

Behavioral Health Services of Bedford and Somerset Counties  
245 West Race Street  
Somerset PA 15501

---

**Behavioral Health Services of Bedford and Somerset Counties**

---

**1st Quarter January-March 2025**

# **Consumer and Family (C/FST) Satisfaction & Outcomes: Survey Findings**

**Detailed Report of Survey Findings**  
*April 2025*

---

**Survey Administration and Evaluation Services  
Provided By:**

**THE CENTER  
FOR BEHAVIORAL HEALTH  
DATA RESEARCH, INC.**

The Consumer Family Satisfaction Team (C/FST) program is a statewide county based program mandated by Appendix L of the Pennsylvania HealthChoices Program to measure member perceptions of satisfaction and treatment outcomes with publicly funded mental health and drug and alcohol services.



## Chart Informational Guide

An appropriate benchmark system is utilized to highlight positive findings and better recognize areas requiring improvement.

Above 90% Benchmark - **Meets Expectations**

Between 80%-90% - **Satisfactory**

Below 80% - **Requires Action**

No chart information - **No data this quarter**

### Data Utilization & Provider Response

Per the Pennsylvania HealthChoices Program, the C/FST data is designed to be utilized as an additional input to the provider's existing internal quality improvement processes. Additionally, the provider is to review their quarterly and year-to-date data and respond with actions your organization will take to improve any indicator that has at least five (5) year-to-date completed interviews/surveys and is below the 80% benchmark.

**\*Please note that no written response is required for 1st quarter survey results, nor for any YTD score that was skewed below benchmark due to the results of only one quarter.**

Counts Break % Respondents	2019/2020	What quarter is it?			
	YTD Total	1st Q Jul-Sept	2nd Q Oct-Dec	3rd Q Jan-Mar	4th Q Apr-Jun
(N/A) responses reduce total	7	7	-	-	-
The people I spoke to at Community Care were helpful.					
Yes	7 100.0%	7 100.0%	-	-	-
No	-	-	-	-	-

**100% of target rate Y\_T\_D**

**Meets Expectations**

**Not all charts are benchmarked.** Benchmarked charts are identified by one of three colors (green, yellow, or red) directly below the chart. **If you have 5 or more surveys Y-T-D, the benchmark will determine if you need to respond.** (See sample above).



## Introduction

The **Bedford-Somerset Consumer/Family Satisfaction Team (C/FST)** is a county-wide program mandated under Appendix L of the Pennsylvania HealthChoices Program to obtain input from individuals and caregivers receiving treatment from publicly funded mental health and drug & alcohol services.

The C/FST is required to be independent and unbiased, although it does seek input from the county (primary contractor), the Managed Care Organization (the insurance company) and treatment providers, as well as individuals being treated and other stakeholders in designing its data collection processes and interview questionnaires.

Individuals receiving treatment are interviewed and asked for their opinions (perceptions) of the ease of accessing treatment, their treatment experiences, their perception of provider recovery orientation practices and treatment outcomes. They are also asked about issues or problems.

The C/FST produces a quarterly report starting with the 1st Quarter produced in April for the January-March period and ending with a 4th Quarter produced in January which also includes the annual report as quarter-to-quarter and year-to-date results are tracked and compared.

The county, MCO and providers are asked to utilize the C/FST data as an additional input into their internal quality improvement processes to support both system and treatment outcomes.

### **How this report is organized:**

The 1st Section covers adults (age 21 and above) interviewed for the present quarter, while the 2nd Section covers family/caregivers (of a child under age 14) receiving treatment and the 3rd Section covers Youths (between the ages of 14 and 21) receiving treatment.

The first two pages of Adult, Family and Youth sections contain a C/FST analysis of interviews/surveys achieved for that quarter, changes in sample characteristics, findings and recommendations.

Some questions provide for an opportunity for the respondent to give literal comments and these are shown under the question, if any additional comments were made.

The Provider Comment Section will list provider comments received in response to the previous quarter report. Typically, these comments are in response to areas receiving year-to-date percentages that are under the established benchmarks and have had at least five (5) individuals interviewed.

The MCO Comment Section and functions the same as the provider comment section with the distinction being the MCO is more focused on systemic delivery outcome and issues across the network, while individual providers are focused on their own results.

The Technical Notes Section addresses target sample size, survey/interview processes, data analysis and reporting, benchmarking, and data limitations.

## Adult Survey Findings

### Bedford-Somerset C/FST – 2025 1st Quarter Report

This 1st Quarter Bedford-Somerset C/FST Report provides details on the 95 adult, 24 family and 23 youth (142 total) interviews that were completed between January 2025 and March 2025.

### Adult Survey Process & Findings

This 1st Quarter Bedford-Somerset Counties C/FST Report covers the period between January and March 2025 and provides detail on the 95 adults interviews/surveys that were completed.

### Survey Results & Variations on Sample Characteristics

Variations in sample characteristics between quarters are represented so that the reader may infer what influences, if any, these variations may have had on member response ratings.

#### 1st Quarter 2025 Adult Sample Characteristics versus 2024 4th Quarter Comparison:

1. Higher percentage of face-to-face – 80% (76 of 95) versus 71% (59 of 83).
2. Similar percentage of female respondents – 60% (57 of 95) versus 59% (49 of 83).
3. Higher percentage of respondents in the age range of 55-64 – 11% (11 of 95) versus 8% (7 of 83).
4. Higher percent of MH only (includes medication mgt) – 88% (84 of 95) versus 60% (50 of 83).
5. Lower ratio of respondents receiving less than six months of treatment from provider – 21% (20 of 95) versus 36% (30 of 83).
6. Higher percentage of respondents receiving treatment services over 4 years with the same provider – 38% (36 of 95) versus 31% (36 of 83).

### Findings Overview

1. Adult overall satisfaction with Community Care continues to be good with 100% (19 of 19, excludes 76 “not applicable” of adults agreeing with, *“If you had contact with Community Care over the past 12 months, were you satisfied with the level of dignity and respect the staff conveyed to you.”* This indicator was 98% for calendar year 2024.
2. Community Care’s complaint and grievance awareness indicators remained consistent during the 4th Quarter. The indicator, *“Are you aware that you can file a complaint and/or grievance if needed?”* is 83% (79 of 95) and was 70% for calendar year 2024. In the 1st Quarter 2025, no adult members reported using either Community Care’s complaint and/or grievance process within the last 12 months.
3. The lowest awareness indicator during the 1st Quarter was, *“Have you reviewed your insurance benefits and treatment options available through Community Care,”* at 48% (46 of 95). This indicator was 31% for calendar year 2024.
4. Surveyed adults are generally pleased with **Access** to provider treatment services having 91% to 100% level of satisfaction in the three satisfaction indicators covering, *“I feel I was able to get the help I needed within a reasonable amount of time,” “I was made aware of the availability of different providers for this service and given a choice,”* and *“Services are available at times that are convenient.”*
5. Adults surveyed are also generally pleased with their provider **Treatment Experiences**, rating all six indicators of satisfaction from 95% to 100%. These include, *“(Provider) helped me create a plan to deal with any problems I have,” “I am an active participant in developing a treatment plan that is a good fit for me,” “I feel comfortable asking questions about my treatment,” “I feel I have enough time with staff during most sessions,” “My provider has talked with me about community resources and other supports, if needed,”* and *“As appropriate, my providers work together and share information to provide me the best care possible.”* These indicators were rated 94% to 99% for calendar year 2024.

6. Surveyed adults continue to be pleased with their provider **Recovery Oriented Practices** rating, “*Staff treats me with respect and sees me as an equal partner in my treatment program,*” at 98% (93 of 95) and “*I have been given clear information on who to contact if I need immediate help between appointments,*” at 100% (95 of 95).

7. Adult perception of **Treatment Outcomes** was 99% - 100% in all three indicators. These indicators have been consistently in the ninety percent level of satisfaction and this quarter continues that trend as adult service recipients believe, “*I deal better with daily problems,*” “*I feel more hopeful about the future,*” and “*I feel treatment is working.*” These indicators were 99% for calendar year 2024.

8. Just 3% (3 of 95) of interviewed adults reported having issues or problems with their provider during the 1st Quarter of 2025. One member reported “*frequent staff changes*” and one member reported “*other*” as the reasons.” See Page 25 Literal Comments regarding member provider related problems.

#### **Adult – Member Request for Assistance (MRAs)**

Upon completing the survey, 0% (0 of 83 members surveyed overall) representing 0% (0 of the 1) adult members that reported having problems) expressed interest in having a provider or MCO concern or issue they shared during the interview referred for immediate handling by BHSSBC.

#### **Quality Audits**

Periodically, random quality audits are performed which have the dual purpose of obtaining member feedback regarding the survey process plus confirming the integrity of the survey.

During the 1st Quarter, 13 adult quality audits were performed. 100% (13 of 13) of adults felt the length of the survey and number of questions were satisfactory. 100% (13 of 13) of adults were satisfied with the survey process and 100% (13 of 13) of adults felt ok or good about being contacted.

#### **Member comments,**

*“I did not mind being contacted.”*

*“I was concerned with the length of the survey because I had an appointment coming up.”*

*“I did not feel anything about being contacted.”*

## Adult Demographics

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
	95	95	-	-	-
<b>Q4-What type of survey is it?</b>					
Phone	19 20.0%	19 20.0%	-	-	-
Face to Face	76 80.0%	76 80.0%	-	-	-

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
	95	95	-	-	-
<b>Q5-What county does the member live in?</b>					
Somerset	38 40.0%	38 40.0%	-	-	-
Bedford	57 60.0%	57 60.0%	-	-	-

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
Base	95	95	-	-	-
<b>Q6-What is your gender?</b>					
Male	38 40.0%	38 40.0%	-	-	-
Female	57 60.0%	57 60.0%	-	-	-
Does not identify with either gender	-	-	-	-	-
Refused to answer	-	-	-	-	-



## Adult Demographics

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
Base	95	95	-	-	-
<b>Q7-How old are you?</b>					
21-24	4 4.2%	4 4.2%	-	-	-
25-34	21 22.1%	21 22.1%	-	-	-
35-44	36 37.9%	36 37.9%	-	-	-
45-54	21 22.1%	21 22.1%	-	-	-
55-64	11 11.6%	11 11.6%	-	-	-
65 and older	2 2.1%	2 2.1%	-	-	-

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
Base	95	95	-	-	-
<b>Q8-What do you consider your race to be?</b>					
Caucasian	92 96.8%	92 96.8%	-	-	-
African American	-	-	-	-	-
Hispanic American	3 3.2%	3 3.2%	-	-	-
American Indian/Alaskan Native	-	-	-	-	-
Asian American	-	-	-	-	-
Multi-racial	-	-	-	-	-
Other	-	-	-	-	-

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
Base	95	95	-	-	-
<b>Q9-Are you receiving services primarily for:</b>					
Mental Health	84 88.4%	84 88.4%	-	-	-
Drug and Alcohol Services	11 11.6%	11 11.6%	-	-	-
Both Mental Health and Drug and Alcohol Services	-	-	-	-	-

## Adult Satisfaction with Community Care

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
Base	95	95	-	-	-
Q10A-Do you know where to find the number to call Community Care with questions or concerns? (Note to Surveyor: If no give number 1-866-483-2908.)					
Yes	67 70.5%	67 70.5%	- -	- -	- -
No	28 29.5%	28 29.5%	- -	- -	- -

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
Base	95	95	-	-	-
Q10B-Are you aware that you can file a complaint and/or grievance if needed?					
Yes	79 83.2%	79 83.2%	- -	- -	- -
No	16 16.8%	16 16.8%	- -	- -	- -

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
Base	95	95	-	-	-
Q10C-Have you reviewed your insurance benefits and treatment options through Community Care?					
Yes	46 48.4%	46 48.4%	- -	- -	- -
No	49 51.6%	49 51.6%	- -	- -	- -

## Adult Satisfaction with Community Care

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
NA reduces totals	19	19	-	-	-
Q11-If you had contact with Community Care (CCBH) in the last 12 months, were you satisfied with the level of dignity and respect the staff conveyed to you?					
Yes	19 100.0%	19 100.0%	-	-	-
No	-	-	-	-	-

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
NA reduces totals	-	-	-	-	-
Q12-If you used Community Care's complaint and/or grievance process within the last 12 months, were you satisfied with how your complaint and/or grievance was handled?					
Yes	-	-	-	-	-
No	-	-	-	-	-

**- No data this quarter**

## Adult Treatment Provider Level Analysis

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
Base	95	95	-	-	-
<b>Q13-What is the name of your treatment provider?</b>					
ACRP	8 8.4%	8 8.4%	-	-	-
Allegiance Rehabilitation	-	-	-	-	-
Alliance Medical Services	-	-	-	-	-
Beal Counseling and Consulting	2 2.1%	2 2.1%	-	-	-
Bedford DBHS	35 36.8%	35 36.8%	-	-	-
Cambria-Somerset Counseling	-	-	-	-	-
Cen-Clear	-	-	-	-	-
Croyle-Nielson	-	-	-	-	-
Discovery House	-	-	-	-	-
Clarvida (FBR)	4 4.2%	4 4.2%	-	-	-
Hyndman Area Health Center	3 3.2%	3 3.2%	-	-	-
Mary Berge and Associates	-	-	-	-	-
Nulton Diagnostic and Treatment Center	20 21.1%	20 21.1%	-	-	-
Peerstar	2 2.1%	2 2.1%	-	-	-
Primary Health Network	-	-	-	-	-
Pyramid HealthCare	-	-	-	-	-
Somerset DBHS	12 12.6%	12 12.6%	-	-	-
Somerset Hospital	-	-	-	-	-
Twin Lakes	4 4.2%	4 4.2%	-	-	-
UPMC Western Behavioral Health of the Alleghenies (UPMC WBHA)	-	-	-	-	-
White Deer Run/Cove Forge	3 3.2%	3 3.2%	-	-	-
Other	2 2.1%	2 2.1%	-	-	-

## Adult Treatment Provider Level Analysis

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
Base	95	95	-	-	-
<b>Q14-What service are you receiving from this (name of provider)?</b>					
MH BCM (Blended Case Management)	7 7.4%	7 7.4%	-	-	-
Crisis Intervention	1 1.1%	1 1.1%	-	-	-
Medication/Psychiatry/Telepsychiatry	42 44.2%	42 44.2%	-	-	-
MH Inpatient Hospitalization	-	-	-	-	-
MH Outpatient Therapy/EOP	23 24.2%	23 24.2%	-	-	-
MH Partial Hospitalization	-	-	-	-	-
Peer Support Services	2 2.1%	2 2.1%	-	-	-
Psych Rehab	9 9.5%	9 9.5%	-	-	-
Substance Use (SU) Inpatient/Rehabilitation	2 2.1%	2 2.1%	-	-	-
SU-ICM (Intensive Case Management)	-	-	-	-	-
SU Intensive Outpatient Therapy	2 2.1%	2 2.1%	-	-	-
SU Detox	1 1.1%	1 1.1%	-	-	-
Naltrexone Maintenance	-	-	-	-	-
Buprenorphine Maintenance	4 4.2%	4 4.2%	-	-	-
SU Certified Recovery Specialist	-	-	-	-	-
SU Outpatient Therapy	2 2.1%	2 2.1%	-	-	-
SU Partial Hospitalization	-	-	-	-	-
Methadone Maintenance	-	-	-	-	-
Other	-	-	-	-	-
Do Not Know	-	-	-	-	-

