



# **Intensive Behavioral Health Services**



**Annual Quality Review  
July 1, 2021 – June 30, 2022**

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## Service Description

- On January 18, 2021, Intensive Behavioral Health Services (IBHS) regulations replaced the requirements for Behavioral Health Rehabilitation Services (BHRS) according to Pennsylvania Department of Human Services. IBHS currently provides individual services and evidence-based therapy.
- IBHS are provided for children and youth with serious emotional and behavioral support needs. Behavioral Consultants (BC) design and direct implementation of behavior medication plans. Mobile Therapists (MT) provide family and individual therapy. Behavioral Health Technicians (BHT) provide one-to-one interventions to assist children and youth in improving behavior, self-esteem, and social skills.
- Behavioral Consultant (BC) designs and directs the implementation of behavior modification plans. This is done in a collaborative effort with the treatment team and family.
- Mobile Therapy (MT) includes intensive treatment efforts that occur outside of an office setting. Methods of intervention include family therapy, collateral therapy, and individual therapy in the home, school, or other community setting. Additionally, behavior programming, parent training, and consultations with other community services are a part of the program design.
- Behavioral Health Technician (BHT) services include efforts to stabilize the child's functioning in the family, school, or community setting. Therapeutic efforts will focus on one-to-one intervention to improve behavior, improve control of anger, enhance self-esteem, and develop more productive social relationships. In addition, therapeutic interventions will include implementation and monitoring behavior modification programming.
- IBHS are delivered in the individual's natural environment such as their home, school, or community.

## Overview

- The Guidance Center operates under the mission of developing and providing comprehensive, quality mental health and substance use treatment, intellectual disability services, education, prevention, and community outreach services, guided by principles of least restricted care, cost effectiveness, accessibility, and responsiveness to individuals, families and communities served.
- The Guidance Center has the distinction of being a Certified Community Behavioral Health Clinic (CCBHC). The goal of CCBHC is to improve access to care, enhance service coordination, and improve service quality in order to reduce hospitalizations and inpatient facility use and to reduce suicide and suicide attempts.

CCBHC's are required to provide the following nine core services:

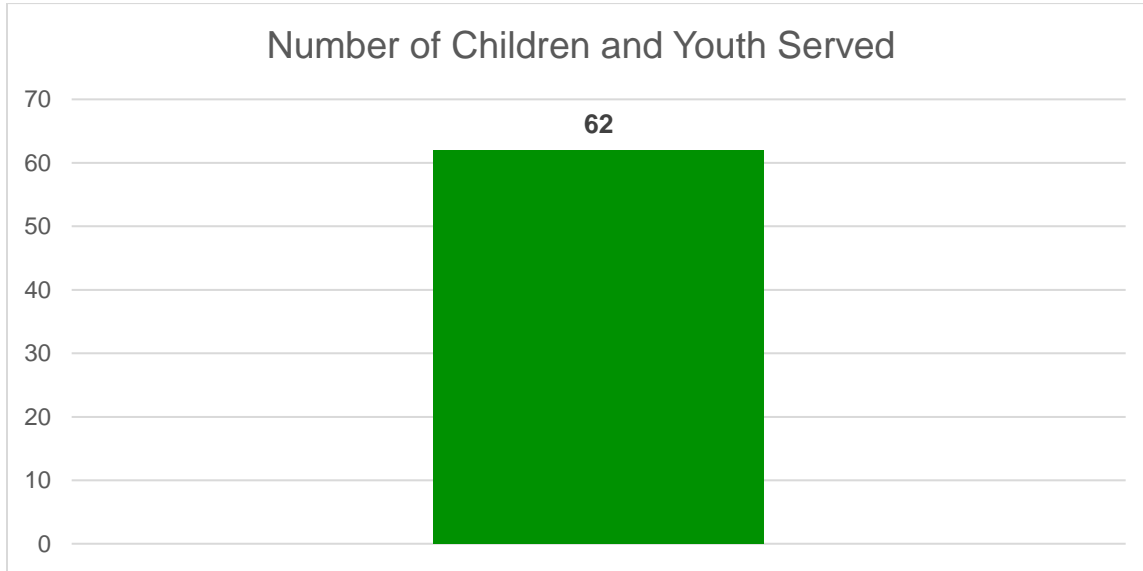
1. Crisis Services –available 24 hours a day, 7 days a week
2. Treatment Planning

3. Screening, Assessment, Diagnosis, & Risk Assessment
  4. Outpatient Mental Health & Substance Use Services
  5. Targeted Case Management
  6. Outpatient Primary Care Screening and Monitoring
  7. Community-Based Mental Health Care for Veterans
  8. Peer, Family Support & Counselor Services
  9. Psychiatric Rehabilitation Services
- The Guidance Center has continued to provide optimal service delivery within the Intensive Behavioral Health Services (IBHS) Program throughout the ongoing challenging times of the COVID-19 pandemic. As we maneuvered through the pandemic, our nation came to be in a stronger place with the utilization of tools such as vaccinations, boosters, and treatment. With these protective measures, there was reduction in illness severity, hospitalizations, and deaths related to COVID-19. Therefore, our agency provided more in-person sessions to the individuals served during this period of review. Additionally, we saw an increase in the individuals served participating in social activities. The Guidance Center continues to adhere to the CDC and State guidelines and will make accommodations to policies and procedures when necessary.
  - Quality Improvement plans are made based upon internal Compliance audit results and client feedback surveys to improve quality outcomes. Client feedback survey results provide necessary data to ensure The Guidance Center is delivering optimal care in IBHS. IBHS clients were offered feedback surveys using a HIPAA compliant platform or a written form. Data was extracted and analyzed based on quality performance. Survey results are shared with the Program Director, Senior Management, Executive Director, and the Agency Board of Directors.
  - The Guidance Center is a designated North Central Trauma Informed Care Center through the Behavioral Health Alliance of Rural Pennsylvania (BHARP) for expertise in trauma informed care practices, specific treatment modalities, supervision, and program management.
  - Data for this Quality Report is from July 1, 2021, through June 30, 2022.

## Demographics

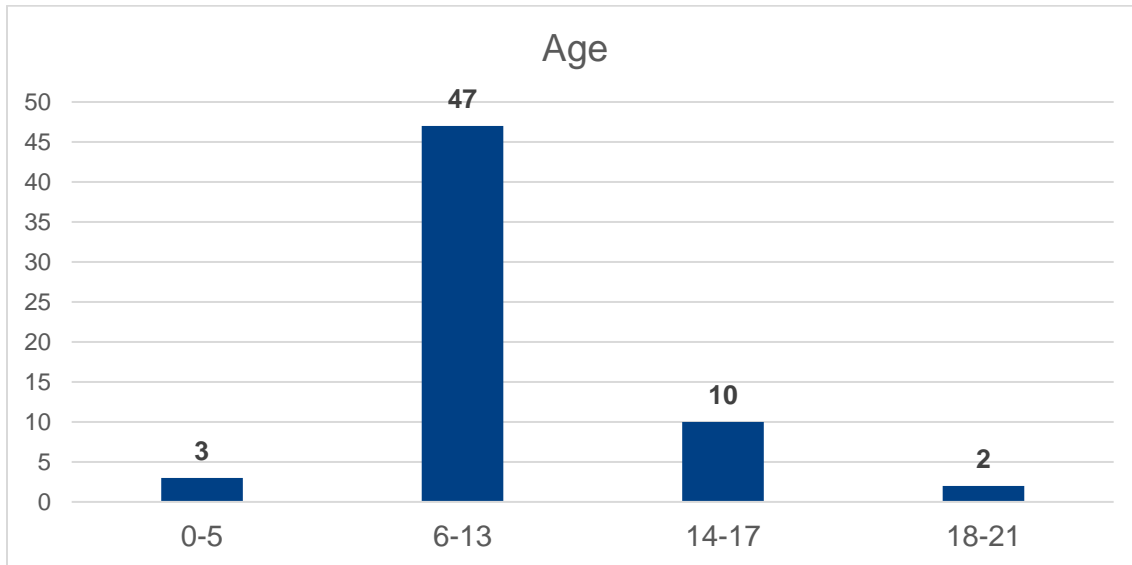
### Number of Children and Youth Served

During this review, there were 62 children and youth served in the IBHS Program.



