FAMILY EMPOWERMENT SATISFACTION TEAM (FEST)
MONTGOMERY COUNTY
2009 ANNUAL REPORT

SUMMARY OF SURVEYS AND ACTIVITIES FOR THE 2009 CALENDAR YEAR

FEST Family Advocates
Martha Hochschwender
Katharine Penzo

William England, Director
Family and Youth Division

Submitted to Montgomery County Behavioral Health
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Family Empowerment Satisfaction Team (FEST)

A program of the

Mental Health Association of Southeastern Pennsylvania
Family and Youth Division

William England, Division Director

Family Empowerment Satisfaction Team (FEST) Montgomery County

Family Advocates

Martha Hochschwender
Katharine Penzo

With Support from

James Sheridan
Jeanette Cord

FEST Montgomery County would like to thank all youth, parents, and caregivers who participated in the FEST 2009 projects and FEST Delaware County, Magellan Behavioral Health, Montgomery County BH/DD Quality Management and Children’s Services, and other stakeholders for their input and feedback.
The Mental Health Association of Southeastern Pennsylvania (MHASP) is an independent, nonprofit organization founded in 1951 as an affiliate of the National Mental Health Association, now known as Mental Health America. Rooted in advocating for social and political change in the treatment of the mentally ill, the agency continues to be at the forefront of the movement to reshape the mental health system. Throughout its history, the MHASP has played an important role in changing mental health policy at local, state, and national levels. Its programs support resiliency, recovery and community integration for children and adults with mental illnesses and behavioral health disorders.

The Family Empowerment Satisfaction Team (FEST), a program of MHASP’s Family and Youth Division, advocates for systems change on behalf of families and youth receiving county behavioral health services. By working together with parents and caregivers of children and adolescents with behavioral health challenges, FEST helps to facilitate communication between the families and the behavioral health system about accessibility, appropriateness and effectiveness of services, and family satisfaction with services. The goal is to work with all stakeholders in strengthening a resiliency and recovery orientation to the delivery of behavioral health services and supports provided to families and youth at the county level.

FEST Montgomery County was formed in November 2005 as the county’s Family Satisfaction Team (FST) in compliance with Pennsylvania guidelines for mandated county Consumer/Family Satisfaction Teams. It is one of only three free-standing FSTs in the state and focuses only on children’s behavioral health services. Since its inception, FEST has been contracted by Montgomery County Behavioral Health to conduct outreach to secure information and input from family stakeholders: youth and parent/caregivers of children and adolescents, who are receiving or recently received behavioral health services in the county. FEST employs the strengths-based approach of Appreciative Inquiry¹ in its questionnaires, interviews and focus groups to ask families and youth about their experiences with services - what worked and what can be improved. The findings with recommendations are reported to Montgomery County Behavioral Health to support its continuous quality improvement efforts. The goal is to create services and supports that are driven by the needs of youth and families.

SURVEYS AND REPORTS

During 2009, FEST completed three satisfaction surveys requested by Montgomery County Behavioral Health. The surveys were designed to obtain input from families and youth on their experiences with the following behavioral health services: youth inpatient hospitalization; summer therapeutic activities program (STAP) camps; and the interagency team meeting (ITM) process for accessing children's behavioral health services. Evaluative studies on each of these services were conducted using survey questionnaires of parent/caregivers and follow-up phone interviews. Where appropriate, youth with behavioral health challenges were surveyed using questionnaires. Brief summaries of each project are included in this Annual Report. Comprehensive reviews of the studies are available in the individual project reports submitted to Montgomery County Behavioral Health during 2009.

2009 YOUTH INPATIENT STUDY

Montgomery County Behavioral Health enlisted FEST to conduct an independent satisfaction survey of county youth and their families who received inpatient services on the children's or adolescent units at Brooke Glen Behavioral Hospital (Brooke Glen) or The Horsham Clinic (Horsham) between January and June of 2009. The sample included parent/caregivers of youth as well as youth ages 14 to 18 with Magellan Insurance.