## Adult Treatment Provider Level Analysis

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
Base	95	95	-	-	-
<b>Q15-How long have you been receiving services from this provider?</b>					
Less than 6 months	20 21.1%	20 21.1%	-	-	-
6-11 months	17 17.9%	17 17.9%	-	-	-
1 to 2 years	16 16.8%	16 16.8%	-	-	-
2 to 3 years	6 6.3%	6 6.3%	-	-	-
4 + years	36 37.9%	36 37.9%	-	-	-

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
NA responses reduce total	89	89	-	-	-
<b>Q16-Were you put on a waiting list to be seen by (provider)?</b>					
Yes	8 9.0%	8 9.0%	-	-	-
No	81 91.0%	81 91.0%	-	-	-

## Adult Teleheath Services

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
Neutral responses reduce totals	56	56	-	-	-
<b>Q17-If you've received services by video or telephone, were you satisfied with the services you received?</b>					
Very Satisfied/Satisfied	54 96.4%	54 96.4%	-	-	-
Very dissatisfied/Dissatisfied	2 3.6%	2 3.6%	-	-	-

## Adult Access to Services

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
Neutral responses reduce totals	94	94	-	-	-
Q18A-I feel I was able to get the help I needed within a reasonable amount of time.					
Strongly Agree/Agree	94 100.0%	94 100.0%	-	-	-
Strongly Disagree/Disagree	-	-	-	-	-

**100.0% of target rate Y-T-D**

**Meets Expectations**

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
Neutral responses reduce totals	85	85	-	-	-
Q18B-I was made aware of the availability of different providers for this service and given a choice.					
Strongly Agree/Agree	77 90.6%	77 90.6%	-	-	-
Strongly Disagree/Disagree	8 9.4%	8 9.4%	-	-	-

**90.6% of target rate Y-T-D**

**Meets Expectations**

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
Neutral responses reduce totals	93	93	-	-	-
Q18C-Services are available at times that are convenient.					
Strongly Agree/Agree	92 98.9%	92 98.9%	-	-	-
Strongly Disagree/Disagree	1 1.1%	1 1.1%	-	-	-

**98.9% of target rate Y-T-D**

**Meets Expectations**

## Adult Treatment Experiences

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
Neutral responses reduce totals	94	94	-	-	-
Q19A-(Provider) helped me create a plan to deal with any problems I have.					
Strongly Agree/Agree	92 97.9%	92 97.9%	-	-	-
Strongly Disagree/Disagree	2 2.1%	2 2.1%	-	-	-

**97.9% of target rate Y-T-D**

**Meets Expectations**

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
Neutral responses reduce totals	93	93	-	-	-
Q19B-I am an active participant in developing a treatment plan that is a good fit for me.					
Strongly Agree/Agree	93 100.0%	93 100.0%	-	-	-
Strongly Disagree/Disagree	-	-	-	-	-

**100.0% of target rate Y-T-D**

**Meets Expectations**

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
Neutral responses reduce totals	94	94	-	-	-
Q19C-I feel comfortable asking questions about my treatment.					
Strongly Agree/Agree	94 100.0%	94 100.0%	-	-	-
Strongly Disagree/Disagree	-	-	-	-	-

**100.0% of target rate Y-T-D**

**Meets Expectations**



## Adult Treatment Experiences

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
Neutral responses reduce totals	94	94	-	-	-
<b>Q19D-I feel I have enough time with staff during most sessions.</b>					
Strongly Agree/Agree	89 94.7%	89 94.7%	-	-	-
Strongly Disagree/Disagree	5 5.3%	5 5.3%	-	-	-

**94.7% of target rate Y-T-D**

**Meets Expectations**

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
Neutral/NA responses reduce totals	84	84	-	-	-
<b>Q20-My provider has talked with me about community resources and other supports, if needed.</b>					
Strongly Agree/Agree	80 95.2%	80 95.2%	-	-	-
Strongly Disagree/Disagree	4 4.8%	4 4.8%	-	-	-

**95.2% of target rate Y-T-D**

**Meets Expectations**

## Adult Providers Share Information

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
Neutral responses reduce totals	76	76	-	-	-
<b>Q21-As appropriate, my providers (physical and behavioral health) work together and share information to provide me the best care possible.</b>					
Strongly Agree/Agree	72 94.7%	72 94.7%	-	-	-
Strongly Disagree/Disagree	4 5.3%	4 5.3%	-	-	-

**94.7% of target rate Y-T-D**

**Meets Expectations**

## Adult Recovery Oriented Practices

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
Neutral responses reduce totals	95	95	-	-	-
<b>Q22A-Staff treat me with respect and sees me as an equal partner in my treatment program.</b>					
Always /Almost Always/Often	93 97.9%	93 97.9%	-	-	-
Sometimes	2 2.1%	2 2.1%	-	-	-
Rarely/Never	-	-	-	-	-

97.9% of target rate Y-T-D

Meets Expectations

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
Neutral responses reduce totals	95	95	-	-	-
<b>Q22B-I have been given clear information on who to contact if I need immediate help between appointments.</b>					
Always,Almost Always, Often	95 100.0%	95 100.0%	-	-	-
Sometimes	-	-	-	-	-
Rarely/Never	-	-	-	-	-

100.0% of target rate Y-T-D

Meets Expectations

## Adult Outcomes

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
Neutral responses reduce totals	88	88	-	-	-
<b>Q23A-I deal better with daily problems.</b>					
Strongly Agree/Agree	88 100.0%	88 100.0%	-	-	-
Strongly Disagree/Disagree	-	-	-	-	-

100.0% of target rate Y-T-D

Meets Expectations

## Adult Outcomes

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
Neutral responses reduce totals	85	85	-	-	-
Q23B-I feel more hopeful about the future.					
Strongly Agree/Agree	85 100.0%	85 100.0%	-	-	-
Strongly Disagree/Disagree	-	-	-	-	-

100.0% of target rate Y-T-D

Meets Expectations

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
Neutral responses reduce totals	92	92	-	-	-
Q23C-I feel treatment is working.					
Strongly Agree/Agree	91 98.9%	91 98.9%	-	-	-
Strongly Disagree/Disagree	1 1.1%	1 1.1%	-	-	-

98.9% of target rate Y-T-D

Meets Expectations

## Adult Provider Issues or Problems

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
Base	95	95	-	-	-
Q24-Have you had any issues or problems with services from (name of provider)?					
Yes	2 2.1%	2 2.1%	-	-	-
No	93 97.9%	93 97.9%	-	-	-

## Adult Provider Issues or Problems

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
NA responses reduce total	2	2	-	-	-
<b>Q25-If yes, what were the issues or problems with services from (name of provider)?</b>					
Lack of treatment planning and coordination	-	-	-	-	-
Services not provided when I needed them	-	-	-	-	-
Poor Communication	-	-	-	-	-
Frequent staff changes	1 50.0%	1 50.0%	-	-	-
Frequent Provider Cancellations	-	-	-	-	-
Other	1 50.0%	1 50.0%	-	-	-

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
Neutrals reduce total	2	2	-	-	-
<b>Q26-Were you able to resolve these issues or problems with (name of provider) through a discussion with the program manager, or did you choose not to take any action?</b>					
I resolved the problem with the program manager	-	-	-	-	-
I chose not to take any action	-	-	-	-	-
I filed a formal complaint	-	-	-	-	-
Other	2 100.0%	2 100.0%	-	-	-

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
Neutrals reduce total	-	-	-	-	-
<b>Q27-If you chose to not take any action, why?</b>					
The problem was not that serious	-	-	-	-	-
I was concerned with how the provider would react	-	-	-	-	-
I didn't know how to file a formal complaint	-	-	-	-	-
Other	-	-	-	-	-

**- No data this quarter**

## Adult Department of Human Services Questions

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
Base	95	95	-	-	-
<b>Q28-Would you recommend your provider to others?</b>					
Yes	94 98.9%	94 98.9%	-	-	-
No	1 1.1%	1 1.1%	-	-	-

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
Base	95	95	-	-	-
<b>Q29-What effect has the treatment you've received had on the quality of your life? (State question)</b>					
Much better	59 62.1%	59 62.1%	-	-	-
A little better	28 29.5%	28 29.5%	-	-	-
About the same	8 8.4%	8 8.4%	-	-	-
A little worse	-	-	-	-	-
Much worse	-	-	-	-	-

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
Base	95	95	-	-	-
<b>Q30-Were you given the chance to make treatment decisions? (State question)</b>					
Yes	86 90.5%	86 90.5%	-	-	-
No	-	-	-	-	-
Sometimes	9 9.5%	9 9.5%	-	-	-

## Adult Department of Human Services Questions

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
N/A's reduce total	95	95	-	-	-
<b>Q31-In the last twelve months, were you able to get the help you needed? (State question)</b>					
Yes	88 92.6%	88 92.6%	-	-	-
Sometimes	6 6.3%	6 6.3%	-	-	-
Never	1 1.1%	1 1.1%	-	-	-

## Adult Behavioral Health Medications

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
N/A's reduce total	5	5	-	-	-
<b>Q32-If you were not able to get behavioral health services in the last twelve months, what stopped you?</b>					
Money issues	-	-	-	-	-
Transportation issues	-	-	-	-	-
Language barriers	-	-	-	-	-
Inconvenient times	-	-	-	-	-
Childcare issues	-	-	-	-	-
Long waiting list	-	-	-	-	-
Didn't know where to get help	1 20.0%	1 20.0%	-	-	-
Other	4 80.0%	4 80.0%	-	-	-

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
Neutral reduce totals	87	87	-	-	-
<b>Q33-If you are taking behavioral health medications, are you experiencing any problems in getting the medications that work for you?</b>					
Yes	6 6.9%	6 6.9%	-	-	-
No	81 93.1%	81 93.1%	-	-	-

**Question 34-Please share any additional compliments or suggestions for improvement you have about the services you participate in with (provider).**

**Q34 is a literal and can be found in the back with literal comments.**

## Name Release

Counts Break % Respondents	2025 Y-T-D Totals	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter April-June	3rd Quarter July-Sept.	4th Quarter Oct-Dec.
Base	95	95	-	-	-
Q35-If you shared problems about your provider or your managed care company during this survey, are you interested in having your concerns addressed immediately by Behavioral Health Services of Somerset and Bedford Counties?					
Yes	1 1.1%	1 1.1%	-	-	-
No	-	-	-	-	-
Not Applicable	94 98.9%	94 98.9%	-	-	-

**\*Question 35A-If you wish, I can forward your concerns directly to Behavioral Health Services of Somerset and Bedford Counties, but I would need to include your name and information from our survey, which means your comments would no longer be anonymous. This may include discussing your specific concerns with your provider. If you do not wish to have this done, all your answers remain confidential. I encourage you to contact Behavioral Health Services of Somerset and Bedford Counties yourself at any time to have your concerns addressed.**

***If yes, please give your name and date of birth:***

**Name Release not displayed due to HIPAA**

## **Literal Comments**

### **Q8A-What do you consider your race to be? Literal Comments**

Q1- Human

### **Q10D-These questions are about your managed care company Community Care. Literal Comments**

Q1- I didn't think about it; they didn't make it obvious I needed to.

Q1- I have not seen my benefits.

### **Q11A-If you had contact with Community Care (CCBH) in the last 12 months, were you satisfied with the level of dignity and respect the staff conveyed to you? Literal Comments**

### **Q12A-If you used Community Care's complaint and/or grievance process within the last 12 months, were you satisfied with how your complaint/grievance was handled? Literal comment**

### **Q13A-What is the name of your treatment provider? Literal Comments**

Q1- Horizon Behavioral Health

Q1- Martha Emerick

### **Q14A-What service are you receiving from this provider? Literal Comments**

### **Q18D-Access Literal Comments**

Q1- I knew about them before PSI recommended them to me.

Q1- No one told me about other providers.

Q1- This office only has a daytime slot for IOP. I started a new job and I may have to transfer. Other offices have evening hours for people who work, and they don't have that here.

Q1- It would be good if they offered group in the evening.

Q1- I did not choose the provider, they told me who to see.

Q1- I did not choose Nulton, they just set me up with someone.

Q1- There are not enough doctors to have a choice.

### **Q19E-Treatment Experiences Literal Comments**

Q1- The appointments with my psychiatrist are very short, I wish they were longer. How are you supposed to properly care for someone when they appointment with them is not very long.

Q1- They gave me some coping skills, but did not really create a plan to help me deal with my problems.

Q1- I always tell my therapist that time just flies.



**Q21A-As appropriate, my providers work together and share information to provide me the best care possible. Literal Comments**

Q1- I have not told my physical health doctor about my other provider.

Q1- I am not sure if they do or not.

Q1- They tried to reach out to the cardiologist but the papers got lost. I got a new cardiologist now.

Q1- I tell them everything going on, they would already know if all of them work together.

Q1- I don't have the physical provider talking to psych rehab.

Q1- I never heard if all of my providers work together or not.

**Q22C-Recovery Oriented Practices Literal Comments.**

Q1- On a truth scale, I feel they downgrade us sometimes. They look down on you sometimes and they mostly comes from the CRR.

**Q23D-Outcome Literal Comments**

Q1- I am constantly stressing out. Some days are more difficult for me and some days I feel it would be better if I was not around.

Q1- It's up and down for me. If I am having major depressive issues, I am doing bad, if not, I could be better. I still think about suicide quite a bit. But not as often as I was.

Q1- It doesn't matter what treatment I get, February and March are my two hardest months to deal with. I lost my parents these two months.

Q1- It has been a rough couple of weeks.

Q1- I feel they have done everything they can. The medication doesn't work 100% of the time.

Q1- I will be in therapy for a long time.

**Q25A-If yes, what were the issues or problems with services from provider. Literal Comments**

Q1- The times of the IOP meetings. They need to accommodate people who work and do evening hours.

**Q26A-Were you able to resolve these issues or problems with provider through discussion with the program manager or did you choose not to take any action? Literal Comments**

Q1- I did bring it up and they said they were going to be moving locations and hopefully open up more time slots.