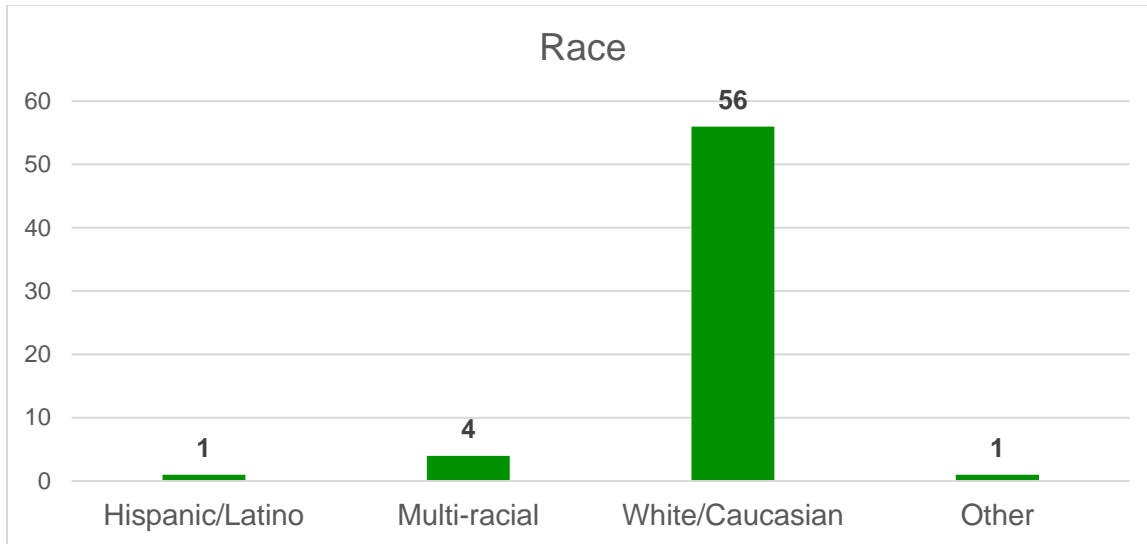
### Age

Majority of individuals in the program are between 6 and 13 years. The following table demonstrates the age breakdown.



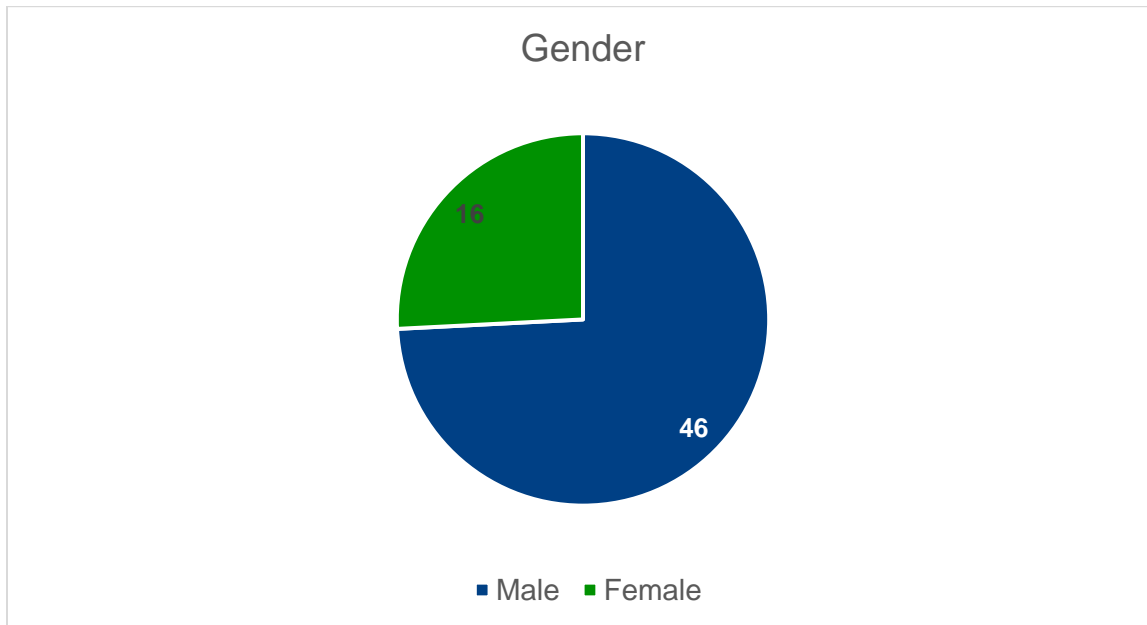
## Race

Majority of children and youth served in the program are White/Caucasian. The graph below indicates the number of children and youth and their race.



