

Region II Human Services Management Report Based on program evaluations for the year 2015

Our Mission

To work toward the health, happiness and well-being of every person who works within our organization and every person served by our organization.

To provide the highest quality substance abuse and mental health services to any person in need of those services

To assure organizational survival and growth.

Prepared by: Kathy Seacrest in partnership with consumers, staff, directors, providers, partners, advisory committee, and governing board.

Overview

Each program evaluation has been reviewed with staff, consumers, advisory committee, and governing board. This management report will provide a summary of those reviews, conclusions and goals for the coming year. The review indicates that the mission and values remain central to service delivery at all levels. Of special note was the number of times the words in our mission were used in the responses from providers and consumers in the satisfaction surveys. The Region II Behavioral Health Authority served 5,935 people in 2015 through direct service programs. Prevention provided evidence based practices classes to over 1,538 individuals and the media campaigns reached thousands. Peer Recovery Facilitators met with over 564 individuals/groups. The Region received \$5,859,189.65 from the state and federal contract to provide the services and system coordination. The Region had \$323,915 in County dollars.

Our Region-wide Quality Improvement goals were included in the report this year. All seemed appropriate and all were met. Program Quality Improvement, compliance and privacy reports were reviewed. No actions appeared necessary based on the review.

Contracted Services

The Region contracts with 11 agencies/coalitions for 16 different services. This includes Prevention Coalitions. During 2015, we connected with each of these agencies/coalitions on a regular basis and created a consistent connection so that clients could be better served. Each of our contracted agencies commented on and appreciated this in their evaluations. Many of our needs are being met by the contracted services and it is also clear that certain needs remain and that we need to address those needs. The demand for certain services is changing and

we as an organization must be planning for those changing needs. We continue seeing an increased need for services for persons with complex needs and this trend indicates a need for ongoing work together to create responsiveness to this trend. All programs discussed the need to work together to find resources for the complexity we are seeing. The challenge remains on how to create that flexibility while being tied to specific funding streams. We recommend that the Quality Improvement team for Region II continue work on this goal this year.

Other gaps noted by providers include: transportation, housing, access to health care for clients, lack of available clinical social workers and other professional staff.

Great Plains Health accepted Emergency Protective Custody individuals from all counties and has continued to work closely with our Emergency Support Program. Great Plains has been able to work with those committed clients and take care of them here in the Region. We had an increase in the number of clients referred to the Regional Center and will work this year to create whatever we can to keep clients here.

CenterPointe (dual diagnosis residential) has had fewer Medicaid clients this year and thus more need for Region II funding.

Houses of Hope (substance abuse halfway house for men) remains an important link in services and has created ways to include families if the clients wish to. Affordable housing for clients at discharge remains a challenge. There is a men's recovery house opening in North Platte that may help with this.

Touchstone continues to improve communication with the Regional staff involved in client care. Wait time to get into this service has decreased and this is very beneficial to the region. Outcome data that has been initiated will be shared to analyze next steps in connecting clients, agencies, and families.

St. Monica's continues serving women from our Region and throughout the year we worked with them on improving communication. Region II connects in person with clients at St. Monica's at least monthly so the communication has improved. Providers indicated that we still need to work on this before discharge especially for drug court participants.

The Supported Employment Program (Goodwill) has grown significantly this year and the Region remains committed to additional funding for this program. We have had 4 years with Goodwill serving individuals who are not eligible for Voc-Rehab or whose needs are immediate. 54 clients were served in this pilot. This has helped facilitate success for clients in their search for employment. We strongly recommend keeping this program in place, continuing to move toward evidence based practice and adding benefits planning.

Intensive Outpatient services (Lutheran Family Services) continues building their program. The program is serving clients in Lexington and North Platte. The hope

was that we could decrease the need for residential by creating this level of care and we are beginning to see that result. This program struggles with numbers for groups in Lexington and management needs to help solve this problem in 2016.

The housing voucher program through West Central Housing Authority is working well and we recommend additional coordination with the program so that we can improve the transition from this program to other housing. Meeting regularly has helped determine how to transition more clients over to other housing programs. The addition of the Rent Wise program taught by a peer has been valuable.

Overall, programs on contract report satisfaction with working with the Region. Gaps include housing and supported housing for those returning from treatment. Meetings with all providers are established to individualize client services. There will not be new dollars to establish new services so we will continue working to wrap services around individual clients. Discharge planning will begin at admission and referral sources and support workers will be involved in the process to be sure each client has the best possible chance at recovery. More emphasis will be placed on the consumer WRAP (Wellness Recovery Action Program).

Prevention programming is greatly enhanced through our relationship with coalitions and communities. This program is stronger and more complete than ever.

Programs Provided Directly by the Region

Outpatient services continue to see a high demand for services. The complexity of need and the intensity of illnesses remains difficult. Only by utilizing all parts of our system can we manage clients in their recovery. Region II continues to work with drug court in Dawson and Lincoln Counties. Urgent Outpatient continues helping meet immediate need but the demand for ongoing care is still strong. Clinicians have worked hard to improve percent of face to face time. Telehealth has been expanded into all clinics for Medication Management and in North Platte and Ogallala for therapy.

Community Support continues improving this service as it is invaluable in keeping clients stable and in the community. Staff are increasingly busy and we will look at the need for more staff. Management will work on the identified needs.