Q1- I found another peer support.

**Q27A-If you chose to not take any action, why? Literal Comments****Q31A-If you were not able to get behavioral health services in the last twelve months, what stopped you? Literal Comments**

Q1- I was homeless and couldn't get help.

Q1- My therapist is overbooked.

**Q32A-Are you experiencing any problems in getting the medications that work for you? Literal Comment**

Q1- Sometimes I can not afford to pay for them.

Q1- I felt it was challenging at times to get DBHS to send over the medication. It may have been because they were short staffed, but I am not completely sure why.

Q1- The psychiatrist I was seeing retired and she forgot to send my last prescription to the pharmacy. I am preparing for a medicine change, my first psychiatrist said the new one might change my regime.

Q1- It is foggy. I am not sure which medication does this, but libido issues.

Q1- I have trouble finding meds that work.

Q1- There have been shortages at the pharmacy.

**Q34-Please share additional compliments or suggestions for improvement you have about the services you participate in with (provider). Literal comment**

Q1- I think ACRP is a really great provider.

Q1- I feel the support staff are really kind and patient people.

Q1- They are very welcoming here.

Q1- They treat us good, I like her to go there.

Q1- They do not talk over you, and they make you feel like you are a part of everything they are doing for you. I feel they really care.

Q1- I want to compliment the doctor on doing a good job, getting me on the medication that works for me.

Q1- I want to compliment psych rehab on doing a good job when things were bad and for checking up on me when things were bad.

Q1- I think they genuinely love what they do, which reflects on how they treat patients.

Q1- They refer to clients as clientele as opposed to patients I feel it seems cold to call us clientele.

Q1- I am very grateful that they are here for me.

Q1- With the medication doctor, the patient knows their own body better than the doctor. The doctors need to take that into consideration and listen to what the patient is telling them.

Q1- The staff are very open.

Q1- My counselor is amazing, she is very knowledgeable.

Q1- My case manager is awesome. She listens very well to what I have to say.

Q1- They shouldn't make us stand outside in the med line when it's cold out. They could let us stand in the hall where it is warm. They need to clean the cafeteria, it is really dirty and I would say that is a health violation.

Q1- I am happy with these people, I am proud to come here!

Q1- They are not snobs. I like it here.

## Family Survey Findings

### Family Survey Process & Findings

The following are C/FST Findings and Recommendations based on the 24 family/caregiver surveys completed during the 1st Quarter of 2025 for the period between January to March 2025.

### Survey Results

Variations in sample characteristics between quarters are provided so that the reader may infer what influences, if any, these variations may have had on member response ratings for the quarter.

#### 1st Quarter 2025 Family Sample Characteristics versus 4th 2024 Quarter Comparison:

1. Lower percentage of face-to-face surveys – 38% (9 of 24) versus 42% (11 of 26).
2. Lower ratio of male caregivers – 4% (1 of 24) versus 15% (4 of 26).
3. Lower percentage of child members under age 5 – 0% (0 of 24) versus 4% (1 of 26).
4. Higher percentage step/adoptive/grandparent/aunt/uncle – 17% (4 of 24) versus 15% (4 of 26).
5. Lower ratio of male service recipients – 67% (16 of 24) versus 69% (18 of 26).
6. Higher total members receiving IBHS – 17% (4 of 24) versus 4% (1 of 26).
7. Lower percentage 17% (4 of 24) versus 19% (5 of 26) of members receiving services for four (4) years or longer from provider.

### Findings Overview

1. The indicator, *“Have you reviewed your child’s insurance benefits and treatment options through Community Care?”* was 50% (12 of 24) for the 1st Quarter of 2025. This indicator was 48% for calendar year 2024.

Community Care’s complaint and grievance awareness indicators decreased to 83% (20 of 24) from 92% (24 of 26) in the previous quarter as fewer family/caregivers agreed with, *“Are you aware that you can file a complaint and/or grievance if needed.”* This indicator is 89% for calendar year 2024.

2. Family/caregivers are generally pleased with **Access** to provider treatment services with a satisfaction score of 88% - 100% in all three indicators during the 1st Quarter of 2025 and was 93% - 100% for calendar year 2024. These indicators include, *“Services are available at times that are convenient,” “I was made aware of the availability of different providers for this service and given a choice,”* and *“I feel like my child was able to get the help he/she needed within a reasonable amount of time.”*

3. Likewise, Family/caregivers are generally pleased with their provider **Treatment Experiences** in the 1st Quarter with satisfaction scores of 92% to 100% in five of seven indicators. These include, *“I feel comfortable asking questions about my child’s treatment,” “I feel my child has enough time with staff during most sessions,” “We are active participants in developing a treatment plan that is a good fit for my child and family,” “If meetings are held, I am always informed with enough advance notice that I can make arrangements to attend,”* and *“As appropriate, my providers (physical and behavioral health) work together and share information to provide my child the best care possible.”*

*“Provider helped us create a plan to deal with any problems my child has,”* also decreased to 92% (22 of 24) and *“My child’s provider has talked with us about community resources and other supports, if needed,”* decreased to 85% (17 of 20, excluding 4 neutral responses).

4. Family/caregivers were generally pleased with **Provider Recovery Orientation** with a satisfaction score of 88%-100% during the 1st Quarter of 2025 and was 93% - 98% for calendar year 2024. These include, *“(Provider) staff treats us with respect and sees us as equal partners in my child’s treatment program,”* and *“I have been given clear information on who to contact if my child needs immediate help between appointments.”*

5. Family/caregiver satisfaction scores with **Treatment Outcomes** were positive with satisfaction scores being 95% to 96% in all three indicators. These include, *“My child deals more effectively with daily problems,” “I feel my child’s behavioral health is improving,”* and *“Our family has improved since my child started treatment.”* These indicators were 90% - 92% for calendar year 2024.

6. Just 2% (2 of 24) of family/caregivers reported having issues or problems with their provider during the 1st Quarter and was 7% (7 of 98) for calendar year 2024. See literal comments on Page 46.

7. 83% (10 of 12, excluding 12 n/a) of family/caregivers reported no problems in getting the behavioral health medications that work for their child during the 1st Quarter of 2025 and was 85% (64 of 75, excluding 23 n/a) for calendar year 2024.

#### **Family/Caregiver – Member Request for Assistance**

Upon completing the survey, 0% (0 of 24) of family/caregiver members surveyed expressed interest in having any concern or issue they shared during the interview referred for immediate handling by BHSSBC. This indicator was 7% (7 of 98) for calendar year 2024.

#### **Quality Audits**

Periodically, random quality audits are performed which have the dual purpose of obtaining member feedback regarding the survey process plus confirming the integrity of the survey.

During the 1st Quarter 2025, 14 family/caregiver quality audits were performed. 6 family/caregivers did not remember being contacted. Research did not determine any common denominator. Most said they did so many surveys they couldn’t precisely recall this particular survey. 100% (8 of 8) of family/caregivers felt the length of the survey and number of questions were satisfactory. 100% (8 of 8) of family/caregivers were satisfied with the survey process and 100% (8 of 8) of family/caregivers felt ok or good about being contacted.

#### **Member comments**

*“I was not under the impression I was going to be contacted to do a survey.”*

## Family Demographics

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
	24	24	-	-	-
<b>Q4-What kind of survey is it?</b>					
Phone	15 62.5%	15 62.5%	-	-	-
Face to Face	9 37.5%	9 37.5%	-	-	-

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
	24	24	-	-	-
<b>Q5-What county does the member live in?</b>					
Somerset	16 66.7%	16 66.7%	-	-	-
Bedford	8 33.3%	8 33.3%	-	-	-

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
	24	24	-	-	-
<b>Q6-What is your gender?</b>					
Male	1 4.2%	1 4.2%	-	-	-
Female	23 95.8%	23 95.8%	-	-	-
Does not identify with either gender	-	-	-	-	-
Refused to answer	-	-	-	-	-

## Family Demographics

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
	24	24	-	-	-
<b>Q7-What is your child's gender?</b>					
Male	16 66.7%	16 66.7%	-	-	-
Female	8 33.3%	8 33.3%	-	-	-
Does not identify with either gender	-	-	-	-	-
Refused to answer	-	-	-	-	-

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
	24	24	-	-	-
<b>Q8-How old is the child who is receiving the services?</b>					
5 years or younger	-	-	-	-	-
6-8 years	10 41.7%	10 41.7%	-	-	-
9-13 years	13 54.2%	13 54.2%	-	-	-
14 years and older	1 4.2%	1 4.2%	-	-	-

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
	24	24	-	-	-
<b>Q9-What is your relationship to this child?</b>					
Parent	20 83.3%	20 83.3%	-	-	-
Grandparent	3 12.5%	3 12.5%	-	-	-
Aunt/Uncle	-	-	-	-	-
Brother/Sister	-	-	-	-	-
Foster parent	-	-	-	-	-
Adoptive parent	-	-	-	-	-
Step-parent	1 4.2%	1 4.2%	-	-	-
Other	-	-	-	-	-

## Family Demographics

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
	24	24	-	-	-
<b>Q10-What do you consider the child's race to be?</b>					
Caucasian	22 91.7%	22 91.7%	-	-	-
African American	-	-	-	-	-
Hispanic American	-	-	-	-	-
American Indian/Alaskan Native	-	-	-	-	-
Asian/Pacific Islander	1 4.2%	1 4.2%	-	-	-
Multi-racial	-	-	-	-	-
Other	1 4.2%	1 4.2%	-	-	-

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
	24	24	-	-	-
<b>Q11-Is your child receiving services for:</b>					
Mental Health Services	24 100.0%	24 100.0%	-	-	-
Drug and Alcohol Services	-	-	-	-	-
Both Mental Health and Drug and Alcohol Services	-	-	-	-	-

## Family Satisfaction with Community Care

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
	24	24	-	-	-
<b>Q12A-Do you know where to find the number to call Community Care with questions or concerns?</b>					
Yes	17 70.8%	17 70.8%	-	-	-
No	7 29.2%	7 29.2%	-	-	-

## Family Satisfaction with Community Care

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Base	24	24	-	-	-
<b>Q12B-Are you aware that you can file a complaint and/or grievance if needed?</b>					
Yes	20 83.3%	20 83.3%	-	-	-
No	4 16.7%	4 16.7%	-	-	-

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Base	24	24	-	-	-
<b>Q12C-Have you reviewed your insurance benefits and treatment options through Community Care?</b>					
Yes	12 50.0%	12 50.0%	-	-	-
No	12 50.0%	12 50.0%	-	-	-

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
NA responses reduce total	-	-	-	-	-
<b>Q13-If you had contacted Community Care in the last 12 months, were you satisfied with the level of dignity and respect the staff conveyed to you?</b>					
Yes	-	-	-	-	-
No	-	-	-	-	-

**- No data this quarter**

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
NA responses reduce total	-	-	-	-	-
<b>Q14-If you used Community Care's complaint and/or grievance process in the last 12 months, were you satisfied with how your complaint/grievance was handled?</b>					
Yes	-	-	-	-	-
No	-	-	-	-	-

**- No data this quarter**



## Family Treatment Provider Level Analysis

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Base	24	24	-	-	-
<b>Q15-What is the name of your child's treatment provider?</b>					
ACRP	5 20.8%	5 20.8%	-	-	-
Adelphoi Village	-	-	-	-	-
Beal Counseling	-	-	-	-	-
Bedford DBHS	2 8.3%	2 8.3%	-	-	-
Blair Family Solutions	-	-	-	-	-
Children's Aid Home	-	-	-	-	-
Children's Behavioral Health (CBH)	-	-	-	-	-
Croyle-Nielson	-	-	-	-	-
Clarvida (FBR)	3 12.5%	3 12.5%	-	-	-
Footsteps	1 4.2%	1 4.2%	-	-	-
Hyndman Area Health Center	-	-	-	-	-
Mary Berge and Associates	-	-	-	-	-
The Meadows	-	-	-	-	-
Merakey	-	-	-	-	-
Nulton Diagnostic and Treatment Center	7 29.2%	7 29.2%	-	-	-
Pediatric Care Specialists	2 8.3%	2 8.3%	-	-	-
Pyramid HealthCare	-	-	-	-	-
Somerset DBHS	1 4.2%	1 4.2%	-	-	-
Twin Lakes	-	-	-	-	-
Youth Advocate Programs (YAP)	2 8.3%	2 8.3%	-	-	-
Other	1 4.2%	1 4.2%	-	-	-

## Family Treatment Provider Level Analysis

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Base	24	24	-	-	-
<b>Q16-Which mental health service does your child receive from this provider to focus the survey on?</b>					
IBHS: (BHT, BC, MT, ABA)	4 16.7%	4 16.7%	-	-	-
Crisis Intervention	-	-	-	-	-
Family Based MH Services	-	-	-	-	-
Functional Family Therapy (FFT)	-	-	-	-	-
Peer Support	-	-	-	-	-
Medication/Psychiatry/Telepsychiatry	9 37.5%	9 37.5%	-	-	-
MH Inpatient Hospitalization	-	-	-	-	-
MH Partial Hospitalization	-	-	-	-	-
MH BCM (Blended Case Management)	1 4.2%	1 4.2%	-	-	-
MH Outpatient Therapy/Counseling	9 37.5%	9 37.5%	-	-	-
Multi Systemic Therapy (MST)	-	-	-	-	-
Transitional-Age Youth Assertive Community Treatment (TAY-ACT)	-	-	-	-	-
Trauma-Based Treatment	-	-	-	-	-
School Based Therapy	1 4.2%	1 4.2%	-	-	-
RTF	-	-	-	-	-
Substance Use (SU) Outpatient Therapy	-	-	-	-	-
Substance Use (SU) Detox	-	-	-	-	-
Substance Use (SU) Inpatient/Rehabilitation	-	-	-	-	-
Other	-	-	-	-	-
Do Not Know	-	-	-	-	-

## Family Treatment Provider Level Analysis

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Base	24	24	-	-	-
<b>Q17-How long has your child been receiving services from (provider)?</b>					
6 months or less	5 20.8%	5 20.8%	-	-	-
6 months to 1 year	4 16.7%	4 16.7%	-	-	-
1 to 2 years	5 20.8%	5 20.8%	-	-	-
2 to 4 years	6 25.0%	6 25.0%	-	-	-
4 or more years	4 16.7%	4 16.7%	-	-	-

## Family Telehealth Services

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Neutral/NA's responses reduce totals	13	13	-	-	-
<b>Q18-If your child received services by video or telephone, how satisfied were you with the services your child received?</b>					
Very Satisfied/Satisfied	12 92.3%	12 92.3%	-	-	-
Very Dissatisfied/Dissatisfied	1 7.7%	1 7.7%	-	-	-