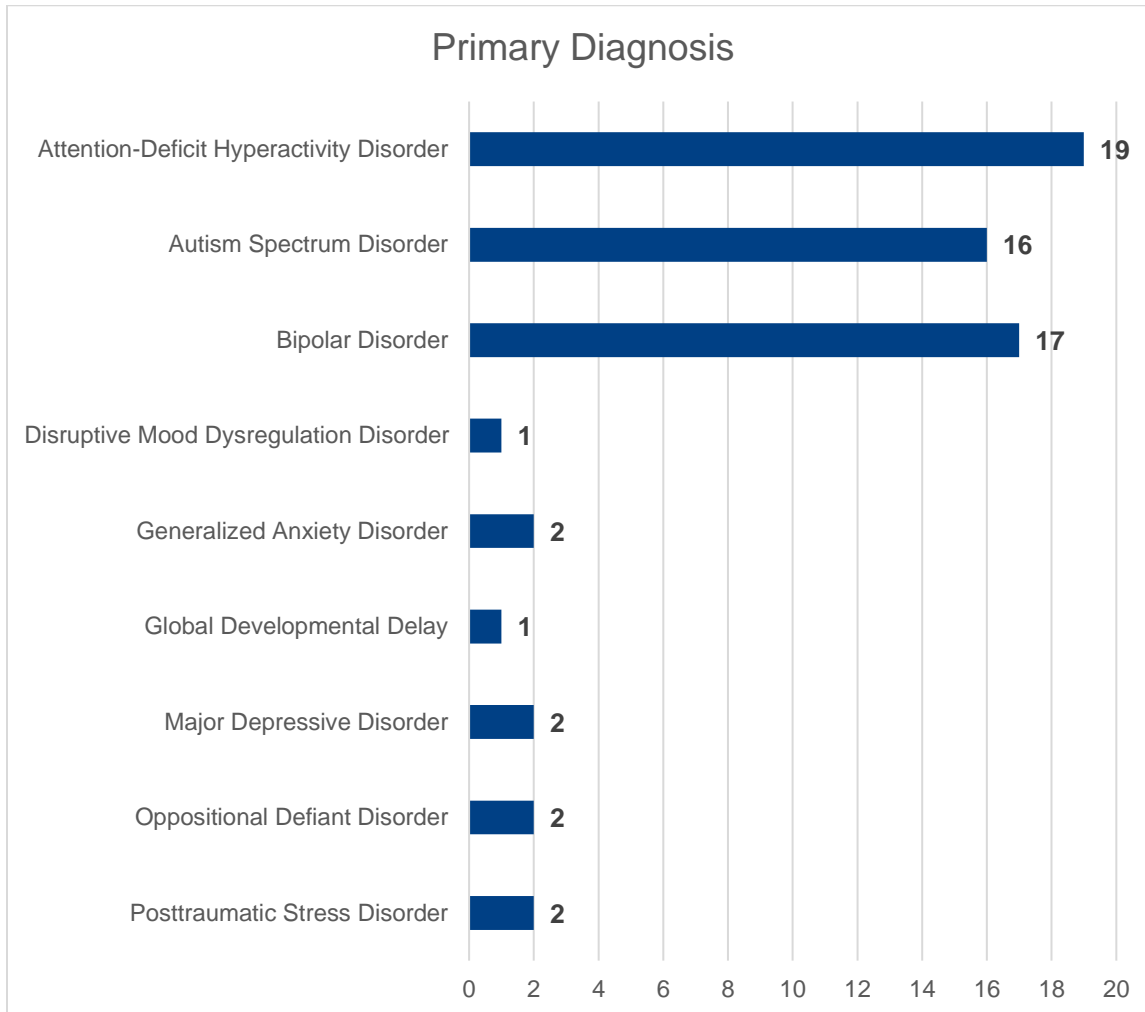
## Gender

A greater number of males have been served in IBHS. There were 16 females and 46 males during the period of review.



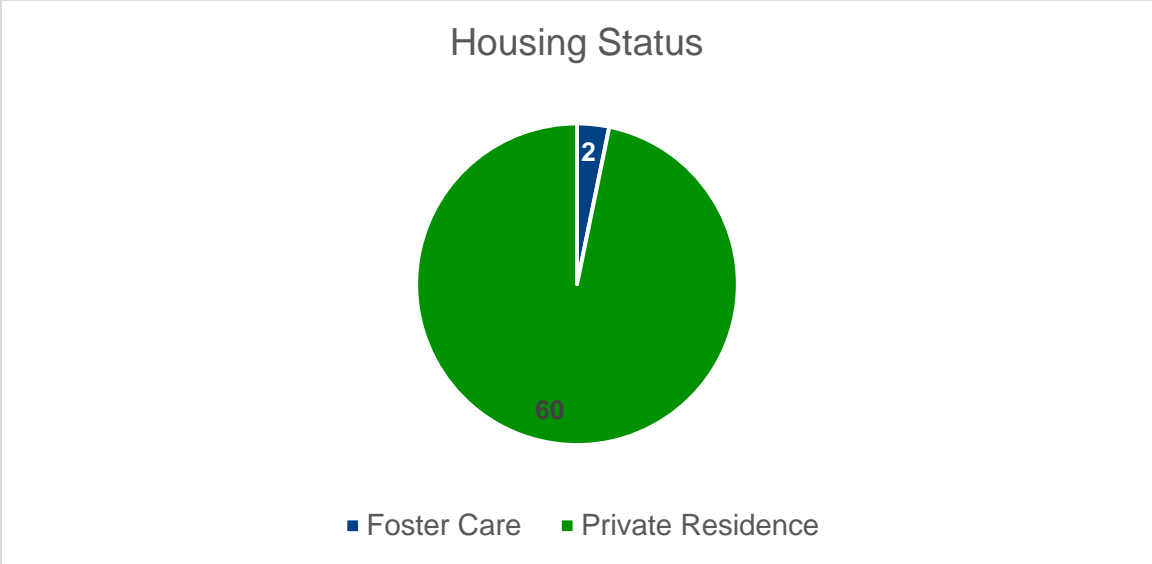
## Primary Diagnosis

The primary diagnosis of individuals enrolled in IBHS is Attention Deficit/Hyperactivity Disorder with 19 children and youth. Bipolar Disorder was next with 17 children and youth. A complete breakdown of the primary diagnoses is found below.



## Current Housing Status

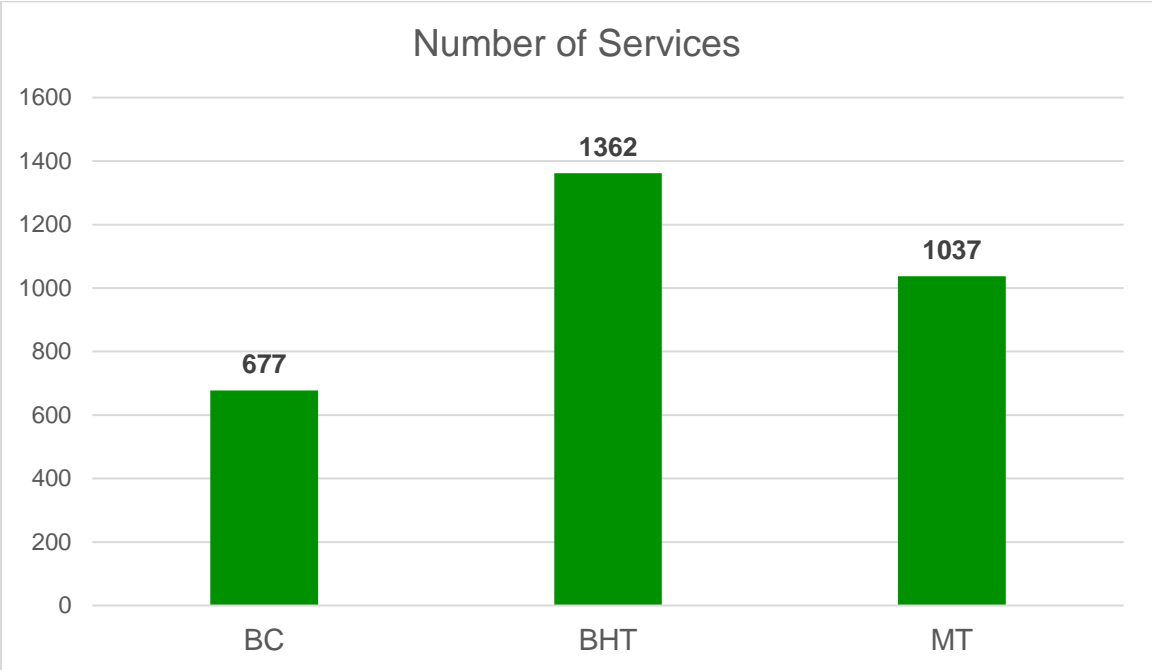
Majority of the children and youth served in the program live in a private residence. In addition, there were 2 children and youth served in the program who live in Foster Care.