Methods
FEST created a parent/caregiver survey with 29 questions and a survey for youth ages 14 - 18 with 20 questions that asked about satisfaction in the areas of Treatment Decisions, Staff Communication, Staff Sensitivity and Discharge Planning. FEST adapted state-mandated and county-required questions to make them applicable to youth and their families. A strengths-based approach was incorporated in all quantitative multiple choice questions and qualitative open-ended questions.

FEST mailed surveys to families within one week after receiving discharge data from the county through Magellan. Mailings to 81 parent/caregivers included a questionnaire, cover letter, FEST flyer, MHASP Family & Youth Division brochure, and a return envelope. 34 parent/caregivers with youth ages 13 and under also received a five-question survey for their child. FEST made follow-up phone calls to parents to increase the response rate and obtain additional qualitative data. All youth ages 14-18 were mailed surveys separate from those of their parents. Six youth were interviewed by FEST during their inpatient stay.

Results & Notable Findings
Survey response rate was over 15%.

<table>
<thead>
<tr>
<th>Surveys completed</th>
<th>N =</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Parent/caregivers</td>
<td>19</td>
</tr>
<tr>
<td>- Youth ages 14 - 18</td>
<td>14</td>
</tr>
<tr>
<td>- Youth ages 13 &amp; under</td>
<td>6</td>
</tr>
</tbody>
</table>

Data analysis - agreement of 80% or higher is considered positive, 60% to 79% is neutral, and 59% and below is negative.
Overall, parent/caregivers reported the lowest satisfaction in the area of Staff Sensitivity and the highest satisfaction in the area of Discharge Planning. When reviewing the data set, specific provider strengths as well as areas of concern were noted.

**Provider Strengths** - providers are doing well in
- Using language that parents understand
- Including parents in discharge planning
- Informing families about how and where to access after-care supports for their child

Parent/caregivers also reported higher agreement (74%) to statements
- I was invited to participate in treatment planning meetings for my child
- My child’s medications were discussed with me

Select qualitative results - Reasons for satisfaction reported by parent-caregivers.

| Staff "called when child wanted to talk to her" | "Feel that experience contributed to child’s improved behavior." | "He, father, would not let anyone work with his child without him being involved" | "Staff on floor, social workers very good" | "Happy with staff" |

**Areas of Concern** - parent/caregivers indicated improvement is needed in
- Recognizing the importance of parents in their child’s inpatient treatment
- Pointing out what the child and family does well
- Staff being available to speak to parents when they call with concerns about child’s treatment
- Providing the appropriate care to meet child’s needs
- Showing concern for the whole family, not just child receiving services

| "Treated her diagnosis as oppositional & punished her for things she couldn’t help." | "Never given enough time to secure behavioral changes - only rote process" | "Discharge was not fully communicated" | "Little communication, doctor did not call" | "Lack of "family meetings" | "Program they have is one size fits all" |

Select qualitative results - Areas for improvement based on parent/caregiver input.

Youth responses to questions about relationship with staff tended to have positive response rates of over 70%. Questions about treatment planning and discharge preparation revealed that youth have low satisfaction with their ability to be decision-makers with regards to their own treatment. Adolescents tended to seek therapeutic activities that required peer interaction, such as ‘groups.’ Youth of all ages, and their parent/caregivers expressed a need for more communication about medication, both in terms of what is being prescribed and how it will affect the child.

The 2009 Inpatient Survey project has allowed FEST to evaluate the current model of the study and consider improvements that can be made in the future. FEST will continue to try new methods to increase the response rate from parent/caregivers and youth.

**2009 SUMMER THERAPEUTIC ACTIVITIES PROGRAM (STAP) SURVEY**

Summer therapeutic activities programs (STAP) are designed to provide a supportive environment for children with Autism Spectrum Disorders (ASD), and emotional and/or behavioral health challenges during the summer months. Child Guidance Resource Centers (CGRC) and Central Montgomery Mental Health & Mental Retardation Center (Central) offer STAP camps for Montgomery County youth. These programs combine supportive and therapeutic services with
traditional summer camp activities. In 2009, CGRC ran two four-week sessions, and Central offered STAP during the month of August. Montgomery County Behavioral Health requested that the Family Empowerment Satisfaction Team (FEST) conduct an independent survey of families with children attending CGRC’s and Central’s STAP camps to evaluate family satisfaction with the programs. FEST met with both Child Guidance and Central prior to the start of STAP camp to explain the survey they would be conducting.

