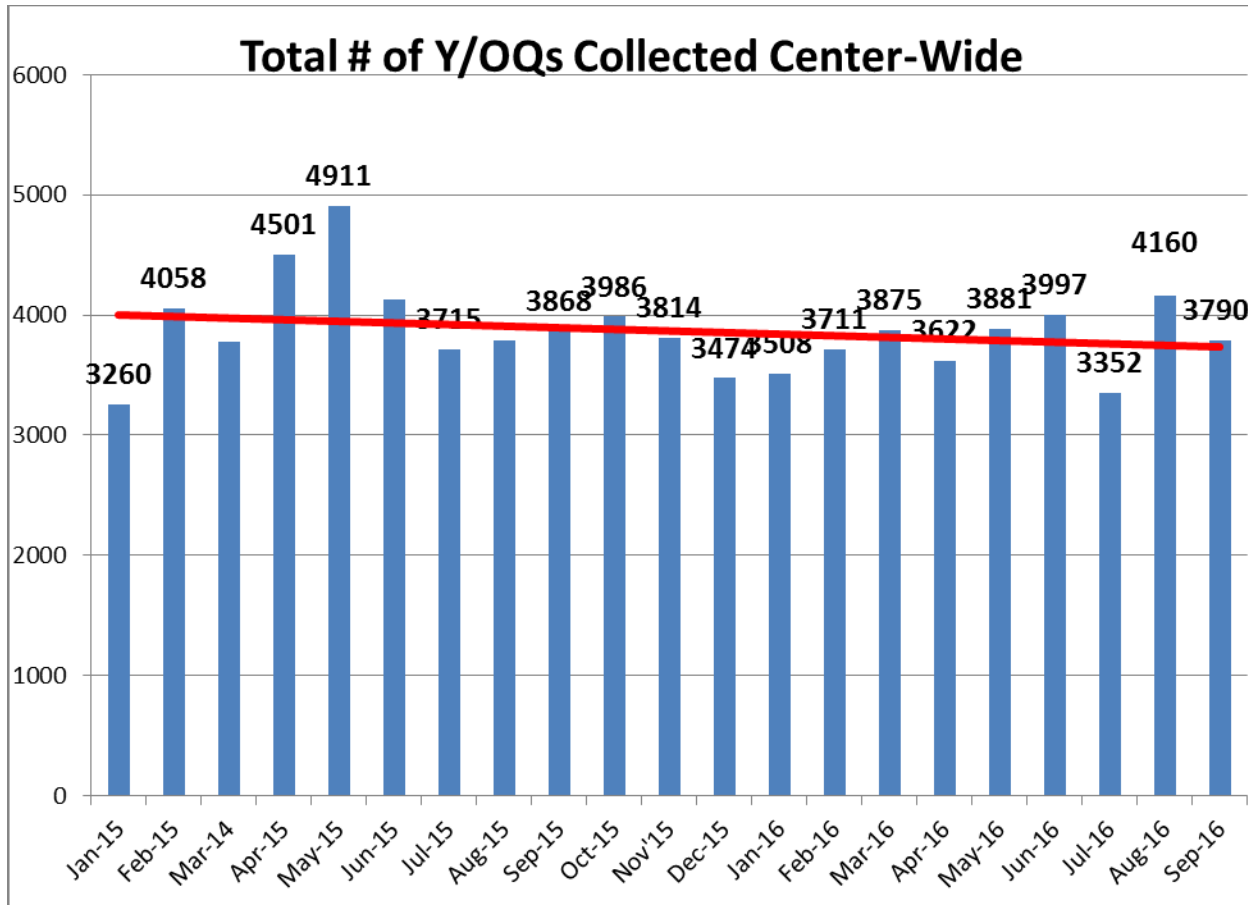


Wasatch Mental Health Monthly Briefing Report October 2016

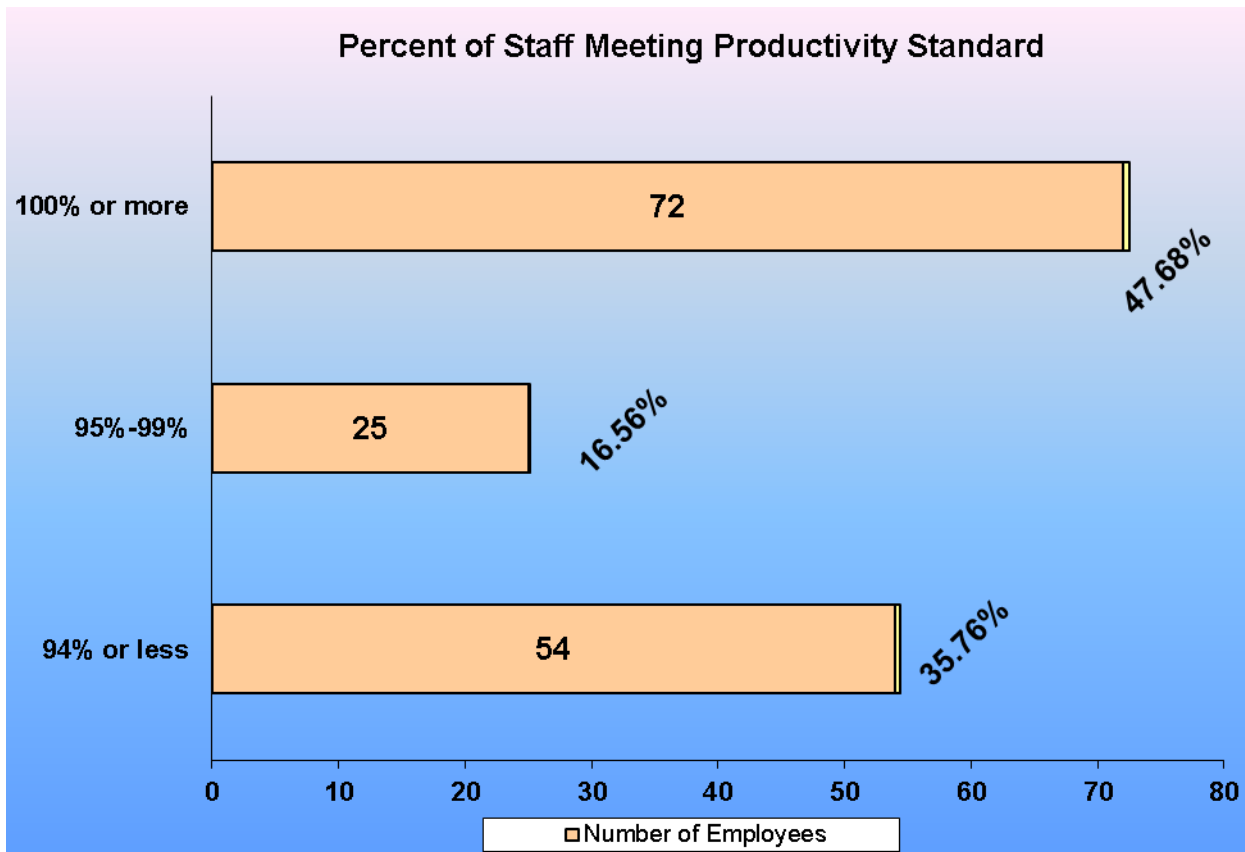
Over the last month, our executive team worked through the initial recommendations from our Salary Survey. Our consultant has done an excellent job to review our job descriptions, develop a systematic rating and training system and provide market data. However, despite his expertise, many refinements were needed internally to adjust for the specific content knowledge and job requirements and to bring the cost of the recommendations into our budget expectations. At this point, the executive team is prepared to present its recommendations to the Authority Board. The overall cost of the implementation of the recommendations (originally \$1.6M from the consultant) have been brought in line with the anticipated cost of about \$1M (including benefits). At this time, we will also propose a plan to adjust the matching contributions for our 401K/457 savings retirement savings plan. The cost of the latter is offset to a large extent by a restructuring of our insurance waiver benefit implemented in FY17.

Below a graph depicting the center wide collection of the Y/OQ protocols.