## Service Data

### Number of Services

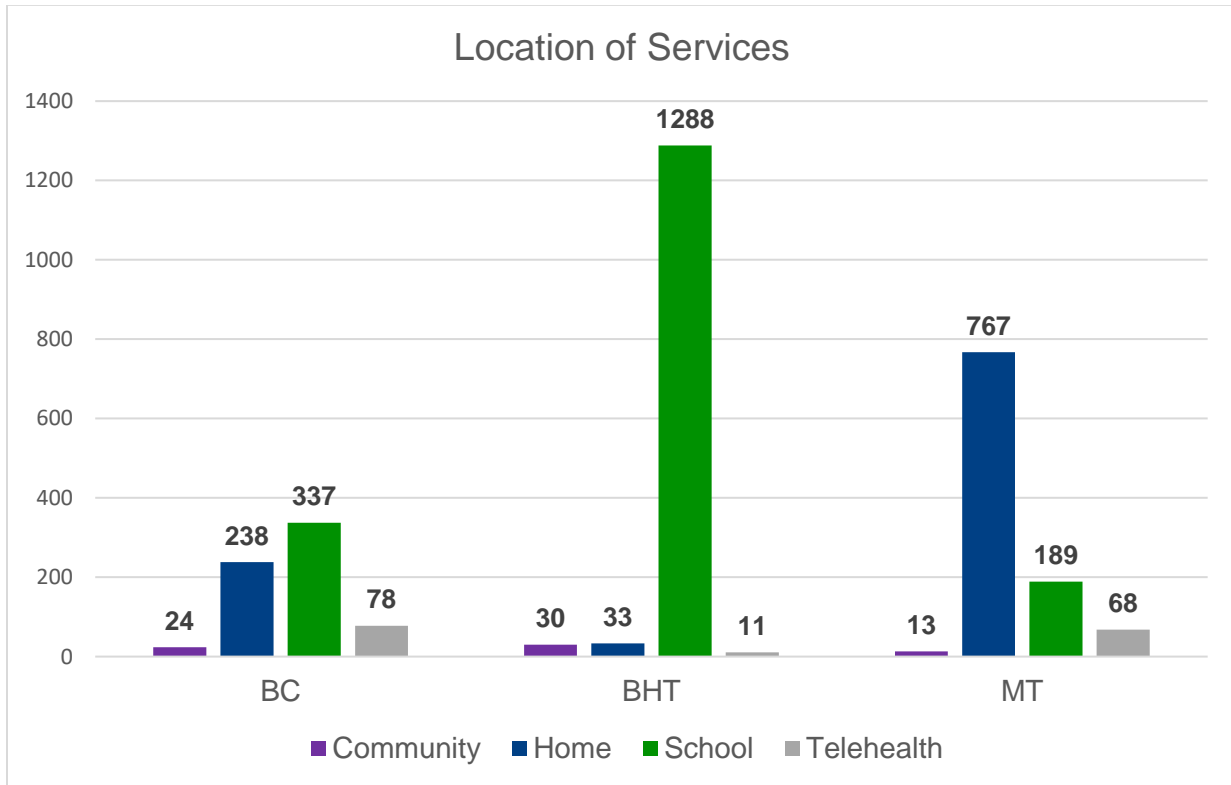
There were 3,076 services delivered during this period of review. Services are delivered by a Behavior Consultant (BC), a Mobile Therapist (MT), or a Behavioral Health Technician (BHT). The graph below represents the number of services broken down by the three categories.





## Location of Services

Majority of services were delivered in schools by BC's and BHT's. However, majority of services were delivered in the home by MT's.



Below indicates the number of services held in each location broken down by service.

### BC Services

- Community: 24
- Home: 238
- School: 337
- Telehealth: 78

### BHT Services

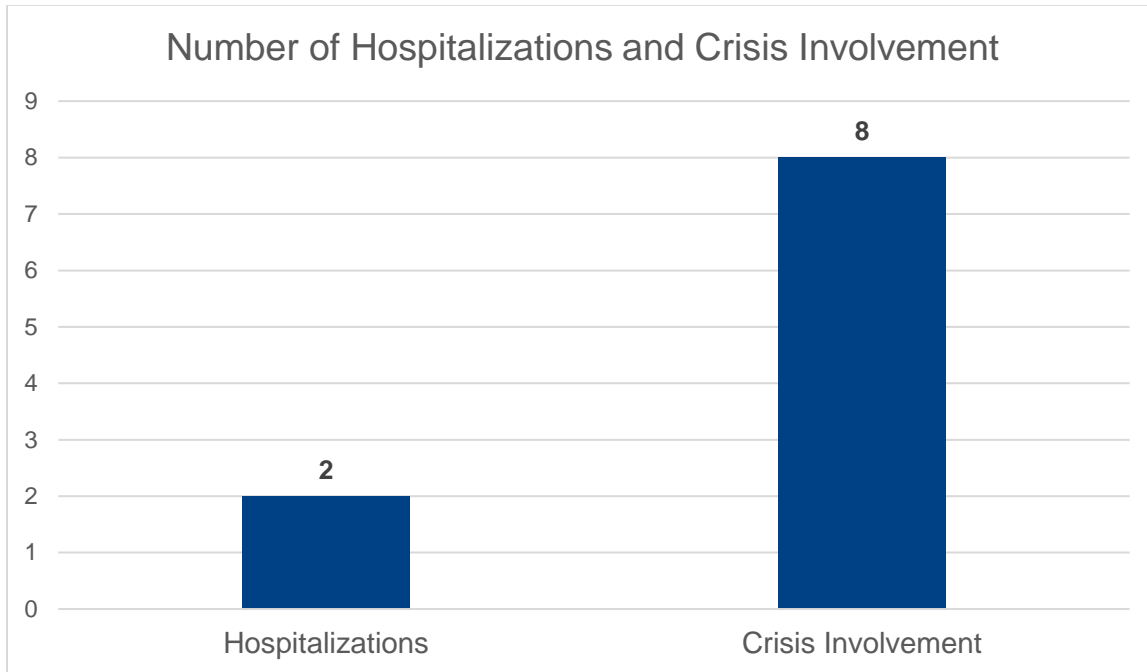
- Community: 30
- Home: 33
- School: 1288
- Telehealth: 11

### MT Services

- Community: 13
- Home: 767
- School: 189
- Telehealth: 68

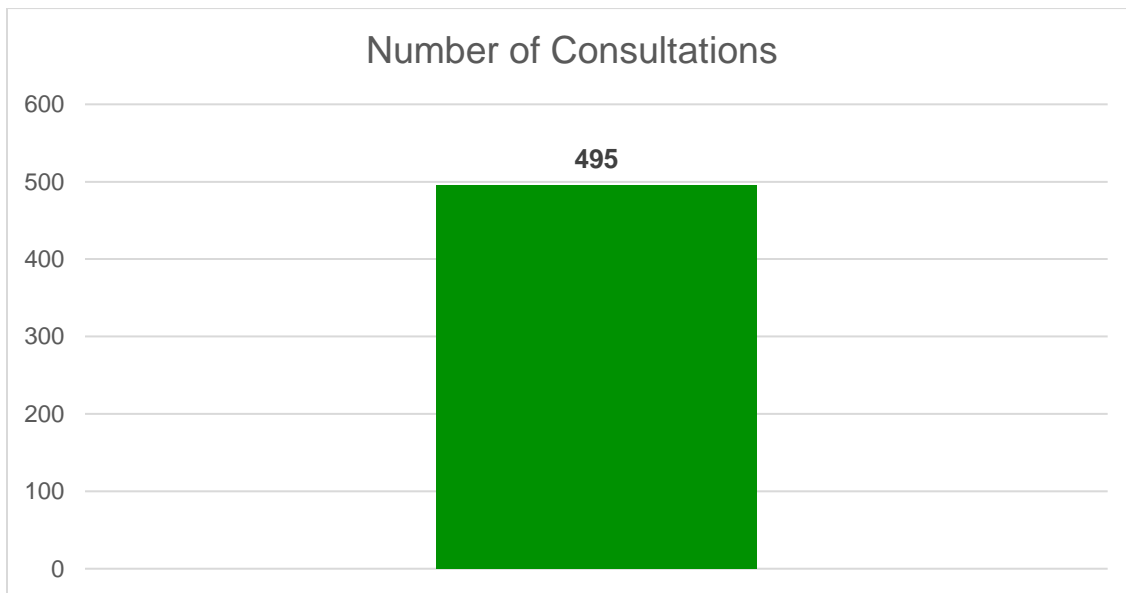
### Number of hospitalizations and crisis contacts