Parent/caregivers of Montgomery County youth attending STAP through Magellan Insurance were asked to complete this survey at the end of the STAP session. Because FEST was unable to obtain contact information for attendees of Central’s program, only parent/caregivers whose child attended STAP offered by CGRC are represented in this sample.

**Methods**
The STAP survey questionnaire was comprised of 21 quantitative, multiple-choice questions and two qualitative, open-ended questions focusing on issues of Communication, Staff Sensitivity and Transportation provided to and from STAP. FEST mailed 39 survey questionnaires along with a cover letter, FEST flyer, MHASP Family & Youth Division Brochure and a return envelope to parent/caregivers within one week of receiving contact information from the county through Magellan. Three weeks following the mailing, FEST made follow-up phone calls to parent/caregivers to increase the response rate. Altogether 11 parent/caregivers completed surveys, representing a response rate of 28%.

**Results & Notable Findings**
Because the sample size represented the feedback of only 11 parent/caregivers, FEST was cautious when analyzing the data. No trends were noted in the areas of communication, staff sensitivity or transportation. Result highlights include high parent/caregiver satisfaction with STAP, with most questions eliciting positive response rates of 90% or higher, with some having a positive response from 100% of participants. In qualitative responses, parent/caregivers also revealed high satisfaction with feedback such as, “My son was happy to go to camp everyday. He liked it.” and “We are very grateful and satisfied with the STAP camp.” Parent/caregivers reported being satisfied with written communication by staff. Several parents felt more verbal communication was needed; such as the comment, “No voice to voice communication with staff.” Parent/caregiver feedback on both communication and staff sensitivity was very high overall.

In the past, there had been issues with the transportation provided by a separate county agency; this affected general satisfaction with STAP camp. The survey results indicate that satisfaction with the transportation has improved greatly. Parent/caregivers agreed with that the transportation was clean, safe and reliable. One parent/caregiver felt that “There seems to be a disparity and lack of communication between the transportation company and [CGRC]”, while a second respondent remarked that the “Driver is always on time, kind, reliable and friendly.”

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**2009 INTERAGENCY TEAM MEETING (ITM) STUDY**

For parents or caregivers of a child with a serious behavioral health disorder, behavioral health rehabilitation services (BHRS) is often a point of intake for accessing county services. As part of the authorization process, the Interagency Team Meeting (ITM) plays an important role in the subsequent delivery of services. In 2009, FEST conducted a survey to evaluate
family satisfaction with the ITM process, including preparation for the ITM, inclusion in all aspects of the meeting, and satisfaction with the meeting outcomes. Between April and September of 2009, parent/caregivers who recently completed an ITM for their child at one of the five designated agencies, were asked participate in this survey by completing a questionnaire.

Methods
FEST designed a questionnaire with 29 quantitative, multiple choice questions and three qualitative, open-ended questions asking parent/caregivers for their perspective of what worked well in the ITM process and what could be improved. FEST mailed the questionnaire, along with a cover letter, FEST flyer, division brochure and self-addressed stamped envelope to parent/caregivers within one week of receiving contact information from providers following an ITM for their child. Families were asked to return the questionnaire within 10 days. FEST mailed a total of 315 surveys before ending data collection at the end of September. FEST received 66 completed surveys, representing a response rate of over 20%.

Results & Notable Findings
Parent/caregiver satisfaction with the ITM process tended to be high. Over 90% of participants provided positive responses to the statement Overall I was satisfied with the ITM process. This is consistent with the qualitative response provided by one participant- "Everybody was on the same page. Great Team all the way around!"

Provider Strengths - providers are doing well in
- Scheduling meetings and responding to questions promptly
- Including parent/caregivers in many aspects of the ITM

Select qualitative results - Reasons for satisfaction reported by parent/caregivers.

