

Crawford County Mental Health Awareness Program, Inc. **(CHAPS)**

944 Liberty Street ~ Meadville, PA 16335 ~ (814) 333-2924 ~ Fax: (814) 337-0008

CHAPS Psychiatric Rehabilitation Program Annual Report 7/14/22-7/23/23

Referrals

The primary source of referrals to the psych rehab programs are people walking into the agency asking for assistance. However, we also receive regular referrals from the inpatient mental health unit, many other provider agencies, BCM's, CYS, and community members. Inter-agency referrals are also made as needed to provide the most comprehensive services to the consumer. Once the referral is assigned to MPR or Clubhouse the verification of eligibility is received from the LPHA. Referrals are assigned to staff and the initial call to schedule the intake is made within seven days. All attempts to contact the consumer are documented to support outreach attempts.

Mobile Psychiatric Rehabilitation (MPR) Outcomes

The mobile psych rehab program served 202 consumers in the last year. The average length of stay for the mobile program is 6 to 12 months. There were 61 discharges from the mobile program. In the majority of discharges, the consumer stop following through with services and we are unable to locate or contact them. It is then documented that we are unable to reach them on the signature line of the discharge. Other discharge reasons include incarceration, the consumer has moved from the service area, or they have transferred programs within the agency. Consumers also have been discharged because they have completed their plan goals. They have gained more independence, become employed, secure safe affordable housing, are managing their overall wellness independently and many other achievements.

The Journey Center Clubhouse Outcomes

The Journey Center Clubhouse served 94 member this year, 15 of them were discharged. There is not an average length of stay for the Clubhouse as it is a lifelong membership, and they will remain an active member as long as the person can identify recovery goals they want to continue working on. If members were discharged it was because they stopped attending or moved from the service area. The Journey Center makes weekly outreach calls to member to try to increase attendance and assure the members are ok if they have not been attending regularly. In the past

year, 52 Journey Center members were employed at 34 local businesses. Members worked a total of 29,905 hours and earning approximately \$299,000.

Pathfinders Outcomes:

We have 48 youth served thus far in the Pathfinders program. We currently have 13 who attend group regularly. We are continuing to focus on the 8 dimensions of wellness and identifying strengths and weaknesses in each dimension to help create balance in our lives. Youth have participated in activities in these domains such as emotional exploration through music, budgeting, connecting to community resources, practicing mindfulness, creating resumes, and participating in physical exercise activities such as walking, basketball, and yoga. We will continue to work on therapeutic group activities by focusing on one dimension each month. We are continuing to work on identifying feelings, learning and practicing coping skills, group decision making, creating a menu, budgeting, ordering ingredients, prepping, cooking and serving dinner while enjoying fellowship with a shared meal.

Individual record reviews

Supervisor's review two files per employee each month, this is completed in supervision. We have switched over to electronic records as of 11/1/22. This has been a huge adjustment for staff and supervisors. We continue make adjustments to the system to meet our needs and we are still learning. The majority of file work is completed within regulatory time frames. Any documentation that is late has a reason documented as to why. For example, the consumer missed appointments and the plan or quarterly update was not completed within the appropriate timeframe. Electronic records have greatly improved the issue with legibility of handwriting and signatures. We have had to trouble shoot connectivity issues, and issues with timestamping of signatures. Our IT personnel had been instrumental in assisting with cell phone hot spot issues, creation of forms, system navigation and communicating with the Credible team. We still face the issue of some of our consumers being started on paper files and the transferring of information to the electronic system. Staff are working hard to learn the system and navigate the normal struggles an agency with encounter when switching over to a whole new system.

Individual satisfaction

Consumer satisfaction survey are completed yearly for each program within the agency. We aim to survey at least 50% of program participants. The surveys are completed by interns and work

study students beginning in early March and ending in mid-April. A survey results presentation is conducted in the Drop in Center for staff, members and stake holders. The results are available to review by all interested parties. We also hold focus groups yearly as well. This gives consumers the opportunity to share their thoughts and suggestions on the programs they receive services in. These groups have resulted in changes to programming, new program development and other changes to improve the experience consumers have while in our building and while receiving services.

Use of exceptions

We have no use of exceptions to admissions and continued stay requirements in the past year. We continue to access our local mental health outpatient providers as well as Dr. Susan Maloney to provide the LPHA prescription for services.

Evaluation of compliance with the agency service description

The compliance committee reviewed the Psych Rehab and Peer Support service descriptions on 2/24/23. They are satisfied that services are being provided as described within the documents. There are no changes needed at this time. We will adjust the service description as regulations require us to do so. These changes will be submitted for approval to OHMSAS and Beacon Health options when necessary. The Quality Assurance committee will also have the chance to review the document at the next annual meeting on 7/13/23.

Action steps:

- Continue to work with the Credible team to improve the use of the system to better meet our needs and our ability to extract data from the system.
- Increase visibility and marketing of agency within the community, increase community outreach efforts.
- Explore other retention and recruitment efforts for new and existing staff. Explore opportunities for current staff within the agency.
- Explore tools to simplify and gather outcomes data for all programs.
- Increase staff productivity targets and meeting program hours.
- Have 4 staff obtain CPRP certification.
- Increase staff morale and improve the overall culture of the agency to reflect our mission.

- Ensure staff are available and present to take referrals during business hours.
- Maximize consumer participation in programs to benefit their overall wellness and recovery.