

Lackawanna/Susquehanna/Luzerne/Wyoming Counties
Child Partial Hospitalization
Annual Report
July 2019-June 2020

Prepared for
Northeast Behavioral Health Care Consortium
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Introduction

The HealthChoices Program, overseen by the Department of Public Welfare's Office of Mental Health and Substance Abuse Services, has been implemented to ensure that Medical Assistance recipients receive quality care and timely access to mental health and/or drug and alcohol services. The goal of the Advocacy Alliance's (TAA) Consumer and Family Satisfaction Team (CFST), in keeping with the intent of the HealthChoices Program, is to ensure early identification and resolution of problems related to service access, timeliness of service delivery, and appropriateness of services and treatment outcomes. The CFST also wants to ensure that this is accomplished through a process that holds respect, dignity, and hopefulness as integral to the overall provision of services.

The CFST is comprised of consumers of mental health and/or substance abuse services, persons in Recovery or family members, and family members of children and adolescents with serious emotional disturbances and/or substance abuse disorders. The CFST is dedicated to the belief that individuals' and families' Recovery and Resiliency processes are directly related to their satisfaction with the services they receive. The CFST gathers information through face-to-face, telephonic or focus group discussions with adult and older adolescent Members and/or family members of children and adolescent Members receiving mental health and/or substance abuse services through Community Care Behavioral Health Organization (CCBHO).

Following the Department of Public Welfare's Appendix L, guidelines for consumer/family satisfaction teams and member satisfaction surveys, the information gathered by the CFST is used to make recommendations for system improvements and includes a feedback loop that informs service providers how services can effectively support Recovery for adults and Resiliency in children and adolescents.

Process

CFST produces provider specific/level of care specific quarterly and annual reports. On quarterly basis, providers receive reports which include responses for each question and a cumulative total that includes all provider responses for the specific level of care. Quarterly, CFST continues to color code reports for providers who have 10 or more surveys completed with a specific level of care. Red indicates that individuals expressed 79% or less level of satisfaction, yellow indicates that individuals expressed 80%-85% level of satisfaction, and green indicates 86%-100% level of satisfaction.

Annual reports are produced at the end of the contract year and include the results of all of the surveys that were completed from July 2019 through June 2020. For Child Partial Hospitalization services there were 3 providers and 27 surveys completed. Annual reports include provider specific satisfaction levels and cumulative network satisfaction levels for each section of the survey tool. If responses to a section fall below 80% level of satisfaction, the report will include the provider's results for all questions of that section of the survey tool. Annually, CFST continues to color code reports. Red indicates individuals expressed 79% or less satisfaction, yellow indicates individuals expressed 80%-85% level of satisfaction, and green indicates 86%-100% level of satisfaction. The CFST will meet with providers annually to review report findings, discuss positive results, and opportunities for improvement.

Demographics

Please check the county you live in.				
Lackawanna	Luzerne	Susquehanna	Wyoming	Total
8	18	1	0	27

What is your relationship with the child receiving services?					
Child/Adolescent	Parent/Guardian	Foster Parent	Caseworker	Grandparent	Total
24	3	0	0	0	27

Your child's gender is:		
Male	Female	Total
16	11	27

How old is the child receiving services?					
3-6 yrs	7-9 yrs	10-13 yrs	14-17 yrs	18-21 yrs	Total
0	1	3	22	1	27

How would you identify your racial background?						
Caucasian/White	African American	Latino/Hispanic	Asian	Native American	Other	Total
17	4	2	1	0	3	27

Length of time receiving current services.						
0-5 Months	6-12 Months	1-3 Years	4-6 years	7-9 Years	10+ Years	Total
5	14	7	1	0	0	27

Survey Results

2019-2020 NBHCC Child Satisfaction Trends	Total for All Providers of Partial Hospitalization Services
Behavioral Health Services	N/A*
Treatment Staff	90%
Cultural Competency	100%
Involvement with Treatment and Services	84%
Empowerment	82%
Interagency Team Meetings	83%
General Satisfaction	89%
Satisfaction with Partial Hospitalization Services	92%

*No one contacted CCBH.