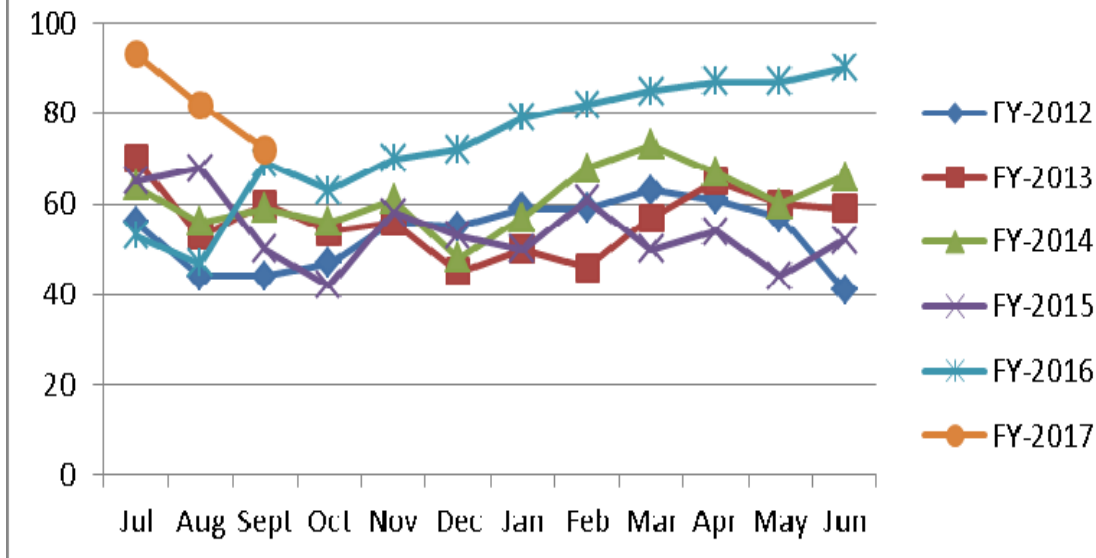


Children and Family Services Division

Performance Indicators



Percentage of Employees with 100% or More Billable Time

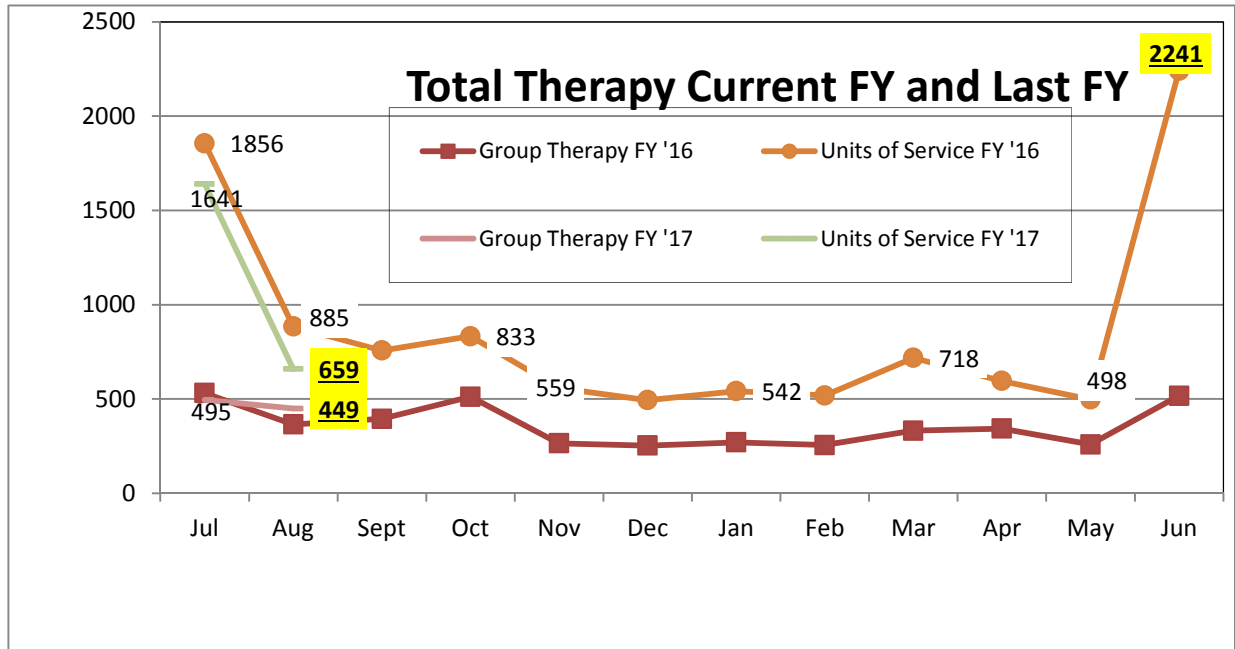


Highlights

- Greg Robinson, Janene Candalot, Doran Williams and Catherine Johnson participated in a trauma informed supervision workshop. They learned how to help staff with the trauma they daily deal with.
- September 14, 2016 New Vista, Vantage Point and the Domestic Violence treatment program were well represented at the DCFS provider fair along with other Wasatch Mental Health services.
- Giant Steps Christmas Program: Friday December 16th at **10:30 am** (Foothill Elementary)
- The PREP (Prevention and Recovery for Early Psychosis) has twelve active clients and approximately 30 who are getting screened. Case loads are getting filled as well as prescriber time. The whole team will be attending On-Track training in October. The training will give the team more guidance in treatment forming and group organization. PREP is also looking at expanding services to do possible pill boxes and med drops for some of the clients, similar to the Bridge Team.
- In September the Wasatch County Family Clinic partnered with several community groups to co-sponsor the Annual Dinner in the Park. This event is held in conjunction with and to help promote National Eat Dinner with Your Family Day. Participants were able to receive information regarding the need to reduce underage drinking and other awareness information. They were provided ingredients to take home and have dinner together as a family and were also provided a dinner in the park. Over 440 individuals were served dinner at this event.
- During September the New Vista clinical team began to meet with the Probation Departments in Utah County to bring them up to date on New Vista's emphasis on trauma focused treatment for both boys and girls who have either sexual behavior problems or are victims of sexual abuse. These individuals need more intensive care and support than regular outpatient clients. We have begun to explore renaming New Vista. New Vista is known state wide for treating youth with sexual behavior issues. We want to move away from that brand and toward a new brand which reflects on the Trauma Focus as described above.

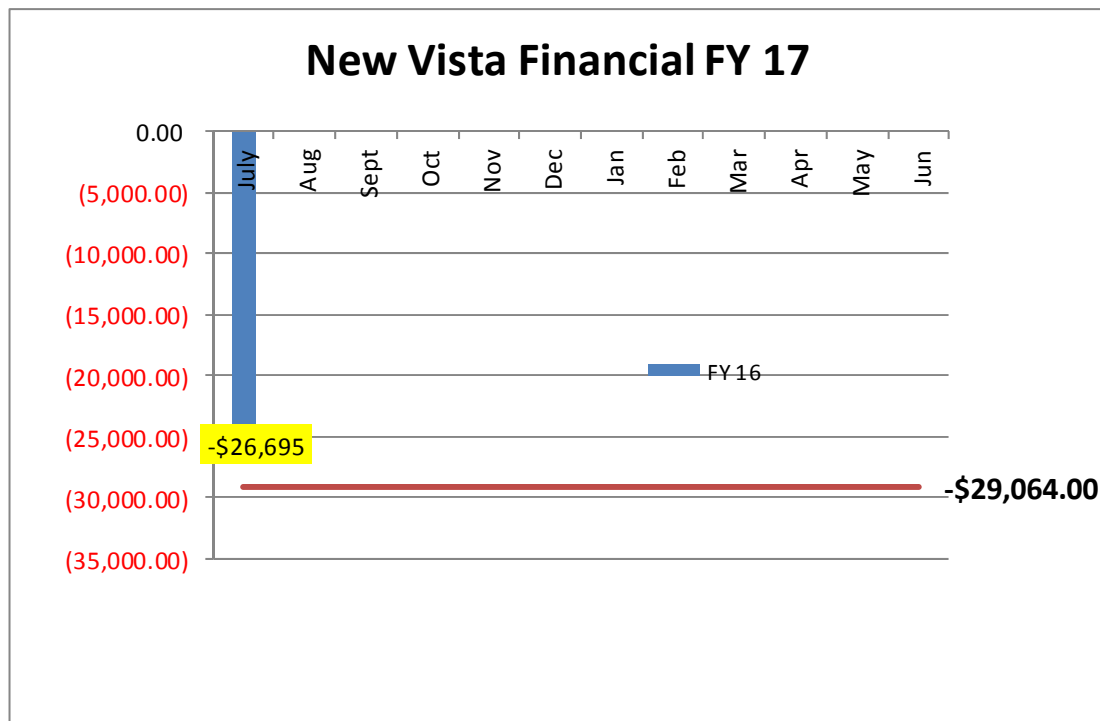
New Vista Youth Services

AUGUST REPORT: August is following the same pattern as it has in years past. This year is a little lower because our census was a little lower. School began about August 17 and that is the time when our kids aren't as available for services as they were in June and July.



New Vista Financial Report

We begin the new fiscal year under the five year average.



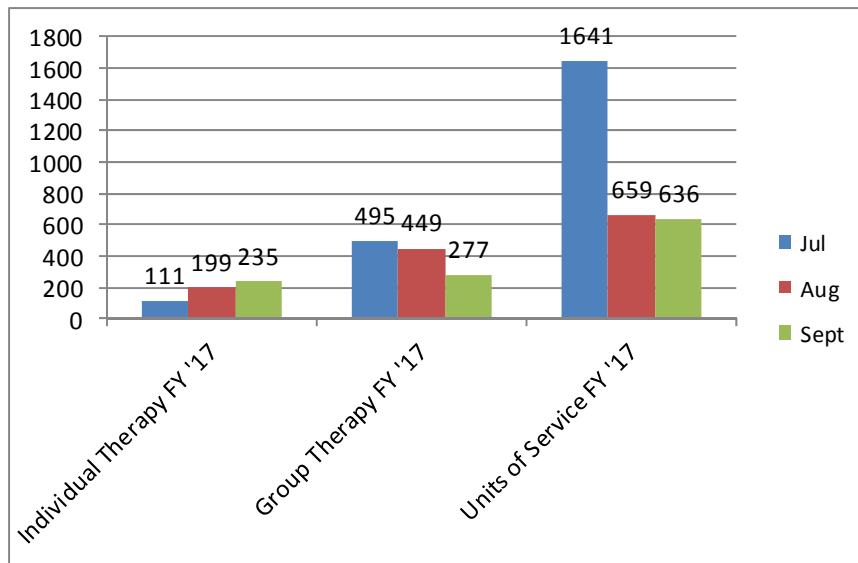
August 2016 New Vista Monthly Report

New Vista continues to hold its 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 morning to transport the youth to treatment and then transport home after treatment. New Vista continues to use the summer lunch program to provide breakfast and lunch for the youth.

In the New Vista YSD group's we focus on building and maintaining healthy relationships. New Vista held a talent show on August 9th. The youth got excited to showcase these talents for each other. It was great seeing the boys and girls put themselves out there with their talents. They all had a good time. The boys group focused on friendship and the importance of friends and how to build healthy friendships. They focused on social cues and what and how to deal with them in appropriate ways. Healthy Relationship group focused on building healthy relationships and not giving up when you get frustrated with something someone has done. They also worked on team communications and being able to share their thoughts openly. In the DBT skills group the youth also focused on distress tolerance and how we can cope with stress in our lives. The youth continue to have Pass Off groups. The youth are encouraged to pass off at least 1 assignment on a weekly basis to help them internalize their therapy and complete the program in a timely manner. During these groups they enhance each others knowledge of what they are studying and how it can be applied in their life. We work on providing service to others by doing service project for Provo School District at Independence High School. We also provide service to Provo City every Tuesday. The city generally has them work with the Parks and Recreation department. One of the projects they completed this past month was cleaning the gun range up Provo Canyon. The youth were able to combine with the Aspire Youth Service Program for a couple of day long therapeutic groups. These groups were able to help the youth use their skills to meet others in a safe environment. They were able to feel supported by staff from both programs while meeting others they did not know. During one of the group activities they were able to work in smaller groups to accomplish the Camp Williams Leadership course. They were able to have a feeling of accomplishment when the teams were able to complete the missions given. Some youth were able to view themselves in a different arena and were able to step up as leaders and mentors. The youth then were able to participate in a music group where they danced and had to be vulnerable in front of their peers. They were able to open up at the end and everyone was observed to be dancing and having a great time.

