

Lackawanna/Susquehanna/Luzerne/Wyoming Counties  
Intensive Behavioral Health Services  
Annual Report  
January 2025 - December 2025

Prepared for  
Northeast Behavioral Health Care Consortium  
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## **Introduction**

The Health Choices 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 Health Choices 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 a 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 January 2025 through December 2025. Annual reports include providing 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

Providers				
Children's Service Center of Wyoming Valley	Friendship House	Northeast Counseling Services	Matrix	Total
16	9	14	11	50

Please check the county you live in.				
Lackawanna	Luzerne	Susquehanna	Wyoming	Total
16	32	0	2	50

What is your relationship with the child receiving services?					
Child/Adolescent	Parent/Guardian	Foster Parent	Caseworker	Grandparent	Total
1	46	0	0	3	50

How old is the child receiving services?					
3-6 yrs	7-9 yrs	10-13 yrs	14-17 yrs	18-21 yrs	Total
4	14	19	13	0	50

How would you identify your racial background?							
Caucasian/White	African American	Latino/Hispanic	Asian	Native American	Bi-Racial	Other	Total
38	0	3	1	0	8	0	50

Length of time receiving current services.						
0-5 Months	6-12 Months	1-3 Years	4-6 years	7-9 Years	10+ Years	Total
3	4	36	7	0	0	50

Have you been interviewed by C/FST before?		
Yes	No	Total
0	50	50

## Survey Results

2025 NBHCC Child Satisfaction Trends	Total for All Providers of Intensive Behavioral Health Services
Behavioral Health Services	50%
Treatment Staff	100%
Cultural Competency	100%
Involvement with Treatment and Services	99%
Empowerment	77%
Interagency Team Meetings	95%
General Satisfaction	100%
Social Determinants of Health	91%
Satisfaction with Intensive Behavioral Health Services	92%

Color	Definition
	Individuals expressing 79% or less level of satisfaction.
	Individuals expressing 80%-85% level of satisfaction.
	Individuals expressing 86%-100% level of satisfaction.

### Behavioral Health Services

Questions	Yes	Unsure	No	N/A	Total
Have you/your child received a Member Handbook?	26	19	5	0	50
If you/your child received a member handbook, have you read the member handbook or has someone read it to you?	24	2	12	12	50
Are you/your child aware of your rights and responsibilities under Community Care Behavioral Health?	42	5	3	0	50
Are you/your child aware of your/your child's right to choose where and what services you want to receive?	46	2	2	0	50
Are you/your child aware of the complaint and grievance process through Community Care Behavioral Health?	38	8	4	0	50
In the last six months, have you/your child called Community Care Behavioral Health for information about services?	9	0	41	0	50

Questions	Satisfied	Neutral	Dissatisfied	Didn't Answer	N/A	Total
If you called Community Care Behavioral Health, how satisfied were you with your contact?	1	2	1	0	46	50

## Empowerment

Questions	Yes	Unsure	No	Didn't Answer	Total
Are you aware of your/your child's/adolescent's rights regarding the services you receive from this provider?	46	4	0	0	50
Are your/your child's/adolescent's treatment goals stated in your/your child's/adolescent's own words?	31	18	1	0	50
Do you know how to make a complaint and where to direct your/your child's/adolescent's concerns?	47	3	0	0	50
If you/your child/adolescent are/is taking medications for mental health or drug and alcohol difficulties, were you told about the side effects?	41	1	5	3	50
Have you/your child/adolescent been informed about additional services that may be helpful?	42	4	4	0	50
Have you/your child/adolescent been informed about support groups within the community?	23	10	15	2	50
Are you familiar with Child/Adolescent Service System (CASSP) Principles?	35	9	5	1	50