During this review, 2 children and youth were hospitalized, and 8 children and youth had crisis involvement.



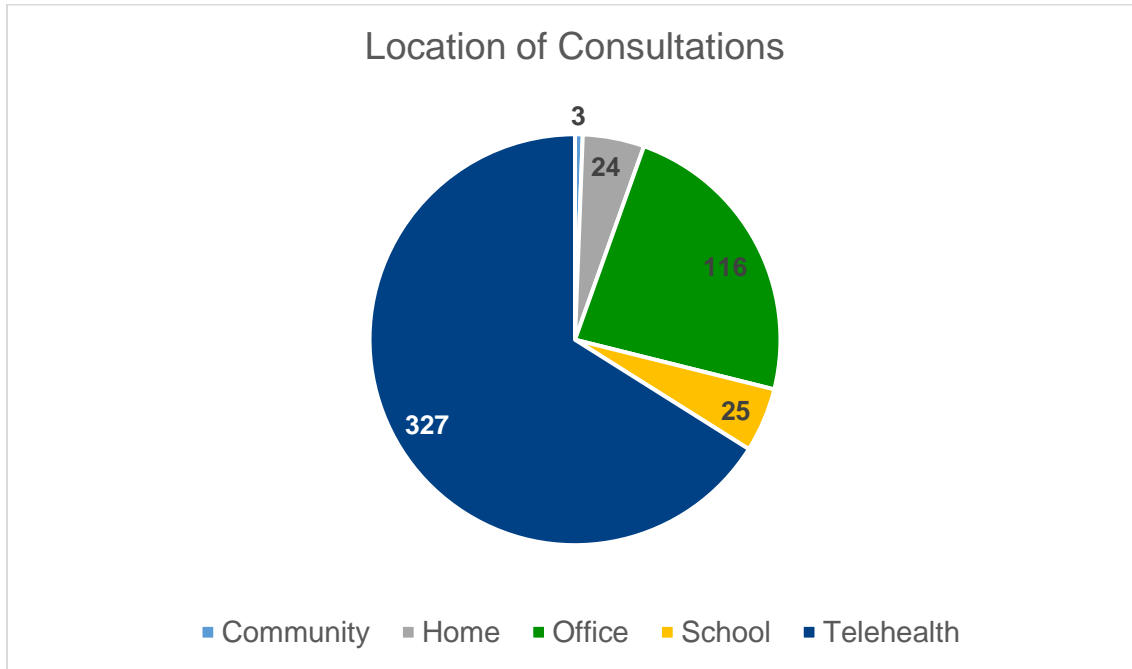
### Number of Collaborations

There were 495 consultations during this period of review.



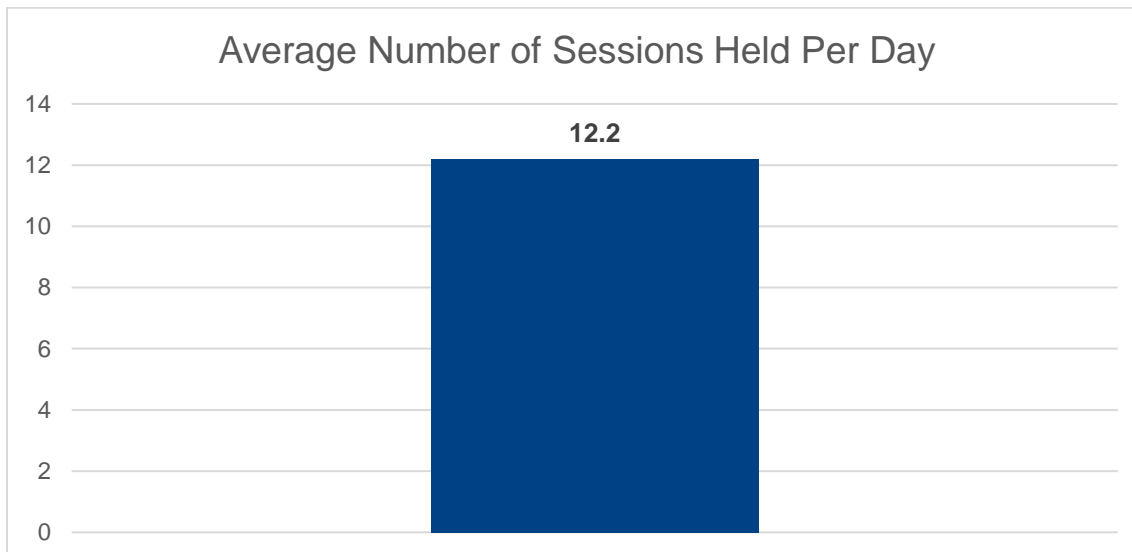
### Location of Collaborations

The location of consultations is indicated in the graph below.



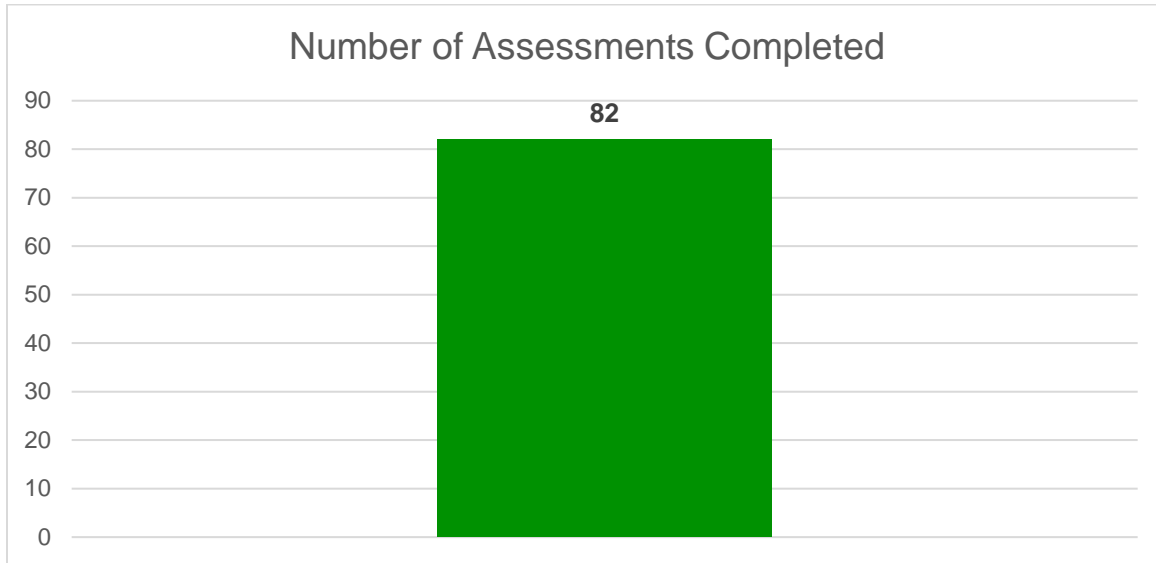
### Sessions Per Day

The average number of sessions per day is 12.20.



