CHARACTERISTICS OF ADULT RESPONDENTS

Gender:	Male		28%
	Female		72%
Age:	21 - 24		11%
	25 - 34		25%
	35 - 44		18%
	45 - 54		22%
	55 - 64		24%
	65 & Over		0%
Survey			
Method	Face to Face	41	33%
	Telephone	83	67%
		124	100%
Services	Mental Health		92%
	Drug & Alcohol		3%
	Mental Health and	Drug & Alcohol	5%

CHARACTERISTICS OF PARENT/FAMILY RESPONDENTS

Gender:	Male		9%
	Female		91%
	Did Not Identify		0%
M. Age:	5 or under		15%
	6 - 8		36%
	9 - 13		49%
	14 & Over		0%
Survey			
Method	Face to Face	6	18%
	Telephone	27	82%
		33	100%
Services	Mental Health		100%
	MH & D&A		0%

100%

CHARACTERISTICS OF YOUTH RESPONDENTS

Gender:	Male		56%
	Female		44%
Age:			
	14 - 15		40%
	16-17		0%
	18-20		60%
	20 & Over		0%
Survey			
Method	Face to Face	4	16%
	Telephone	21	84%
		25	100%
Services	Mental Health		100%
	Drug & Alcohol		0%
	Mental Health and Dr	ug & Alcohol	0%

Contact Information

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Survey Administration and Evaluation Services provided by:

The Center for Behavioral Health Data Research, Inc.

1331 Twelfth Ave, Suite 200, Altoona, PA. 16601 Lynna P. Flynn Somerset-Bedford C/FST Program Director 1-888-474-5006 (Toll Free)

Bedford-Somerset HealthChoices

245 West Race Street
Somerset, Pennsylvania 15501

Bedford-Somerset Recipients Rate Their Behavioral Health Services

October—December 2021 Consumer and Family Satisfaction and Outcomes Survey Findings

January 2022

BACKGROUND

The Office of Mental Health and Substance Abuse Services (OMHSAS) of the Pennsylvania Department of Human Services requires counties to assess member satisfaction with, and outcomes of, publicly funded behavioral health services provided through participating providers of Community Care A total of 182 adults, adolescents and parent/family caregivers participated in the survey process during October - December 2021.

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=25

20%	Do you know who Community Care is? (Yes).
4%	Have you reviewed your benefits/treatment options?
68%	Did you choose to go to this provider? (Yes) .
84%	We meet at times that are convenient for me.
84%	Am able to get help within a reasonable amount of time.
88%	Provider helped me create a plan to deal with problems.
91%	Am active participant in developing treatment plan.
44%	Are you aware you can file a complaint, if needed?
87%	I am included in meetings about my treatment.
88%	Staff talks to me about community supports & options.
75%	I manage strong feelings better.
89%	I make better choices dealing with day to day lie.
71%	I don't get into trouble as often.
90%	I believe treatment is working because I feel better.
72%	Are you taking behavioral health medications?

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 Community Care 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=124		N=33
Do you know who Community Care is? (Yes)	48%	Do you know who Community Care is? (Yes)	36%
Are you aware you can file a complaint if needed? (Yes)	72%	Are you aware you can file a complaint if needed? (Yes)	91%
Provider talked to me about a Mental Health Advanced Directive?	54%	We were given a choice of agencies for child's service.	100%
I was able to get help needed within a reasonable amount of time.	99%	Service are available at times that are convenient.	100%
I am an active participant in developing my treatment plan.	98%	Given clear information on who to contact if child in crisis.	97%
Provider talked to me about community supports and other options.	83%	Have enough provider time during most sessions.	94%
I was offered a copy of my treatment plan/treatment summary.	87%	I feel comfortable asking questions.	100%
I was encouraged to use consumer-run programs.	84%	Child's treatment plan was shared & reviewed with me.	100%
Staff treats me with respect and sees me as an equal partner.	100%	Have you had any issues or problems with provider?	18%
My treatment is developed around my specific needs.	96%	Informed with notice to attend treatment meetings.	100%
Were you put on a waiting list to see this provider? (Yes)	11%	Treatment has improved quality of my child's life.	85%
Have you had any issues or problems with services from provider?	7%	Staff talks to you about community support options.	88%
Provider helped me create a plan to deal with any problems I have.	93%	Staff helped us create a plan to deal with problems.	97%
Treatment has improved my overall quality of life.	81%	Child obtained needed help within an acceptable time.	97%
Provider asked me what my goals were to achieve a happy life.	97%	I was involved in developing child's treatment goals.	100%
I deal more effectively with daily problems.	97%	We were given a chance to make treatment decisions.	97%
I feel more hopeful about the future.	95%	Child deal more effectively with daily problems.	97%
I believe I can get better.	97%	Our family has improved since child started treatment.	87%
I feel treatment is working.	97%	Child's behavioral health is improving.	81%
In the past 12 months, I was able to get the help I needed.	94%	My child is taking behavioral health medications.	70%
Are you taking behavioral health medications? (Yes)	83%	Having any problems obtaining medications that work?	4%