New Vista Youth Services

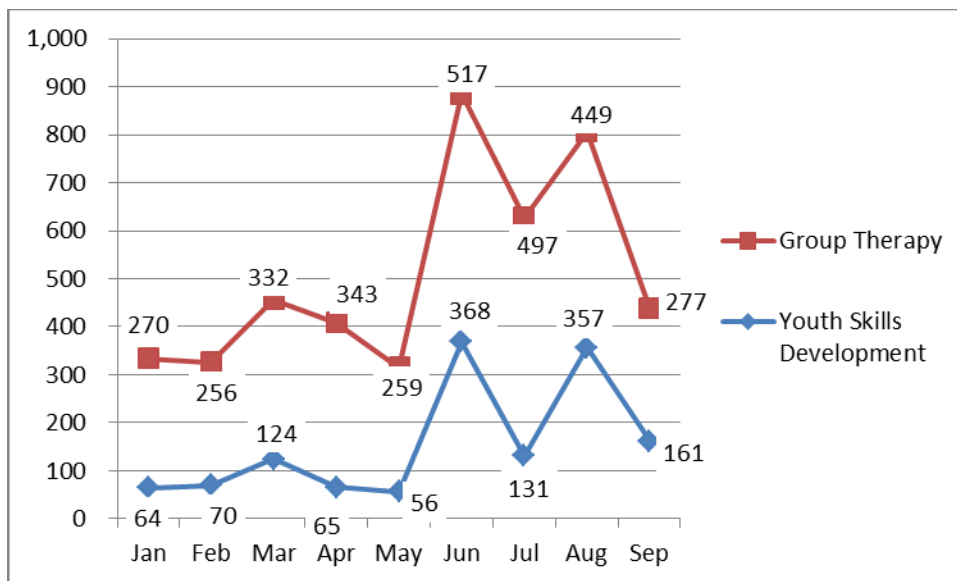
SEPTEMBER REPORT: As this chart indicates July is our strongest month of the year. School is out and everyone has a new energy for the summer and we have the kids all day, so our numbers are up. September comes around and school is back in session and the summer is over. All three indicators show this trend.



Leadership/Allied Agency Participation/Initiatives/Success

- In September our clinical team began to meet with the Probation Departments in Utah County to bring them up to date on New Vista's emphasis on trauma focused treatment for both boys and girls who have either sexual behavior problems or are victims of sexual abuse. These individuals need more intensive care and support than regular outpatient clients.
- We have begun to explore renaming New Vista. New Vista is known state wide for treating youth with sexual behavior issues. We want to move away from that brand and toward a new brand which reflects on the Trauma Focus as described above.

The graph below shows a comparison between group therapy and YSD groups provided since January. The trend is to follow very similar paths. One goal for us to consider is to be more consistent in providing YSD groups over the course of the year and at a higher rate per month.



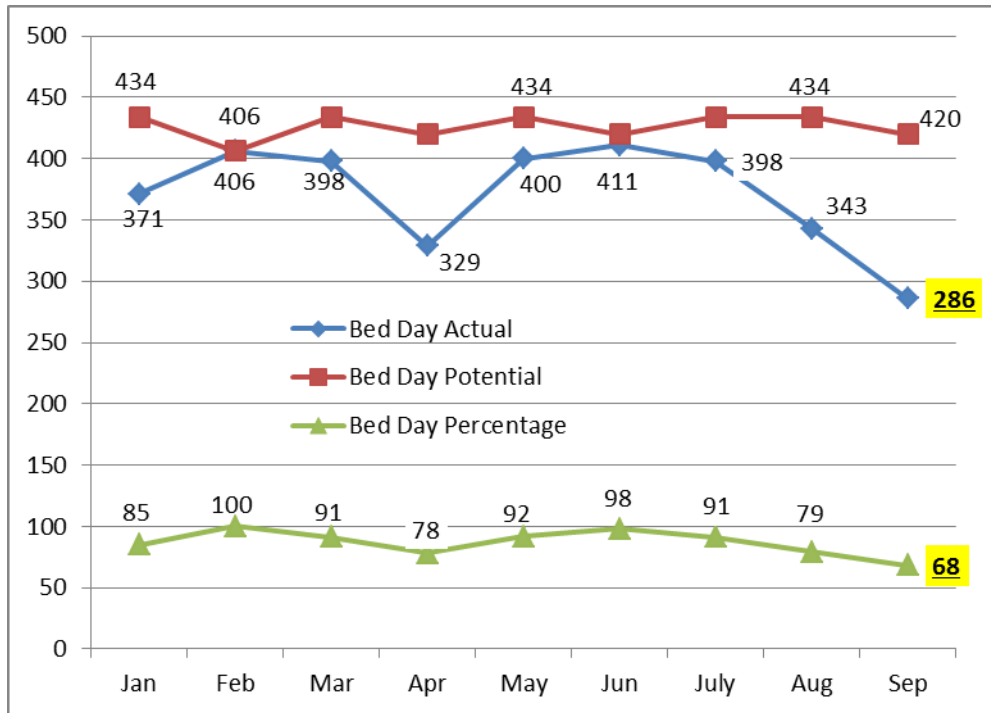
September '16 New Vista Monthly Report

New Vista has 2 Youth that attend Dixon Jr High with 1 staff. We have 11 youth that attend Independence High School. We also have 1 youth that we transport to Timpview High School for school. She is in a class room that can better meet her educational needs at Timpview High School. She had only attended approximately 20 days of school last year due to her family's circumstances. We currently have 2 youth that are in our step down program that attend school in the community and then come to Day Tx after school on various days for groups and individual therapy. We had 1 youth that organized her final service projects this past month. She had organized a talent show that was held at a care center. All youth took a talent to share with the residents of the care center. She was able to graduate this past month from the New Vista program after her final project. She has been able to learn and grow from the help that she has received from staff, therapists, her adoptive parents as well as her foster family and caseworker. She is a Senior in High School and is currently looking forward to a bright future.

New Vista continues with YSD groups that focus on building healthy lifestyles for youth. The youth work on building relationships with each other that include problem solving and conflict resolution. Some of the YSD groups that New Vista is currently focusing on are: Assignment pass off group, Why Try group, Healthy Lifestyles group and a social skills group. The youth are focusing on building healthy relationships with one another and setting appropriate boundaries. The youth have been able to provide service in the community this past month by helping someone that was in needed of having their home cleaned up.

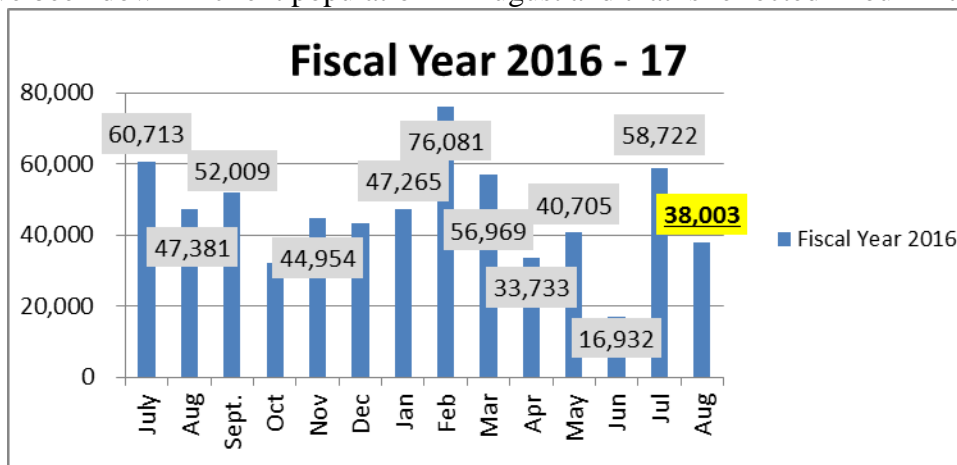
Aspire Youth Services

SEPTEMBER REPORT: We hit a drought of referrals which appears to near its end. We went about two months without an acceptable referral. We did receive two referrals but they were deemed too difficult for us to be able to manage without a seclusion room or putting our other clients and staff at risk. In the first two weeks of October we have received four referrals, two have been admitted and two others are waiting for the proper paperwork to be completed.



Aspire Academy Financial Report

We have been down in client population in August and that is reflected in our financial statement.



Aspire Monthly Report September 2016

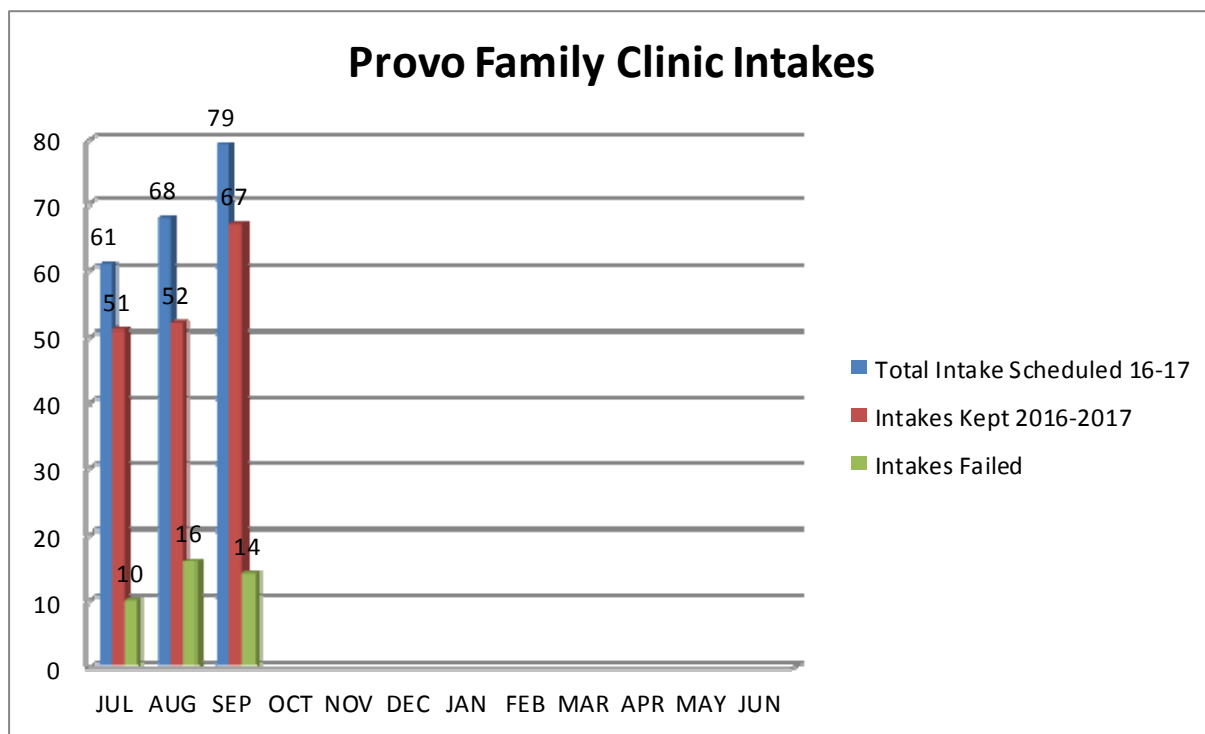
We currently have 11 residents at Aspire (as of October 14). We had 1 discharge and 2 new admissions.