"Timely responses to phone calls" * "Able to contact agency personnel easily - Flexible w/meeting times & able to make appointments quickly" * "Felt there was open communication & that my opinions & thoughts were heard." * "My child’s strengths were discussed"

Areas of Concern - parent/caregivers indicated improvement is needed in
- Providing better information about what to expect throughout each step of the ITM process
- Increasing family’s strengths and culture in treatment plans

Select qualitative results - Areas for improvement based on parent/caregiver input.

"This process was very confusing" * "I am not sure which one was the "ITM" meeting" * "Be sensitive in choosing words" * "Explaining process for approval in more detail" * "I feel that there should be more communication going on"

Overall, providers were successful in their interactions with parent/caregivers as conveyed in statements such as "This has been a very good experience" and "I am grateful for everything they are doing for my son." In the future, these providers can continue meeting the needs of the families, while expanding upon the identified areas for improvement.
Pennsylvania Performance Based Contracting Questions

FEST includes three state-mandated Performance-Based Contract (PBC) questions in every satisfaction survey it develops. Counties provide the data supplied by C/FSTs to the state annually. The information collected does not necessarily reflect the experience a person has (Table 1) presents the combined data collected from the FEST's 2009 surveys; inpatient, ITM and STAP. The total number of respondents is N= 110.

Table 1

A) In the last 12 months did you or your child have problems getting the help you need?

<table>
<thead>
<tr>
<th></th>
<th>Yes (always)</th>
<th>Sometimes</th>
<th>No (never)</th>
<th>No Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percentage</td>
<td>12% (13)</td>
<td>18% (20)</td>
<td>66% (73)</td>
<td>4% (4)</td>
</tr>
</tbody>
</table>

B) Were you and your child given the chance to make treatment decisions?

<table>
<thead>
<tr>
<th></th>
<th>Yes (always)</th>
<th>Sometimes</th>
<th>No (never)</th>
<th>No Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percentage</td>
<td>56% (61)</td>
<td>29% (32)</td>
<td>9% (10)</td>
<td>7% (7)</td>
</tr>
</tbody>
</table>

C) What effect has the treatment your family received had on the quality of your child’s life?

<table>
<thead>
<tr>
<th></th>
<th>Much better</th>
<th>A little better</th>
<th>About the same</th>
<th>A little worse</th>
<th>Much Worse</th>
<th>No Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percentage</td>
<td>34% (38)</td>
<td>32% (35)</td>
<td>20% (22)</td>
<td>1% (1)</td>
<td>0% (0)</td>
<td>14% (14)</td>
</tr>
</tbody>
</table>
OTHER PROJECTS AND ACTIVITIES

- FEST attended CSTAP Conference for Pennsylvania C/FST programs. FEST was able to connect with several other FST programs with a focus on families and youth, rather than families of adults receiving mental health services. The group agreed to continue to share ideas for enhancing the FST role in systems advocacy for families and youth. FEST Montgomery County and FEST Delaware County will take the lead in pursuing this project.

- FEST, along with Montgomery County Behavioral Health and Magellan, met with representatives from Brooke Glen Behavioral Hospital and The Horsham Clinic to ask for their input on ways to improve FEST’s ability to survey youth at the inpatient facilities. Concerns and procedures were discussed and all parties brainstormed ways to increase participation of parent/caregivers and youth in the 2010 Inpatient Survey.

- FEST member and Division Director met with Mark Salzer of the UPenn Collaborative for a consultation on improving FEST’s satisfaction surveys and reports to produce a greater impact. Subsequently, FEST was invited to give a presentation on its experience “working in the field” conducting evaluation research for empowerment to a graduate level evaluation research class at The University of Pennsylvania.

Collaborative Projects

Tri-county RTF Restraints Project
FEST Montgomery County continued working with FEST Delaware County and Voice and Vision on a Bucks County C/FST initiative to obtain youth and parent/caregiver perspective, as well as staff feedback, on the use of restraints and seclusion in residential treatment facilities used by the three surrounding counties. FEST assisted in facilitating focus groups, designing survey questions, and reviewing pilot questionnaires to suggest revisions.