## Assessments

There were 82 assessments completed during this time of review.



## Assessment of the Outcomes of Services Delivered

A discharge summary is completed on individuals who exit the program. IBHS staff complete a summary that includes the last date of service, summary of service outcomes, and the reason for discharge. The table below indicates the number of individuals and their discharge reasons.

Discharge Reason	Number of Individuals
1. The child, youth or young adult failed to attend scheduled IBHS for 45 consecutive days without any notification from the youth, young adult or the parent, legal guardian or caregiver of the child or youth.	4
2. The child, youth or young adult completed the goals and objectives in the ITP and no new goals or objectives have been identified.	14
3. The child, youth or young adult is not progressing towards the goals identified in the ITP within 180 days from the initiation of service and other clinical services are in place.	1
4. The child, youth or young adult requires a more restrictive service to meet the child's, youth's or young adult's needs and other clinical services are in place.	3
5. The parent or legal guardian who provided consent to receive services agrees services should be discontinued.	6
6. The youth or young adult agrees services should be discontinued.	1

Majority of individuals discharged from IBHS is because the child, youth or young adult completed the goals and objectives in the ITP and no new goals or objectives have been identified.

## Program Adherence

To ensure that the IBHS Program is adhering to the program requirements, multiple routine record audits as well as intensive supervision is utilized.

Additionally, a comprehensive annual quality review is conducted by the Quality Director to evaluate compliance with the service description. Program goals are determined when quality improvement areas are identified during a quality review.

Moreover, the agency formed a Client Advisory Committee in 2020. Clients of the agency are offered to join the committee to provide feedback for quality initiatives. The Quality Director reviews the quality initiatives at the monthly agency Quality Meetings with the Executive Director and Senior Management.

## Audits

Regular chart audits are completed by the Program Director in addition to biannual internal compliance audits conducted by the Compliance Coordinator. Additionally, Community Care Behavioral Health (CCBHC) completes quality audits annually.

## Methodology

Methodology for selected IBHS charts to be internally audited by the Compliance Coordinator on a biannual basis is by random selection. Additionally, Program Director reviews all charts on a weekly basis.

Results from the two internal audits completed by the Compliance Coordinator during this time of review are below:

## IBHS Internal Compliance Audit Results

On September 7, 2021, 20 IBHS Charts were reviewed for 27 of The Guidance Center Quality and Compliance Indicators and 5 Program Specific Indicators.

### Results for 20 Charts:

Category	Score	Goal
Intake and Assessment	82%	80%
Treatment Planning	98%	80%

Care Coordination	100%	80%
Physical Health	94%	80%
Discharge Planning	100%	80%
Smoking Cessation	<b>31%</b>	80%
Key Indicators	86%	80%

### Key Indicators

Does the Treatment Plan contain specific short-term objectives? **100%**

Is the Treatment Plan updated every 6 months? **67%**

Is the Initial Assessment done within 14 days of the first service? **65%**

Are clients getting the services they are authorized to receive with BCs and MTs? **100%**

Is 80% of the BHTs interventions utilized each month? **100%**

### Indicators that fell below the 80% Goal

Completion of Risk Assessment **35%**

Waist Circumference **70%**

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### IBHS Internal Compliance Audit Results

On January 12, 2022, 20 IBHS Charts were reviewed for 27 of The Guidance Center Quality and Compliance Indicators and 5 Program Specific Indicators.

#### Results for 20 Charts:

Category	Score	Goal
Intake and Assessment	91%	80%
Treatment Planning	97%	80%
Care Coordination	100%	80%
Physical Health	95%	80%
Discharge Planning	N/A	80%
Smoking Cessation	100%	80%

Key Indicators

87%

80%

### Key Indicators

Does the Treatment Plan contain specific short-term objectives? **100%**

Is the Treatment Plan updated every 6 months? **82%**

Is the Initial Assessment done within 14 days of the first service? **53%**

Are clients getting the services they are authorized to receive with BCs and MTs? **100%**

Is 80% of the BHTs interventions utilized each month? **100%**

### Indicators that fell below the 80% Goal

Completion of Risk Assessment **53%**

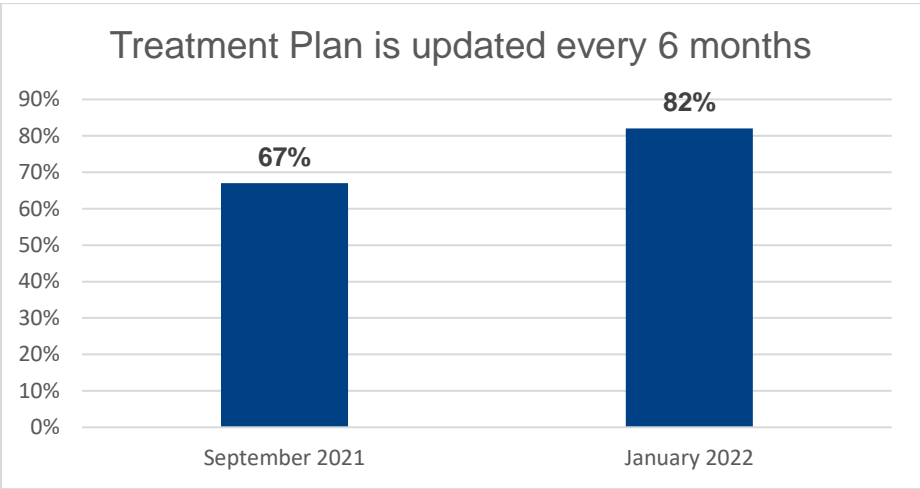
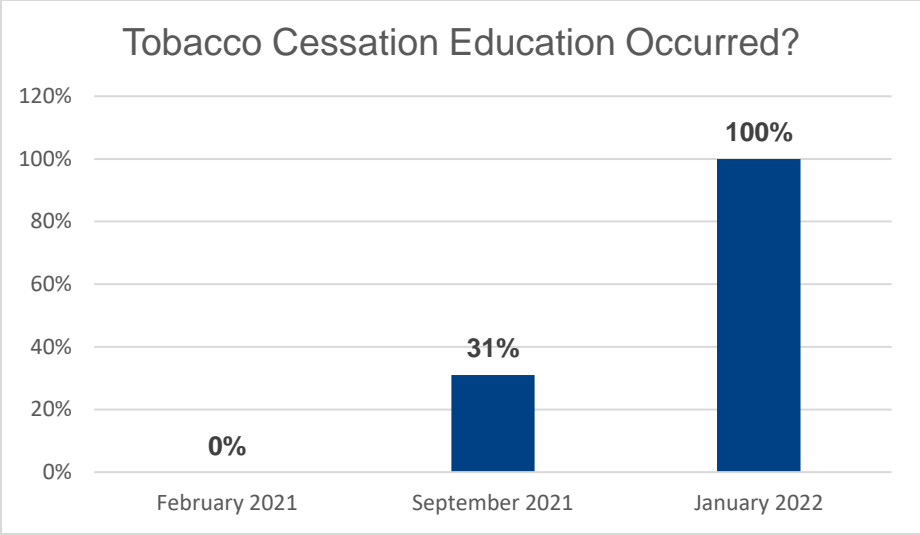
### Program Goals

Program goals are identified from internal compliance audits.

