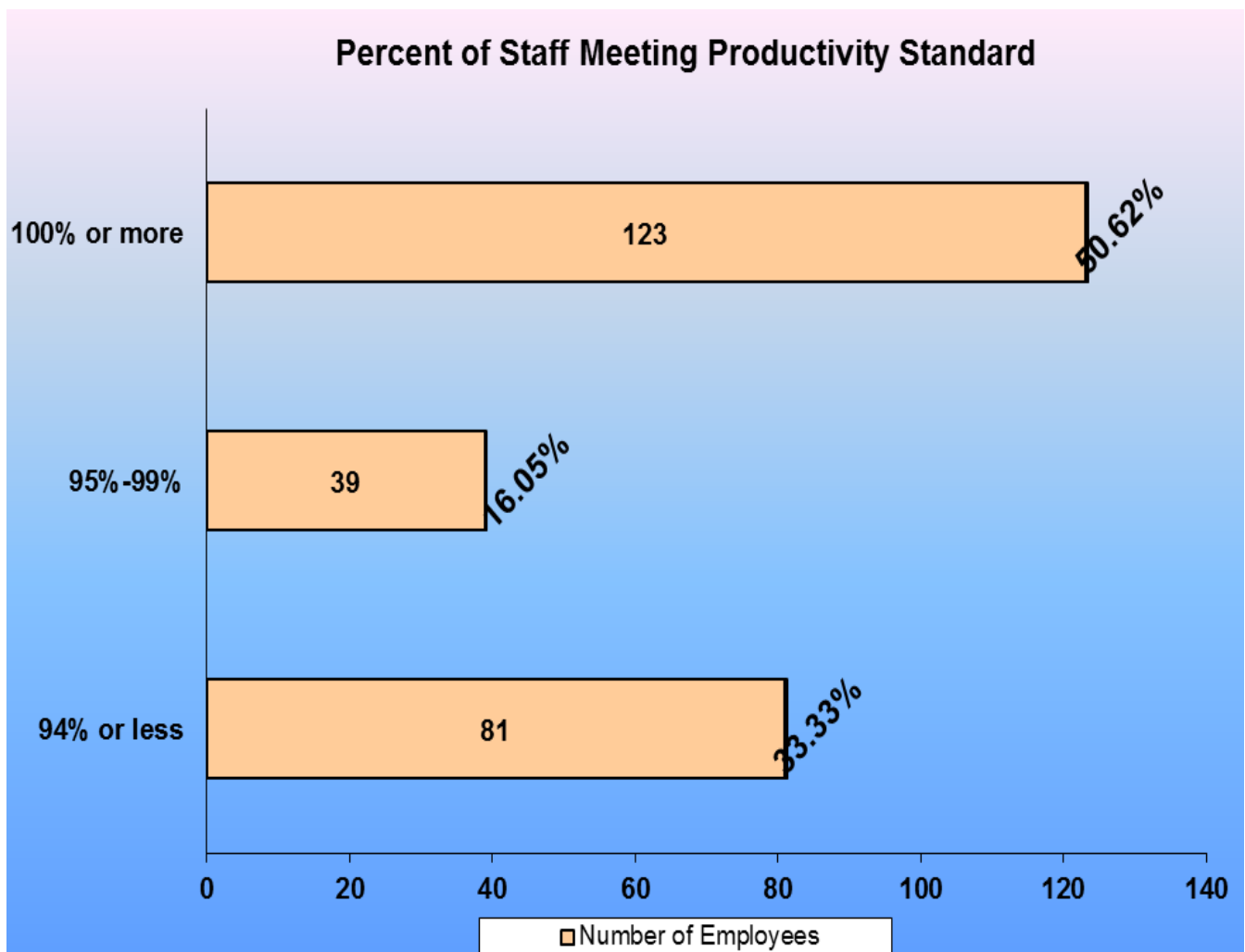


# Wasatch Mental Health Briefing Report August 2015

With our budget process for 2016 completed, we focused this last month on two major initiatives. First, we are moving ahead with our plans for the Payson facility. We met several times with the architects who submitted preliminary floorplans after consulting with the other agencies involved in the project. We are in the process of scaling the project to address current needs while also allowing for future growth.

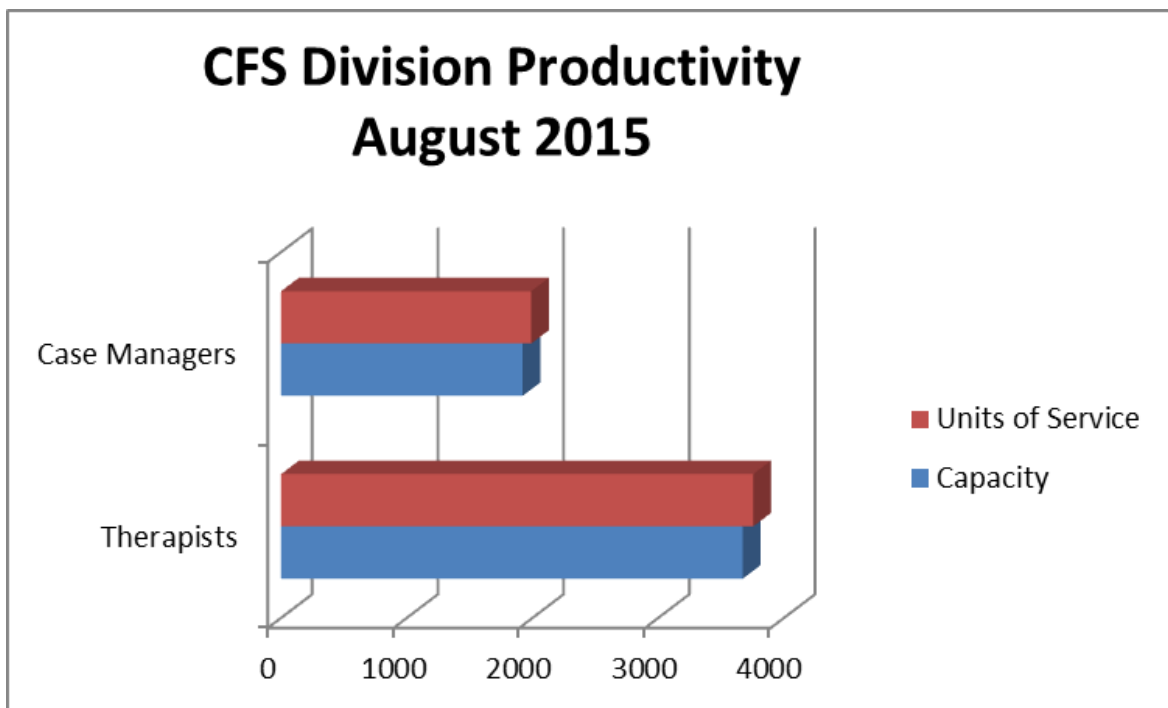
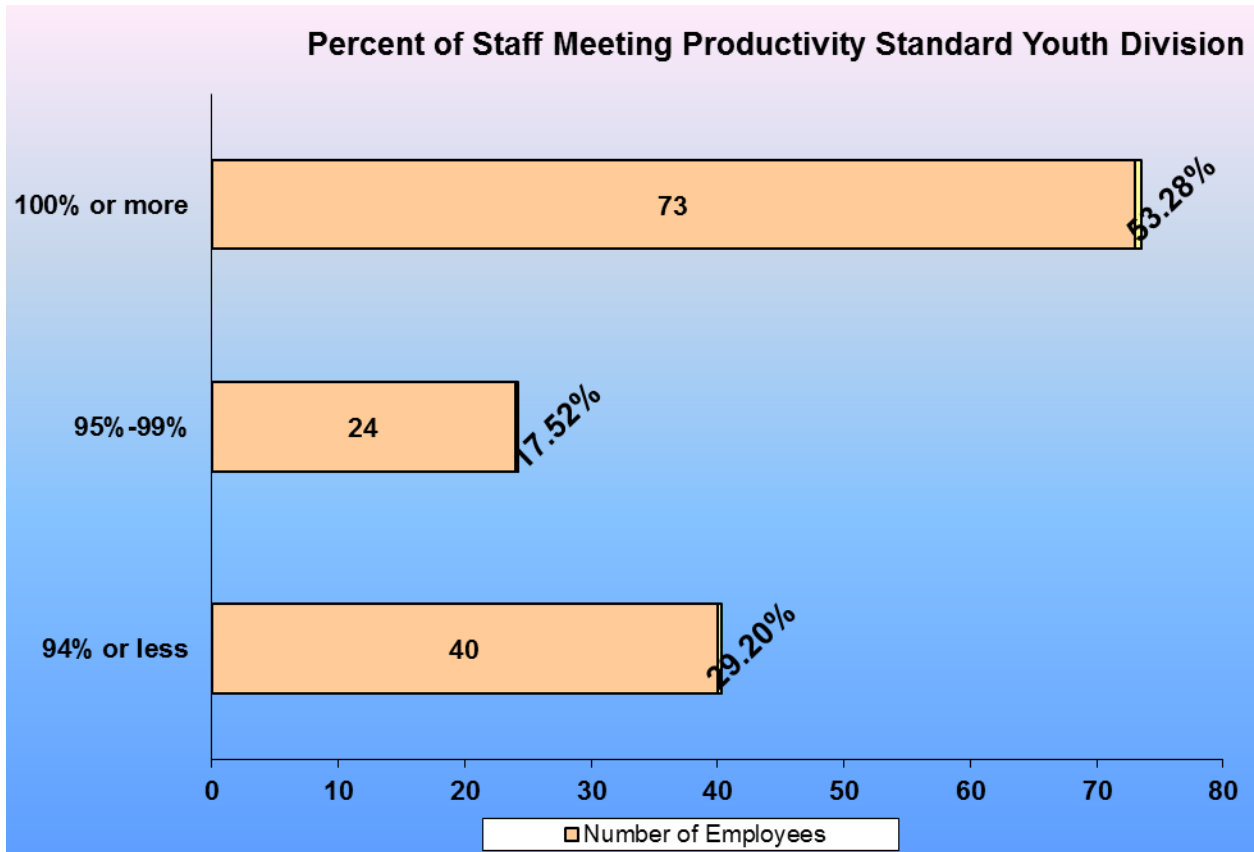
Secondly, we are continuing to outline what services we hope to provide with the newly allocated Justice Reinvestment Funds (JRI). We have met with the JRI steering committee (an extension of the Judges Round Table). J. Korbanka, Ph.D. has reviewed the literature related to various instruments to start selection of a possible psychometric tool assisting us with the screening for mental illness and the assessment of criminogenic risk. This has resulted in us revising our anticipated staffing plan for our JRIU team.

Below, a graph depicting the percentage of staff meeting various levels of their respective productivity levels.

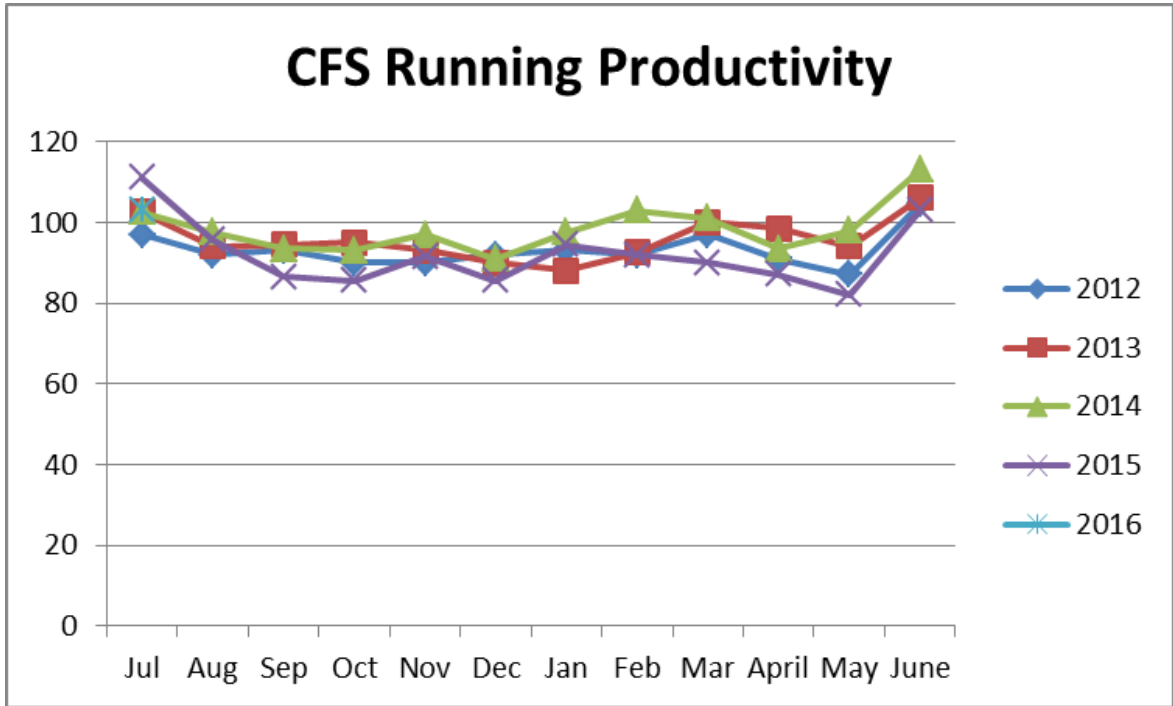


# Children and Family Services Division

## Performance Indicators

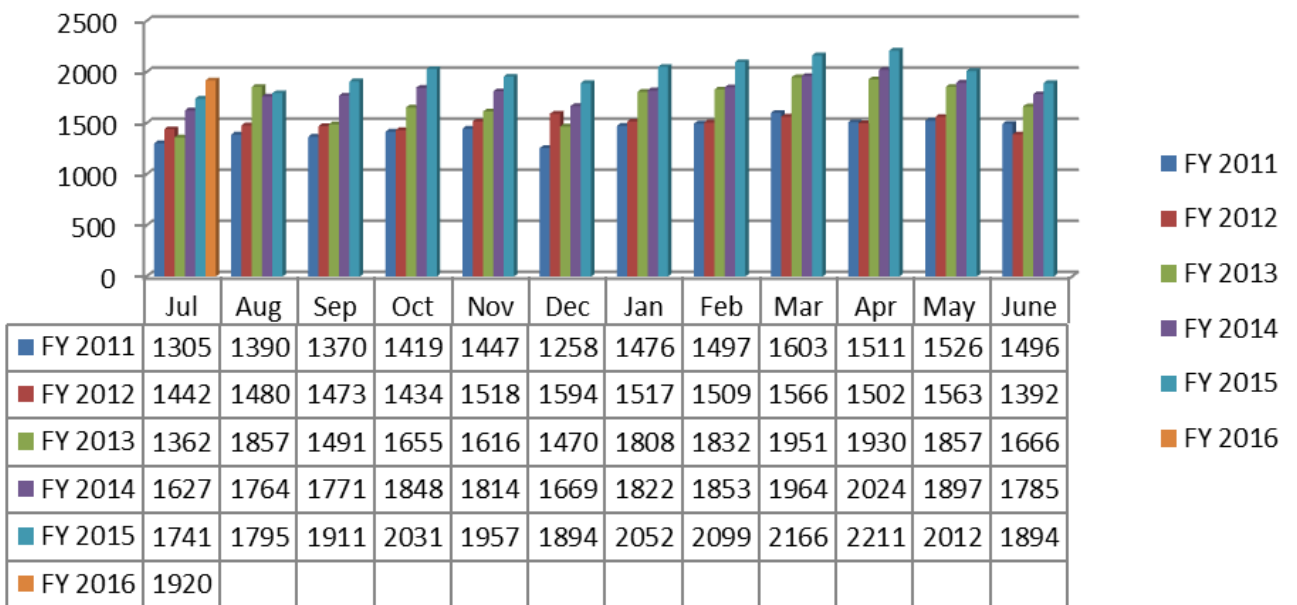


## CFS Running Productivity



The above graphs indicate the total capacity of possible units of service based on productivity standards in comparison with the actual units of service provided. For the month of July total therapist time is at 102% capacity. Case manager time is at 104% capacity.