## Family Access to Services

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Neutral responses reduce totals	24	24	-	-	-
<b>Q19A-Services are available at times that are convenient.</b>					
Strongly Agree/Agree	24 100.0%	24 100.0%	-	-	-
Strongly Disagree/Disagree	-	-	-	-	-

**100.0% of target rate Y-T-D**

**Meets Expectations**

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Neutral responses reduce totals	21	21	-	-	-
<b>Q19B-I was made aware of the availability of different providers for this service and given a choice.</b>					
Strongly Agree/Agree	17 81.0%	17 81.0%	-	-	-
Strongly Disagree/Disagree	4 19.0%	4 19.0%	-	-	-

**81.0% of target rate Y-T-D**

**Satisfactory**

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Neutral responses reduce totals	24	24	-	-	-
<b>Q19C-I feel like my child was able to get the help he/she needed within a reasonable amount of time.</b>					
Strongly Agree/Agree	23 95.8%	23 95.8%	-	-	-
Strongly Disagree/Disagree	1 4.2%	1 4.2%	-	-	-

**95.8% of target rate Y-T-D**

**Meets Expectations**

## Family Treatment Experience

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Neutral responses reduce totals	24	24	-	-	-
<b>Q20A-Provider helped us create a plan to deal with any problems my child has.</b>					
Strongly Agree/Agree	22 91.7%	22 91.7%	-	-	-
Strongly Disagree/Disagree	2 8.3%	2 8.3%	-	-	-

**91.7% of target rate Y-T-D**

**Meets Expectations**

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Neutral responses reduce totals	24	24	-	-	-
<b>Q20B-We are active participants in developing a treatment plan that is a good fit for my child and family.</b>					
Strongly Agree/Agree	24 100.0%	24 100.0%	-	-	-
Strongly Disagree/Disagree	-	-	-	-	-

**100.0% of target rate Y-T-D**

**Meets Expectations**

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Neutral responses reduce totals	23	23	-	-	-
<b>Q20C-I feel comfortable asking questions about my child's treatment.</b>					
Strongly Agree/Agree	23 100.0%	23 100.0%	-	-	-
Strongly Disagree/Disagree	-	-	-	-	-

**100.0% of target rate Y-T-D**

**Meets Expectations**

## Family Treatment Experience

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Neutral responses reduce totals	23	23	-	-	-
<b>Q20D-I feel my child has enough time with staff during most sessions.</b>					
Strongly Agree/Agree	22 95.7%	22 95.7%	- -	- -	- -
Strongly Disagree/Disagree	1 4.3%	1 4.3%	- -	- -	- -

95.7% of target rate Y-T-D

Meets Expectations

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Neutral/NA's responses reduce totals	22	22	-	-	-
<b>Q21-As appropriate, my providers (physical and behavioral health) work together and share information to provide my child the best care possible.</b>					
Strongly Agree/Agree	22 100.0%	22 100.0%	- -	- -	- -
Strongly Disagree/Disagree	- -	- -	- -	- -	- -

100.0% of target rate Y-T-D

Meets Expectations

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Neutrals and N/A's reduce total	20	20	-	-	-
<b>Q22-My child's provider has talked with us about community resources and other supports, if needed.</b>					
Strongly Agree/Agree	17 85.0%	17 85.0%	- -	- -	- -
Strongly Disagree/Disagree	3 15.0%	3 15.0%	- -	- -	- -

85.0% of target rate Y-T-D

Satisfactory

## Family Treatment Experience

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Neutral/NA's responses reduce totals	24	24	-	-	-
<b>Q23-If meetings are held, I am always informed with enough advance notice that I can make arrangements to attend.</b>					
Strongly Agree/Agree	22 91.7%	22 91.7%	-	-	-
Strongly Disagree/Disagree	2 8.3%	2 8.3%	-	-	-

**91.7% of target rate Y-T-D**

**Meets Expectations**

## Family Recovery Oriented Practices

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Neutral responses reduce totals	23	23	-	-	-
<b>Q24A-Staff treats us with respect and sees us as equal partners in my child's treatment program.</b>					
Strongly Agree/Agree	23 100.0%	23 100.0%	-	-	-
Strongly Disagree/Disagree	-	-	-	-	-

**100.0% of target rate Y-T-D**

**Meets Expectations**

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Neutral responses reduce totals	24	24	-	-	-
<b>Q24B-I have been given clear information on who to contact if my child needs immediate help between appointments.</b>					
Strongly Agree/Agree	21 87.5%	21 87.5%	-	-	-
Strongly Disagree/Disagree	3 12.5%	3 12.5%	-	-	-

**87.5% of target rate Y-T-D**

**Satisfactory**

## Family Outcomes

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Neutral responses reduce totals	20	20	-	-	-
<b>Q25A-My child deals better with daily problems.</b>					
Strongly Agree/Agree	19 95.0%	19 95.0%	-	-	-
Strongly Disagree/Disagree	1 5.0%	1 5.0%	-	-	-

95.0% of target rate Y-T-D

Meets Expectations

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Neutral responses reduce totals	24	24	-	-	-
<b>Q25B-Our family has improved since my child started treatment.</b>					
Strongly Agree/Agree	23 95.8%	23 95.8%	-	-	-
Strongly Disagree/Disagree	1 4.2%	1 4.2%	-	-	-

95.8% of target rate Y-T-D

Meets Expectations

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Neutral responses reduce totals	22	22	-	-	-
<b>Q25C-I feel my child's behavioral health is improving.</b>					
Strongly Agree/Agree	21 95.5%	21 95.5%	-	-	-
Strongly Disagree/Disagree	1 4.5%	1 4.5%	-	-	-

95.5% of target rate Y-T-D

Meets Expectations



## Family Provider Issues or Problems

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Base	24	24	-	-	-
<b>Q26-Have you had any issues or problems with this (provider)?</b>					
Yes	2 8.3%	2 8.3%	-	-	-
No	22 91.7%	22 91.7%	-	-	-

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
N/A's reduce total	2	2	-	-	-
<b>Q27-If you have had issues or problems with provider, what were they?</b>					
Lack of treatment planning and coordination	-	-	-	-	-
Poor communication	-	-	-	-	-
Frequent staff changes	1 50.0%	1 50.0%	-	-	-
Services not provided when my child needs them	-	-	-	-	-
Frequent Provider Cancellations	-	-	-	-	-
Other	1 50.0%	1 50.0%	-	-	-

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
N/A's reduce total	2	2	-	-	-
<b>Q28-Were you able to resolve these issues or problems with the provider through discussion with the program manager, file a formal complaint, or choose not to take action?</b>					
I resolved the problem with the program manager	-	-	-	-	-
I filed a formal complaint	-	-	-	-	-
I chose not to take any action	2 100.0%	2 100.0%	-	-	-
Other	-	-	-	-	-

## Family Provider Issues or Problems

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
N/A's reduce total	2	2	-	-	-
<b>Q29-If you chose to not take any action, why?</b>					
The problem was not that serious	-	-	-	-	-
I was concerned with how the provider would react	-	-	-	-	-
I didn't know how to file a formal complaint	1 50.0%	1 50.0%	-	-	-
Other	1 50.0%	1 50.0%	-	-	-

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Base	24	24	-	-	-
<b>Q30-Would you recommend your child's provider to others?</b>					
Yes	23 95.8%	23 95.8%	-	-	-
No	1 4.2%	1 4.2%	-	-	-

## Family Department of Human Services Questions

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Base	24	24	-	-	-
<b>Q31-What effect has the treatment your child received had on the quality of your child's life? (State question)</b>					
Much better	14 58.3%	14 58.3%	-	-	-
A little better	7 29.2%	7 29.2%	-	-	-
About the same	3 12.5%	3 12.5%	-	-	-
A little worse	-	-	-	-	-
Much worse	-	-	-	-	-

## Family Department of Human Services Questions

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Base	24	24	-	-	-
<b>Q32-Were you and your child given the chance to make treatment decisions? (State Question)</b>					
Yes	23 95.8%	23 95.8%	-	-	-
No	-	-	-	-	-
Sometimes	1 4.2%	1 4.2%	-	-	-

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Base	24	24	-	-	-
<b>Q33-In the last twelve months was your child able to get the help they needed? (State question)</b>					
Yes	23 95.8%	23 95.8%	-	-	-
Sometimes	1 4.2%	1 4.2%	-	-	-
Never	-	-	-	-	-

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
N/A's reduce total	-	-	-	-	-
<b>Q34-If you weren't able to get behavioral health help for your child in the last 12 months, what stopped you?</b>					
Money issues	-	-	-	-	-
Transportation issues	-	-	-	-	-
Language barriers	-	-	-	-	-
Inconvenient times	-	-	-	-	-
Childcare issues	-	-	-	-	-
Long waiting list	-	-	-	-	-
Didn't know where to get help	-	-	-	-	-
Services denied	-	-	-	-	-
Process was overwhelming	-	-	-	-	-
Process was too confusing	-	-	-	-	-
Other	-	-	-	-	-

- No data this quarter

\* Q35-Are there any services your child needs but is not getting?  
Q35 is a literal question, it is listed in the back with other literal comments.

## Family Behavioral Health Medications

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
NA responses reduce total	12	12	-	-	-
Q36-If your child is taking behavioral health medications, are you experiencing any problems in getting behavioral health medications that work for your child?					
Yes	2 16.7%	2 16.7%	-	-	-
No	10 83.3%	10 83.3%	-	-	-

**\* Q37-Please share any additional compliments or suggestions for improvement you have about the services your child participates in with (provider).**

**Q37 is a literal question, it is listed in the back with other literal comments.**

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Base	2	2	-	-	-
Q38-If you shared problems about your provider or your managed care company during this survey, are you interested in having your concerns addressed immediately by Behavioral Health Services of Somerset and Bedford Counties?					
Yes	-	-	-	-	-
No	2 100.0%	2 100.0%	-	-	-

**\*Question 38A-If you wish, I can forward your concerns directly to Behavioral Health Services of Somerset and Bedford Counties, but I would need to include your name and information from our survey, which means your comments would no longer be anonymous. This may include discussing your specific concerns with your provider. If you do not wish to have this done, all your answers remain confidential. I encourage you to contact Behavioral Health Services of Somerset and Bedford Counties yourself at any time to have your concerns addressed.**

**Name Release not displayed due to HIPAA.**

## **Family Literal Comments**

### **Q9A-What is your relationship to this child? Literal Comments**

### **Q10A-What do you consider the child's race to be? Literal Comments**

Q1- Bi-Racial

### **Q12D-Community Care Literal Comments**

### **Q13A-If you contacted Community Care in the last 12 months, were you satisfied with the level of dignity and respect the staff conveyed to you? Literal Comments**

### **Q14A-If you contacted Community Care in the last 12 months, were you satisfied with the level of dignity and respect the staff conveyed to you? Literal Comments**

### **Q15A-What is the name of your child's treatment provider? Literal Comments**

### **Q16A-Which mental health services does your child receive from provider? Literal Comments**

### **Q19D-Access to Services Literal Comments**

Q1- Got told there were not many provider in town and they are not taking anyone new.

Q1- I had to have the school call them to have them call me back.

Q1- I called the crisis center and they sent me here, I did not have the option to choose my provider.

Q1- They never told me about other providers.

### **Q20E-Treatment Experiences Literal Comments**

Q1- He shuts down during sessions.

Q1- We really needed help once and the psychiatrist only wanted to push more medication on my son. She did not help at all and I was asking to get him into counseling.

### **Q23A-If meetings are held, I am always informed with enough advance notice that I can make arrangements to attend. Literal Comment**

Q1- I don't think I was ever invited to a meeting.

### **Q24C-Recovery Oriented Practices Literal Comments**

Q1- They said two family members can't be in the same room.

Q1- They never told me who to contact if I need immediate help between appointments.

**Q25D-Outcomes Literal Comments**

Q1- He shuts himself out and is quiet.

Q1- I want to say she is improving but it's hard to tell right now.

Q1- He deals with daily problems better if he has his medication.

**Q27A-If you have had issues or problems with provider, what were they? Literal Comments**

Q1- Poor communication, the doctor does not want to listen to what is actually wrong. He doesn't want to listen because he doesn't see what we see.

**Q28A-Were you able to resolve these issues or problems with the provider through a discussion with the program manager, file a formal complaint, or choose not to take any action? Literal Comments****Q29A-If you chose to not take any action, why? Literal Comments**

Q1- Just their turnover rate is too high, they can't keep staff.

**Q33A-If you weren't able to get behavioral health help for your child in the last twelve months, what stopped you?****Q35-Are there any services your child needs but is not getting? Literal Comments**

Q1- I am waiting to get him evaluated again for more mental health services.

We need a BHT

Q1- She needs OT, but there is a waiting list.

Q1- He needs to get into counseling.

**Q36A-Are you experiencing any problems in getting behavioral health medications that work for your child? Literal Comments**

Q1- The pharmacy does not always have the medications that he needs.

Q1- Their medicine is constantly on back order.

**Q37-Please share additional compliments or suggestions for improvement you have about the services you participate in with (provider). Literal comments**

Q1- Someone needs to make a handbook on who provides what services. No one down here knows who does what. Make a resource guide for each county. Have more than one counselor in this county and put them with certain age groups.

Q1- It is a pretty well run program. They always reach out if anything changes.

Q1- They are wonderful here. They go above and beyond to try and help when they can.

Q1- They need to listen to the parent or child. I do most of the talking and they don't interact with the child to have him open up.

Q1- The therapist has been wonderful.

Q1- They do wonderful here.

Q1- They help us as much as they can and if they can't help us, they find someone who can.

Q1- Keep up with getting his medication sent in to the pharmacy on time. I call and they never send it over on time.

## Youth Survey Findings

### Youth C/FST Survey Process & Findings

The following are C/FST Findings and Recommendations based on the 23 youth (Ages 14 to 20) surveys completed during the 1st Quarter of Calendar Year 2025 for the period from January to March 2025.

### Survey Results

Variations in sample characteristics between quarters are represented so that the reader may infer what influences, if any, these variations may have had on member response ratings for the quarter.

#### 1st Quarter 2025 Youth Sample Characteristics versus the 4th 2024 Quarter Comparison:

1. Higher percent of face-to-face – 44% (10 of 23) versus 22% (4 of 18).
2. Lower ratio of male treatment recipients – 26% (6 of 23) versus 56% (10 of 18).
3. Higher percentage of youth members aged 14-15 – 30% (7 of 23) versus 17% (3 of 18).
4. Higher percentage total youth members receiving IBHS – 4% (1 of 23) versus 0% (0 of 18).
5. Higher ratio of youths receiving treatment from same provider four (4) years or longer – 35% (8 of 23) versus 33% (6 of 18).