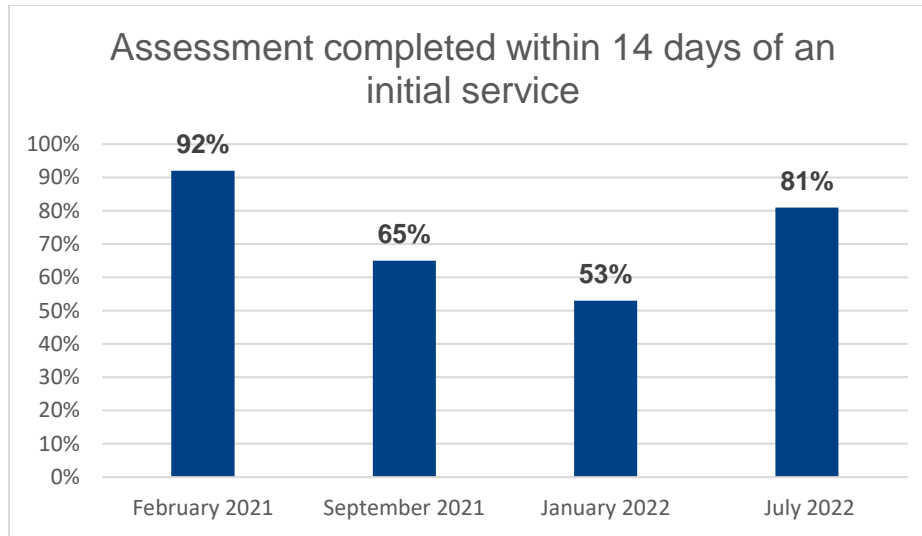
At the beginning of the fiscal year, the program identified the following areas for quality improvement:

1. Tobacco cessation education is discussed with clients when a concern is identified.
2. The Treatment Plan is updated every 6 months.
3. A Risk Assessment is completed with every client.
4. The Initial Assessment is completed with every client within 14 days of the initial service.

When an area is identified for quality improvement, a Plan Do Check Act (PDCA) is developed. Since monitoring these areas, improvement has been made. The charts below indicate the tracking and monitoring of the improvement. Full details of the plan for quality improvement can be found in the agency's PDCA's.







These areas all meet or exceed 80% of the goal. Therefore, these PDCA's are considered retired, however, these indicators continue to be internally audited for compliance.

Currently, there is only one active PDCA for quality improvement in the IBHS Program noted below.

1. Monitoring that waist circumference is recorded in the Electronic Health Record (EHR) for all enrolled clients.

## Supervision

IBHS meets and exceeds supervision requirements. The supervision requirements are as follows:

- **BHT (Behavioral Health Technician)** working 37.5 hours a week or less
  - 1 hour of individual supervision per month
  - 1 hour of group supervision per month
- **BC & MT (Behavioral Consultant & Mobile Therapist)**
  - 1 hour of individual supervision per month for every service provided

In addition to individual supervision, BC & MT staff also receive 2 hours of group supervision bimonthly.

## Staff Training

Training requirements for BHT, BC, & MT are described below.

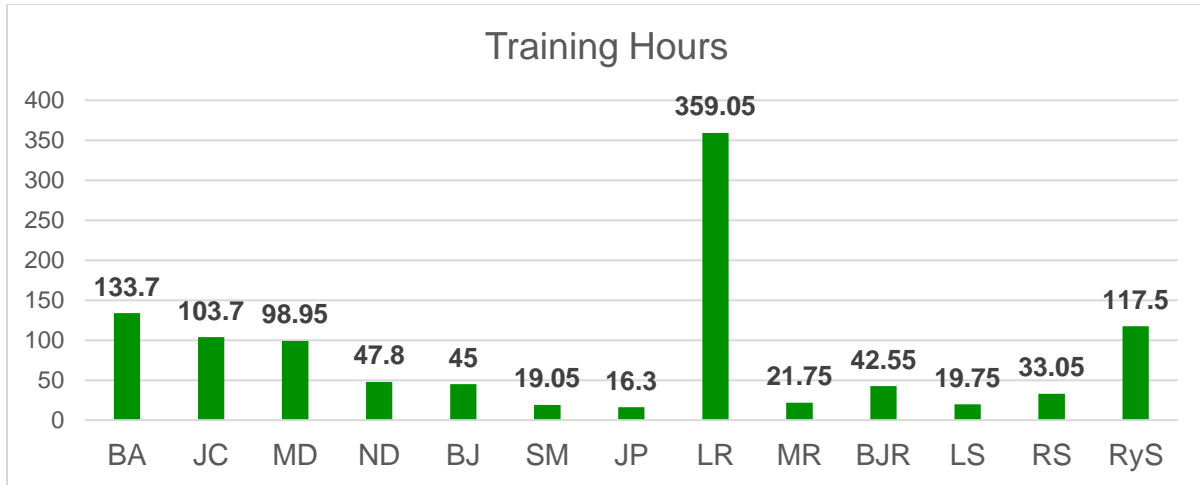
### BHT

- Complete 30 hours of department approved training prior to providing services independently.
- At least 20 hours of department approved training annually.

## BC & MT

- Complete at least 16 hours of department approved training annually.

Staff complete regulatory required training hours in addition to completing agency required trainings. IBHS staff training hours are captured in the table below.