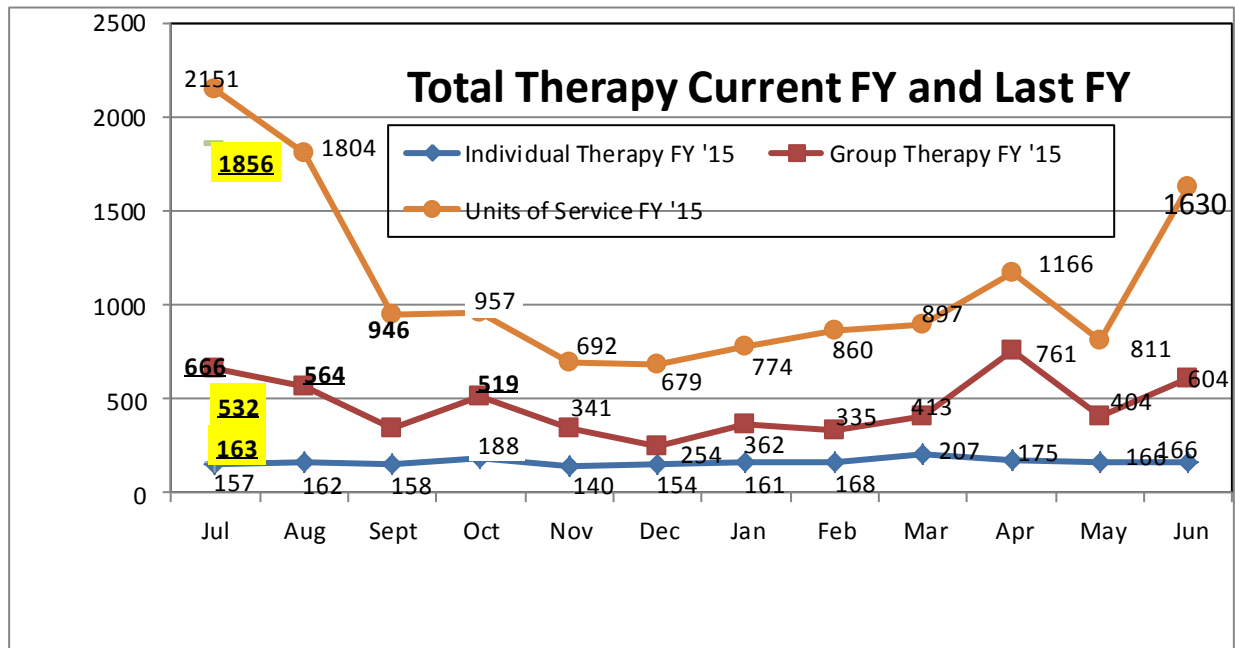
## Total Number Unduplicated Clients Served CFS Division



**Highlights**

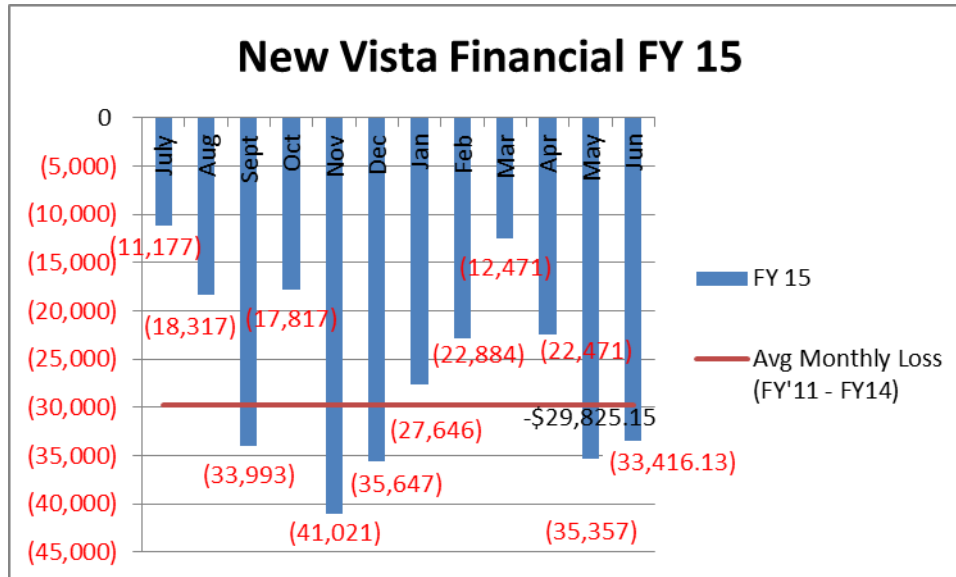
- The Giant Steps Summer program ran for the month of July. We provide the Summer Program to help the children have an opportunity to continue practicing their social skills and avoid losing what they have learned throughout the year.
- Janeen McFadden attended a UVU Community Partner meeting to coordinate volunteer needs and strengthen the relationship our program has with the university.
- The Giant Steps waiting list currently at 101 children.
- School Based Services staff from SFFC have been helping with the Summer Stride program. They have wrapped up another successful year.
- Bryant Jenks and Richard Hatch attended the NAMI National Convention
- AFFC School Based staff helped with the summer STRIDE program received the follow feedback from a couple guardians:
- Strengthening Families just ended the summer session in Provo.

**New Vista Youth Services**



## NEW VISTA FINANCIAL REPORT

At year end our monthly average loss was \$26,000. This is less than the 4 year average as indicated below.

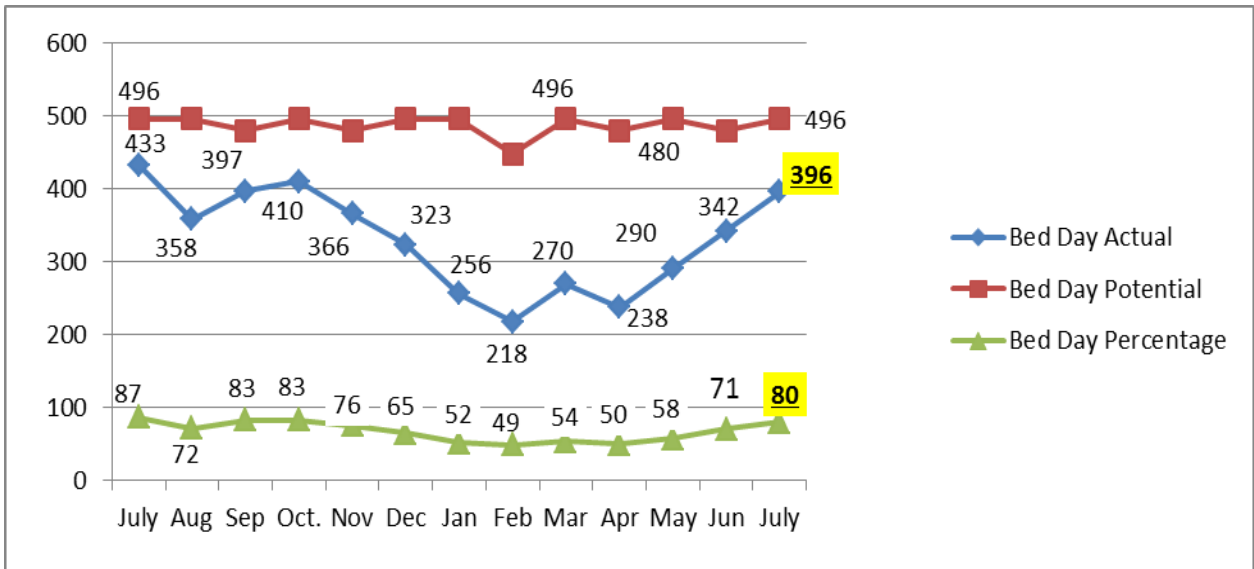


### July '15 New Vista Monthly Report

New Vista continues to hold their summer program Mon-Friday and it focuses on enhancing the skills that the youth have to develop their ability to build healthy relationships so they decrease their maladaptive behaviors. New Vista staff continues to pick up the youth in the AM to transport the youth to Tx and the families that they live with are responsible to pick them up after ends in the afternoon. We have 21 youth in full time day Tx. With 2 youth that have earned the privilege of stepping down to partial day tx. We work to build on the needs of the youth and what they individually need.

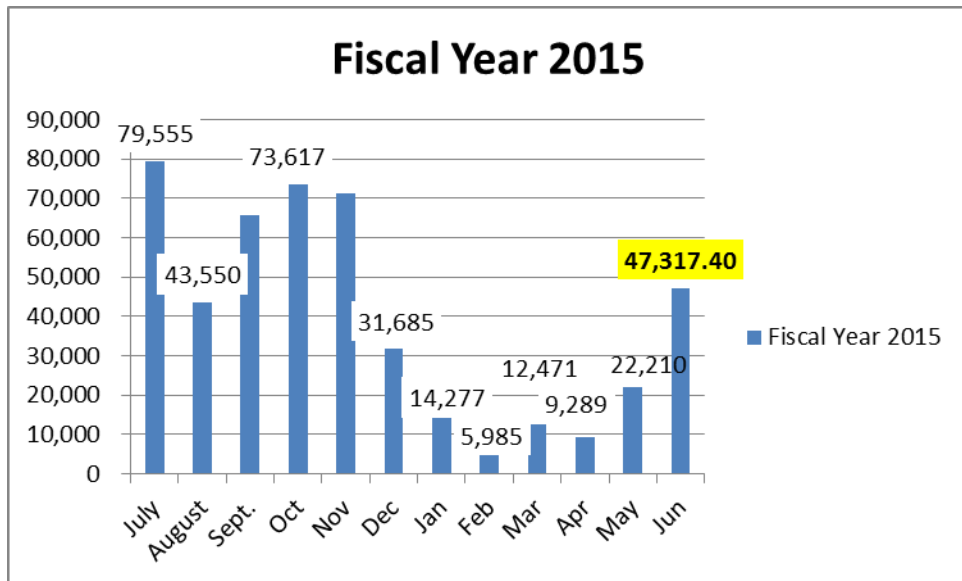
### Aspire Academy

**JULY REPORT:** July blossomed into a month full of referrals and admissions. We continue to have an upswing in referrals/admissions. We accepted all four of the girls who were referred to us. The 80% bed occupancy rate is the highest percentage since October 2014. At one point we reached 87% occupancy for about two weeks. We're also excited about a new Service Agreement from DCFS which allows Community Mental Health Centers to bill for Group/Family/Individual Behavior Management as well as TCM. We have therefore requested to be able to hire a Case Manager in the Supervisor position and then fill our Master Level Therapist position. (Both positions have been on the personnel blue print, but held back as per Juergen until financials and the workload would support hiring the positions). These positions will allow more consistent treatment for our girls and functioning of our program.



## ASPIRE ACADEMY FINANCIAL REPORT

With the increase numbers of referrals/admission in June we saw our bottom line increase. We were at 80% occupancy in July so our report next month should be that much better. It feels good not to be a burden on the Center. Our income again more than doubled in June from the previous month.



### July 2015 Monthly Report.

We currently have 12 girls at Aspire. They are typical girls and we have our hands full with moodiness, drama and girl issues, but we enjoy the challenge. We also enjoy building the relationships and watching these girls progress through treatment.

On July 23 we took several girls to the Sundance Summer Theater production of The Wizard of Oz. It was a good time which included a BBQ dinner and the show. It proved to be a late night and the girls did real well and were able to enjoy a more natural experience away from Aspire.

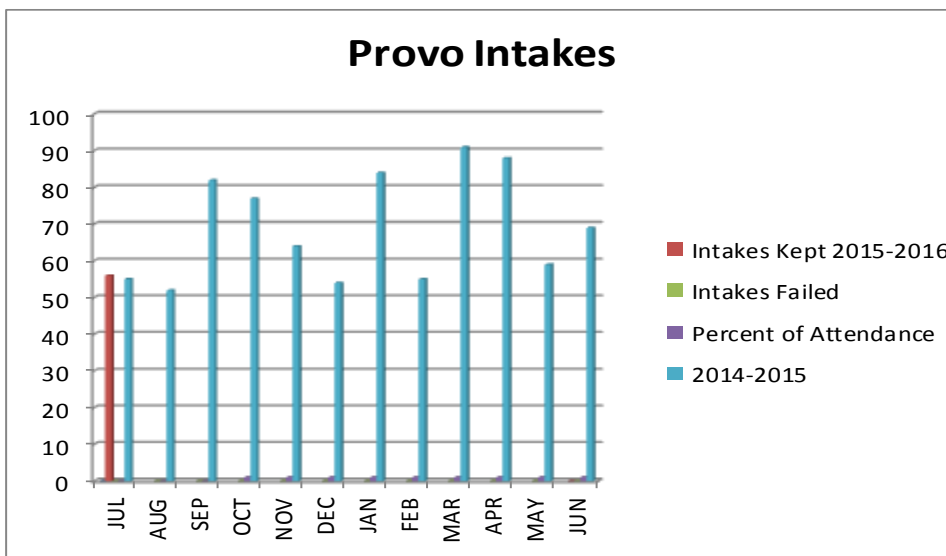
All of the girls and their families are making progress in therapy they are all engaging and working on their treatment goals, which consist of processing trauma, learning skills to increase self-worth, self-esteem, repairing and building better relationships, mood regulation, distress tolerance etc.