## Treatment Outcomes

### What do you like about your services?

- Excellent service.
- The TSS worker is fantastic.
- The attention to details and meeting my daughter's specific needs.
- The whole team seem to communicate with each other.
- Was a great service.
- The whole approach just makes sense.
- Treatment team is outstanding. She is doing so much better than the last few years,
- The therapist has been a gift.
- They were absolutely wonderful. My son loved going and was very comfortable.
- He's doing better than last year at this time. Still working on his attitude.
- He's doing great at home now and better in school.
- They have helped my child express her anger and frustration.
- Never trouble with appointments. Good communication. Respectful. Very flexible.
- Consistent, Mobile Therapist is excellent.
- They are accommodating to his needs and certain moods. They are patient with him.
- His therapist understands his needs.
- Needs being met. The team is so very attentive. He responds to hands on therapy. The therapist is phenomenal.
- I can easily reach the treatment team by phone.
- The people are very honest, and they keep him as an individual. They don't compare.
- I really like the therapists.
- I've noticed a big change in behavior.
- Very grateful they give me tips and advice for her to succeed.
- The personal attention from all the staff. It feels like they really care.
- It seems to be helping. They (child) are really turning a corner with school.
- The whole staff is patient and kind.
- The collaboration of services is usually pretty easy. I can get in touch with them.
- I think they do a great job with his behaviors, and he is really coming along fine, once he got settled.
- The service is incredible. Everyone from the person who answers the phone to the doctor. We are totally respectful of my mental illness and recovery.
- It was a huge help at a time when we really needed it.

- I like that they're working on his ADHD, I think it's helping but it's still slow going.
- The treatment team is amazing and competent.

- The whole team approach is very helpful. I can get in touch with them very easily.
- I like the team approach.

**What do you dislike about your services?**

- Setting up meeting with the school can be tough.
- It took a while to see the psychiatrist, long enough that I started looking elsewhere.
- We are pretty happy without complaints.
- Organizing a meeting can be a complicated nightmare.
- Inconsistency with staffing.
- They were short-staffed so sometimes with call offs he couldn't go.
- I don't mind medication for my child, but not like five pills.
- More consistency with BHT's. They are short staffed.

- Short staffed - New BHT.
- Constant change and turnover inconsistencies.
- Inconsistency with staffing.
- It took so long to get this far. I almost just quit trying other providers.
- Because he talks too much.
- Scheduling a meeting is tough. It's hard to get myself and child there when everyone wants to meet.
- Staff turnover. Just when you get to know and like someone they leave.
- The CASSP principles are news to me. Maybe they just called the meeting by another name.
- The team meetings are hard to schedule.

**If you could improve anything about your services what would it be?**

- No complaints. They're (treatment team) doing a great job.
- I wish I had found services for my other kid.
- Maybe a phone chain or an easier way to leave messages.
- Not receiving the hours he is approved for.
- More busses for transportation to and from.
- Arranging those meetings is a nightmare.
- They're really good at meeting my kids where they're at. We really like them.
- He needs more hours in the home.

- Don't receive the hours he is approved for.
- I would improve communication between me and the treatment team. Leaving message after message gets old.
- Feedback on how he's doing.
- No improvements. They don't have to do a thing to be great. Just keep it up.
- More time with the ITS Staff.
- Better communication.
- Coordinating team meetings and getting everyone in one place.

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

- Satisfied with service.
- Overall, I am satisfied and happy.
- Very happy with treatment.
- It really made a difference in her future I think.
- Generally very satisfied.
- Overall Satisfied. (4)
- Everyone was very understanding of his need's.
- Otherwise satisfied.
- He likes them.
- Very satisfied overall.
- They have been amazing. So grateful.
- Wish I had looked into IBHS sooner.
- Satisfied with program.
- They do a great job. Very professional.
- Very happy with staff.
- It has been a big help. My child is doing better than he has in years.
- I would recommend this provider.
- Generally satisfied with treatment.
- I'd recommend them to anyone.
- They do a great job. (2)

<b>Question</b>	<b>Face-to-Face</b>	<b>Telephone</b>	<b>Mail</b>	<b>Total</b>
Survey completed by:	1	49	0	50