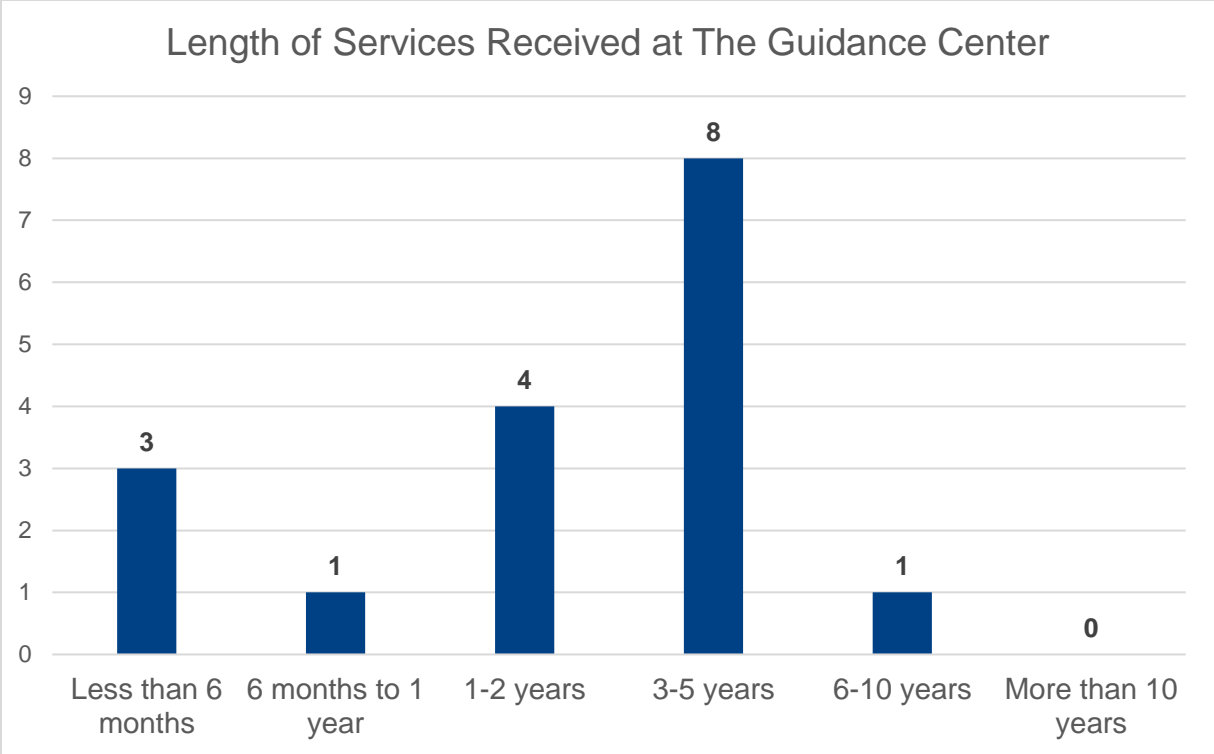
A complete list of training hours for each staff member is maintained by the Program Director.

## Satisfaction Surveys

Surveys were administered to IBHS clients using a survey link or a fillable form. There were 17 surveys completed during this review. Five individuals completed the survey using a link and 12 individuals completed the survey using paper format.

Demographic information is collected regarding age, gender and race. Additionally, clients reported the number of years they have been receiving services at the agency.

The table below represents the number of years surveyed individuals have received services at the agency.



Majority of individuals have been enrolled in services for 3-5 years.

Additionally, individuals were asked to rate their satisfaction of services using the scale:

- 4 - Very Satisfied
- 3 – Satisfied
- 2 – Somewhat Satisfied
- 1 – Not Satisfied

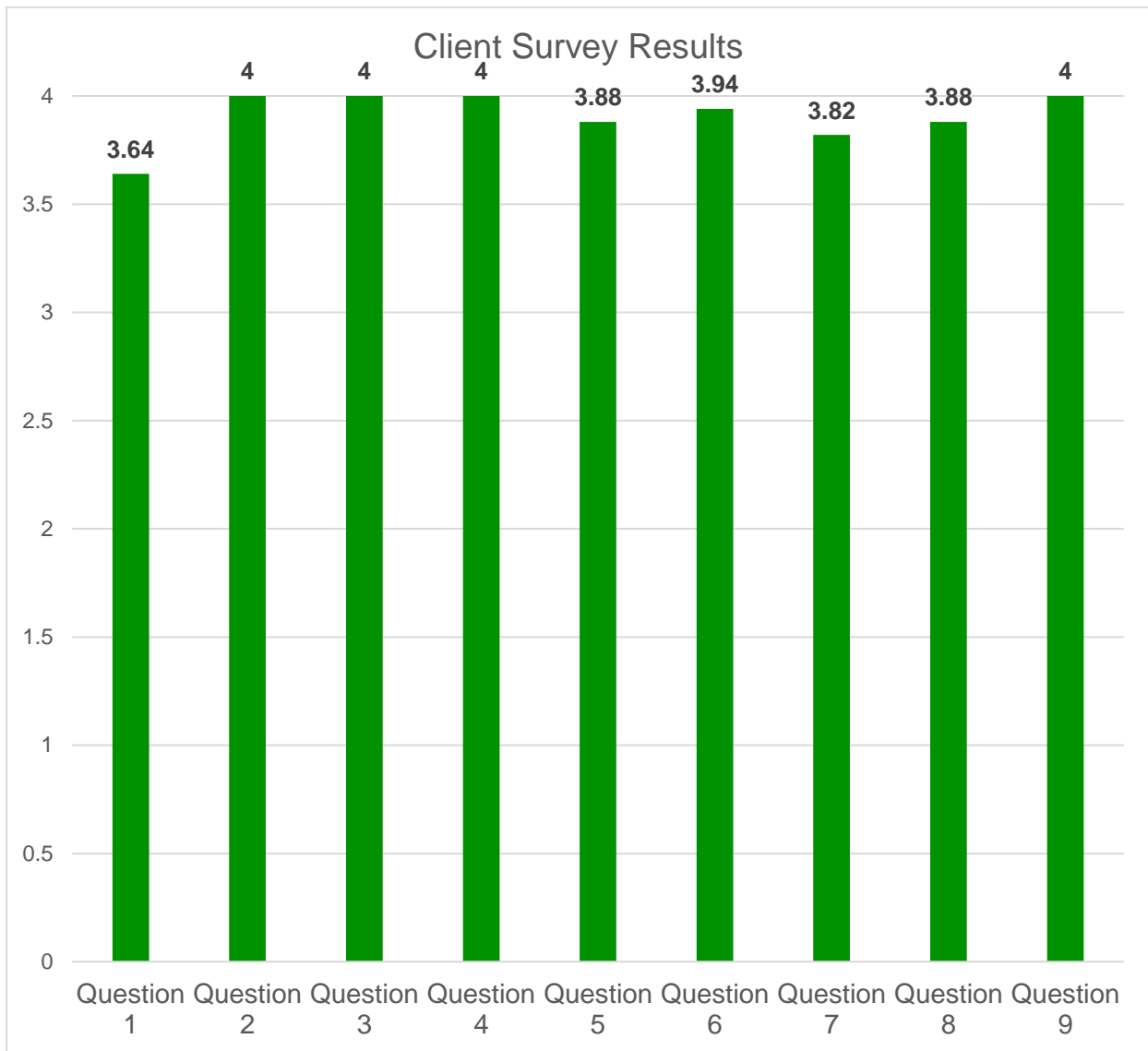
The following tables list the survey questions asked regarding the individual's satisfaction in various areas and the results of client's responses.

**Survey Results**

*Questions:*

<b>Survey Questions</b>	
<b>Survey Question</b>	<b>Result</b>
1. Timeliness of our response to your initial request for this service?	<b>3.64</b>
2. The setting where services are provided?	<b>4</b>
3. The courtesy and respect shown by our staff?	<b>4</b>
4. The level of confidentiality?	<b>4</b>
5. Your participation in the development of a treatment plan that met your needs?	<b>3.88</b>
6. Your provider's ability to help you and your family?	<b>3.94</b>
7. Your ability to handle your situation as a result of receiving services?	<b>3.82</b>
8. The frequency and convenience of contacts.	<b>3.88</b>
9. Did services provided address your specific cultural background in a respectful manner?	<b>4</b>

Results:



Overall, the results indicate that individuals are satisfied with the services and care received. Clients will be continuously surveyed on satisfaction with services.

## Comments

To conclude the survey, participants in the program are offered a space to provide feedback on comments. Additionally, participants were given a space to provide feedback on what has been the most helpful thing about services within the last 6 months.

The word cloud below depicts answers given.

*The most helpful thing about services within the last 6 months are...*