The therapists are having success with EMDR and Experiential therapy. We have had a number of the girls do well with processing their trauma with EMDR. They are experiencing the accomplishment of doing their own therapy and integrating what has happened to them and learning from it then moving forward. The insights they have gained have been surprising and eye opening to them and inspiring as well as they move forward in treatment. The Experiential Therapy has really been effective in the group sessions and has also been very insightful for them as they move through their trauma and begin to heal.

The Southern Region of DCFS expressed appreciation of Aspire because we have shown to them that as a team we have effectively helped the 5 girls from that region.

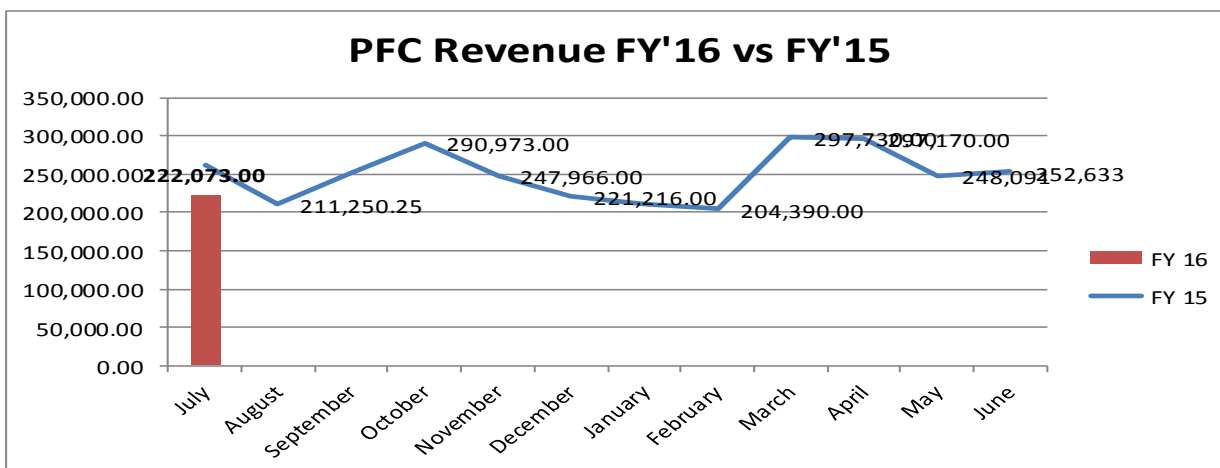
## Provo Family Clinic

### Performance Indicators:

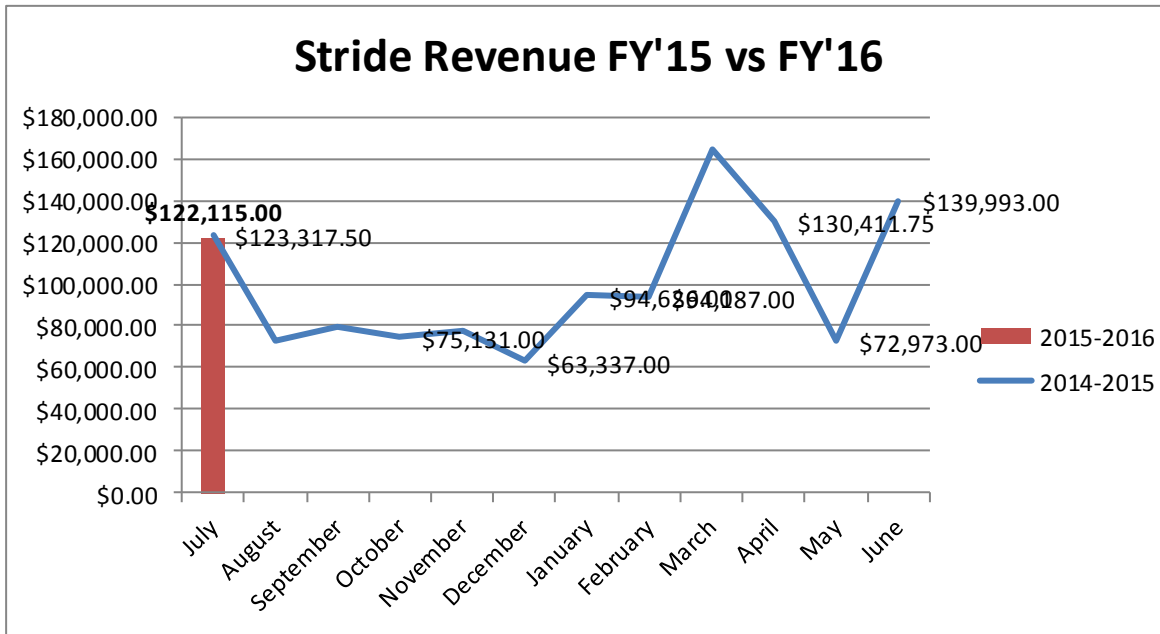


Adult OQ were 59 and YOQ children were 489 with a total of 548 for July.

Groups currently running: Grand Families, Strengthening Families, CPTR family groups and parenting groups in association with the Summer Stride program are running weekly.



## Stride Partial Day Treatment Program



### Leadership/Allied Agency Participation/Initiatives/Success

We were very excited in the Provo younger class when one of our non-social children was in the van and asked a girl what her name was. He then proceeded to use her name and asked her to come sit by him. This was a big deal because of his pervasive tendency to be non-social.

We have a client that has autism. She struggles to put sentences together unless she is quoting something, and she struggles to make friends. She has made a good friend and she says that she is her best friend. She spends time with her every day at Stride, and they talk about the movie Inside Out. She also struggles to cope when she is upset. We recently discovered that playing with her dolls from Inside Out (Fear and Joy) help her to calm down instead of yelling or kicking things.

## GIANT Steps

### Average Group Ratios During Summer Program

| Group  | Children | Staff | Service Capacity July | Service Capacity June | Service Capacity May |
|--|----------|-------|-----------------------|-----------------------|----------------------|
| Saratoga Springs #1  | 8.42     | 6.86  | 12 children           | 12 children           | 12 children          |
| Saratoga Springs #2  | 9.75     | 6.63  | 11 children           | 11 children           | 11 children          |
| Provo #1   | 9.86     | 6.86  | 13 children           | 13 children           | 13 children          |
| Provo #2   | 10.33    | 6.83  | 11 children           | 11 children           | 11 children          |
|  |          |       | <b>89%</b>            | <b>80%</b>            | <b>90%</b>           |
| <b>90% and above capacity is the target goal since this takes into consideration children being absent from group.</b> |          |       |                       |                       |                      |



## Giant Steps Outcomes 2014-2015

In the 2014-2015 treatment year pre and post outcomes were analyzed using the Psychoeducational Profile, 3<sup>rd</sup> edition (PEP-3) and the Childhood Autism Rating Scale, 2<sup>nd</sup> edition (CARS-2).

### CARS-2 Outcomes

Functioning levels were classified using the CARS-2 at the time of assessment and at the end of the treatment year and are reflected as followed:

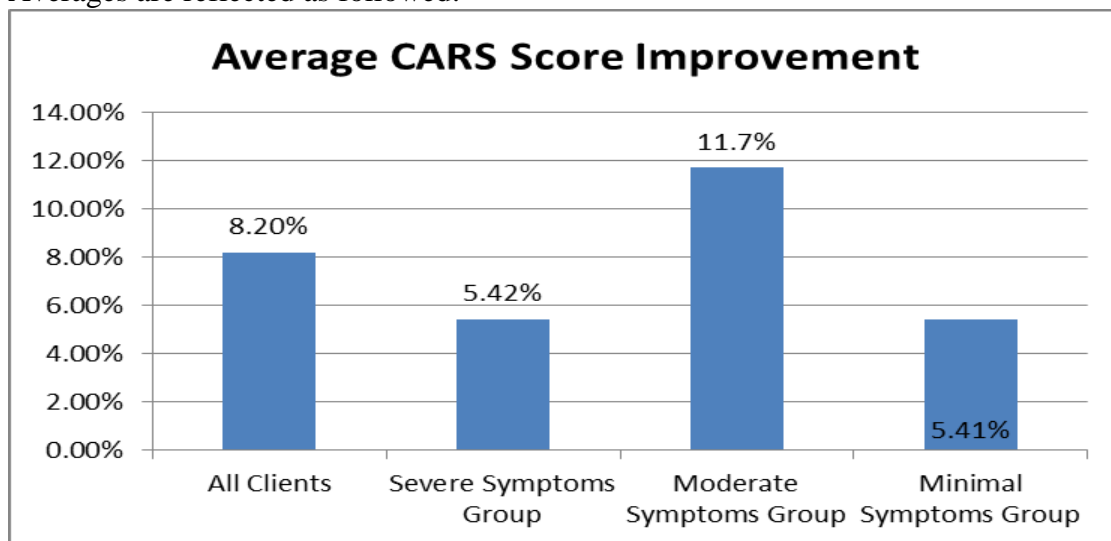
#### Pre Measures

Severe: 44.26%  
Moderate: 44.26%  
Minimal: 11.48%

#### Post Measures

Severe: 34.43%  
Moderate: 39.34%  
Minimal: 26.23%

The following graph reflects the average percentage improvement per treatment year (11 months) for CARS-2 scores. Progress was found most prominent among children with moderate symptoms. Averages are reflected as followed:

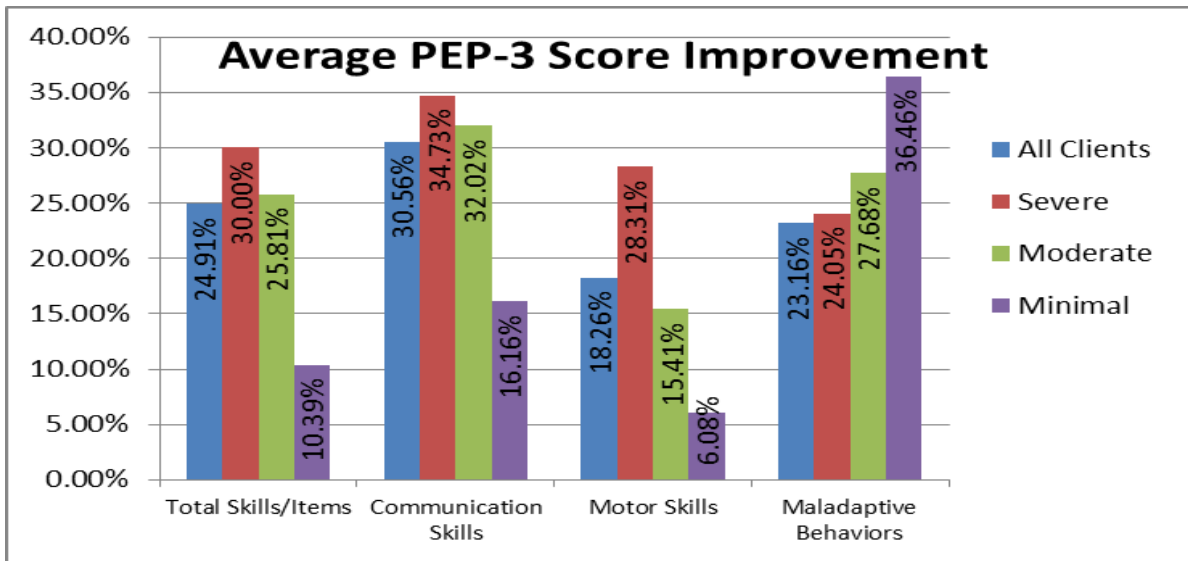


### PEP-3 Outcomes

For raw scores progress was found most prominent in the severe group, where clients completed a higher rate of new skills learned (items passed previously failed) with progress occurring predominately in communication skills. However, the minimal symptoms group experienced the highest rate of improvement in maladaptive behaviors. For developmental age the moderate group experienced most progress in communication while the severe group lead in motor and the minimal group in personal self care.

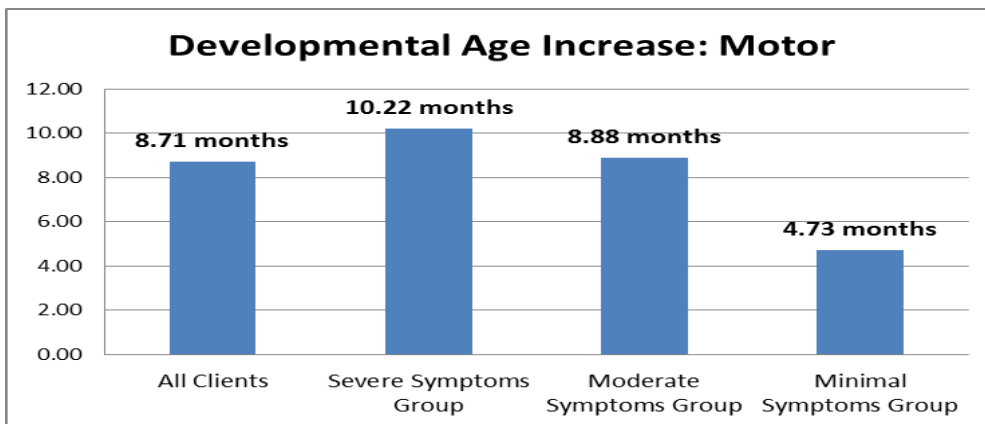
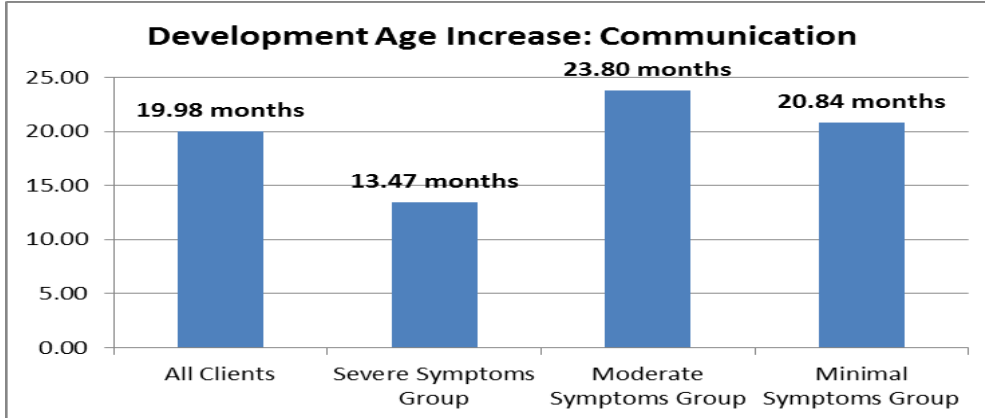
## Raw Scores

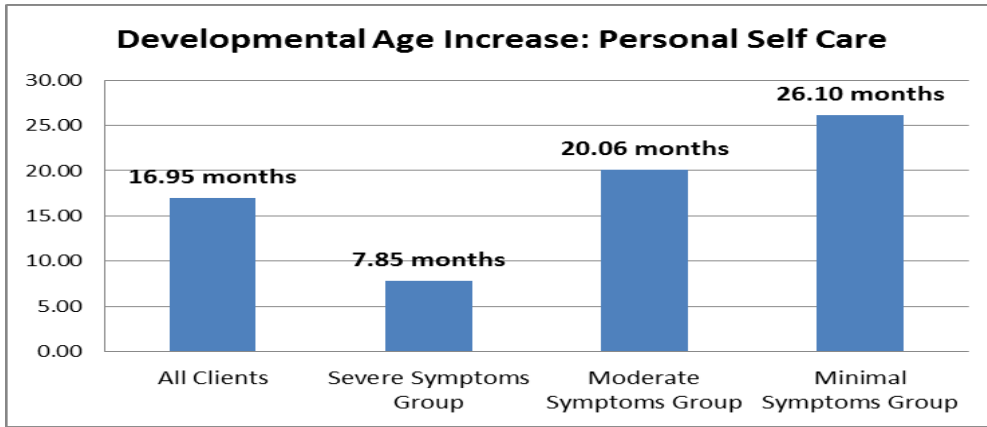
The following graph reflects average percentage improvements per treatment year (11 months) for the assessment's composites raw scores.