### Findings Overview

1. Just 35% (8 of 23) of youths interviewed during the 1st Quarter of 2025 agreed with, *“Have you reviewed your insurance benefits and treatment options through Community Care?”* This indicator was 28% (23 of 82) for calendar year 2024.

87% (20 of 23) of youths in the 1st Quarter were, *“aware they could file a complaint and/or grievance with Community Care.”* This indicator was 77% for calendar year 2024.

17% (4 of 23) of youths interviewed during the 1st Quarter of 2025, *“knew where to find the number to call Community Care with questions or concerns.”* This indicator was 46% (38 of 82) for calendar year 2024.

100% (3 of 3, excluding 20 “not applicable”) of youths agreed with, *“If you had contact with Community Care in the last 12 months, were you satisfied with the level of dignity and respect the staff conveyed to you.”* This indicator was 100% for calendar year 2024.

0% (0 of 23) youths reported using Community Care’s complaint or grievance processes during the 4th Quarter of 2024.

2. Youths surveyed on **Access** to provider treatment services rated the three indicators 100% in the 1st Quarter 2025. These cover, *“We meet at times that are convenient to me,” “I was made aware of the availability of different providers for this service and given a choice,”* and *“I feel I was able to get the help I needed within a reasonable amount of time.”* These indicators were 86% - 99% for calendar year 2024.

3. Youths surveyed on **Treatment Experiences** rated satisfaction in all six indicators at 100% in the 1st Quarter of 2025. These questions include *“Provider helped me create a plan to deal with any problem I have,” “I am an active participant in developing a treatment plan that is a good fit for me,” “I feel comfortable asking questions about my treatment,” “I am included in meetings about my treatment,” “My provider has talked with me about community resources and other supports, if needed,”* and *“As appropriate, my providers (physical and behavioral health) work together and share information to provide me the best care possible.”*

4. Youths interviewed this quarter also continue to show good results with **Provider Recovery Orientation** satisfaction scores of 100% in both indicators, *“I have been given clear information on who to contact if I need immediate help between sessions,”* and *“Staff treats me with respect and sees me as an equal partner in my treatment program.”* These two indicators were 100% for calendar year 2024.



5. Youth perception of **Treatment Outcomes** this quarter was 100% in all three indicators. These questions include, *"I manage strong feelings better," "I make better choices about how to deal with day-to-day life,"* and *"I believe that treatment is working because I feel better."* These indicators were 92% - 95% for calendar year 2024.

6. 0% (0 of 19, excluding 4 n/a responses) of youths taking behavioral health medications reported problems in getting the medications that work for them. This indicator was 8% (6 of 69, excluding 12 n/a) for calendar year 2024.

7. 0% (0 of 23) of youths reported having issues or problems with their provider during the 1st Quarter of 2025 and was 7% for calendar year 2024.

### **Recommendations/ Overview**

1. Overall, it appears progress continues regarding youth perceptions of their treatment access, treatment experiences, and provider recovery-oriented practices. It is recognized that these perceptions are highly subjective and can also be tied to variations in sample characteristics. Improvements should be recognized and supported.

2. Youth respondents usually report a lower incidence of provider issues and problems compared to adult and family respondents. More analysis is needed to determine if this is just a characteristic of this group. More analysis of sample characteristics, provider usage, and particularly service level should take place to evaluate the fluctuations that occur quarter to quarter.

### **Youth – Member Request for Assistance**

Upon completing the survey, 0% (0 of 23) of youth members surveyed expressed interest in having a concern or issue they shared during the interview referred for immediate handling by BHSSBC.

### **Quality Audits**

Periodically, random quality audits are performed which have the dual purpose of obtaining member feedback regarding the survey process plus confirming the integrity of the survey.

During the 1st Quarter 2025, 3 youth quality audits were performed. 100% (3 of 3) of youths felt the length of the survey and number of questions were satisfactory. 100% (3 of 3) of youths were satisfied with the survey process and 100% (3 of 3) of youths felt ok or good about being contacted.

### **Member comments:**

*"I did not know I was going to be contacted."*

## Youth Demographics

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Qtr Ja- n-March	2nd Qtr Apr-Jun	3rd Qtr July-Sept	4th Qtr Oct-Dec
	23	23	-	-	-
<b>Q4-What type of survey is it?</b>					
Phone	13 56.5%	13 56.5%	- -	- -	- -
Face to Face	10 43.5%	10 43.5%	- -	- -	- -

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Qtr Ja- n-March	2nd Qtr Apr-Jun	3rd Qtr July-Sept	4th Qtr Oct-Dec
	23	23	-	-	-
<b>Q5-What county does the member live in?</b>					
Somerset	16 69.6%	16 69.6%	- -	- -	- -
Bedford	7 30.4%	7 30.4%	- -	- -	- -

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Qtr Ja- n-March	2nd Qtr Apr-Jun	3rd Qtr July-Sept	4th Qtr Oct-Dec
	23	23	-	-	-
<b>Q6-What is your gender?</b>					
Male	6 26.1%	6 26.1%	- -	- -	- -
Female	16 69.6%	16 69.6%	- -	- -	- -
Does not identify with either gender	1 4.3%	1 4.3%	- -	- -	- -
Refused to answer	- -	- -	- -	- -	- -

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Qtr Ja- n-March	2nd Qtr Apr-Jun	3rd Qtr July-Sept	4th Qtr Oct-Dec
	23	23	-	-	-
<b>Q7-How old are you?</b>					
14-15 years	7 30.4%	7 30.4%	- -	- -	- -
16-17 years	2 8.7%	2 8.7%	- -	- -	- -
18-20 years	10 43.5%	10 43.5%	- -	- -	- -
over 20 years	4 17.4%	4 17.4%	- -	- -	- -

## Youth Demographics

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Qtr Ja- n-March	2nd Qtr Apr-Jun	3rd Qtr July-Sept	4th Qtr Oct-Dec
	23	23	-	-	-
<b>Q8-What do you consider your race to be?</b>					
Caucasian	20 87.0%	20 87.0%	-	-	-
African American	-	-	-	-	-
Hispanic American	-	-	-	-	-
American Indian/Alaskan Native	-	-	-	-	-
Asian American	-	-	-	-	-
Multi-Racial	3 13.0%	3 13.0%	-	-	-
Other	-	-	-	-	-

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Qtr Ja- n-March	2nd Qtr Apr-Jun	3rd Qtr July-Sept	4th Qtr Oct-Dec
	23	23	-	-	-
<b>Q9-Are you receiving services primarily for:</b>					
Mental Health	23 100.0%	23 100.0%	-	-	-
Drug and Alcohol Services	-	-	-	-	-
Both Mental Health and Drug and Alcohol Services	-	-	-	-	-

## Youth Satisfaction with Community Care

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Qtr Ja- n-March	2nd Qtr Apr-Jun	3rd Qtr July-Sept	4th Qtr Oct-Dec
Base	23	23	-	-	-
<b>Q10A-Do you know where to find the number to call Community Care with questions or concerns? (Note to surveyor: If no, give number 1-866-483-2908.)</b>					
Yes	4 17.4%	4 17.4%	-	-	-
No	19 82.6%	19 82.6%	-	-	-

## Youth Satisfaction with Community Care

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Qtr Ja- n-March	2nd Qtr Apr-Jun	3rd Qtr July-Sept	4th Qtr Oct-Dec
Base	23	23	-	-	-
<b>Q10B-Are you aware that you can file a complaint and/or grievance if needed?</b>					
Yes	20 87.0%	20 87.0%	-	-	-
No	3 13.0%	3 13.0%	-	-	-

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Qtr Ja- n-March	2nd Qtr Apr-Jun	3rd Qtr July-Sept	4th Qtr Oct-Dec
Base	23	23	-	-	-
<b>Q10C-Have you reviewed your insurance benefits and treatment options through Community Care?</b>					
Yes	8 34.8%	8 34.8%	-	-	-
No	15 65.2%	15 65.2%	-	-	-

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Qtr Ja- n-March	2nd Qtr Apr-Jun	3rd Qtr July-Sept	4th Qtr Oct-Dec
N/A responses reduce total	3	3	-	-	-
<b>Q11-If you had contact with Community Care in the last 12 months, were you satisfied with the level of dignity and respect the staff conveyed to you?</b>					
Yes	3 100.0%	3 100.0%	-	-	-
No	-	-	-	-	-

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quar- ter Jan...	2nd Qua- rter Apr...	3rd Quar- ter July...	4th Quar- ter Oct...
N/A responses reduce total	-	-	-	-	-
<b>Q12-If you used Community Care's complaint and/or grievance process within the last 12 months, were you satisfied with how your complaint/grievance was handled?</b>					
Yes	-	-	-	-	-
No	-	-	-	-	-

- No data this quarter

## Youth Treatment Provider Analysis

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Qtr Ja- n-March	2nd Qtr Apr-Jun	3rd Qtr July-Sept	4th Qtr Oct-Dec
Base	23	23	-	-	-
Q13-What is the name of your treatment provider?					
ACRP	3 13.0%	3 13.0%	-	-	-
Adelphoi Village	-	-	-	-	-
Beal Counseling	-	-	-	-	-
Bedford DBHS	1 4.3%	1 4.3%	-	-	-
Blair Family Solutions	-	-	-	-	-
Children's Aid Home	-	-	-	-	-
Children's Behavioral Health (CBH)	-	-	-	-	-
Croyle Nielson	-	-	-	-	-
Clarvida (FBR)	2 8.7%	2 8.7%	-	-	-
Footsteps	-	-	-	-	-
Hyndman Area Health Center	-	-	-	-	-
Mary Berge and Associates	1 4.3%	1 4.3%	-	-	-
The Meadows	-	-	-	-	-
Merakey	-	-	-	-	-
Nulton Diagnostic and Treatment Center	9 39.1%	9 39.1%	-	-	-
Pediatric Care Specialists	-	-	-	-	-
Pyramid HealthCare	-	-	-	-	-
Somerset DBHS	6 26.1%	6 26.1%	-	-	-
Somerset Hospital	-	-	-	-	-
Twin Lakes	-	-	-	-	-
Youth Advocate Programs (YAP)	-	-	-	-	-
Other	1 4.3%	1 4.3%	-	-	-

## Youth Treatment Provider Service Level Analysis

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Qtr Ja- n-March	2nd Qtr Apr-Jun	3rd Qtr July-Sept	4th Qtr Oct-Dec
Base	23	23	-	-	-
<b>Q14-What service are you receiving from this provider?</b>					
Crisis Intervention	-	-	-	-	-
IBHS (BHT, BC, MT, ABA)	1 4.3%	1 4.3%	-	-	-
MH CRR Home	-	-	-	-	-
Family Based MH Services	1 4.3%	1 4.3%	-	-	-
Functional Family Therapy (FFT)	-	-	-	-	-
Peer Support	-	-	-	-	-
MH Inpatient Hospitalization	1 4.3%	1 4.3%	-	-	-
Medication/Psychiatric/Telepsychiatry	9 39.1%	9 39.1%	-	-	-
MH (BCM) Blended Case Management	1 4.3%	1 4.3%	-	-	-
MH Outpatient Therapy/Counseling (individual or group)	9 39.1%	9 39.1%	-	-	-
MH Partial Hospitalization	-	-	-	-	-
Residential Treatment Facility (RTF)	-	-	-	-	-
Transitional-Age Youth Assertive Community Treatment (TAY-ACT)	-	-	-	-	-
Substance Use (SU) Detox	-	-	-	-	-
Naltrexone Maintenance	-	-	-	-	-
Substance Use (SU) Outpatient Therapy	-	-	-	-	-
SU Inpatient/Rehabilitation	-	-	-	-	-
Methadone Maintenance	-	-	-	-	-
Multi Systemic Therapy (MST)	-	-	-	-	-
Buprenorphine Maintenance	-	-	-	-	-
Other	1 4.3%	1 4.3%	-	-	-
Do Not Know	-	-	-	-	-

## Youth Treatment Provider Service Level Analysis

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Qtr J- an-March	2nd Qtr Apr-Jun	3rd Qtr July-Sept	4th Qtr Oct-Dec
Base	23	23	-	-	-
<b>Q15-How long have you been receiving your current services from this provider?</b>					
Less than 6 months	-	-	-	-	-
6-11 months	3 13.0%	3 13.0%	-	-	-
1 to 2 years	10 43.5%	10 43.5%	-	-	-
2 to 4 years	2 8.7%	2 8.7%	-	-	-
4 + years	8 34.8%	8 34.8%	-	-	-

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Qtr J- an-March	2nd Qtr Apr-Jun	3rd Qtr July-Sept	4th Qtr Oct-Dec
NA responses reduce total	20	20	-	-	-
<b>Q16-Were you put on a waiting list to be seen by (provider)?</b>					
Yes	1 5.0%	1 5.0%	-	-	-
No	19 95.0%	19 95.0%	-	-	-

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quar- ter Jan...	2nd Qua- rter Apr...	3rd Quar- ter July...	4th Quar- ter Oct...
NA responses reduce total	20	20	-	-	-
<b>Q17-If you received services by video or telephone, were you satisfied with the services you received?</b>					
Yes	20 100.0%	20 100.0%	-	-	-
No	-	-	-	-	-

## Youth Access to Services

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Qtr Ja- n-March	2nd Qtr Apr-Jun	3rd Qtr July-Sept	4th Qtr Oct-Dec
Base	23	23	-	-	-
Q18A-We meet at times that are convenient for me.					
Strongly Agree/Agree	23 100.0%	23 100.0%	- -	- -	- -
Strongly Disagree/Disagree	- -	- -	- -	- -	- -

100.0% of target rate Y-T-D

Meets Expectations

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Qtr Ja- n-March	2nd Qtr Apr-Jun	3rd Qtr July-Sept	4th Qtr Oct-Dec
Neutrals reduce total	22	22	-	-	-
Q18B-I was made aware of the availability of different providers for this service and given a choice.					
Strongly Agree/Agree	22 100.0%	22 100.0%	- -	- -	- -
Strongly Disagree/Disagree	- -	- -	- -	- -	- -

100.0% of target rate Y-T-D

Meets Expectations

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Qtr Ja- n-March	2nd Qtr Apr-Jun	3rd Qtr July-Sept	4th Qtr Oct-Dec
Neutrals reduce total	23	23	-	-	-
Q18C-I feel I was able to get the help I needed within a reasonable amount of time.					
Strongly Agree/Agree	23 100.0%	23 100.0%	- -	- -	- -
Strongly Disagree/Disagree	- -	- -	- -	- -	- -

100.0% of target rate Y-T-D

Meets Expectations



## Youth Treatment Experiences

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Qtr J- an-March	2nd Qtr Apr-Jun	3rd Qtr July-Sept	4th Qtr Oct-Dec
Neutrals reduce total	23	23	-	-	-
<b>Q19A-(Provider) helped me create a plan to deal with any problems I have.</b>					
Strongly Agree/Agree	23 100.0%	23 100.0%	-	-	-
Strongly Disagree/Disagree	-	-	-	-	-