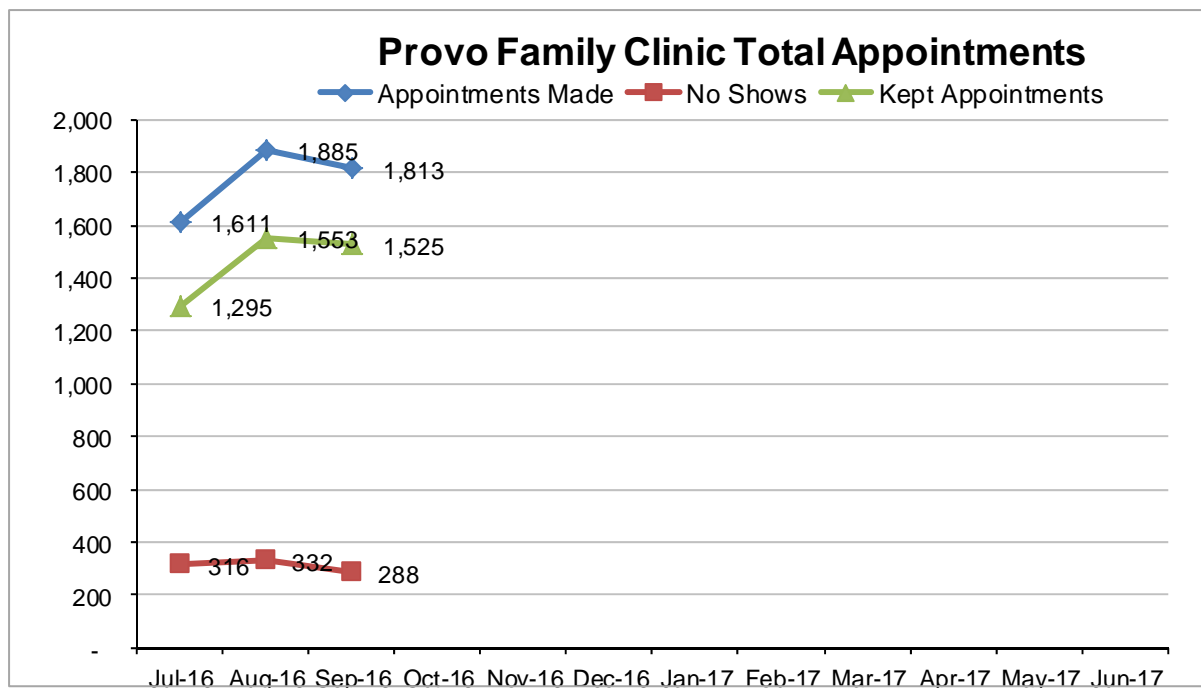
Our residents have settled into their school routine. The residents here have already completed a mini term and are currently in their second mini term. All of our residents were successful in school for the first mini term, all of them passed their classes with a C or above. Fall break is coming up and we have several off campus activities planned for the residents, such as hiking, a visit to This Is The Place State Park, and the Ropes Course.

The residents are continuing to do well in Therapy. We are continuing to work with the girls on their DBT skills, socialization, community skills, trauma, and developing healthy relationships outside of Aspire.

In addition, we are excited with the success we have seen with these girls who have previously been discharged the program. The treatment team has continued to receive updates from their caseworkers who have reported on their success after their discharges. We are happy to hear about their success and are hoping for their continued success in their placements, schools, and communities.

Provo Family Clinic





Total OQ and YOQ: 76 adult, 577 children **total: 653**

Leadership/Allied Agency Participation/Initiatives/Success

PFC has started planning to have a prescriber “urgent care / walk-in clinic” to help with our problem of failed prescriber appointments. Our tentative start date will be November 30th. We will start with just an hour once a week and go from there. Clients who have missed more than 3 appointments will not be able to schedule a set appointment but will go to the walk in clinic to see their prescriber where they will be seen on a first come first serve basis. The clinic will start with one prescriber as we work out the details and monitor the success. We hope to expand as needed to more time and more prescribers.

Financial Status

Through **August 2016** PFC’s budget is in the red \$8, 250

Stride and XCEL-partial day treatment

XCEL Younger Class

Total Present:	Avg. Clients	=	4.47
Total Present:	Avg. Staff	=	2.68

XCEL Older Class

Total Present:	Avg. Clients	=	7
Total Present:	Avg. Staff	=	4.71

Success Story!

STRIDE is very excited to announce that we have found a possible new home for our American Fork class. Through the help of Bryant Jenks we have been able to arrange to stage an experimental class at Forbes Wasatch Mental Health October 2016 Briefing Report

Elementary School. This arrangement will be reviewed with the principal in a few months to determine the goodness of fit. We are very optimistic that this could be a fruitful long term relationship with Forbes. This will begin October 25th.

Financial Status

Through **August 2016**, **Stride's** budget is in the black \$31,214

Through **August 2016**, **XCEL's** budget is in the red \$1,101

GIANT Steps

Highlights

- We held Parent Training nights on 9/13 and 9/27. Child care was provided for approximately 45 families each night. Topics discussed included the diagnosis of autism, eating issues, and evidence based treatments.
- We began initial Individualized Education Plan meetings for all of the children in the Giant Steps program. We should finish with them all by the end of October. These meetings set behavioral, speech, and occupational therapy goals for the child and involve the families, school district special education staff, and our employees.
- Children and family members attended our September community development field trip to the Animal Farm at Thanksgiving Point.
- The Giant Steps waiting list currently includes 170 children, 39 of which have Medicaid insurance. There were 28 children who aged out of the waiting list.

Positive Reports from Families or the Community:

- A parent expressed appreciation since her child has been showing much better behaviors in the community (like church and at the store) since starting our program.
- Another parent reported that their child has now developed the ability use sign language for things he wants and has been able to say "please" which is a first.
- The grandparent of a child in the program stated they are feeling like there is a "night and day difference" with their grandson and that they feel like he is doing "so much better."
- One of our children who has been non-verbal has begun counting out loud and saying her first simple sentences.

Upcoming Dates / Events

- Giant Steps Christmas Program: Friday December 16th at **10:30 am** (Foothill Elementary)

GIANT Steps Volunteer Hours

Community Volunteer Hours: **47.5 hours**

GIANT Steps Parent Volunteer Hours: **110.25 hours**

Parent Volunteer Hours (FYTD): **112.5 hours**

Performance Indicators

Productivity:

Department Productivity: **105%**

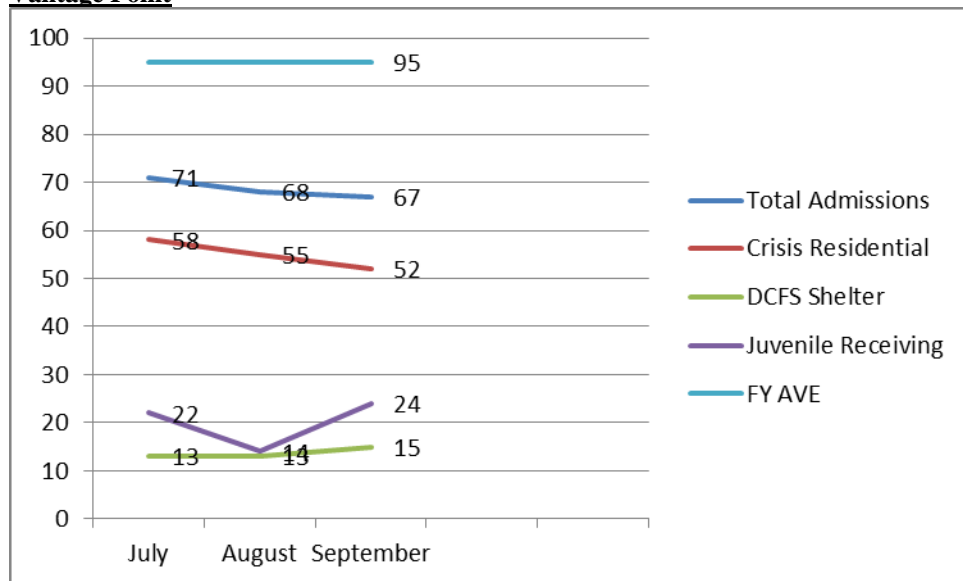
Billable Units of Service

Current Month – 6089.5 units of service were provided to Giant Steps clients and their families.

Last Year Comparison – 5496.25 units of service were provided in the same month last year.

Vantage Point

Vantage Point



No final write up yet from the FYSB audit as of yet. We will keep you posted.

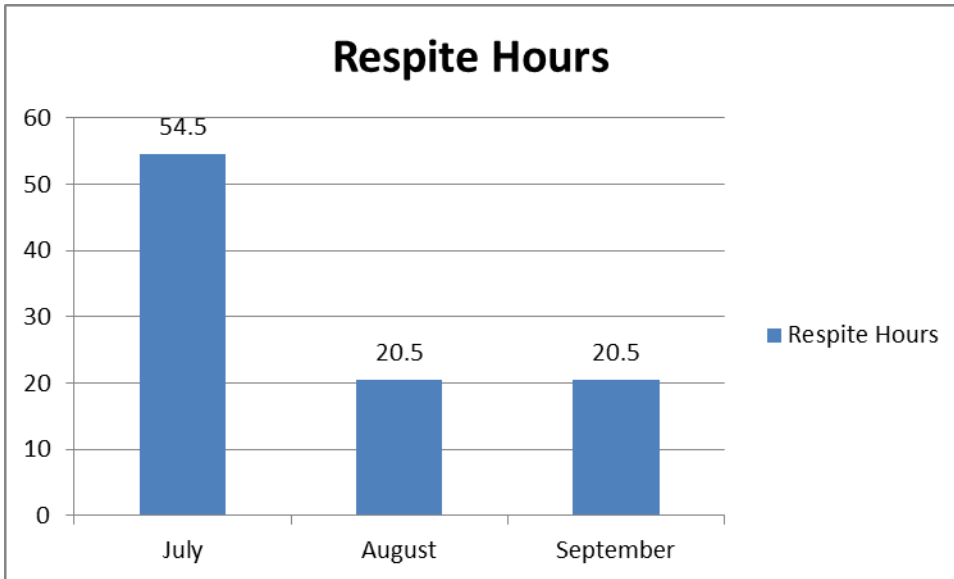
Leadership/Allied Agency Participation/Initiatives/Success

September is proving to be a busy month with DCFS kids, quite a few between the age of 10-13, and a couple of youth who are homeless that we are trying to help.