## Developmental Age

The following graphs reflect average developmental age increases per treatment year of the assessment's composite areas: Communication, Motor and Personal Self Care.

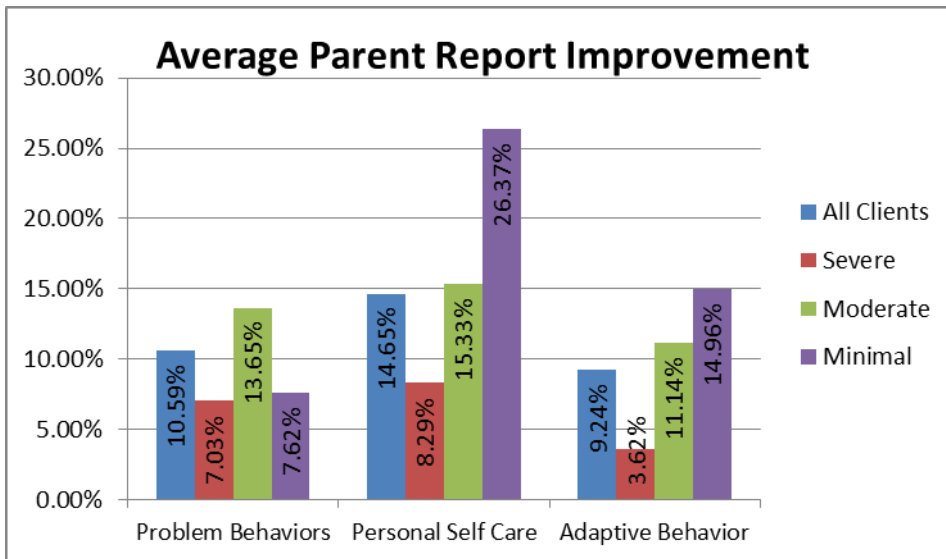




### Caregiver Report

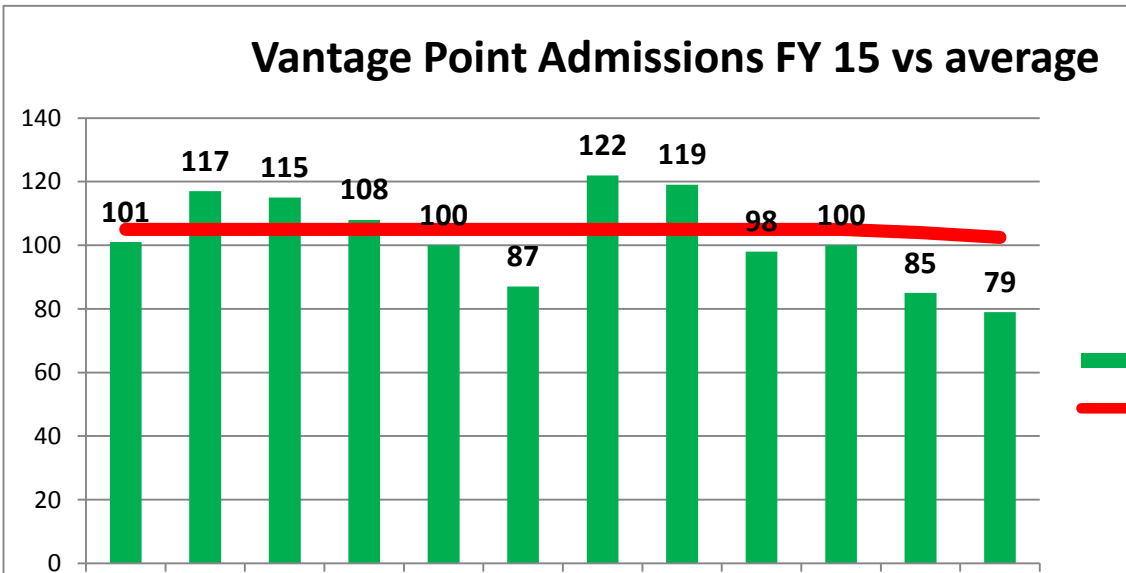
Parents having children with minimal and moderate symptoms reported the most overall progress. The most prominent progress was seen in the minimal symptoms group for Personal Self Care.

The following graph reflects average percentage improvements per treatment year (11 months) for the Caregiver Report.



## Vantage Point and CYFAST

We had **79 admissions** this month, **75** were unduplicated.

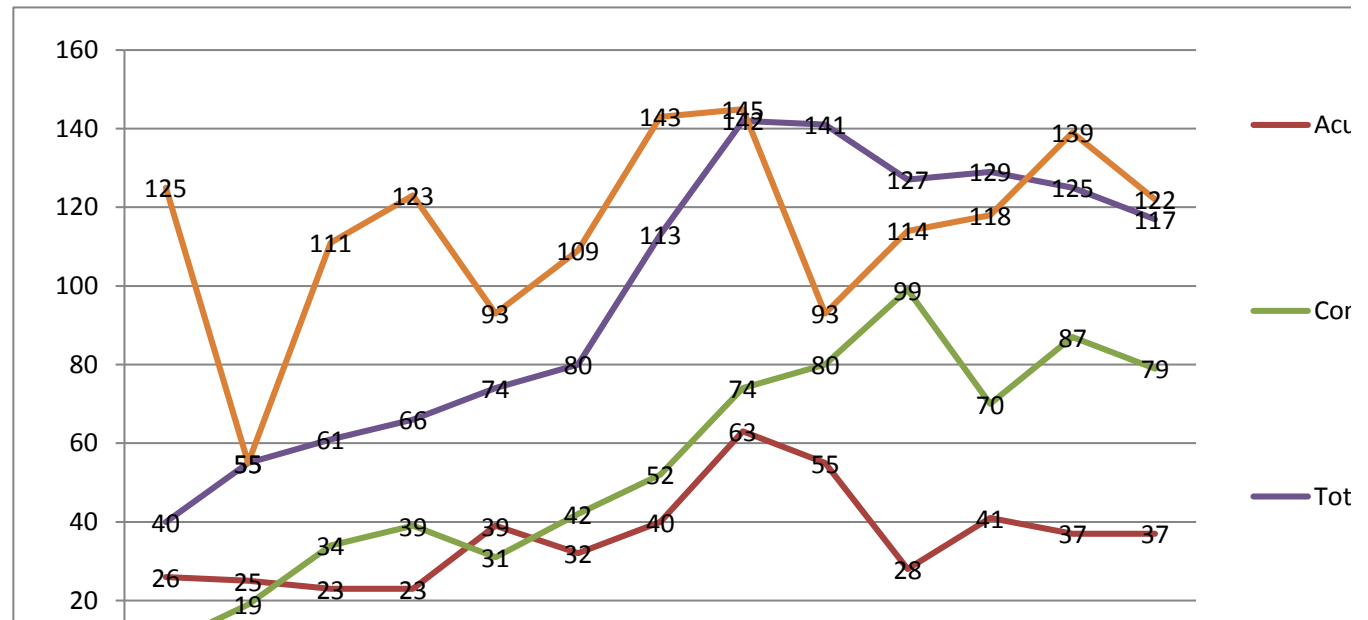


### Safe Exit

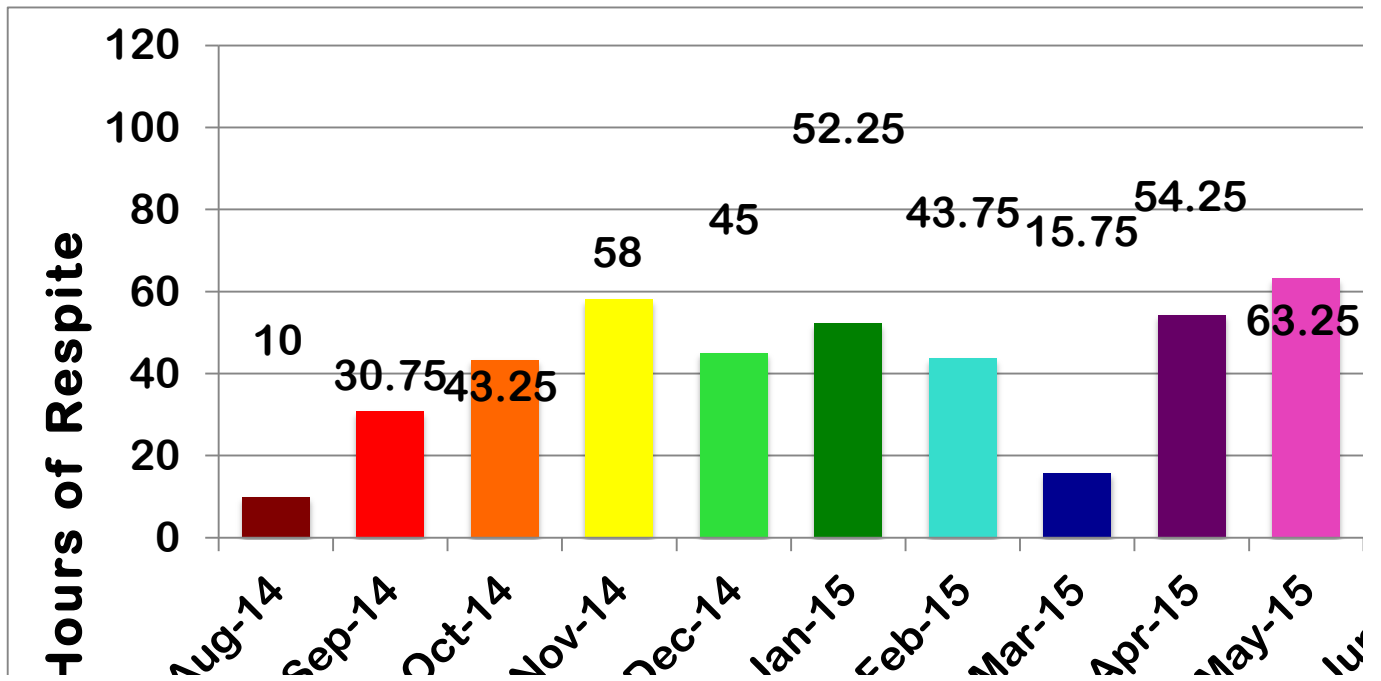
Crisis Residential: 97 %

Juvenile Receiving: 100%

### **CY FAST (mobile crisis)**



## CY-FAST Respite Care



We served 20 clients during the month.

## DHS Case Management

### Performance Indicators

**Case Load:** (A regular DCFS load should about 12-15 cases)

|                   |    |
|-------------------|----|
| Katy Gibson:      | 19 |
| Suzanne Jasper    | 14 |
| Amanda Stansfield | 2  |

All DCFS case reviews and court reports are completed and current.

DCFS data base task items are completed or scheduled.

**American Fork Family Clinic (AFFC)  
&  
School Based Services**

|   |            |             |             |
|---|------------|-------------|-------------|
| <b><u># of total clients served last month:</u></b> | Total: 514 | (Adult: 168 | Youth: 346) |
| <b><u>Number of YOQs/OQs administered:</u></b>      | YOQs: 410  | OQs: 322    |             |
| <b><u>Unduplicated number of YOQs/OQs:</u></b>      | YOQs: 236  | OQs: 178    |             |

**Groups in AFFC**

Child/Parent Relational Training  
Summer Program at Greenwood Elementary

**Leadership/Allied Agency Participation/Initiatives/Successes**

Bryant Jenks and Richard Hatch attended the NAMI National Convention. It was a great learning experience to hear and gain more understanding from the client and guardian perspective regarding navigating the mental health system.

Our School Based staff helped with the summer STRIDE program and received the following feedback from a couple guardians:

“[Our youth] has benefited from Stride in so many ways. Everyday when he gets done he walks to the car with a proud look on his face carrying a paper rocket, a beadwork key chain, or one of so many other awesome projects he has made. [Our youth] came from an abusive and neglectful home to live with me a year and a half ago. In that time he has grown in so many ways thanks to the staff at Wasatch Mental Health that work with him at Stride. I’m grateful he has the opportunity to be in this program & I hope that many more children can have this great experience.”

“We have really enjoyed our boys [being] in the Stride program. It has been such a benefit because of the problem solving skills they have learned, [and] the counseling has helped because they know that we can talk about our problems and it helps. They are learning how to use other forms of dealing with their aggressive behavior. I would recommend this [program] to any parent that struggles with their children’s aggressive behavior, and any child in general. Thanks for everything!”