100.0% of target rate Y-T-D

Meets Expectations

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter r Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Neutrals reduce total	23	23	-	-	-
<b>Q19B-I am an active participant in developing a treatment plan that is a good fit for me.</b>					
Strongly Agree/Agree	23 100.0%	23 100.0%	-	-	-
Strongly Disagree/Disagree	-	-	-	-	-

100.0% of target rate Y-T-D

Meets Expectations

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter r Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Neutrals reduce total	23	23	-	-	-
<b>Q19C-I feel comfortable asking questions about my treatment.</b>					
Strongly Agree/Agree	23 100.0%	23 100.0%	-	-	-
Strongly Disagree/Disagree	-	-	-	-	-

100.0% of target rate Y-T-D

Meets Expectations

## Youth Treatment Experiences

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Qtr Ja- n-March	2nd Qtr Apr-Jun	3rd Qtr July-Sept	4th Qtr Oct-Dec
Neutral/NA responses reduce totals	22	22	-	-	-
<b>Q20-I am included in meetings about my treatment.</b>					
Strongly Agree/Agree	22 100.0%	22 100.0%	- -	- -	- -
Strongly Disagree/Disagree	- -	- -	- -	- -	- -

100.0% of target rate Y-T-D

Meets Expectations

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter r Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Neutral/NA responses reduce totals	20	20	-	-	-
<b>Q21-My provider has talked with me about community resources and other supports, if needed.</b>					
Strongly Agree/Agree	20 100.0%	20 100.0%	- -	- -	- -
Strongly Disagree/Disagree	- -	- -	- -	- -	- -

100.0% of target rate Y-T-D

Meets Expectations

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Qtr Ja- n-March	2nd Qtr Apr-Jun	3rd Qtr July-Sept	4th Qtr Oct-Dec
Neutral/NA responses reduce totals	20	20	-	-	-
<b>Q22-As appropriate, my providers (physical and behavioral health) work together and share information to provide me the best care possible.</b>					
Strongly Agree/Agree	20 100.0%	20 100.0%	- -	- -	- -
Strongly Disagree/Disagree	- -	- -	- -	- -	- -

100.0% of target rate Y-T-D

Meets Expectations

## Youth Recovery Oriented Practices

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Base	23	23	-	-	-
Q23A-I have been given clear information on who to contact if I need immediate help between sessions.					
Always, Almost Always, Often	23 100.0%	23 100.0%	-	-	-
Sometimes	-	-	-	-	-
Rarely/Never	-	-	-	-	-

100.0% of target rate Y-T-D

Meets Expectations

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Base	23	23	-	-	-
Q23B-Staff treats me with respect and sees me as an equal partner in my treatment program.					
Always, Almost Always, Often	23 100.0%	23 100.0%	-	-	-
Sometimes	-	-	-	-	-
Rarely/Never	-	-	-	-	-

100.0% of target rate Y-T-D

Meets Expectations

## Youth Outcomes

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Qtr Jan-March	2nd Qtr Apr-Jun	3rd Qtr July-Sept	4th Qtr Oct-Dec
Neutrals reduce total	23	23	-	-	-
Q24A-I manage strong feelings better. (Anger, sadness, etc.)					
Strongly Agree/Agree	23 100.0%	23 100.0%	-	-	-
Strongly Disagree/Disagree	-	-	-	-	-

100.0% of target rate Y-T-D

Meets Expectations

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Neutrals reduce total	18	18	-	-	-
Q24B-I make better choices about how to deal with day to day life.					
Strongly Agree/Agree	18 100.0%	18 100.0%	-	-	-
Strongly Disagree/Disagree	-	-	-	-	-

100.0% of target rate Y-T-D

Meets Expectations

## Youth Outcomes

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Neutrals reduce total	23	23	-	-	-
Q24C-I believe treatment is working because I feel better.					
Strongly Agree/Agree	23 100.0%	23 100.0%	-	-	-
Strongly Disagree/Disagree	-	-	-	-	-

100.0% of target rate Y-T-D

Meets Expectations

## Youth Provider Issues or Concerns

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Qtr Ja- n-March	2nd Qtr Apr-Jun	3rd Qtr July-Sept	4th Qtr Oct-Dec
Base	23	23	-	-	-
Q25-Have you had any issues or problems with services from (provider)?					
Yes	-	-	-	-	-
No	23 100.0%	23 100.0%	-	-	-

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Qtr Ja- n-March	2nd Qtr Apr-Jun	3rd Qtr July-Sept	4th Qtr Oct-Dec
N/A responses reduce total	-	-	-	-	-
Q26-If yes, what were the issues or problems with services from (provider)?					
Lack of treatment planning and coordination	-	-	-	-	-
Services not provided when I needed them	-	-	-	-	-
Poor communication	-	-	-	-	-
Frequent staff changes	-	-	-	-	-
Frequent Provider Cancellations	-	-	-	-	-
Other	-	-	-	-	-

- No data this quarter

## Youth Provider Issues or Concerns

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Qtr Ja- n-March	2nd Qtr Apr-Jun	3rd Qtr July-Sept	4th Qtr Oct-Dec
N/A responses reduce total	-	-	-	-	-
<b>Q27-Were you able to resolve these issues or problems with (provider) through a discussion with the program manager or did you choose not to take any action?</b>					
I resolved the problem with the program manager	-	-	-	-	-
I chose not to take any action	-	-	-	-	-
I filed a formal complaint	-	-	-	-	-
Other	-	-	-	-	-

### - No data this quarter

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
N/A responses reduce total	-	-	-	-	-
<b>Q28-If you chose to not take any actions, why?</b>					
The problem was not that serious	-	-	-	-	-
I was concerned with how the provider would react	-	-	-	-	-
I didn't know how to file a formal complaint	-	-	-	-	-
Other	-	-	-	-	-

### - No data this quarter

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Qtr Ja- n-March	2nd Qtr Apr-Jun	3rd Qtr July-Sept	4th Qtr Oct-Dec
Base	23	23	-	-	-
<b>Q29-Would you recommend your provider to others?</b>					
Yes	23 100.0%	23 100.0%	-	-	-
No	-	-	-	-	-

## Youth Department of Human Services Questions

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Qtr Ja- n-March	2nd Qtr Apr-Jun	3rd Qtr July-Sept	4th Qtr Oct-Dec
Base	23	23	-	-	-
<b>Q30-What effect has the treatment you've received had on the overall quality of your life?</b>					
Much better	17 73.9%	17 73.9%	-	-	-
A little better	5 21.7%	5 21.7%	-	-	-
About the same	1 4.3%	1 4.3%	-	-	-
A little worse	-	-	-	-	-
Much worse	-	-	-	-	-

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Qtr Ja- n-March	2nd Qtr Apr-Jun	3rd Qtr July-Sept	4th Qtr Oct-Dec
Base	23	23	-	-	-
<b>Q31-Were you given the chance to make treatment decisions?</b>					
Yes	21 91.3%	21 91.3%	-	-	-
No	-	-	-	-	-
Sometimes	2 8.7%	2 8.7%	-	-	-

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Qtr Ja- n-March	2nd Qtr Apr-Jun	3rd Qtr July-Sept	4th Qtr Oct-Dec
Base	23	23	-	-	-
<b>Q32-In the last twelve months, did you have problems getting the help you needed?</b>					
Yes	23 100.0%	23 100.0%	-	-	-
Sometimes	-	-	-	-	-
Never	-	-	-	-	-

## Youth Department of Human Services Questions

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Qtr Ja- n-March	2nd Qtr Apr-Jun	3rd Qtr July-Sept	4th Qtr Oct-Dec
N/A responses reduce total	-	-	-	-	-
<b>Q33-If yes, why weren't you able to get the behavioral health help in the last 12 months?</b>					
Money issues	-	-	-	-	-
Transportation Issues	-	-	-	-	-
Language barriers	-	-	-	-	-
Inconvenient times	-	-	-	-	-
Long waiting list	-	-	-	-	-
Didn't know where to get help	-	-	-	-	-
Attitude/Personality Conflicts	-	-	-	-	-
Other	-	-	-	-	-

- No data this quarter

## Youth Behavioral Health Medications

Counts Break % Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Qtr Ja- n-March	2nd Qtr Apr-Jun	3rd Qtr July-Sept	4th Qtr Oct-Dec
NA reponses reduce total	19	19	-	-	-
<b>Q34-If you are taking behavioral health medications, are you experiencing any problems in getting the medications that work for you?</b>					
Yes	-	-	-	-	-
No	19 100.0%	19 100.0%	-	-	-

**\*Question 35-Please share additional compliments or suggestions for improvement you have about the services you participate in with (provider)/**

**Q35 can be found in the back with literal questions.**

## Name Release

Counts Respondents	2025 Y-T-D Total	What quarter is it?			
		1st Quarter Jan-March	2nd Quarter Apr-Jun	3rd Quarter July-Sept	4th Quarter Oct-Dec
Base	23	23	-	-	-
Q36-If you shared problems about your provider or your managed care company during this survey, are you interested in having your concerns addressed immediately by Behavioral Health Services of Somerset and Bedford counties?					
Yes	-	-	-	-	-
No	-	-	-	-	-
Not Applicable	23	23	-	-	-

**\*Question 36A-If you wish, I can forward your concerns directly to Behavioral Health Services of Somerset and Bedford Counties, but I would need to include your name and information from our survey, which means your comments would no longer be anonymous. This may include discussing your specific concerns with your provider. If you do not wish to have this done, all your answers remain confidential. I encourage you to contact Behavioral Health Services of Somerset and Bedford Counties yourself at any time to have your concerns addressed.**

***If yes, please give your name and date of birth.***

**Name Release not displayed due to HIPAA.**



## **Youth Literal Comments**

### **Q8A-What do you consider your race to be? Literal Comment**

### **Q10D-Community Care questions. Literal Comments**

Q1- I never had to call them.

### **Q11A-If you had contact with Community Care in the last 12 months, were you satisfied with the level of dignity and respect the staff conveyed to you? Literal comment**

### **Q12A-If you had contact with Community Care in the last 12 months, were you satisfied with the level of dignity and respect the staff conveyed to you? Literal Comments**

### **Q13A-If you used Community Care's complaint process with in the last 12 months, were you satisfied with how your complaint was handled? Literal Comments.**

### **Q14A-If you used Community Care's grievance process with in the last 12 months, were you satisfied with how your grievance was handled? Literal Comments**

Q1- Conemaugh Counseling Associates

### **Q18D- Access Literals**

### **Q19D-Treatment Experiences Literal Comments**

### **Q23C-Recovery Oriented Practices Literal Comments**

### **Q24D-Outcomes Literal Comments**

Q1- I am definitely working on making good choices.

Q1- It hasn't been long enough to work on that yet.

Q1- I am still working on making better choices.

### **Q26A-If yes, what were the issues or problems with services from provder? Literal Comments**

### **Q27A-Were you able to resolve these issues or problems with provider through a discussion with the program manager or did you choose not to take any action? Literal Comments**

**Q28A-If you chose to not take any action, why? Literal Comments****Q32A-If yes, why weren't you able to get the behavioral health help in the last twelve months? Literal Comments****Q33A-If you are taking behavioral health medications, are you experiencing any problems in getting the medications that work for you? Literal Comments****Q35-Please share additional compliments or suggestions for improvement you have about the services you participate in with (provider). Literal comment**

Q1- Staff should get a raise for the wonderful job they do.

## Provider Responses

### Provider Responses to 4th Quarter (October - December ) 2024 C/FST Report

The comments below are shown in recognition of the time, attention and interest providers have shown in listening to and utilizing C/FST data as an additional input in their internal QI processes.

Provider responses for the 4th Quarter/Annual 2024 C/FST data are shown below:

#### Provider 1:

“Following a review of the BHSSBC Adult Satisfaction Survey, Family Member Survey, and Youth Satisfaction Survey results, we have identified several key barriers and opportunities for improvement within our services.

##### **1. Awareness of Grievance and Complaint Procedures**

*Some individuals indicated a lack of awareness regarding Community Care’s contact information and the process for filing a complaint or grievance. To address this, (provider) ensures that all clients receive this information during the intake process through the **Consent to Treatment Agreement**, which outlines grievance and complaint procedures. Additionally, this information is readily available in a handout at the front desk and is included in (provider’s) **Outpatient Handbook**, which clients review and acknowledge prior to their intake appointment.*

##### **2. Awareness of Alternative Providers**

*Survey results also revealed that some clients were unaware of other available providers. As part of our intake process, clients are provided with the **Freedom of Choice S/B Consent**, which lists mental health and behavioral health providers in Somerset and Bedford Counties. Clients also receive contact information for their insurance provider to explore additional options. Additionally, before placing any client on a waitlist, (provider) Somerset’s front desk receptionist offers a list of alternative providers. This list can be provided via phone, mail, or email, based on the client’s preference.*

##### **3. Access to Psychiatric Services**

*(Provider) Somerset currently has limited psychiatric provider availability, with one psychiatric provider serving children and adolescents and another serving adults. The adult psychiatric nurse practitioner provides in-person services, while the psychiatrist is available via telehealth for clients under 18 and higher-risk adults requiring a higher level of care. Clients may request a transfer of medication management services to (provider’s) Walnut St. Office if deemed appropriate based on case history. Additionally, (provider) Somerset has two part-time outpatient therapists. While this may impact service accessibility, both therapists are available for in-person therapy sessions and can facilitate telehealth services as needed.*

##### **4. Survey Participation and Feedback**

*(Provider) staff will continue to inform individuals when surveyors are on-site to facilitate survey completion. Staff will also actively encourage clients and families to participate, as their feedback is essential to improving service quality and client satisfaction. However, survey facilitators may encounter challenges when parents need to return to work or bring their child back to school, which can impact participation rates.*

*(Provider) remains committed to continuously improving service accessibility, transparency, and client engagement. We appreciate your time in reviewing these findings, and we welcome any feedback or recommendations to further enhance our services.*

#### Provider 2

*“(Provider) remains committed to providing high quality services to all members served. We were disappointed to learn that our agency had again fallen below the benchmark for the question regarding offering choice. In speaking with Supervisors, we have implemented the action steps aimed to improve informing members of other local resources and providing choice. After reviewing comments on the most recent quarterly report, it is noted that possibly our efforts will take additional time as many members interviewed have been active with us for ongoing services. But also, as we identified last quarter, we are unaware if hospitals are providing choice as part of their discharge planning. Our supervisors have not identified additional barriers. (Provider) will continue with recent programmatic enhancements to improve the members’ responses. Supervisors will also continue to provide ongoing training and education as the agency is focusing on recovery principles. (Provider) will continue to review our quarterly reports as we plan for future programmatic changes.”*