There are times that we have turned kids away and that is only when we are full. The kids that get sent to Vantage Point are not just kids having a dispute over curfew. Most of the kids that we help have complex trauma histories, mental illnesses, and behavior problems all wrapped up into one. It is a delicate balancing game at times. Due to staffing patterns and numbers, we have to be strategic. Safety is top priority for the other clients and staff.

DCFS kids are very challenging to have. They come with not just behavioral issues, but mental health and complex trauma as well. They are often placed with us the longest. They have abuse and attachment problems. And after being with us for a period of time, anxiety always gets the best of them and that is when the reactivity starts. So we will be looking at some ways to help support their emotions and trauma, by recognizing these things and supporting them with sensory and environmental factors that can help quiet their limbic systems. We interface with DCFS regularly and have the support of their administrators. That working relationship has been a great blessing for us. We really appreciate Jon Perkins and Eric Jenkins attending our staffings regularly and giving us support in helping getting these kids placed.

CY FAST



Total Cases: 91

FRF Involved: 15

Mobile Contacts: 68

PREP

We now have 12 on our active list clients, those who are now in the program and we have approximately 30 who are getting screened. Caseloads are getting filled and doctor time as well. We will be going to more training in October. We look forward for On-Track training on October 26th and 27th. This will give us more guidance in treatment forming and group organization.

We are also looking at expanding our services to do possible pill boxes and med drops for some of our clients, similar to the Bridge Team.

Number of total unduplicated clients served last month: 60

Number of OQ/ YOOs administered: 60

American Fork Family Clinic (AFFC) & School Based Services

Excellence in Mental Health Care:

Successes:

Recently one of Darren Gillespie's clients gave the following feedback: "Therapy has been so helpful to me in so many ways. I can actually talk to someone and express my thoughts and not be looked at or judged in a bad way. It literally takes the monkey off my back."

of total clients served last month: Total: 578 Adult: 215 Youth: 363

Number of YOQs/OQs administered: YOQs: 389 OQs: 285

Unduplicated number of YOQs/OQs: YOQs: 237 OQs: 154

Acuity Based Care Implementation

We are discussing how to impact the 75% of clients who only stay 6 sessions or less. We reviewed how to look at the Client Utilization Profile of adult client charts. We talked about how to use the information to help how the therapists proceed with therapy.

Providing Excellent Customer Service

A foster parent on how they have been treated:

"I have been coming to Wasatch for over 2 years receiving services for my two sons that I adopted through foster care. Sheri Rowley has been their play therapist from the beginning. She has been so helpful, never judging us or the extreme situations we are dealing with. She has been a vital part of my sons healing and treatment! I don't know where we would be without her. The nurse Sarah [Horsley] has gone out of her way to help us with med management issues, always checking in on us. We are so grateful for Sheri and Sarah and feel as if they truly care about us. I consider them my friends."

Employee Growth and Development

Several staff attended the following training:

- The Art of the Relationship by Garry Landreth September 16th and 17th, 2016
Garry presented on working with young children (under 6) in the play room. He presented an interactive and exploratory workshop focusing on a variety of seldom examined issues that emerge in play therapy relationships: play therapy as a process of living out beliefs about a child rather than applying techniques, methods or skills; the play therapist as a person of commitment and passion; intangibles that impact possibilities and progress in play therapy; understanding the sequence of inner emotional steps that precedes behavioral change and returning responsibility to children.
He stressed Being With a child to explore the inner person of the child that is waiting to come forth and be experienced. He challenged the therapists to look within and to examine their core beliefs about children and the therapeutic process.

Spanish Fork Family Clinic (SFFC) & School Based Services

Excellence in Mental Health Care:

Successes:

Words from our clients or the guardians of clients:

“We've had multiple needs with our children and we couldn't be happier with the service we receive from Spanish Fork Wasatch Mental Health. The intake staff are so kind and helpful and the therapists are so very supportive. Thank you Wasatch Mental Health!!”

“I feel like there are people here willing to assist me. My therapist has helped me through difficult moments. I enjoy the association my therapist and I have. My personal life is more hopeful with what I have learned. The lobby is comfortable and I am attended to with care and friendliness.”

of total clients served last month: Total: 342 Adult: 113 Youth: 230

Number of YOQs/OQs administered: YOQs: 283 OQs: 179

Unduplicated number of YOQs/OQs: YOQs: 182 OQs: 101

Providing Excellent Customer Service

- Chelsea Seegmiller, Doran Williams, Mike Wilkins, and Bryant Jenks provided feedback on Suicide Prevention Plans that were presented by Landmark High School students. It was a great opportunity to compliment the strengths and give additional insights and resources for the students to consider.
- Myriam Bardsley present to faculty and school counselors of Springville High School about group services that can be provided for students. She specifically discussed doing DBT and the Why Try program for them.
- Tasha Jones, SSW, met with Neely Kay of the Nebo School District about being added to a couple meetings within the Special Education team and trying to help some of her more resistant teachers understand what an asset WMH can be in their classes. The meeting was successful and Tasha will continue to follow up.

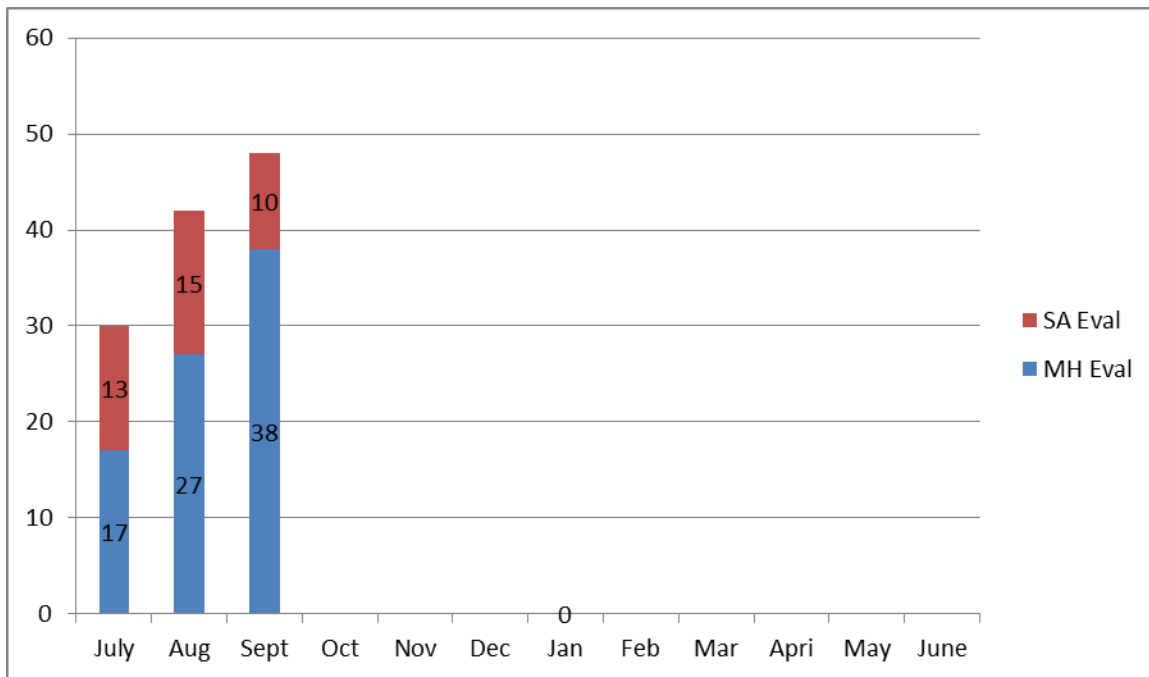
Wasatch County Family Clinic

Performance Indicators

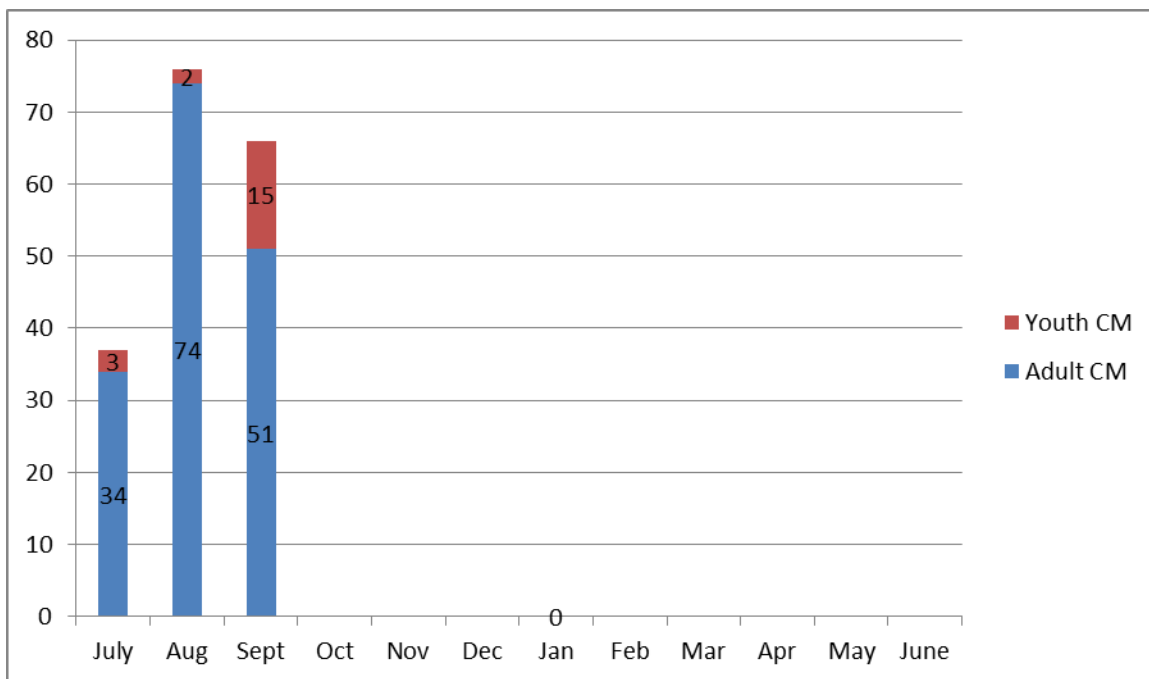
Total Unduplicated Clients Served in September: 257