**Spanish Fork Family Clinic (SFFC)  
&  
School Based Services**

|   |            |             |             |
|---|------------|-------------|-------------|
| <b><u># of total clients served last month:</u></b> | Total: 315 | (Adult: 106 | Youth: 209) |
| <b><u>Number of YOQs/OQs administered:</u></b>      | YOQs: 279  | OQs: 156    |             |
| <b><u>Unduplicated number of YOQs/OQs:</u></b>      | YOQs: 164  | OQs: 84     |             |

**Groups in SFFC**

CPRT parenting group  
DBT  
Summer Program—Behavior Management

**Leadership/Allied Agency Participation/Initiatives/Successes**

Kayelyn Robinson reported the following success with one of her clients:

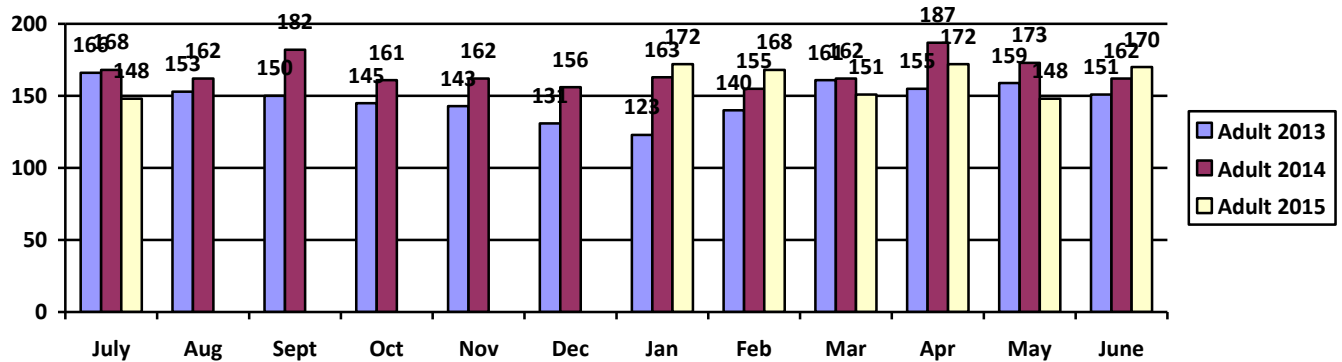
[My] client was sexually abused by her brother and an older brother's friend. Through methods of TFCBT and EMDR this client was able to participate in a clarification session with her brother this past week and he is able to transition back home. Her family is strict with the safety plan and her brother has been very willing to accept his responsibility and also follow the safety plan, even when it's hard. This client went to the sentencing hearing of the other offender and processed forgiveness for both of her offenders. She is hopeful that she can be close to her brother again in a healthy way as he proves himself to be safe. She also knows how to protect herself from future abuse from anyone. Her parents' active participation in both of their children's therapy was the key to the success for their family.

School Based Services staff from SFFC have been helping with the Summer Stride program. They have wrapped up another successful year. We want to especially acknowledge Spanish Fork Jr. High for allowing us to have the class in their facilities. We appreciate our school based relationships!

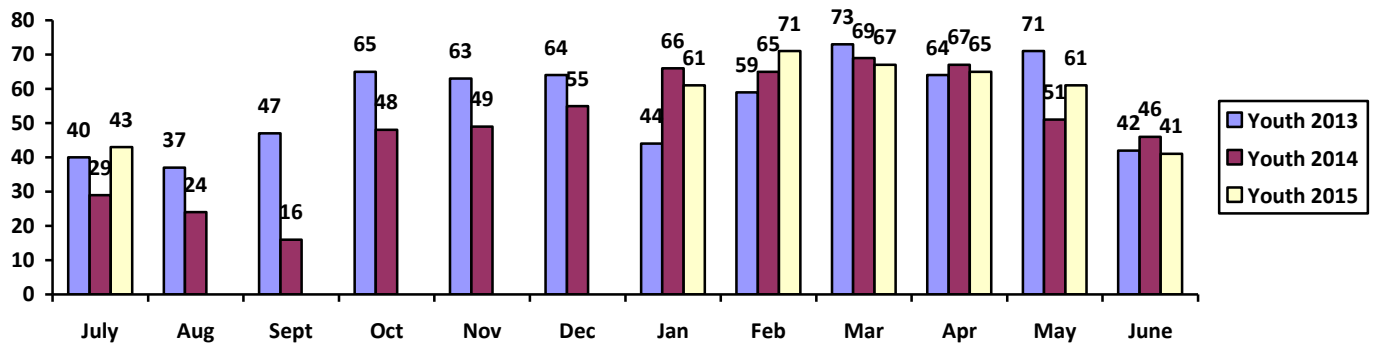
**Wasatch County Family Clinic**

**Total Unduplicated Clients Served in July: 191**

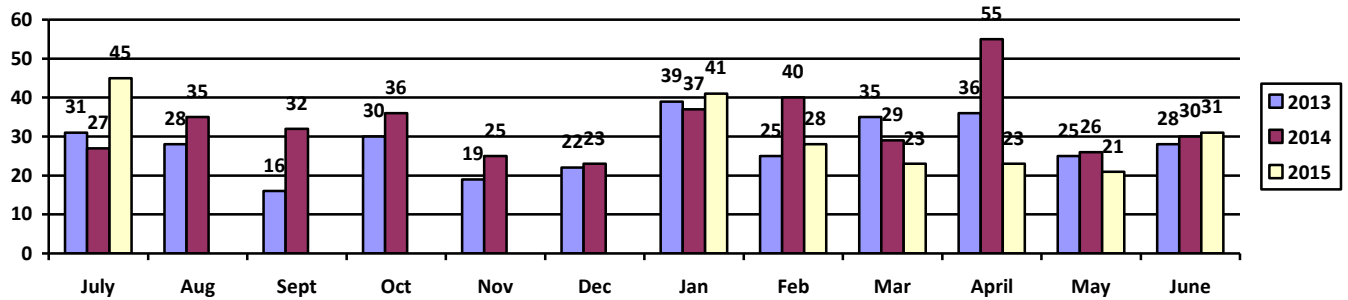
**Adults: 148**



**Youth: 43**



**July Monthly Intakes: 45**



**Number of YOQs/OQs administered:** YOQs: 42 OQs: 153

**Unduplicated number of YOQs/OQs:** YOQs: 22 OQs: 80

**Groups at WCFC**

- Recovery Day Tx
- Summer School Program
- Drug Court Group
- Gender Specific Male and Female SA groups
- Relapse Prevention
- Thinking Errors
- Anger Management
- MRT
- Prime For Life
- Teen Prevention
- Alumni Group
- Strengthening Families

**Leadership/Allied Agency Participation/Initiatives/Success**

Preliminary meetings have also been held with the Wasatch County Attorney regarding the Justice Reinvestment Initiative. Continued meetings were also held with the Caring Community Coalition and the Wasatch County Suicide Prevention Coalition.

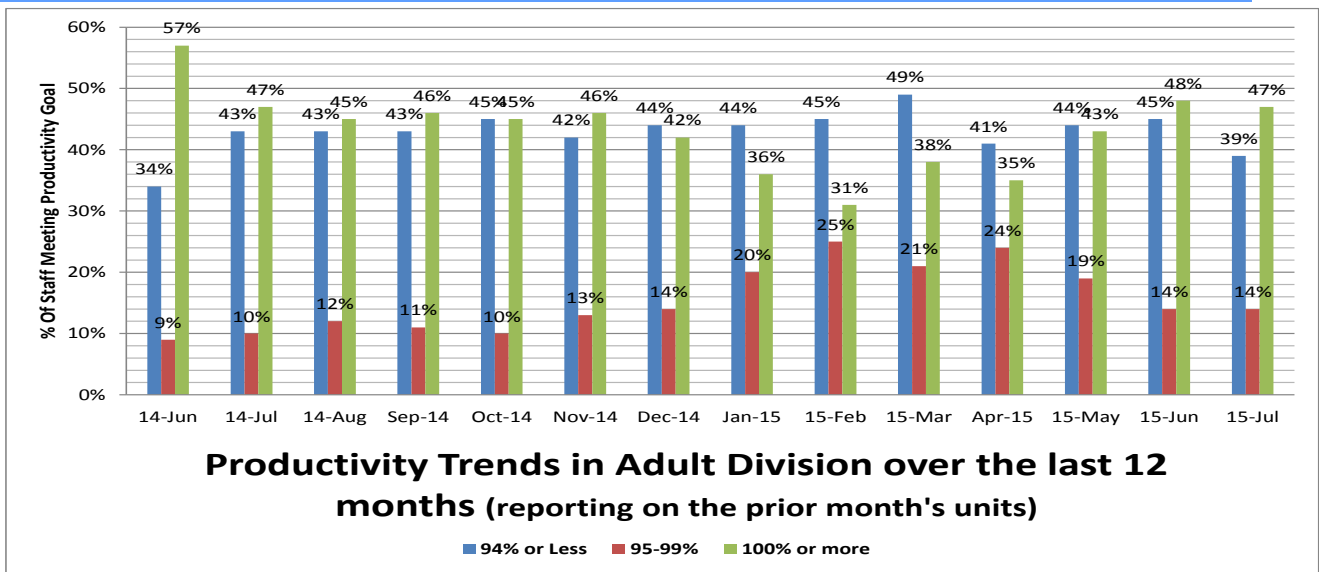
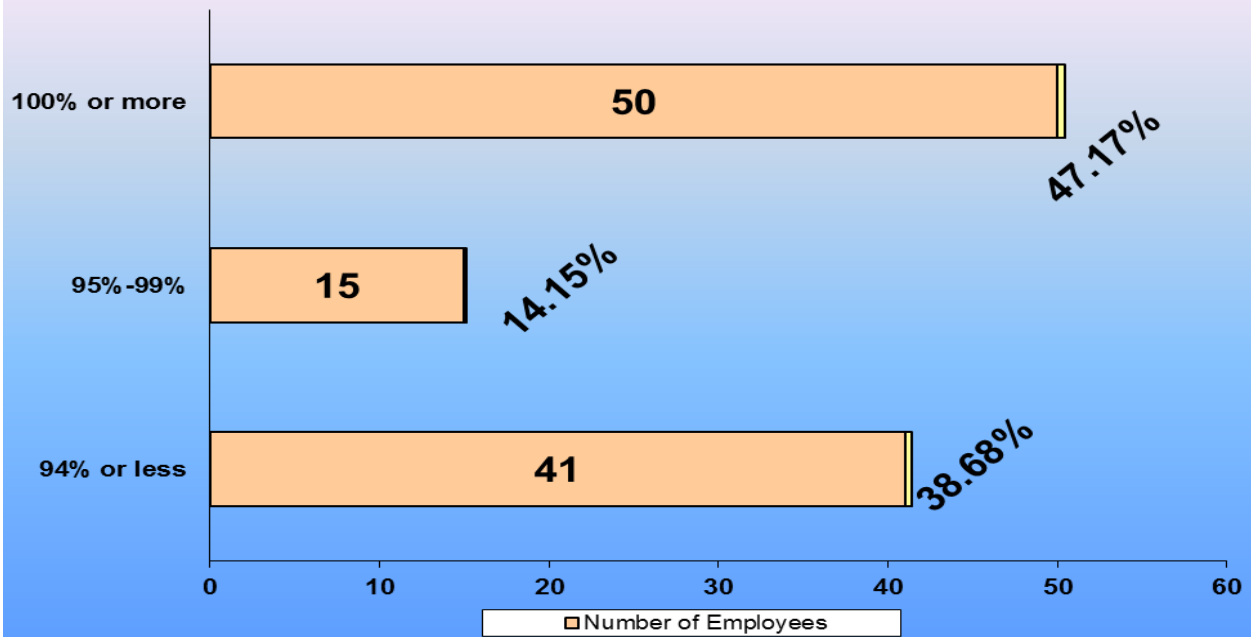
Heber Valley Medical Center now provides Crisis Evaluations using their telemedicine service. During July we received relatively few calls to consult. One issue we have identified is we no longer are aware of our WMH clients who may be admitted to inpatient services. We will continue to coordinate with the hospital.

We have received the Partners For Success Grant for some funding through this Federal Fiscal Year and next. One major purpose of this grant is to develop and strengthen community coalitions. With this funding we were able to have several of our coalition members attend a coalition summit and training held at Bryce Canyon. Kendall Crittenden, a member of the coalition and the Wasatch County Council was also able to attend.