Appendix L Revisions
FEST initiated a collaborative effort with five other county C/FSTs to submit appropriate children’s questions for adoption when state-mandated questions are rewritten during the process of revising Appendix L. FEST will continue advocating for full inclusion of youth and family concerns in the revision of C/FST guidelines.

RTF Providers’ Training
FEST represented family perspective in “Perspective on residential and Community - Based Treatment for Youth and Families” training for RTF providers

Other County Projects

Montgomery County Telesage
FEST will access the Telesage database to identify when county youth, who were discharged from an RTF, are scheduled to make the follow-up phone call to complete the Telesage survey. FEST will mail them a reminder, and when the data-base shows the call was made, FEST will mail them a gift card. No Montgomery County youth were entered in the database during 2009. This project will continue through 2010.

High Fidelity Wraparound Evaluator
FEST participated in county meetings for the development of a HiFi evaluator position for the pilot program in Montgomery County. FEST attended a Train-the-Trainer workshop which served as an introduction to the type of evaluations that would be required. Their county office asked FEST to take on the evaluator position. FEST created a position separate from its FST work to provide this service, to begin in 2010.

<table>
<thead>
<tr>
<th>County Meetings</th>
<th>Reports to County</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monthly Joint Quality Management meetings</td>
<td>2008 Annual Report</td>
</tr>
<tr>
<td>CPAC meetings - FEST project updates</td>
<td>Quarterly Activity Reports</td>
</tr>
<tr>
<td>Montgomery County Mental Health Luncheon</td>
<td>2009 Satisfaction Survey Reports</td>
</tr>
<tr>
<td>Participation in interview of MCO County</td>
<td>▪ Youth Inpatient</td>
</tr>
<tr>
<td>contract candidates</td>
<td>▪ Summer Therapeutic Activities Program</td>
</tr>
<tr>
<td></td>
<td>▪ Interagency Team Meeting (ITM)</td>
</tr>
</tbody>
</table>

Workgroup Participation

- Regional Mental Health Suicide Prevention Work Group - focusing on individuals receiving public mental health services
- RTF Restraints Reduction Regional Work Group held in Bucks County

Conferences Attended

- Our Collective Journeys, Recovery and Resiliency Conference - Montgomery County
- PCCY session - Starting Points for Rethinking Evaluation in Community Prevention Programs
- Consumer Satisfaction Team Alliance of Pennsylvania (CSTAP) Conference - From Challenge to Opportunity - the Journey Ahead

MHASP Required Meetings and Trainings

- Attended all MHASP mandatory Agency, Division and Program meetings
- New employee one day MHASP orientation training and on-the-job training
- Training to transform MHASP to a Recovery/Resiliency organization - 1st in series
- Sexual Harassment training

OUTREACH

FEST conducted outreach to members of the community, parents and caregivers, service providers, other mental/behavioral health advocacy groups, state- policy makers and students.

Community Events - (Vendors Table)

- Disease and Disability Resource Expo - hosted by Senator Rafferty and State Representative Michael Vereb
- Disability Resource Expo - hosted by State Representatives Thomas Murt and Bernie O’Neill
- Montgomery County 5th Annual Children’s Mental Health Awareness Day at Elmwood Park Zoo

Parents and Caregivers
Family to Family Steering Committee - Spoke to 15 meeting attendees: foster parents, families adopting children, OCY; and others promoting foster care and support services

PEAK (Parent Empowerment for Advocacy through Knowledge) program - spoke to 35 parents and caregivers attending classes in Lansdale and Willow Grove

Parent/caregiver referrals to Parents Involved Network (PIN) advocates

**Individual meetings to promote FEST**

- Director of CST of Montgomery County - Sandy Watson
- Director of Community Advocates of Montgomery County - Kathie Mitchell
- Marketing/ Community Relations - Child Guidance Resource Centers - Gerry Gonzalez

**FAMILY INPUT**

*Stakeholder Involvement*

FEST continued to solicit family and youth input into surveys. FEST engaged family members and other stakeholders in the development of tools (written questionnaires and interview questions) and implementation of FEST studies. Provider and county input also contributed to FEST’s planning and development of studies and tools.