Adults: 180 Youth: 77 September Total Monthly Intakes: 48

September Evaluation Type



Case Management Services



Number of YOQs/OQs administered: YOQs: 62 OQs: 179

Unduplicated number of YOQs/OQs: YOQs: 36 OQs: 107

Groups at WCFC

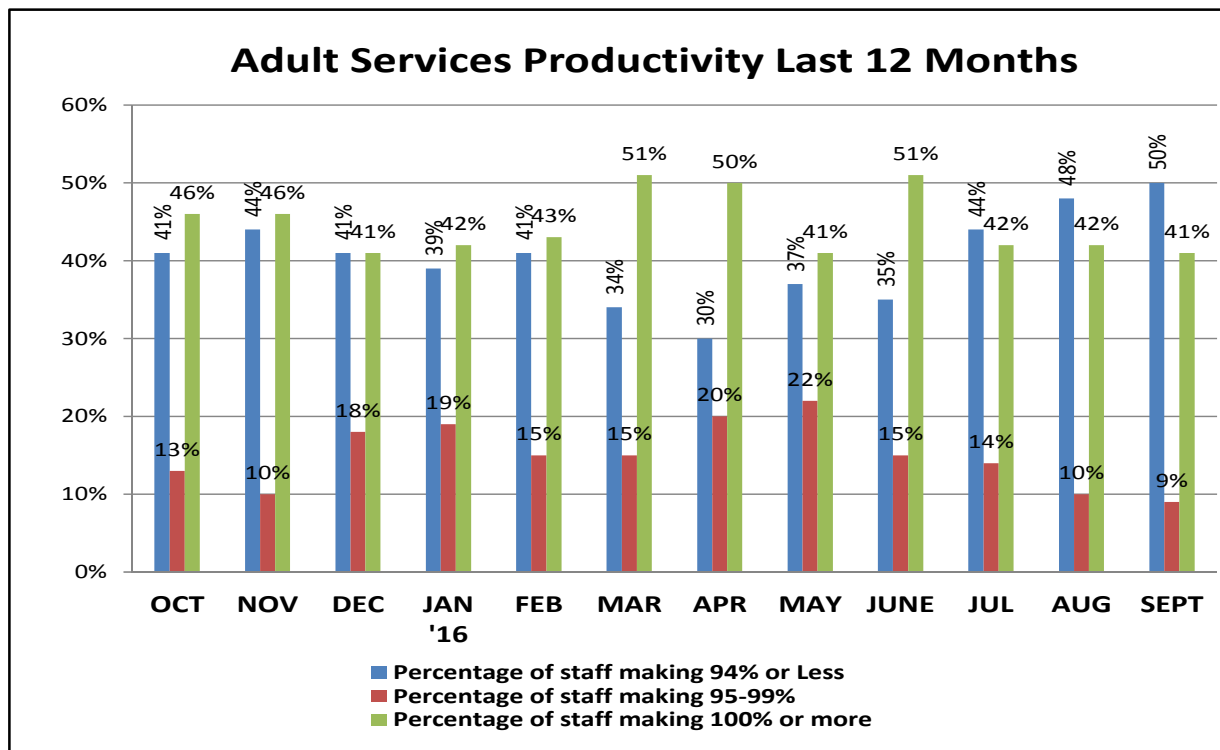
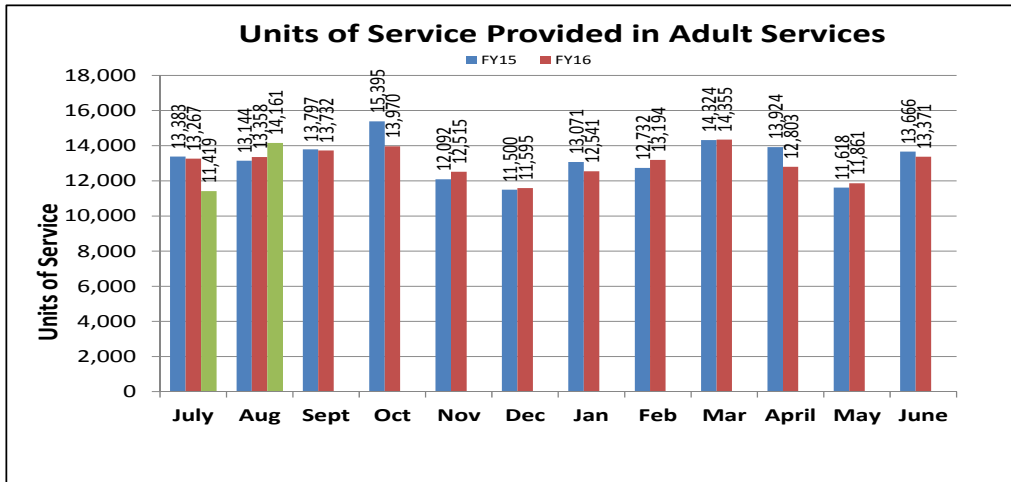
- Recovery Day Tx
- Summer School Program
- Drug Court Group

- 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

- In September we partnered with several community groups to co-sponsor the Annual Dinner in the Park. This event is held in conjunction with and to help promote National Eat Dinner with Your Family Day. Participants were able to receive information regarding the need to reduce underage drinking and other awareness information. They were provided ingredients to take home and have dinner together as a family and were also provided a dinner in the park. Over 440 individuals were served dinner at this event. We are continuing with the Strengthening Families Program and DCFS has expressed appreciation for this service in the community as they have several families which have benefitted.
- In August WCFC had a review of JRI programming completed by the Utah Criminal Justice Center as part of the DSAMH initiative. We are still awaiting a preliminary draft report from this audit but they have indicated we should receive this within the next week.
- In September, as part of the JRI initiative with the University of Utah Criminal Justice Center we were able to send 2 clinicians to participate in a 2 day CBT certification workshop. Staff involved found this very helpful.

Adult & Family Services Division



Adult and Family Services CM Productivity (Jan-Sept '16)

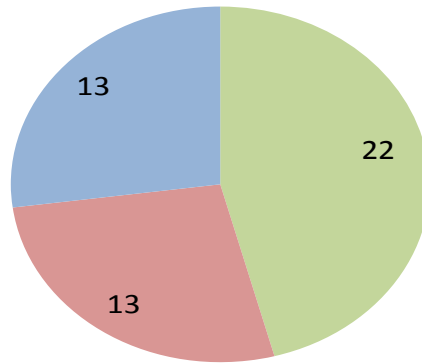
48 Case Managers

22 100% and greater

13 95-99%

13 94% and less

Average Productivity 97%



OQ/YOQ Administration

Number of total unduplicated clients served last month:

Adult Clients Served	2338
Child/Youth Clients Served	1452

Number of OQ/ YOQs administered:

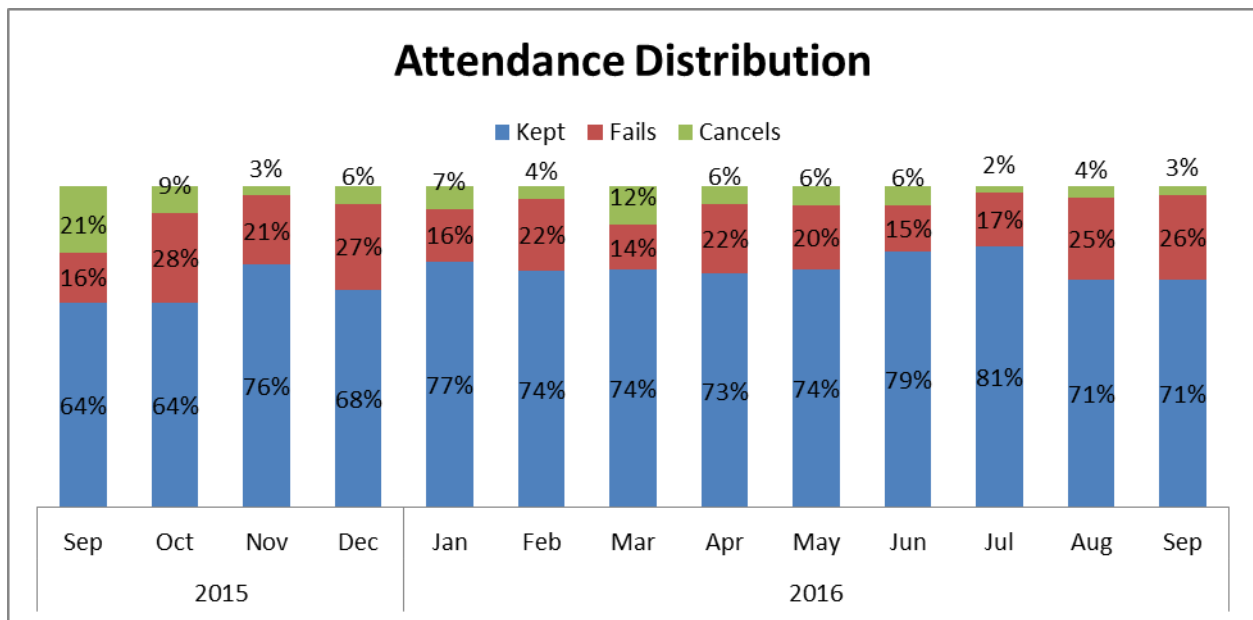
Adult & Family Services Division	1484
Youth & Family Services Division	2219

Unduplicated Count of All clients Served at WMH 3790

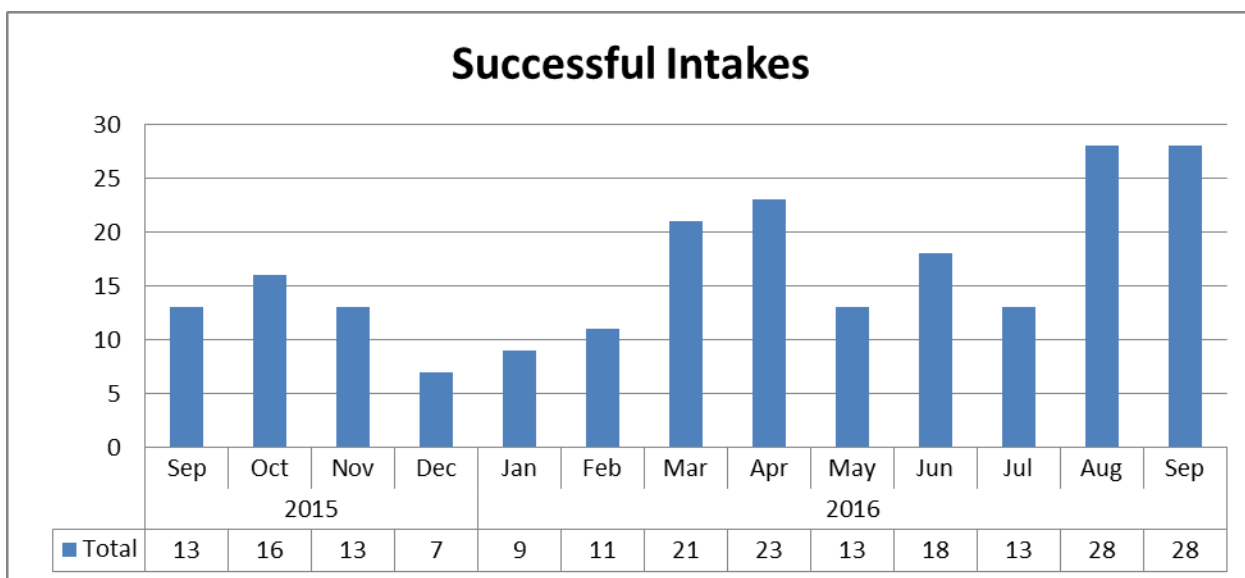
% of Unduplicated Clients Completing an OQ/YOQ 61%

Mountain Peaks Counseling

The graph below indicates the number of clients who kept their scheduled appointments, who failed and were charged vs who canceled and were not charged.