## Adult Services Division

**Percent of Staff Meeting Productivity Standard**



### OQ/YOQ Administration

**Number of total unduplicated clients served last month: 3663**

|                            |      |
|----------------------------|------|
| Adult Clients Served       | 2339 |
| Child/Youth Clients Served | 1324 |

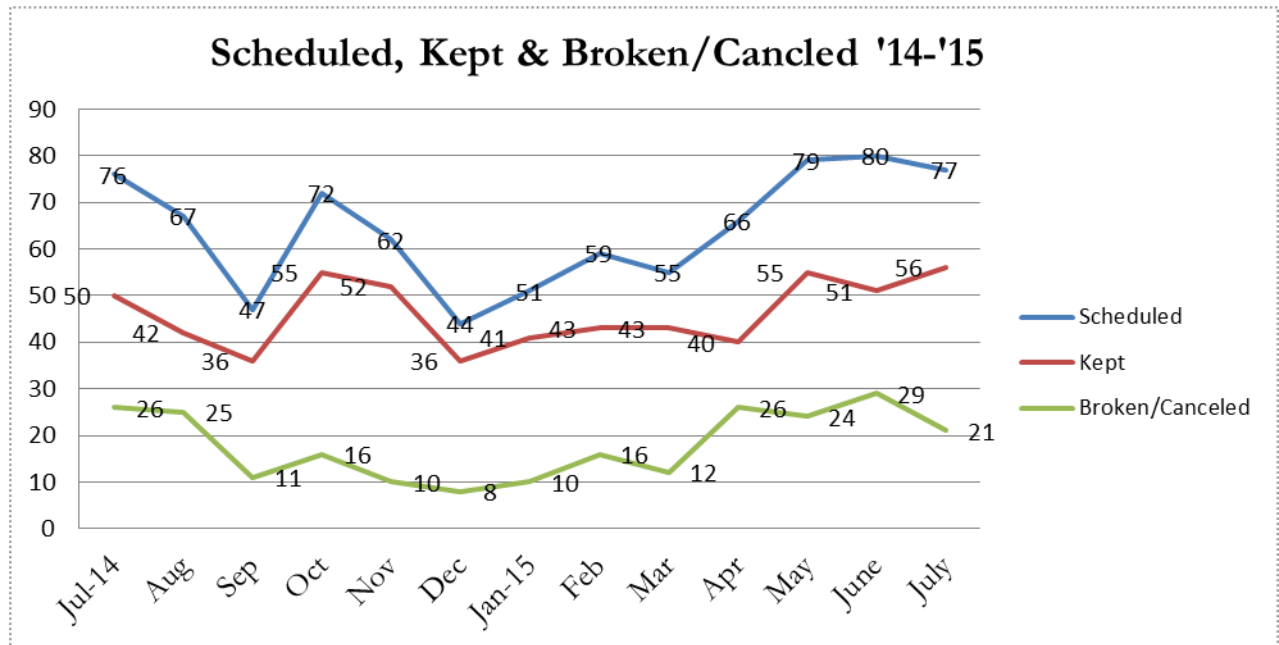
**Number of OQ/ YOQs administered:**

|                                    |      |
|------------------------------------|------|
| Adult Services Division            | 2217 |
| Children & Youth Services Division | 1081 |

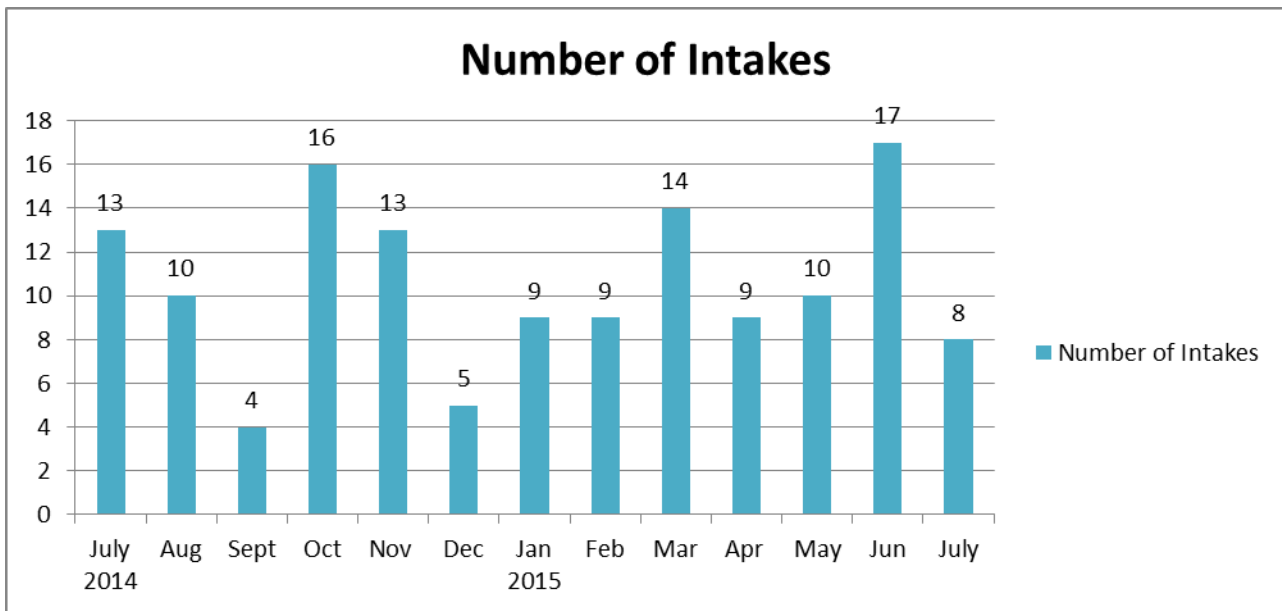
**% of Unduplicated Clients Completing an OQ/YOQ    57 %**

# Mountain Peaks Counseling

The graph below indicates the number of clients who were scheduled, the number of them who showed up to their appointment, and the number that did not.



Below is a graph of the number of intakes by month



## Leadership/Allied Agency Participation/Initiatives/Successes

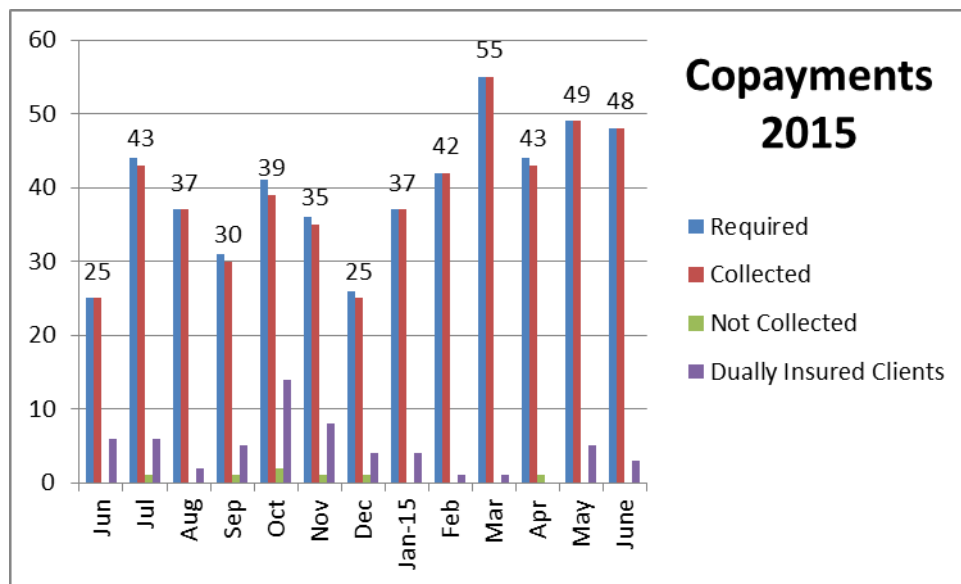
Included is a report from a therapist regarding one of their clients they worked within MT Peaks clinic:

OS began services at Mountain Peaks earlier this year, She had been hospitalized several times in the past year for suicidal actions. She began therapy and med management after moving back in with mom, as she had been living in Ogden area. She initially presented at Mountain Peaks as being more stable but as she progressed in treatment it became evident that she had rapid cycling moods and had difficulty with sustaining employment and lost several jobs in quick succession. She qualified for Medicaid once she moved into her own apartment. She was transferred to level 2 and was referred to Wasatch House to learn work skills on how to manage symptoms. She was able to get a Transitional Employment job and worked for several months. She recently moved to another state and is starting mental health services there. She is volunteering on a daily basis for a Good Will agency and has a chance at being hired part-time in several months. When contacted for an outreach call she wanted to thank everyone who worked with her at WMH for treating her with respect and also inspiring her to define her recovery goals and live life with her mental illness.

**Financial Report:**

As it is essential that co-payments are collected at each appointment, the graph below depicts the number of co-payments that were required and how many of those were collected.

Kimberlee Hughes has done an excellent job collecting co-pays from clients who come for sessions. You can see by the chart below that she collects nearly 100% of the copays required for the sessions attended.



**Adult Outpatient**

**Performance Indicators**

The number of OQ-45 questionnaires collected in AOP decreased in July compared to the previous month. AOP collected 569 OQ questionnaires during the month of July. This is down from 689 questionnaires administered in June, and down from 715 questionnaires administered during July of last year. Of the OQs collected this July, 352 were unduplicated, which was a decrease from the 393 unduplicated questionnaires collected during the previous month, and a decrease from the 395 unduplicated questionnaires collected during July of last year. The number of daily administrations

during July also decreased very slightly by 0.8 questionnaires per day compared to last month, and decreased by 4.2 questionnaires per day compared to July of last year.

The number of OQ-45 questionnaires collected in CSS also decreased slightly in July compared to the previous month. CSS collected 116 OQ questionnaires during the month of July. This is down from 134 questionnaires administered in June. Of the OQs collected this last month, 70 were unduplicated, which was decreased slightly from the 71 unduplicated questionnaires collected during the previous month. The number of daily administrations during July decreased minimally to 5.5 questionnaires per day compared to 6.1 questionnaires per day last month.

In addition to focusing on the collection of outcome questionnaires, we are also working to maintain a high utilization of the information obtained from the OQs to enhance our clinical practice. This month's random sample of two therapy notes from each clinician that sees clients in AOP and CSS revealed that an outcome questionnaire was administered in 18 out of 18 cases for a sample administration rate of 100%. Of the cases in which an OQ was administered, the clinician performing the therapy session referenced the OQ score in his or her note in 16 cases or 88.9% of the time.

During the last quarter (beginning with the pay period starting on 5/3/2015 and ending with the pay period ending 7/25/2015), AOP staff with productivity standards achieved a total of 2011.53 productive hours, which equates to 95.4% of the department's cumulative productivity standard. This is up 0.6% compared to last month.

### **Leadership/Allied Agency Participation/Initiatives/Successes**

In the past few months we have been tracking the number of referrals we are sending to Mountainlands Health Center. In June and July therapists report that they currently have 39 clients in CSS who are being served in Mountainlands, 25 clients were extended an Invitation to go to Mountainlands and 2 Clients were assisted in setting up appointments. It is difficult to ascertain, but it appears most of those assisted to set up an appointment kept their appointment.

The number of walk-in intakes performed in AOP decreased slightly this month while the utilization rate decreased, and the number of intakes scheduled increased. During June, a total of 38 walk-in intakes were performed, for a utilization rate for the month of 61.7 percent. This is down 8.8% from the utilization rate observed in June, dipping slightly below the point where performing intakes would be a detriment to clinician productivity on average. There were eleven potential clients who were not able to be seen at the time of their first contacts with WMH due to limited capacity this month. This marked increase compared to previous months was due to two factors including unusually heavy attendance of specific time slots and decreased clinician availability due to internship timing, illness and vacation issues.

## **Community Supportive Services**

### **Performance Indicators**

In July PASRR Staff completed 94 PASRRs for a generated revenue of \$35,910.94. This is a new record. The PASRR staff continue to break records of how many they do each month. We will soon be submitting the RFP for PASRRs for intellectually disabled individuals. This could increase the numbers of PASRRs we do even more. If we are awarded this additional contract, we may need to explore additional staffing needs.

# MENTAL HEALTH COURT

## Fourth District MHC

In July, 4 screenings were scheduled. 1 screening appointment was kept and 2 are still on hold . 2 individuals were admitted to the program. 1 individual was terminated from the program. 26 individuals are currently participating in the District MHC program. There were 2 graduations this month.

## Provo City Justice MHC

Currently, there are 7 participants. 3 screening appointments were set for next month.

## Orem City Justice MHC

Currently, there are 3 participants. This month there were no terminations and 2 graduations.

The number of OQ-45 questionnaires collected in CSS decreased slightly in July compared to the previous month. CSS collected 116 OQ questionnaires during the month of July, this is down from 134 questionnaires administered in June. Of the OQs collected this last month, 70 were unduplicated, which was decreased slightly from the 71 unduplicated questionnaires collected during the previous month. The number of daily administrations during July decreased minimally to 5.5 questionnaires per day compared to 6.1 questionnaires per day last month.

During the last quarter (beginning with the pay period starting on 5/3/2015 and ending with the pay period ending 7/25/2015), CSS staff with productivity standards achieved a total of 2638.25 productive hours, which equates to 94.7% of the department's cumulative productivity standard. This is down 7.5% compared to last month.

RPS staff with productivity standards achieved a total of 980.75 productive hours, which equates to 93.9% of the department's cumulative productivity standard. This is up 7.5% compared to last month.

## Leadership/Allied Agency Participation/Initiatives/Success

Our success story this month comes from a case manager who worked with a difficult client. She talks of her experience working with a local doctor who treated a client with a medical problem. She stated, "I want to acknowledge the exceptional work performed by one of our community partners. In May of this year, S.H. fell and broke his elbow; he was referred by Urgent Care to the Intermountain Utah Valley Sports Medicine Clinic in Provo. When I went to pick up S.H. on the day of his first apt, he presented with exceptionally dirty, stained clothes and it was evident he hadn't bathed in quite some time. Additionally, S.H. was experiencing auditory hallucinations and reacting to them quite severely. He was unable to remain in the waiting room and instead paced the length of the sidewalk just outside the building gesturing and talking loudly in response to the voices he was hearing. People entering the building would stare or point; S.H. knew it was attracting attention, but told me he couldn't help it. Writer asked the receptionist if there was a quiet room inside where we could wait until time for S.H.'s appt. She was very kind and understanding and not only found us a room but said she spoke to the doctor who agreed to bump S.H. up in order to see him next. When Dr. Gordon entered the room, he spoke directly to S.H. in calm tones and acknowledged that S.H. was having a difficult day. He asked S.H. if he wanted him to go over the x-rays as he usually does or just get right to the business of putting on the cast. S.H. said he just wanted to get the cast on and leave. When Dr. Gordon asked S.H. what color of cast he wanted, S.H. said he just wanted white (which hadn't been a color option), however the

doctor went to the effort to find some white casting material that he thought they'd gotten rid of. S.H.'s body odor was very bad and his skin and clothes were quite dirty, but Dr. Gordon did not hesitate to get close to S.H. in order to put the cast on him. He continued to talk in low, calm tones to S.H., explaining each step of the process. All of the staff treated S.H. respectfully in spite of him exhibiting what was sure to be much different behavior than what they are used to dealing with. I have been in many doctor apt with clients over the years and have seen clients treated as if they're invisible when receptionists, nurses, and doctors speak to me and don't even look at the client who is the actual patient. Every staff member communicated directly with S.H. and even if he didn't respond to them they still treated him with dignity and respect. Awesome!!”