*Family Feedback*

At times staff members of FEST engage in conversations with family members that are not part of a project we are undertaking but are related to satisfaction of families and youth with the behavioral health system. These interactions give personal meaning to the work being done by FEST, Montgomery County Behavioral Health, Magellan and providers as we listen and respond to family input into the behavioral health services provided in Montgomery County.

Each month FEST and the other programs of the Mental Health Association of Southeastern Pennsylvania submit an account of contact made with an individual or family member that has made a difference in the life of that person. In an effort to provide an accurate and rounded representation of FEST’s contact with family members during the course of our work, a few select narratives from this past year have been included in this 2009 Annual Report. For everyone involved in improving the behavioral health system, these accounts demonstrate What Works with the combined effort to “Make every voice count!”

**FEST Montgomery County - Selected Narratives From 2009**

A FEST advocate helped to ease a parent/caregiver’s fears about protecting her child after receiving a FEST satisfaction survey in the mail. She contacted FEST and spoke to an advocate expressing concern that the county was selling or otherwise distributing confidential information on her child. The FEST advocate explained to the parent that FEST has a contract with the county and that no unauthorized groups can access her child’s information via the county. This appeared to be a relief to the parent.

Family Empowerment Satisfaction Team (FEST) Montgomery County along with Parents Involved Network (PIN) and Trail Guides staff displayed information and resources at the Montgomery County Children’s Mental Health Awareness Day held at Elmwood Park Zoo in Norristown. In addition to talking to many parents about the program, FEST introduced
themselves to county providers of youth services, with many expressing interest in FEST’s work. Several providers indicated they would like FEST to survey their services in the future.

FEST Montgomery County has reached out to other programs in the Family and Youth Division in the county, discussing how the goals and activities of many programs align. Through this outreach, FEST was asked how to get services for children of participants in another division program and was able to make several referrals to PIN.

A FEST advocate took the phone call of a mother who asked to speak to someone about services for her child. After asking a few questions, the FEST member offered to transfer her to PIN. The mother asked if she could talk a little longer; she needed to talk to someone understanding. The mother expressed gratitude for the information on support groups and for affirmation of her child’s strengths.
APPENDIX A

FEST Model for Satisfaction Surveys
FEST MODEL FOR SATISFACTION SURVEYS
FEST's approach to conducting satisfaction surveys uses an Appreciative Inquiry model that is both multi-informant and multi-method. FEST involves stakeholders when developing survey tools (multi-informant), collects quantitative and qualitative data (multi-method), and employs a strengths-based (Appreciative Inquiry)\(^2\) approach in all its surveys (Figure 1).

Figure 1

Family Empowerment Satisfaction Team: Families & Youth Leading the Direction for a Change Approach to Family & Youth Evaluations of Services/Systems of Care

All methods can be done via different modalities – face-to-face, phone, written, web/chat. High preference is given to convenience for participants.

The following further describes the three key components of this model.

Family and Stakeholder Involvement - Families and other stakeholders are consulted throughout the development of the survey tools; questionnaires, interviews and discussion groups. Members of FEST include individuals with direct knowledge and experience with services. Experiential knowledge is emphasized in evaluation research for empowerment. Knowing the right questions to ask can effectively elicit feedback.

Quantitative and Qualitative Methods for collecting data complement one another and are employed to obtain the most complete picture of service strengths and areas for improvement.

Appreciative Inquiry strategies are incorporated in all FEST projects. FEST believes that the service system can best serve the needs of children, youth and families with behavioral health challenges by applying a strengths-based approach to system change as well as to individual or family change. Appreciative Inquiry is a well-established approach to organizational change that identifies and builds upon what is working well\(^3\).

By using this model, FEST interweaves data collected by quantitative and qualitative methods over time to achieve an increasingly enhanced view of services with the goal of empowering families to drive services to meet their needs.

\(^2\) Hammond