Below is a graph of the number of intakes by month. It appears that we now have 2 months of data to support that intakes spiked with hiring Corom and have held with the second month as most of the intakes are going to Corom.



Leadership/Allied Agency Participation/Initiatives/Successes

We are excited to report that we have hired Bryant Jenks to begin the expansion of Mt Peaks to the Northern part of Utah County in American Fork. It is our hope that we can get this expansion off and running by the end of October and have the Care team assistants trained in how to work with insurances and collecting co-pays accurately. Bryant comes with a wealth of experience and will be a great asset to the Mt Peaks Team.

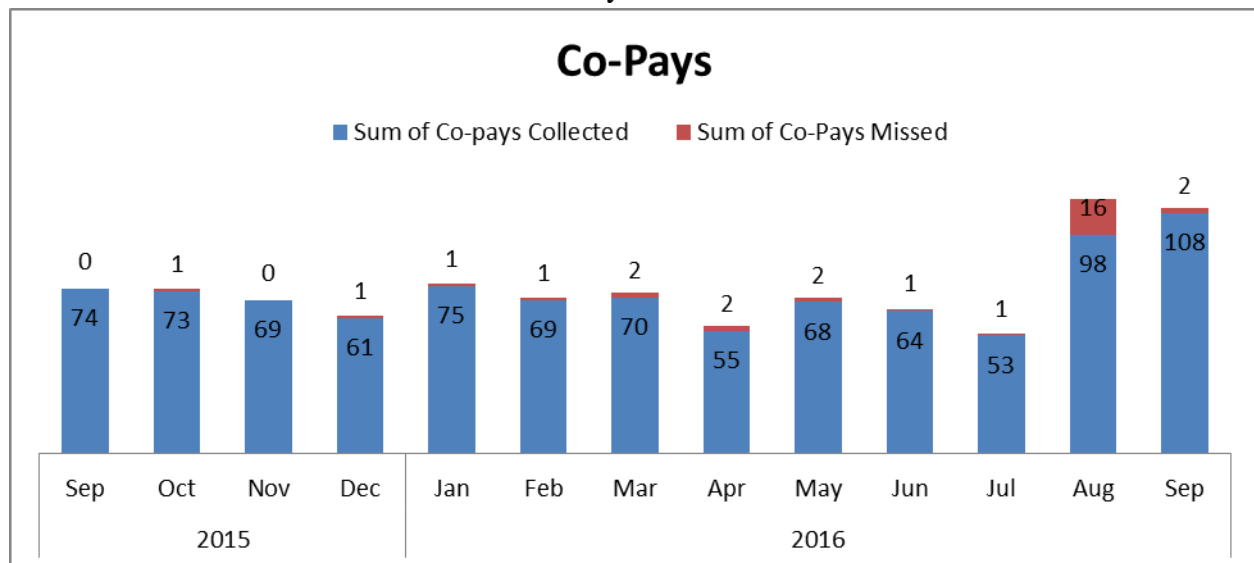
Some interesting statistics that we have collected, thanks to Alex's keen eyes on data collection:

Over 1226 recorded visits to MPC in 2016, intake appointments average 64.6% success, while follow-up visits average 77.4%. That's a 12.8% gap in failed appointments between intakes and follow-ups, which is made up of a painful **81 broken intake appointments**. If our intakes had shared the attendance ratio of our follow-ups, **we would have reclaimed 27 intakes**. We are looking at ways to enhance the success of completed intake appointments. One way is to look at a texting option so we can text potential clients, where Junction can only text existing clients.

We are noting increased pressure on scheduling appointments with all the current therapists in the Provo Mt Peaks office. Scheduling new intakes for Corom, the full time therapist are now about 1.5 – 2 weeks out and scheduling follow up appointments are getting more difficult to schedule in the week following their intake. We realize we are early in our recent expansion of hiring a full time therapist, but we are seeing significant and consistent growth. It is exciting to see this growth, especially when we think of how this service supports those in need of our clinical services.

Financial Report

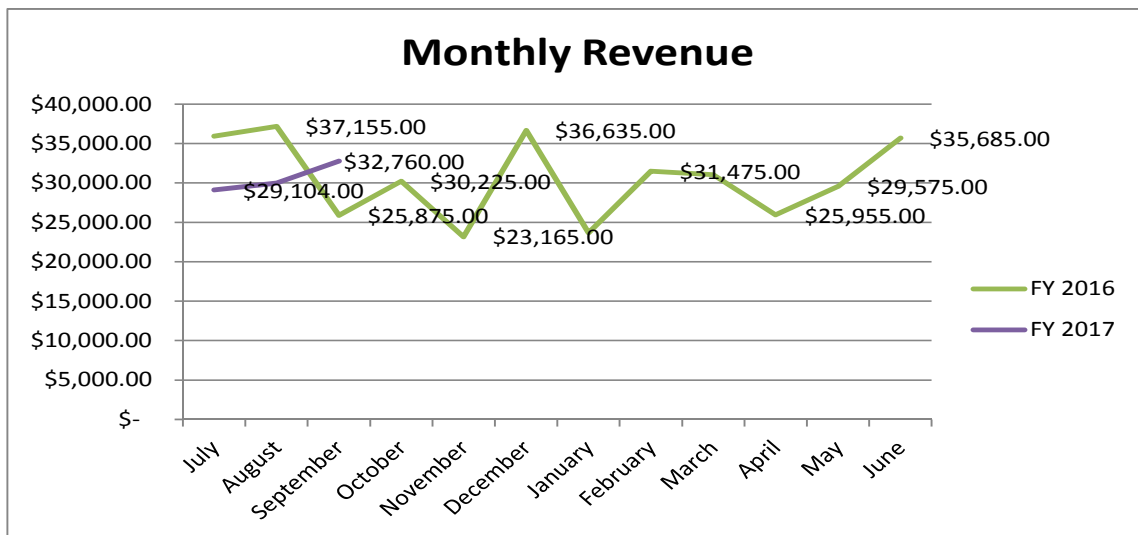
We have reduced our missed co-pays from 16 down to 2 this month. Alex and Jennie have been trained by Katie, from billing, on how to access the actual insurance websites. This helps us to verify the actual co-pay and reduces doubt on the client and staff as to accuracy.



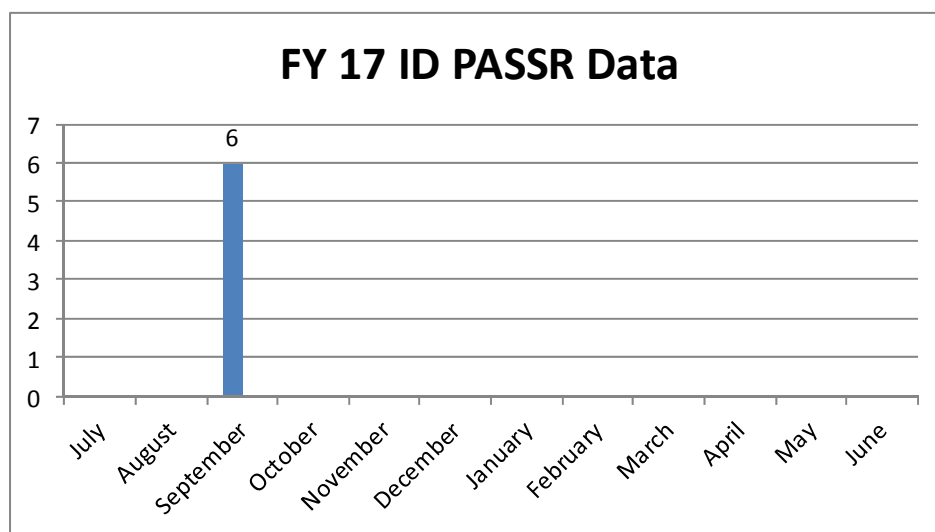
Westpark Family Clinic

Performance Indicators:

In September PASRR staff completed 84 PASRRs for a generated revenue of \$23,760. The graph shows the 4 fiscal years revenue by month. From this graph one can see what months of the year are the highest and lowest for each year as well as if this year is starting out higher or lower in relation to past years.



In the past few months WMH has obtained a new contract to provide PASRR Evaluations for individuals who have intellectual disabilities. In September PASRR Staff completed 6 PASRRs for a generated revenue of \$1,384.95. Below is a graph that is being added to this report to track and see how many of these PASRRs we are doing and what the revenue for it is. WMH PASRR staff will be attending a training in mid-October where we will learn more about these evaluations and how to do them successfully and appropriately.



The number of OQ/YOQ questionnaires collected in WFC remained relatively stable this month. WFC collected 673 OQ questionnaires during the month of September. This is down by 13 questionnaires from 686 in August. Of the OQs collected this month, 411 were unduplicated, which is up from 389 unduplicated questionnaires last month. The number of daily administrations this September increased to 32.1 per working day, which is up by 2.2 questionnaires per day compared to August.

During the last quarter (beginning with the pay period starting on 6/26/2016 and ending with the pay period ending 9/17/2016), WFC staff with productivity standards achieved a total of 4,160.52 productive hours, which equates to 81.5% of the department's cumulative productivity standard. This is a 0.7% decrease compared to last month.

During the same period of time, RPS staff with productivity standards achieved a total of 1,077.38 productive hours, which equates to 103% of the department's cumulative productivity standard. This is a 9.6% decrease compared to last month.