**Areas of Focus with Barriers and Action Steps:****Current Process to Offer Choice:**

*During our initial contact (via phone or face-to-face contact) (Provider) staff offer choice to members regarding the services that are available in our county. (Provider) staff provide the names, location, and contact information regarding all local providers. Upon the member stating that they select (provider), initial intake information is gathered.*

*(Provider) Staff have also recently discussed providing a choice when the agency receives a referral from an outside source.*

*(Provider) Staff have been trained to discuss provider choice as part initial assessments.*

**Barriers to Meeting the Benchmark:**

*(Provider) Staff have not identified any new barriers from last Quarter.*

**Actions Steps to Improve:**

*(Provider) Staff remain committed to providing clear, concise communication with members. Our team will continue with the following action steps to enhance our performance:*

- 1. The Program Director provided staff with the 4th quarter survey results indicating not meeting benchmark.*
- 2. During intake, clearly explain provider choice with simpler language to ensure that all members have a full understanding of the information provided and ensure member understanding.*
- 3. Staff will also consider that outside providers might not have offered choice, therefore, (provider) will take responsibility to ensure that members are aware of other potential providers.*
- 4. (Provider) staff will ensure that choice of providers is provided despite current availability.*
- 5. (Provider) Staff will provide ongoing provider choice during conversations in which the member appears dissatisfied or struggling with progress.*
- 6. (Provider) Staff will explain that (provider) Psych Rehab and CRR levels of care are the only available provider for that service in Bedford County.*

**Provider 3**

*"(Provider) remains committed to providing high quality services to all members served. Upon an analysis of our quarterly and Year-To-Date results, we are pleased to note that all 2024 results met the benchmarks with satisfactory or above ratings."*

*"Our analysis of the 2024 literal comments provided an opportunity for a second review to acknowledge the positive statements regarding our "helpful" and "kind" staff, progress reported by members and/or their families and members are thankful for the services (provider) provided. In addition, (provider) Supervisors were reminded of our need to remain committed to enhancing our services and environment for members to feel more in control of provider/programming choices and to always experience positive interactions and communications with staff."*

*"Throughout 2025, (provider) has plans to refocus on Recovery Principals that will re-train staff on individualized, member driven care. Communication and Motivational Interview trainings will assist staff with learning positive evidence-based practices while engaging with members."*

*"(Provider) will continue to strive towards achieving all 2025 benchmarks by providing a welcoming environment conducive to members achieving their goals and living their best life."*

**Provider 4**

*"Thank you for providing us with the 2024 YTD results from the C/FST Overall, we are pleased with the results, however, we also realize that there is always room for improvement, and we continue to strive and search for ways to improve in any area where deficiencies are noted."*

*Please see what we have identified as barriers, trends and opportunities below:*

*Clinical and case management will be reminded to present all the various services and treatment providers available to an individual while in treatment and upon discharge.*

*Counselors will be reminded to include individuals in all treatment decisions.*

*Sometimes it is hard for individuals to understand that the residential LOC does not include daily individual counseling, so the question related to feeling like one has had enough time in treatment with staff is understandable.*

*We will continue with our overall goal to have each staff member treat the individuals we serve with dignity and respect and have an "attitude of gratitude" for the services we are able to provide to those in need. It is always troubling to read when an individual has felt disrespected but without knowing the situation, it is hard to address as redirection may be perceived as disrespect.*

*We offer several avenues for an individual in treatment to voice any concerns or issues during their time in treatment with us. These include the following: speaking directly with one's counselor, a clinical supervisor, another member of the management team, completing an on-call form or seeing the patient advocate.*

*Please let me know if you have any additional questions."*

#### **Provider 5**

*"(Provider) appreciates the opportunity to review and respond to the results of the C/FST survey. The feedback assists our programs in identifying areas of growth and progress, as well as identifying areas of opportunity. We recognize that responses are inclusive of all levels of care offered to members in this region as we are unable to determine which facility and level of care these responses are reflective of."*

*"Upon review of (provider's) 4th quarter and annual survey results for Bedford Somerset, we were pleased that we met the standard of 80% or higher with all areas with the exception of one. The one identified area of opportunity from this review response to the question outlined below:*

*Q18B-I was made aware of the availability of different providers for this service and given a choice.*

- 1. (Provider) recognizes the importance of client choice in their care. Upon admission, clients provide insight into their strengths, needs, abilities, and preferences identifying any preferences they may have. These are reassessed during treatment planning, relapse prevention/crisis planning and during aftercare/discharge planning.*
- 2. Staff are available to assist clients with referrals and/or transfers to other providers at any time during the treatment process as needed or requested. Additionally, many of our facilities offer case management which is available to assist clients with identifying different resources, including but not limited to other providers.*
- 3. Due to the nature of the survey results, it is difficult to know what barriers may have contributed to this perception, however, (Provider) makes every effort to support client choice throughout the treatment process.*

*"Ensuring reflection of client choice is essential and something that we continuously strive for with each client's treatment experience. Thank you again for the opportunity to provide a response to the results of the C/FST survey. Please feel free to contact me for any additional information."*

#### **Provider 6**

*"(Provider) remains committed to providing high quality services to all members served. Upon an analysis of our quarterly and Year-To-Date results, we are pleased to note that all 2024 results met the benchmarks with satisfactory or above ratings."*

*"Our analysis of the 2024 literal comments provided an opportunity for a second review to acknowledge the positive statements regarding our "helpful" and "kind" staff, progress reported by members and/or their families, and members thankful for the services (provider) provided. In addition, (provider's) Supervisors were reminded of our need to remain committed to enhancing our services and environment for members to feel more in control of provider/programming choices and to always experience positive interactions and communications with staff."*

*"Throughout 2025, (provider) has plans to refocus on Recovery Principals that will re-train staff on individualized, member driven care. Communication and Motivational Interview trainings will assist staff with learning positive evidence-based practices while engaging with members."*

*"(Provider) will continue to strive towards achieving all 2025 benchmarks by providing a welcoming environment conducive to members achieving their goals and living their best life."*

#### **Provider 6**

*"Overall, we were very pleased with the results of the 2024 C/FST survey in which 93% of the survey respondents either "agreed" or "strongly agreed" with all of the benchmarked questions. We appreciate getting feedback from our clients so that we can identify specific areas of concern and/or those in need of improvement as part of ongoing efforts to provide quality services to our consumers and to increase overall consumer satisfaction."*

*"Even though the overall results were positive, under the "Access to Services" section there was one question where four of the respondents answered Strongly Disagree/Disagree:"*

*1. I was made aware of the availability of different providers for this service and given a choice*

*"We will use these results as an opportunity to ensure that our clients are always aware of provider choice and availability."*

*"We have begun distributing a handout that identifies alternative providers with addresses and phone numbers, to all clients during evaluations. We will also review the handout with all clients to ensure they understand provider choice. Lastly, we provide warm hand-offs of clients who choose to obtain services outside of (provider) to ease the transition of service."*

#### **Provider 7**

*"In a review and analysis of the Consumer and Family (C/FST) Satisfaction & Outcomes: Survey Findings of the (provider) 2024 Youth Report Somerset/Bedford County, the following items were reviewed for client satisfaction as they fell under the "meet expectations" benchmark (as outlined within the C/FST report):"*

**Q19A:** Provider helped me create a plan to deal with any problems I have.

*"In relation to Q19A, further review found that there were no "literal comments" by youth."*

*1. 2025 Goals: (Provider) currently seeks to be client-centered in our care meaning that the client with their provider identify the issues that they would like to work on within their treatment. All individuals involved within care at (provider) create treatment plans that seek to help the client with their identified problems and creates a plan to overcome barrier addressed. Our goal with any program is to ensure that treatment plans are accurate and reflect the current identified needs of the client. Within the year 2025, programs are going to seek to address treatment plan more frequently with the youth population to ensure that treatment plans address and deal with any problems that a client might have.*

*2. The (provider)y will seek to increase the "strongly agree/agree" responses for this question by 5-10%*

#### **Provider 8**

*"Thank you for providing (provider) feedback regarding its most recent CFST survey. We value the assessment of our program and its effectiveness, especially as far as our consumers' first-hand experiences."*

The feedback that fell below benchmark has been closely assessed and a couple of key points can be taken away. First of all, 2 out of the 3 families expressed that their child's behavioral health had not improved but essentially indicated that there was either "no behavioral health problems" or that the consumer "was not ready to talk yet." It seems part of the feedback we received was either a misinterpreted question or is more specific to a child's readiness to participate in treatment.

*However, there was one response that indicated that the family felt their child should be seen more often in treatment. Without specific information about who that client is, it is hard to directly impact that consumer's experience in treatment. Fortunately, there are also some tools available to us that can encourage this information to be shared with clinicians openly to make a change in treatment. This feedback will be reviewed with clinical leadership and the following strategies can be used to impact improved communication.*

*Clinical leadership will review with all clinicians that it is necessary to consistently seek feedback from consumers about their experience in and thoughts about treatment. If clinicians are predictably seeking feedback, the door is open for this conversation about treatment frequency to occur more easily. Additionally, Collaborative Documentation is a practice that all clinicians are trained in and required to use, which encourages and relies upon this open feedback loop.*

*Thank you again for sharing our feedback and giving us an opportunity to address specific needs in our Bedford/Somerset clinics."*

"Thank you for providing Clarvida's feedback regarding its most recent CFST survey. We value the assessment of our program and its effectiveness, especially including our consumers' first-hand experiences.

#### **Provider 8 (Additional Response)**

"It appears that the quarter 4 information that rounded out a year of survey feedback maintained the trends that have been addressed in previous responses and reviews of CFST results. I have included (provider)outpatient program's previous response from November as much of that remains our plan and will be reinforced again with our clinical team in Bedford and Somerset.

Additionally, I thought it important to mention that all consumers sign a Freedom of Choice form at intake, which reviews that they have a choice in providers and can seek other available providers in the area by calling their insurance company. Furthermore, all clients have an established treatment plan by their first therapy session and are actively involved in setting goals and developing objectives to reach those goals.

Given that it was identified by a couple of our clients that they felt they had not been involved in or made aware of their plan, clinical leadership will review with clinicians' ways to involve their consumers explicitly in the creation of their treatment plan. It is an important reminder for all clinicians throughout their work that the treatment plan is a cornerstone of treatment, drives results, and must be done in collaboration with a client in order to meet them where they are at.

Thank you again for sharing our feedback and giving us an opportunity to address specific needs in our Bedford/Somerset clinics."

## MCO Responses

### Community Care Response to 4th Quarter/Annual 2024 C/FST Report

See the abridged (minus charts) Community Care response below for the 4th Quarter/Annual 2024 C/FST Data:

#### Sample Methodology

The C/FST interviewed and surveyed a total of 535 members and/or the family members of members who received services from various behavioral health providers. Members were asked questions or read statements (individual indicators/outcomes) relating to several service areas, as specified in Appendix L of Pennsylvania's HealthChoices Behavioral Health Program Standards and Requirements. In addition to closed-ended questions, respondents were asked to offer comments or recommendations beyond standard "yes or no" responses. BHSSBC, Community Care and providers are asked to utilize the C/FST data as additional input into their internal quality improvement processes to support both systemwide and individual treatment outcomes. A benchmark system is utilized to highlight positive findings and identify areas requiring improvement. Community Care and providers are requested to review their quarterly and year-to-date data and respond with actions that will be taken to improve any indicator that has at least five completed interviews/surveys and is below the established benchmark.

#### Discussion

C/FST completed a total of 535 regular surveys for the period of January 1, 2024-December 31, 2024, which included 342 females (63. 9%), 191 males (35. 7%), two members who did not identify with either gender (.004%), and zero members who refused to answer. The number of surveys completed face-to-face (404 or 75.5%) was higher than 70% in 2023. C/ FST completed more face-to-face surveys than the number of surveys completed via phone (131 or 24.5%). The expectation that at least half of the surveys were completed face-to-face was met during this measurement period.

Community Care, BHSSBC, and the C/FST continually evaluate the relevance of the survey questions as they relate to recovery and resiliency specifically for Bedford and Somerset Counties. Questions and indicators are reviewed yearly to determine if updates are needed, which often results in adding, deleting, and/or revising to ensure questions are easy to understand and valid.

#### Adult Responses

1. Adult satisfaction with Community Care results continues to be positive, with 97.8% of adults reporting they were "Satisfied with the level of dignity and respect Community Care staff conveyed." In review of the results, 3 of the 5 Community Care satisfaction indicators were under the 80% goal. These indicators were "I Know how to call Community Care with questions or concerns?", "Aware that you can file a complaint and/or grievance with Community Care?", and "Have you reviewed your insurance benefits and treatment options through Community Care?"
2. All three of the OM HSAS Mandatory/Appendix L Questions fell below the 90% benchmark. "In the last twelve months, were you able to get the help you needed?" scored 85.4% while "What effect has the treatment you've received had on your quality of life" scored 87.9% and finally, "Were you given the chance to make treatment decisions?" was just under goal at 89%.



3. In review of the results, 14 out of 15 (93.3%) of questions related to access, recovery-oriented practices, treatment experiences, telehealth, and treatment outcomes met the 90% benchmark. The remaining question: "I was made aware of the availability of different providers for this service and given a choice" scored just below the 90% benchmark at 86.4%. The highest score (99.7%) was for the indicator, "I feel comfortable asking questions about my treatment."

### **Family/Caregiver Responses**

1. Family/Caregiver satisfaction with Community Care results continue to be positive, with 83.3% of family/caregivers reporting they were "Satisfied with the level of dignity and respect Community Care staff conveyed." Regarding Satisfaction with Community Care, 2 out of the 4 questions that included responses met the 80% benchmark. The lowest indicator: "Have you reviewed your child's insurance benefits and treatment options through Community Care?" has shown fluctuation over each quarter, ending the year at 48%.

2. One out of the three OMHSAS Mandatory/Appendix L Questions met the 90% benchmark. The question "I was given chance to make treatment decisions" met goal at 93.9%.

3. In review of the results, 15 out of the 16 (93.8%) family questions related to access, recovery-oriented practices, treatment experiences, telehealth, and treatment outcomes met the 90% benchmark. The remaining question: "My provider helped us create a plan to deal with any problems my child has" scored just below the 90% benchmark at 88.5%. The highest score (100%) was for the question, "I feel comfortable asking questions about my child's treatment."

### **Youth Responses**

1. Regarding Satisfaction with Community Care, 2 of the 4 questions met the 80% benchmark. Youth satisfaction with Community Care continues to be good, with 100% of youth reporting they were "Satisfied with the level of dignity and respect Community Care staff conveyed." This score is not entirely unexpected, as members often do not know how to contact Community Care until a specific need arises, but once they do contact Community Care, there is very consistent satisfaction.