Treatment Outcomes

How did you first learn about Partial Hospitalization programs? If other, please list:

- Mom. (2)

Prior to Partial Hospitalization program, if you/your child received other services, please list:

- Crisis.
- Hope.
- Inpatient. (2)
- Community School Based Behavioral Health. (3)
- Drug & Alcohol Outpatient.

What do you like about your services?

- I like the teachers. I like the activities that we do.
- Food is good, chocolate milk.
- Staff are like my family and when I was suicidal, they talked to me. I give the staff a 10 out of 10! They are great!
- The staff are empathetic. They are relatable. Teachers are supportive. The food is great!
- I like that I'm close to other services. I like the staff.
- The staff is very sweet. They say hi to everyone in the morning. I've met the best teacher I've ever had, [teacher]. Very genuine and caring to all the students. Made good friends. here.
- They understand my issues. Try to help me with my problems. I get to be myself here.
- I like that there are less people. I like that there is not a lot of homework.
- Put on medications, able to focus, attaining good grades.
- Teachers, food, gym.
- Everything! The services went above and beyond what I was described. They did more to help than I thought.
- They are really nice. I like the staff! I can always talk to them. They are really nice to every student.
- It's really nice here. Much better than my old school.
- Everything.
- They understand me and help me with situations.
- Best thing is I can call at any time if I have anything to ask about or a problem going on at any time. Yes, I feel good about the program!
- I like that they are hands on with my son. Everything is going smoothly with my son.
- My son and I feel like he is really going to really benefit from the program.

- They are very individualized to each of us. Meet us where we are at. They challenge me to work on things I need to work on. Overall, I like the program.
- There is a lot of one on one. I like that I'm able to socialize with people in a small group.
- I enjoy the staff.
- The schoolwork is easier. I like that there is a therapist here always. Someone to talk to. It's like a little family but in school.

- I can ask to leave the classroom to talk to my therapist. I really like my therapist.
- The teachers and the prize cabinet. I like that we get leave earlier than the rest of the school.
- It's like family here! They take care of us. It's a smaller classroom and we are all very close. It's therapeutic.
- I like that we have a long gym class.

What do you dislike about your services?

- The program itself, wish it was set up different.
- How loud it can get.
- The education. I'm not learning new things. I'm learning things I learned in 6th grade. I'm in tenth grade now. Some of the rules of the program.
- I dislike some of my classmates!
- Screaming from other peers. Younger kids classrooms are very noisy.
- I don't like being in the partial program.
- The food. The boy's bathrooms stink.
- Other kids
- Temperature in rooms are either cold or too hot. More challenges regarding education. Some of the work I've already done before.
- Some of the rules are too strict. Example no hot beverages in the room. More strict than other classrooms.

- I dislike the point system. I wish it would be more confidential. I know it's a classroom policy not partial, but I still don't like how the point system works.
- I wish I could learn higher level grade work instead of the whole class learning the same thing. The cockroaches in the school.
- The cockroaches. They are in the hallway and bathrooms.
- I don't like that the school has cockroaches.
- Not being able to participant in school functions like pep rallies.
- The boy's bathrooms by the lunchroom are gross. I like the bathroom in the partial program.

Is there anything else that you would like to say about your services?

- This place is nice! I've made friends here!
- We need more music therapy. Once a week isn't enough!
- Fine with services.
- More activities like real school, more gym, more art therapy and music therapy.
- It's good.
- I really like the program.
- So far things are going really well.
- I really like staff! Everyone is very helpful!
- It's helpful for me.
- New chairs, the current chairs are too low to the ground. Get rid of cockroaches.
- It's a good program! It's helping me. Regular school isn't for me, partial is good for me. I like the therapeutic aspect of the program.

Question	Face-to-Face	Telephone	Mail	Total
Survey completed by:	24	3	0	27