satisfaction and Outcomes Survey Findings

April 2016

BACKGROUND

The Office of Mental Health and Substance Abuse Services (OMHSAS) of the Pennsylvania Department of Welfare requires counties to assess member satisfaction with, and outcomes of, publicly funded behavioral health services provided through participating providers of PerformCare. A total of 118 adults, adolescents and parent/family caregivers participated in the survey process during January – March 2016.

RATING TREATMENT SUCCESS

Adolescents between 14 and 20 years of age were asked how they had improved as a direct result of the behavioral health services they received. Percentages below represent those respondents who “strongly agreed” or “agreed” with the following statements: They were also asked their opinion regarding the treatment they received from their provider. N=16

100%	I am satisfied with amount of provider time.
100%	These services meet my needs.
100%	Staff see me as an equal partner in my treatment .
100%	I feel comfortable asking questions.
81%	I am included in treatment meetings.
88%	I am receiving all the services that I need.
100%	I am happy to be in treatment.
88%	I know how to file a complaint, if necessary.
100%	Staff focuses on my strengths.
75%	Encouraged to participate in consumer –run programs.
50%	I manage strong feelings like anger better.
88%	I make better choices.
69%	I don’t get into trouble as often.
100%	I believe treatment is working.
29%	Provider recommended doing a WRAP.

RATING SATISFACTION WITH SERVICES

Adult and parent/family caregivers were asked to rate their overall satisfaction with the behavioral health services they received for themselves or their child. Percentages below represent those respondents who “strongly agreed” or “agreed” with the following statements. The questions covered the member’s perception of treatment, outcomes, treatment by the provider and staff of PerformCare. The parent/family caregivers interviewed responded on behalf of their child under 14 years of age. The table below shows survey findings, where percentages represent respondents who “strongly agreed” or “agreed” with each item, using a 5– point scale.

ADULT SATISFACTION WITH SERVICES	AGREE	PARENT/CAREGIVER SATISFACTION WITH SERVICES	AGREE
	N=66		N=36
I was made aware of and given a provider choice.	65%	Services are available at convenient times.	100%
I am satisfied with provider service amount.	96%	Information submitted on time for service continuity.	100%
These services meet my needs.	94%	We were given a choice of providers for child’s service.	75%
I was given clear information on emergency contact needs.	95%	The services meet my child’s needs.	86%
I feel welcomed by provider.	97%	Given clear information on who to contact if child in crisis.	94%
I was informed about treatment options.	94%	Have sufficient provider time during most sessions.	89%
Provider talks to me about aftercare.	77%	I feel comfortable asking questions.	100%
I feel free to complain.	94%	I was offered a copy of child’s treatment plan	78%
Provider makes me feel good about myself.	92%	Staff communicates with each other and us regularly.	97%
I have a written safety/wellness plan.	71%	Informed with notice to attend treatment meetings.	100%
Provider staff believes I can grow, change and recover.	99%	I feel free to complain without fear of consequences.	100%
Provider staff is sensitive to my cultural background.	99%	Were encouraged to use community support programs.	44%
Provider staff see me as an equal partner in treatment program.	99%	We are participating in community-run programs.	28%
Provider recommended I do a Wellness Action Recovery Plan (WRAP)	65%	Staff discusses child’s continuing care plan with me.	92%
Provider recommended I do a Mental Health Advance Directive.	31%	Staff asks what goals I want to work on with child.	94%
I deal more effectively with daily problems.	76%	Provider recommended we do a WRAP.	24%
I feel more hopeful about the future.	88%	Child deal more effectively with daily problems.	72%
I believe I can get better.	85%	Treatment is making a positive impact on family.	72%
I feel I am improving with treatment	80%	Child’s behavioral health is improving.	81%
I was encouraged to use consumer-run programs.	86%	The people I spoke to at PerformCare were helpful	73%
My treatment is developed around my specific needs.	89%	I know how to file a complaint	50%