The demand for Youth Care continues to grow. Staff rose to the challenge and created ways to help more participants. Community teams remain a vital component in helping transition-age youth move toward adult services.

The Day Rehab programs continue serving all Severe and Persistent Mentally Ill clients who are referred and who meet criteria. Programming improved per goals

set last year. Moving the McCook location to day support only has increased flexibility.

The Emergency Support Coordination Program has continued its excellent response to emergency behavioral health needs. Management will work with the program and the state to maintain the flexibility that make this program a strong resource. Goals this year include working on every EPC and commitment discharge with the hospital so that ongoing care can continue. The Emergency Support Program and the hospital will create a training program for law enforcement.

Prevention services continue across the Region. Every county was touched by some form of prevention message. Every effort will be made to continue this level of service. Coalitions were continued in Dawson county through a Federal grant received by the state. Challenges remain when there is not paid staff in coalitions.

The outcome data reveals an overall increase in quality of life and functional improvements. Client Surveys from every program indicate an excellent level of satisfaction. Client satisfaction surveys are our main report card. The surveys are given to every client for two weeks each year. This measure remains a crucial tool in our evaluation program. We had a 98% return rate with a very high rate of satisfaction. 92% of clients reported that their quality of life is better due to the services they received.

CARF site visit will occur in 2016. Directors and staff have committed enormous energy to this.

Regional Coordination

The Region coordinates an extraordinary amount of activity. Coordination includes emergency, prevention, youth systems, housing, disaster and consumer. All of the system coordination areas met their deliverables and have worked hard to measure and fill gaps as noted in the program evaluation.

Overall this organization remains true to its mission and goals. Clients come first and their needs are valued in every decision made.

Our Peer Recovery Care Facilitators continue providing the administration with priorities based on client needs as they discover those needs in conversations and in peer support groups.

Regional Administration continues coordinating community groups to enhance services for those we serve.

Conclusions

All programs collected information from clients on the improvement in their quality of life. 88% report that the quality of their life has improved as a result of their participation in the programs. This is an excellent report card for our system.

2015 has been a good year of challenges as the health care environment changes. In the midst of those changes staff and programs have stayed constant in their work for and with clients. We have improved our system of care, communication, quality of care, and increased the use of community based services. The complexity of client needs makes service delivery more challenging each year. Keeping adequate and creative support available to all staff is a priority. Keeping clear communication within all programs delivered and funded is also a priority. As we develop systems of care and systems of documentation, we must keep our mission and values in place. In the process, we remain fiscally responsible for each dollar spent. This is done through reports to the Advisory and Governing Boards and State.

The organizational changes continue as experience teaches us what will work best for client centered care.

We will remain accredited and licensed in all areas required. Our Advisory Committee will remain active in recommendations to the Board and will continue representation of our area and our consumers. All boards and programs continue valuing participation from consumers, families, and interested persons in mental health and substance abuse.

This management plan is considered part of the strategic plan for the Region. The Governing Board, Advisory Committee, consumers and all staff and providers review the program evaluation and this report. The program evaluations and the management report are used to help create the Regional Budget Plan. The Regional Administrator meets with persons served in the creation of goals and in the planning effort. Our Peer Recovery Facilitators meet with consumers across the region on a regular basis and bring concerns, needs and ideas forward to the Regional Administrator monthly. Our goal to add these reports, client satisfaction surveys and other communication tools to the web site will continue.

No trends were noted of significance in incident reporting. A full analysis of incidents is completed annually. The cultural competency and diversity plans were reviewed and enhanced. No grievances or written complaints were received.

It is evident that this organization is living and working the mission established and will continue doing so over the coming year. All compliance and privacy requirements were met.

All programs passed internal and external audits

Review of Goals established for 2015

- Create Quality Improvement Goals based on Results Based Accountability.
 - ◆ Worked with the state on establishing goals and measures. Talked with all providers on measures now in place.
- At least 80% of clients in all programs will report an increase in the quality of their lives due to participation in the programs.
 - ◆ **88% reported an increase in quality of life.**
- Provide a welcoming atmosphere for all clients and respond to individual client need.
 - ◆ **Developed areas in Lexington and McCook to make the office more accommodating for all clients and staff. Clients have expressed appreciation for the changes.**
- Continue Trauma Informed Care training. Review results of the survey and implement changes based on data.
 - ◆ **Reviewed results of the survey. Each program is implementing at least 3 goals.**
- Implement Co-occurring/complex needs training. Review results of survey and implement changes based on data.
 - ◆ **Reviewed results of survey with all providers. Each program is implementing at least 3 goals.**
- Question, Persuade, Refer (suicide prevention) training throughout the region for community partners including law enforcement, school, ministers, etc.
 - ◆ **Have 5 trained facilitators and have done training for 160 individuals throughout the region.**
- All clinicians will receive suicide prevention training.
 - ◆ **All clinicians were invited to a Assessing and Managing Suicide Risk workshop. This will be offered again for new hires.**
- Work with new leadership at the state level in DHHS and Behavioral Health.
 - ◆ **New leadership is in place and administration has been and is very active in working with them.**

Goals for 2016

- Achieve 3 year CARF Accreditation
- Implement the new state client data system
- Find ways to increase funding to meet the demand for services
- Implement Quality Improvement Goals
- Participate in the state behavioral health needs assessment
- Help implement the state strategic plan
- Remain constant in our mission.