2. All three of the OMHSAS Mandatory/Appendix L Questions measured below the 90% benchmark. The two questions "Treatment improved quality of my life?" and "In the last twelve months, were you able to get the help you needed?" measured the highest at 79.3%.

3. In review of the results, 13 out of 14 (92.9%) of youth questions related to access, recovery-oriented practices, treatment experiences, telehealth, and treatment outcomes met the 90% benchmark. The remaining question: "Provider helped me create a plan to deal with any problem I have" scored just below the 90% benchmark at 86.4%. The highest scores (100%) were for the indicators, "Services are available at times that are convenient" and "Staff treat me with respect and sees me as an equal partner in my treatment program."

In 2024 Community Care continued to work collaboratively with BHSSBC and CBHDR to include four targeted questions in efforts to assess if Community Care's PEDTAR interventions targeting stigma have been effective. When asked "I have been in situations where I have heard others say unfavorable or offensive things about people who have been in treatment for their substance use:" 19.7% (70 of 355) of adults surveyed in 2024 reported "Almost Always" or "Always" and 8.2% (8 of 98) of families and 12.2% (14 of 93) of youth surveyed reported "Almost Always" or "Always." When asked "Abstinence-based therapy (not using any medications) is the only successful form of treatment for substance use disorder:" 9.6% (34 of 355) of adults surveyed in 2024 reported "Agree" or "Strongly Agree" and 5.1% (5 of 98) of families and 1.2% (1 of 82) of youth surveyed reported "Agree" or "Strongly Agree." When asked "Addiction is a medical disease like diabetes, arthritis, or heart disease:" 59.2% (210 of 355) of adults surveyed in 2024 reported "Agree" and 46.9% (46 of 98) of families and

26.8 (22 of 82) of youth surveyed reported "Agree." When asked "I would be embarrassed to tell people that someone close to me has a substance use disorder:" 7.3% (26 of 355) of adults surveyed in 2024 reported "Agree" and 7.1% (7 of 98) of families and 1.2% (1 of 82) of youth surveyed reported "Agree."

**Actions/Interventions**

*C/FST will continue to collect and report satisfaction input from behavioral health consumers and their family members about the quality of services provided to address areas of unmet needs, service gaps, and needed improvements in the behavioral health service system.*

*C/FST will continue to attend Quality and Care Management Committee meetings to present and discuss the findings.*

*C/FST, BHSSBC, and Community Care will communicate on a regular basis and meet quarterly or as necessary to review program implementation, compliance with Appendix L, findings, removal of barriers, member requests for assistance issues, and outreach to unserved or underserved members. In addition, the results of the C/FST survey are discussed monthly at the Stakeholder Committee and at quarterly Provider Advisory Committee (PAC) meetings to conduct a barrier analysis, review trends, and determine possible solutions or suggestions.*

BHSSBC also processes and resolves any Member Requests for Assistance (MRAs) that are identified through the C/FST process by reaching out to the members, helping identify needed services, and discussing issues with providers, etc.

Additionally, the following interventions have been implemented to address specific categories of questions:

**Satisfaction with Community Care**

1. Community Care members continue to receive the Member Handbook upon enrollment along with welcome packets.
2. C/FST interviewers continue to distribute handbooks to members while completing on-site interviews. Community Care's Customer Service Representatives offer to mail the Member Handbook to members when they call Community Care to inquire about services.
3. Community Care's Community Relations Coordinator continues to provide member handbooks and information with contact information available the Stakeholder Committee meetings, health fairs, and other community events.
4. The Member Handbook and newsletters are available electronically on the Community Care website.
5. Specific to satisfaction with the complaint process, Community Care continues to follow protocol to ensure thorough processing of all complaints. Complaints are reviewed by the Complaint Committee, which includes Quality and Senior Management. This committee meets daily to ensure a thorough investigation and satisfactory resolution of all complaints. Community Care conducts outreach calls to all members who file complaints to ensure that they are satisfied with the outcome of their complaints. All members are educated on their rights to file Level 2 or external complaints if not satisfied. At times, as a result of a complaint, Community Care may review records and/or provider's Policies and Procedures as well as ask for Quality Improvement Plans (QIPs) from providers, as necessary.

**Access**

1. *Care Managers are always available to help members get an appointment and often call providers on behalf of members if they are having trouble getting an appointment.*
2. *Community Care continues to send access standards to both members and providers every year.*
3. *Community Care distributes business-sized cards that include the customer service number to members at all stakeholder meetings and shared with providers to distribute. Customer Service can help members identify other providers or make referrals if there is an unsatisfactory wait time.*
4. *Community Care has an updated member website that provides links to accessing treatment via the provider directory, customer service number, and an online submission form.*
5. *Service information, specific to Bedford and Somerset Counties, can continue to be found on Community Care's website.*

**Recovery Outcomes and Treatment**

1. *Community Care's Bedford/Somerset team completed provider trainings, participated in the OMHSAS Integrative Care Planning project, conducted screenings, and has initiated Value Based Payment arrangements with providers to improve treatment outcomes.*
2. *Community Care's Community Relations Coordinator attended outreach activities in 2024 including in person community events, town halls, and provided support to coalitions related to behavioral health. During some of these events, Community Care staffed a table, which displayed brochures related to service options, general information about Community Care, recovery-oriented literature and information related to training and support initiatives.*
3. *Community Care maintains and frequently updates member and provider resources on the website related to recovery and resiliency. The numerous resources include Recovery Toolkits, recovery articles, WRA P information and examples, webinars, and links to other related websites as well as a Recovery Library.*

**Follow-up/Outcomes**

*C/FST collects satisfaction information from members and families on an ongoing basis throughout the year. This is a quarterly report that will be presented to the OCMC in February, May, August, and November 2025/*

## Technical Notes

### Technical Notes

#### A. Projected Surveys – January 1, 2025 – December 31, 2025

The Center for Behavioral Health Data Research, Inc. (CBHDR) has been contracted by BHSSBC to manage the Bedford-Somerset C/FST and to conduct 534 general purpose and 100 special focus C/FST surveys between January 1, 2025, and December 31, 2025.

The general-purpose survey target represents approximately 2.4% of the Bedford-Somerset HealthChoices membership and approximately 18.3% of individuals receiving behavioral health services.

#### B. Focus

**The targeted survey activity includes 326 Somerset and 208 Bedford C/FST surveys. The sub-targets by member category include 355 adults, 82 youth and 98 families with individual sub-targets for each of those categories for each county.** Additionally, CBHDR will achieve a representative sampling of all service levels, age groupings, gender, zip code and providers.

#### C. C/FST Survey Process

The survey instruments were developed under the guidance and direction of BHSSBC and the Bedford-Somerset C/FST Advisory Committee consistent with the requirements and guidelines of DPW's Appendix L. The Committee is comprised of individuals representing Community Care, adult, parent/family, and youth membership, county provider staff, and staff members of BHSSBC, Community Care, and The Center for Behavioral Health Data Research, Inc. including the Bedford-Somerset C/FST Program Director.

Adult, family, and youth survey questions are reviewed and evaluated annually for their relevance and effectiveness by the Advisory Committee and BHSSBC; additions, deletions, and changes are usually made to the questionnaires at the start of a new fiscal year in July.

Surveys are completed via two methods. The first method involved surveyors making visits to service area providers to conduct surveys with any Community Care members who happened to be at the provider during that time and who wished to participate in the survey. The second method involved calling Community Care members and offering to do face-to-face or phone surveys with them.

The interview questions are designed to determine member satisfaction and perceptions of Community Care (the MCO), provider access, treatment experiences, recovery-oriented practices, and outcomes. Care has been taken to ensure that collection and analysis is standardized, accurate and provides formative reliable data on critical system indicators that can be used to drive change and improvement.

Many of the questions incorporate the Recovery Oriented System Indicators (ROSI) including those under: *Validated Personhood, Person Centered Decision Making & Choice, Self –Care, Wellness & Meaning, Rights & Informed Consent, and Treatment Options* as these primarily relate to the managed care organization and provider practices. ROSI questions also include community support and infrastructure including those under: *Community Integration, Social Relationships, Basic Life Resources, and Peer Support & Self-Help*. The C/FST also added questions from the Comprehensive, Continuous, Integrated System of Care (CCISC) model.

The member responses and results of the survey process are shared with the MCO and providers on a quarterly basis with each provider receiving its own specific member responses (in the aggregate) in addition to the overall report. The C/FST information is to become part of operational and clinical processes, assist in decision-making and help drive performance and quality. A key to this outcome is MCO and provider acknowledgement of, and response to, the process.

#### D. Survey Methodology Population/Sampling

The overall sample size of 534 represents approximately 18.3% of Community Care's Bedford-Somerset County behavioral health membership and yields a 95% confidence level with a plus/minus 4.6% margin of error when divided by the membership in Somerset and Bedford counties. The overall target sample of 534 is then divided by a specific provider's percent of Community Care's membership to arrive at a target sample size for each individual provider. This is defined as a proportional-stratified sample for each provider.

#### E. Data Analysis and Reporting

Survey instrument development, data entry, and data analysis were conducted using the SNAP software and incorporated Likert scale, multiple choice, and narrative responses. In addition, participants were able to skip questions or stop the interview at any point during the data collection process. As a result, the number of respondents (N) for each question and the total number of surveys completed may vary.

Respondents were offered the choice of answering; *"strongly agree"*, *"agree"*, *"neutral"*, *"disagree"*, or *"strongly disagree"*, and a straight *"yes"* or *"no"* to some questions. Other questions asked for a verbal opinion or reasons for an answer. Additionally, some questions provide for a non-applicable response, which can also alter the total when reconciling the *"agree"*, *"neutral"* and, *"disagree"* responses.

An appropriate benchmark system is utilized to highlight positive findings and better recognize areas requiring improvement – see below. The objective of adding benchmarks to the Quarterly Report is to communicate member satisfaction in a format that captures readers' attention and focuses analysis. The format should make it easier to identify areas of success versus areas that require improvement with increased interest in understanding member satisfaction scores.

At or above 90% Benchmark – **Satisfactory**

Between 80%-90% - **Monitor**

Below 80% - **Requires Action**

In addition to **Benchmarking** data to identify changes, trends and issues, other refinements have also been added to the quarterly reports. These include:

- 1. Quarter-to-Quarter Analysis:** It is difficult to draw any conclusions from a single quarter, which represents a "snapshot" in time. Thus, a quarter-to-quarter comparison was added so that member responses can be tracked over time.
- 2. Face-to-Face Variations:** The collected data can be evaluated overall and then by source of interview, including that collected by telephone, compared to that data collected in face-to-face interviews. These reports can be requested.
- 3. Sample Characteristics:** Significant variances in member responses between quarters are also evaluated by the size and characteristics of the member sample. Any variances in member age range, treatment service level or provider is also noted.
- 4. Cross-Tabulation:** Using the SNAP software, member responses to a particular interview question can be evaluated by any other data characteristic including age, level of service, provider, or treatment category.
- 5. Quarterly Provider Report:** As one quarter of member responses are only a snapshot in time, a quarterly provider report was developed to show member responses by provider, by quarter, with a year-to-date average which is more useful in identifying trends, drawing conclusions, and recommending improvements.

These data analysis enhancements are designed to provide additional interpretative capability for the reader to develop useful information regarding member perceptions of treatment access, provider treatment, recovery orientation, and outcomes.

## **F. Limitations**

There are always limitations to the administration of a survey. The following is a discussion of two significant limitations experienced during the administration process.

When attempting to assess satisfaction among a sample population, a telephone survey has both advantages and disadvantages. One of the advantages is that the time needed for data collection is far less than what would be needed for either face-to-face interviews or a mailed survey. An additional advantage is that it provides a way to collect data, in a far more cost-effective manner than face-to-face interviewing. The major disadvantage to telephonic methodology is that consumers are eliminated from the survey if they have no access to a phone, or if the available phone number is inaccurate.

Survey data obtained from members may be for service(s) rendered in a different time than when the survey was conducted. Thus, it is difficult to assume that changes in data between quarters (actual counts and percentage) represent trends – good or bad. It is best to review year-to-date data and both member and provider demographics within a particular survey period to place the results into perspective.

## **G C/FST Program Member Assistance & Reporting**

### **1. Monthly Status & Problem Resolution**

Consistent with the requirements of DHS's Appendix L, BHSSBC, Community Care, and the C/FST Program Director communicate on a regular basis and meet monthly. The ongoing dialogue focuses on a review of program implementation, compliance with Appendix L, evolving findings, removing barriers, the member request for assistance process, and outreach to un-served or underserved member identification.

### **2. Member Request for Assistance**

In cooperation with BHSSBC, the Bedford-Somerset C/FST developed a referral mechanism to assist members that identify service specific issues and concerns during the interview process. If the member desires to have their concern or issue immediately addressed, the surveyor obtains the member's consent to release the information, completes a Member Request for Assistance form, reviews it with the C/FST Program Director, and forwards the form to BHSSBC.

The form requires a description of the reason the member is requesting assistance and a desired resolution/outcome description from the member. The request is checked as either urgent or non-urgent and the member is advised they can expect to be contacted within the next 30 days or sooner, depending on the nature of the issue.

### **Anonymous Member Concern(s)**

In addition to a Member Request for Assistance, the C/FST surveyor may submit an Anonymous Member Concern form to BHSSBC in cases where the surveyor believes BHSSBC should be made aware of the member's concern, but the member declined to release their contact information.

**Critical Incident Reporting**

It is the responsibility of the C/FST surveyor to report any unusual incident that occurs during the interview process. This includes awareness of abuse or alleged abuse of a member, seclusion, restraint, alleged medication errors, or talk of suicide.

**3. Confidentiality, Consent and Protection of Participant Information**

There are several mechanisms in place to safeguard confidentiality and protection of participant information.

1. Potential participants are assured of the confidentiality of their opinions.
2. Potential participants are also assured their opinions will not negatively affect the services they are currently receiving.
3. Individuals who indicated they did not wish to participate had their names or the name(s) of their child removed from the list of potential participants and were not contacted again.
4. Everyone contacted via telephone received another explanation of the survey during the survey introduction and were given another opportunity to opt in or out of participation.
5. Employee Confidentiality Statements are completed annually, and prior to any interviews/surveys conducted on behalf of the Center for Behavioral Health Data Research, Inc., and Bedford-Somerset HealthChoices.
6. Policies and practices for the storage, access, and disposal of participant records are designed to protect personal information and maintain confidentiality.

The oversight and monitoring of interviewers and calls are in accordance with approved protocols and are implemented in collaboration with CBHDR and BHSSBC.