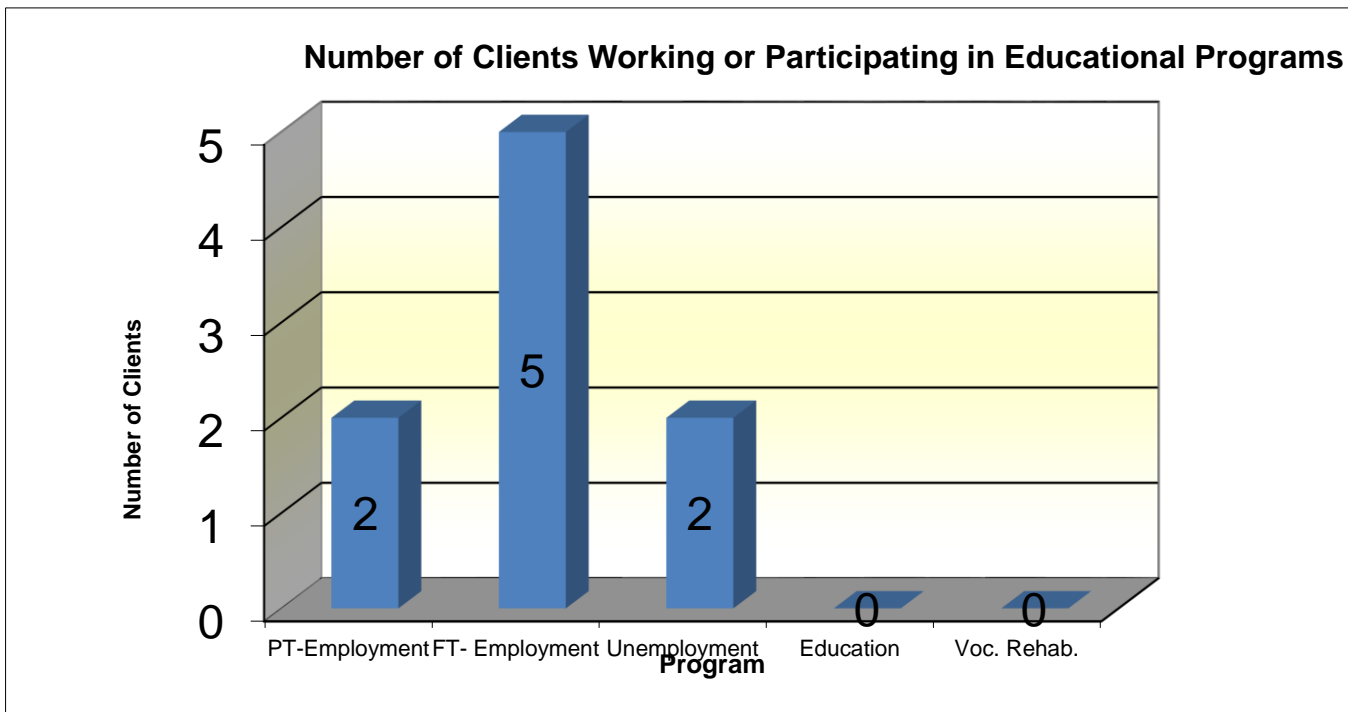
In the past few months we have been tracking the number of referrals we are sending to Mountainlands Health Center. In June and July of the therapists and case managers reporting, 99 of our clients go to Mountainlands, 25 clients were extended invitations to go to Mountainlands and 13 clients were assisted in setting up appointments. It is difficult to ascertain, but it appears most of those clients who were assisted in setting up an appointment kept their appointments.

**Number of Unduplicated Clients Served last month:**

In July CSS provided services to 374clients. RPS provided services to 282 unduplicated clients throughout adult services.

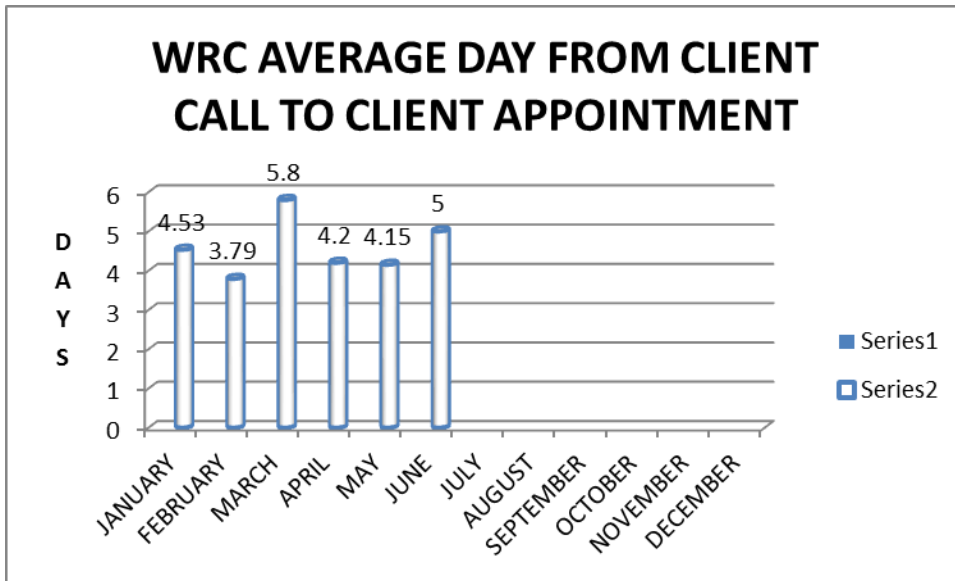
**Wellness Recovery Clinic**

The following chart shows the number of individuals working or who are in an education program for FY 2015.



**Average length of time (in days) between initial phone call and scheduled intake**

The average time between initial phone call and intake in the WRC was 5 days for the last month



**Leadership/Allied Agency Participation/Initiatives/Success**

We have begun to take a look at tracking referrals made to Mountainland Medical group in West Park. We get a few phone calls asking for information for a low income medical clinic and referrals are made to the Clinic specifically at Westpark. This past 2 months we have made some referrals:

- From individuals not open in services: 3
- Referrals from WRC clients: 3

We have received some feedback from some clients via the comment box:

Thank You!! For helping me get Medicaid. I have struggled with MH issues for years and it wasn't until I came here to Wellness Recovery that I was truly helped. Thank you Jessica!!!

Your staff is exceptional. Becky tries to help me schedule appt in the most efficient & effective ways possible. Travis makes me feel relaxed, understood, & well-managed in just 15 mins. How does he make 15 feel like a full 30? Jennifer is an absolute godsend helping me process forms & bills that I could not manage on my own. The staff in the various groups is smart, sensitive & professional. They rein me & my ADD in with out hurting my feelings.

|   |     |
|---|-----|
| <b><u># of total clients served last month:</u></b> | 182 |
| <b><u>Number of OQ/ YOQs administered:</u></b>      | 316 |
| <b><u>Number of unduplicated OQ/YOQ:</u></b>        | 139 |

We are grateful to have 2 Psychology interns working in the WRC this year. We have many holes to fill with the 3 interns that just recently ended their time with us. They are fitting in nicely and acclimating to the WRC and services provided here.

## **Medical Department**

### **Leadership/Allied Agency Participation/Initiatives/Successes**

We are pleased to announce that Dr. Tom Yee will be joining the medical staff as a prescriber. Dr. Yee has experience with both youth and adults and will be providing services for both age groups. He will be joining us at the end of August.

With Dr. Page gone, we have slightly lower productivity with support staff like Wellness Coordinators and Nurses.

We have Dr. Yee live on Junction and are sorting out which days he will be where. We have started adding clients to his schedule. He will start at the end of August.

Dr. Villani let us know that he is moving back to New York. He wanted to keep the door open in the event he moves back Utah some time.

With Mitzi gone for over a month, we have had an opportunity to look at the pre-auth system currently in place and are making some changes. One big change is that we got permission from prescribers to use an electronic copy of their signature for the letters so we don't have to spend time tracking them down. We have developed some templates for the letters that are standard. We are working on a procedure for scanning them into the chart rather than storing everything in the wall of file cabinets in Mitzi's office. And, we are training a handful of people to do the pre-authorizations so we have more resources to meet the need.

“Same Day Services/ Just in Time Scheduling” has been on our minds for a while. We have had some preliminary discussions with prescribers and clerical staff about the concept. Due to the success of the walk-in clinics already, it was not a hard concept to sell. We have gone through prescriber schedules at West Park and added walk-in clinics for all prescribers. In October we have scheduled an expansion of those clinics. We will evaluate at the end of the year to see how we want to keep expanding this concept.

## **Psych Testing/Interns/Form 20**

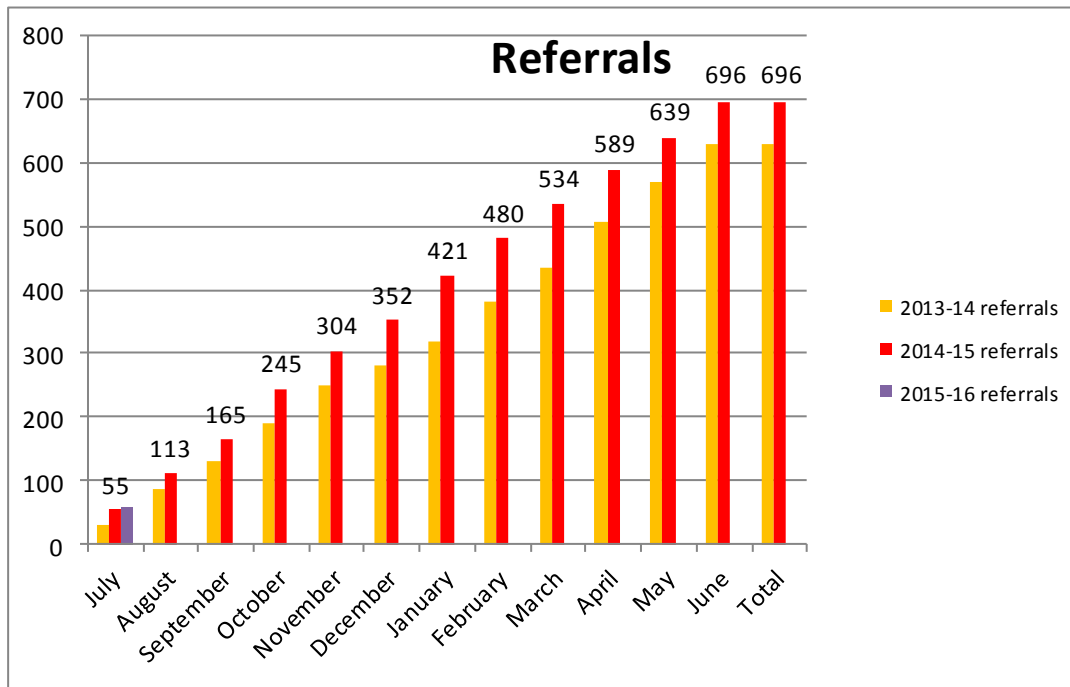
### **Leadership/Allied Agency Participation/Initiatives/Successes**

We are pleased to announce that Dr. Jaime Houskeeper has been selected as a new supervisor in Psych Services! Psych Services has been a very busy new department and has some administrative needs to run at full efficiency. Last year, the department processed 696 psych testing cases. The department currently has 3 full time psychologists but also coordinates with 5 psych interns and 6 other psychologists center wide to accommodate testing referrals.

We also have an Internship Director, Dr. Randy Pennington, who organizes and orchestrates the Psychology Internship program that is accredited by the American Psychological Association. This accreditation helps us to bring in highly qualified doctoral students to complete a one year internship at



Wasatch Mental Health. These doctoral candidates come from all over the country which gives us an opportunity to learn about how mental health systems and challenges are experienced outside of Utah. This year we have 5 interns, 3 of whom are male, ending the all female groups of recent years.



The chart above shows the number of psychological testing referrals received year to date and compares it to the prior two year’s numbers. We are still getting more referrals than previous years.

End of the year feedback summary from interns would suggest that we need to do some work on the Didactic schedule. I will be working with Dr. Pennington on this goal, again. We made some strides in the right direction last year but lost it at the end of the internship.

### Outside Providers

We are still working on getting treatment plans in and pre-auths out for private providers. We did get the entire end of the year billing in from private providers in record time. We are setting up the audit schedule for the year.

### Clerical Support Services

It’s always nice when a supervisor is called out to the front desk to hear a compliment instead of a complaint about a staff member. One of our clients wanted to share with us how wonderful Ana Rojas is to work with at the front desk, “she is pleasant, kind, and easy to speak with”. She is helpful in every way towards the population we work with”.

Dallas Earnshaw has worked with a client for seven years and he is switching insurances do to life circumstances for the better. This client is hoping to get an insurance that will allow him to transfer to Mt Peaks because he said WMH has treated him so well these last seven years, especially Dallas. Client

wanted this writer (Lori) to thanks all staff members for the great work and the kindness that has been rendered toward him.

We now have locks on both entry doors at West Park, decreasing the chances of someone slipping in as staff leave after the building has been locked up. Admin techs feel “heard” and a little safer since they are the ones who end up dealing with the people who have slipped in previously. Thank you!

**Performance Indicators:**

AOP secretaries served roughly 1,581 clients at the front desk during the month of July with a break down of 614 clients receiving therapy and 468 receiving medication management, and 389 clients checking in for Mt. Lands Health Clinic, this is up 34 clients from last month. The last few months we have started checking clients in for case management since they have transitioned over to using junction scheduler the month of July; we checked in roughly 110 clients for this department it is a ball park figure since not all clients for this department check in with us, it has been a positive transition for most case managers.

AOP secretaries served roughly 19, 821 clients at the front desk during the fiscal year 2014/2015.

**Jail Contract**

Marsha has exited the jail and returned to PFC for an additional half day a week. Clint has made in it and back out again for his first few jail clinics.

**Elder and Vulnerable Adult Coalition (EVAC)**

The meeting was cancelled again in July but is scheduled for August.

**CIT (Crisis Intervention Team)**

State wide coordinating meeting to update curriculum etc. was scheduled for September.

The next academy is schedule for November and will be held at UVU.

**Skills Development Services**

The Clubhouse Director, 1 staff and 1 member are currently participating in a 2 week training at Alliance House in Salt Lake City. This event focuses on immersing Clubhouse staff and members in the Clubhouse model to bring the program into fidelity.

Through funding provided from the foundation, the Clubhouse was able to take 40 members for an enjoyable day at Lagoon. For many members this was the first time they were able to enjoy this type of activity. Several challenged themselves on some of the more intense rides and worked through the anxiety that comes with waiting in line to receive the self confidence that came afterwards from accepting the challenge and seeing it through. We want to express appreciation to the foundation for making this activity possible!

**Number of total unduplicated clients served last month:** 156

**Number of OQ/ YOQs administered:** 95

## WATCH Program

# of clients served in the WATCH Program: 82

2 WATCH clients were highlighted in Mayor John Curtis' fundraiser for homeless programs.

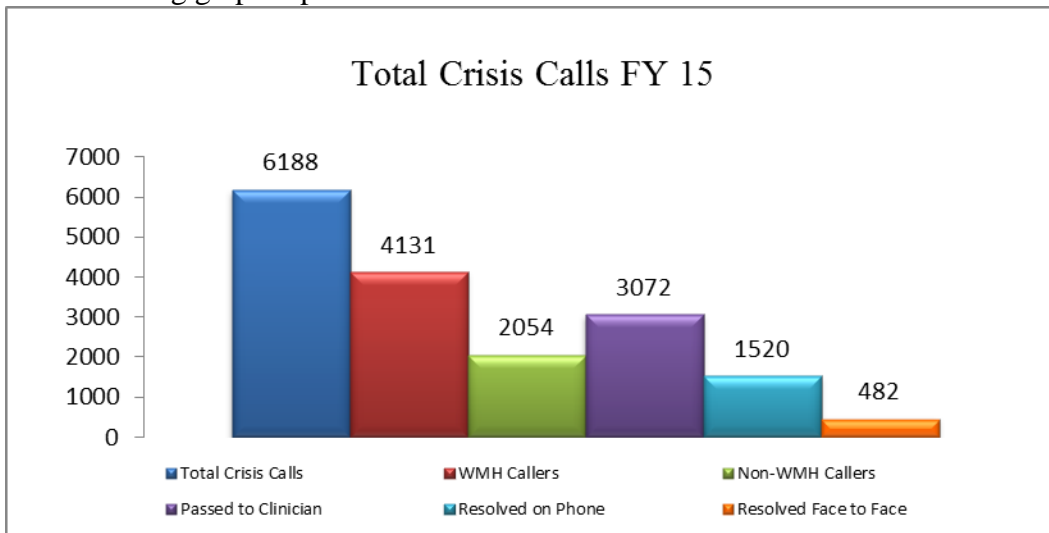
### Financial Report

In the month of July, \$3020 was spent in emergency shelter. In FY16, we have spent a total of \$3020 to house 10 unduplicated individuals for 76 nights of safe and secure shelter. The average length of stay is 7.6 nights per person. We have expended 9.1 percent of funds for 8.3 percent of the year.

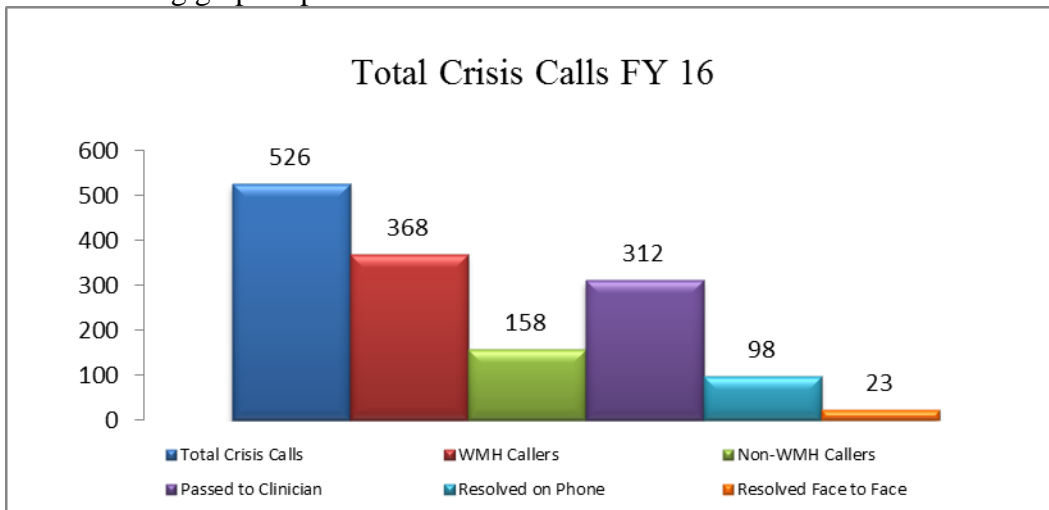
## CRISIS SERVICES

### Crisis Calls

The following graph represents the total break down of Crisis calls received thus far for fiscal year 2015

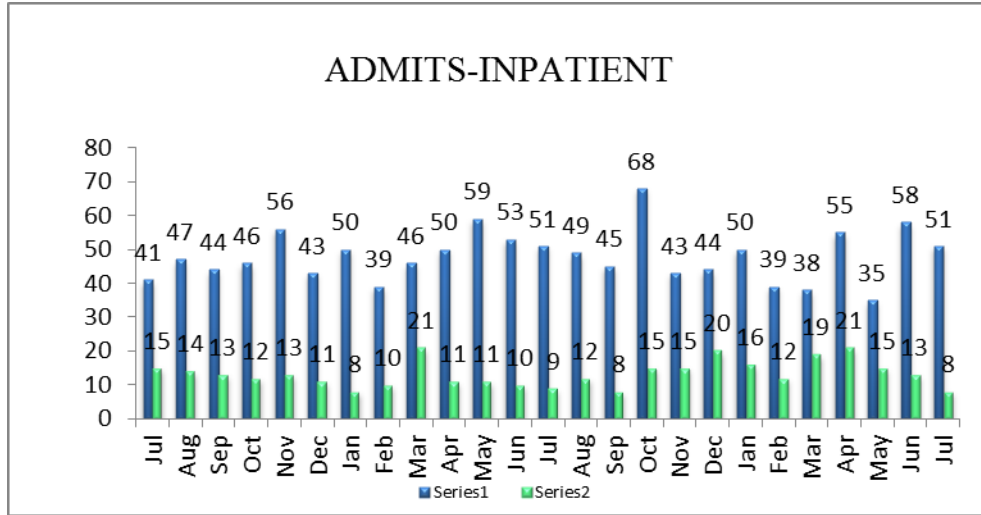


The following graph represents the total break down of Crisis calls received thus far for fiscal year 2016

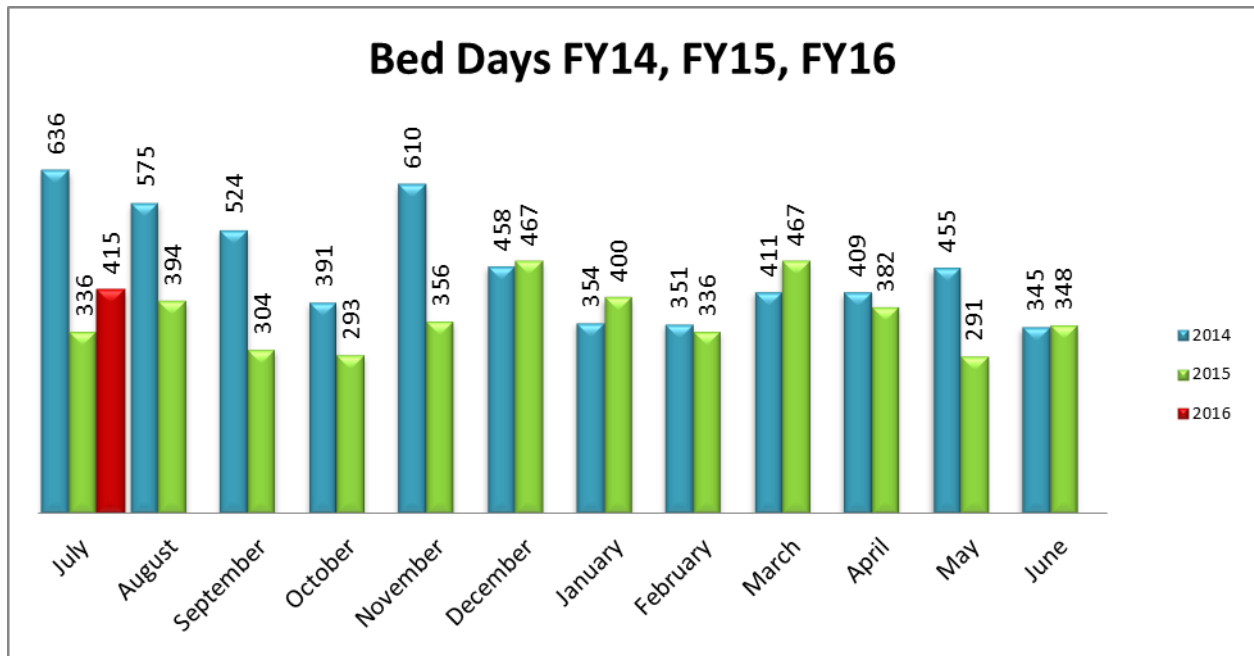


## Inpatient Psychiatry

The following graph represents Adult and Youth clients admitted to inpatient psychiatric units for the last 25 months. (FY2014 to current FY2016)

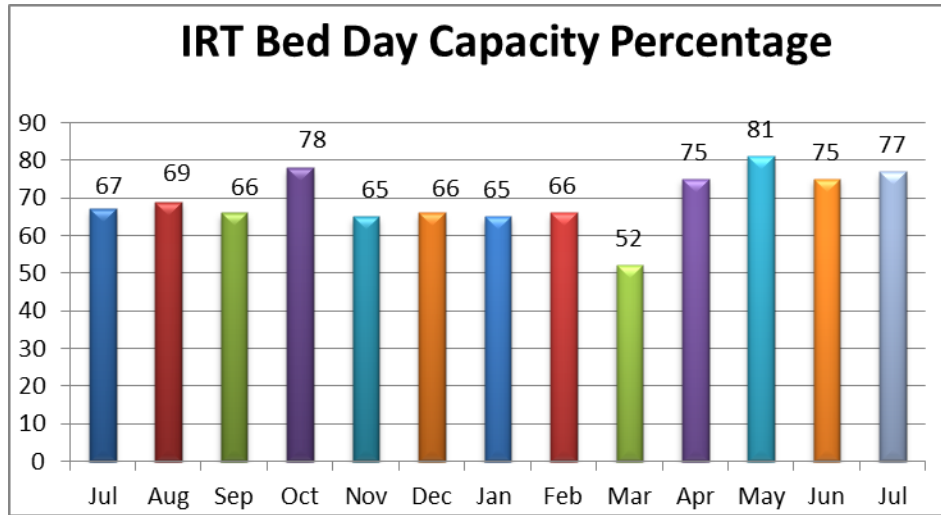


The following graph illustrates the total number of inpatient psychiatric bed days used for WMH clients during each month of the last two fiscal years and FY 2016. These bed days are accrued for all inpatient interests involving various WMH clients. WMH will not necessarily be the Medicaid payer; however we are accruing the worst case scenario.



## Intensive Residential Treatment

The following graph illustrates the bed day capacity percentages from FY14 to FY16 at IRT

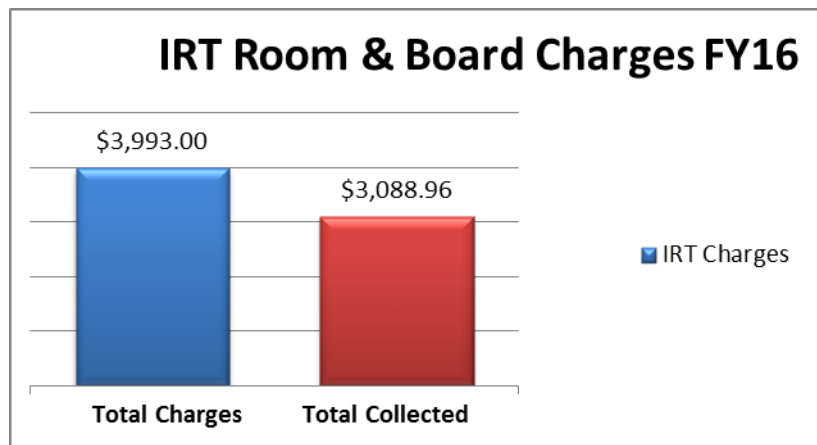


### Success Story

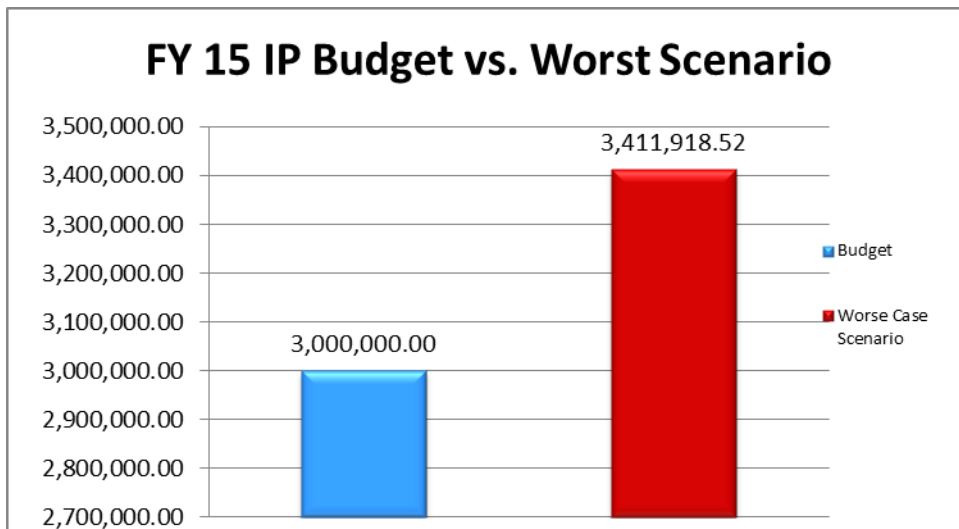
We have had several clients leave IRT and inpatient psychiatric services and link to longer term outpatient resources. Looking back at the month of July we would consider the valiant efforts of the BRIDGE Team case managers and therapists a huge success. They worked at a feverish pace, while significantly understaffed most of the month to keep current clients stable, and to place very difficult individuals into housing arrangements that are not easy to come by. Most of the openings and available apartments have come in partnership with some local landlords who know that the BRIDGE team staff will take immediate action if the landlord has a concern with the client/tenant. A few of our clients would be in a USH setting if it were not for the daily contact, sometimes several times a day contact with these chronically ill clients. Because of the reputation of the BRIDGE Team staff, landlords have been willing to take “risks” with clients who present as rough around the edges and don’t necessarily pass standard credit checks.

### Financial Report

This table represents the total number of IRT Room and Board dollars collected compared to the total number of dollars charged.



The graph below illustrates budgetary expectations for inpatient psychiatry costs thus far in FY15. The column in blue represents budgeted inpatient costs. The column in red represents both the cost of actual claims paid and all other projected bed days tracked. This demonstrates a worst case scenario.



## Human Resources

### Staffing

The total turnover rate for July 2015 was 4.2%, and annualized WMH is running at 23% overall. Part-time employees continue to drive the turnover rate and the majority of employees leave due to moving and or school. The spike in separation in July is directly related to student returning to school. Average time to hire (time from recruitment request to start date) has been reduced from 49 days to 38 days.

Turnover rate for full-time benefited employees = 21%

Turnover rate for part-time employees = 49%

Exit survey data shows that most employees are leaving having a positive experience – a great source of referrals and good will!