The following are the numbers from our three Mental Health Courts in Utah County:

Mental Health Courts in Utah County:	Number in the program:	Graduates:	New Clients Accepted:	Clients who dropped out or removed from program:
4 th District Court:	17	9	5	0
Provo Justice Court:	11	0	3	1
Orem Justice Court:	2	0	0	1

Leadership/Allied Agency Participation/Initiatives/Success:

Our success story for this month comes from one of our Mental Health Court case managers. She reports: a female client was a MHC client in the Orem Justice Court. She graduated successfully and I have not met with her for a while. She set an appointment with me to find out about where she was on the housing list. As we talked, she thanked me for helping her get to where she is now and then preceded to tell me her story.

She said that on May 11th she will be sober for 5 years. She said that this is the longest she has been sober since starting to drink (alcohol is her drug of choice) She said that she had been sober for 4 years when she was raped and to cover the pain she started to drink again. She said that it happened 5 years ago and that she was living at a drug/meth house. She was helping her roommate with her kids when the cops came by. She said that they found that she had a speeding ticket that she had never paid and the officer said he had to take her in. When they got to the jail he commented to her that she was extremely skinny and asked how she ended up at the drug house. She said she didn't have anywhere else to go and it came out for the first time that she had been raped. The officer said she needed to report it and she said "Why, they aren't going to do anything about it, nobody cares" The officer said she could get help from him anytime and although she said she didn't want to see him again she got out and started back on her trek to get sober. She said she found out about Wasatch and got herself in and had been receiving help. When she felt like she wanted to start drinking again, she instead went out and shoplifted, knowing she would get caught; that is where she entered the MHC program. She was then able to get into treatment for her trauma history and started doing EMDR. She said that for so many years she drank to numb her pain, physical, emotional and psychological. She said that it was so hard to stop drinking, but then came the part where she had to start working on herself and working on the trauma and abuse she had been through. She said that was harder than quitting the actual drinking. She said she attended the DV victims group and was able to learn a lot. She is now trying to help her roommate overcome her drug addictions too. When her roommate asked why she was doing it, she said someone was there for me and gave me hope. I want to be there for you too. She had a skeleton key that has the word HOPE as the actual key part that she gave to me and said that hope is the key to her success. She came up with an acronym for HOPE and only could remember the first two which is HOLD ON. She is now almost sober for 5 years and is doing well. She said she knows she will always have anxiety and issues she is going through but that she has HOPE and can continue to be sober and clean. She has come so far and all because someone reached out to her and validated her.

In the past several months WMH began using an evidence based model of treatment where in the OQ45 is used to more successfully impact client's treatment. Two pilot consultation groups were started to use the OQ45 to provide feedback to therapists about how their clients are doing. The group and group leader then

consult about cases that are not making the expected improvements. The goal is to improve client outcomes through this consultation and collaboration. The pilot groups have been successful enough that two additional consultation groups have been started. There are five WFC therapists participating in these four groups. In an effort to see how much impact these consultation groups have, WFC program manager and supervisor have started tracking the data to determine how much impact the evidenced based use of the OQ45 and the consultation groups have on treatment.

At first look at the data for this month, on average, those clients who took the OQ-45 in the WFC this month had initial scores of 84.8 and current scores of 78.3, showing mean improvement of 6.5 points. Of these clients, 32% currently show improvement on the OQ-45 with 50% and 18% showing no reliable change and deterioration respectively.

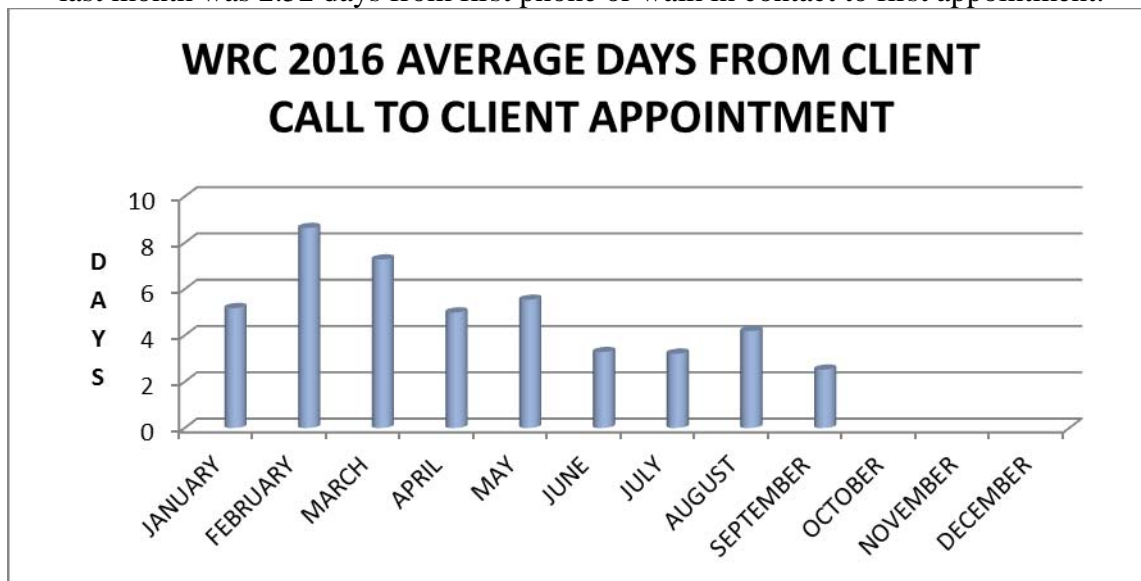
Those clients taking the YOQ-2 in the WFC this month had average initial scores of 63.8 and current scores of 50.7, showing mean improvement of 13.1 points. Of these clients, 45% currently show improvement on the YOQ-2 with 45% and 10% showing no reliable change and deterioration respectively.

On average, those clients who took the YOQ-SR in the WFC this month had initial scores of 70.7 and current scores of 52.5, showing mean improvement of 18.2 points. Of these clients, 28% currently show improvement on the OQ-45 with 67% and 5% showing no reliable change and deterioration respectively.

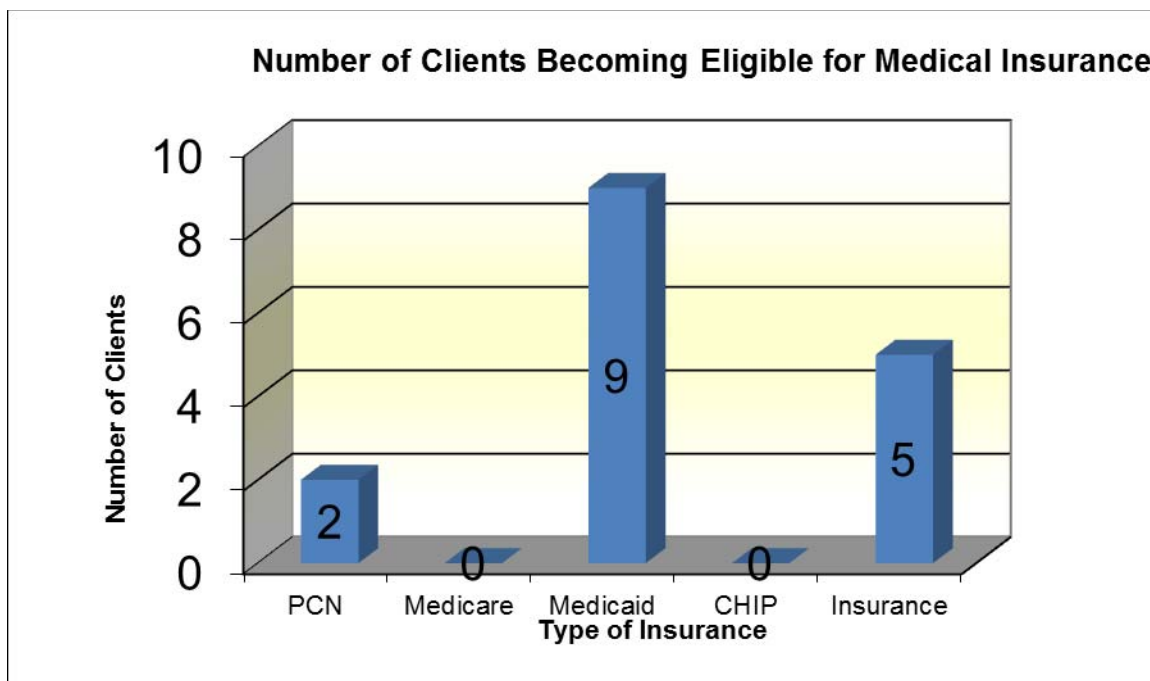
Wellness Recovery Clinic

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 is shown below. The exact number for the last month was 2.52 days from first phone or walk in contact to first appointment.



Below is a chart indicating how may clients became eligible for medical insurance in FY 2017:



Leadership/Allied Agency Participation/Initiatives/Success

We had an all-time successful low number of days it has taken to get in for an appointment from the date of first contact of 2.52 days wait. We have even had a few times where we were able to see the client the day they contacted us for an appointment. The additional student we have assigned to us this semester has really helped.

A client success:

Client presented for treatment after a traumatic incident involving her partner committing suicide in front of her and her daughter. Client presented feeling little hope that she would be able to overcome what she had experienced. She felt it was her fault and was burdened with questions about what she could have done better to have kept it from happening. She was isolating, avoiding reminders, experiencing physiological pain, and feeling attacked by intrusive thoughts and memories and struggling to make it through the day at work. After about four months of treatment, Client was able to return to a level of normal functioning and find peace regarding the loss of her partner. She is no longer isolating, she has turned to friends and family, has developed healthier thinking patterns and come to recognize that she is not to blame, decreased frequency of intrusive memories and found motivation from her personal aspirations and family.

We are enjoying success with our UVH liaison, Ransom Bigelow, as he meets weekly and has consistent contact through e-mail and phone contact. We have noticed a higher than usual fail rate of clients referred straight from UVH inpatient (IP). Ransom is working closely with the WRC to see what we can do to streamline the process. This may include sending a clinician to make face to face contact with client while on the IP unit. With the extra student we have been working with, we may be able to carve out some time to do an initial intake while they are still on the unit to improve the connection of the WRC to client to make them a little more comfortable with following through.

We recently ran a report indicating where clients are being served outside of the WRC location. There are 22 clients being seen off site in satellite locations due to special treatment needs or transportation issues. It is the intent of the WRC clinic to look at this list periodically to see who can have the WRC funding removed from their chart and placed with Medicaid or other appropriate sources.

Financial Report

We have completed our 1st quarter for reporting on the Primary Care Grant. We are indicating that we provided 201 or more face to face services to at least 25 new clients each quarter. We easily met this goal for the grant and will submit a report by Friday October 14th to the State office governing the grant.

Number of total unduplicated clients served last month: 135

Number of OQ/ YOQs administered: 275

% of clients taking the OQ/YOQ: 78%

Medical Department

Leadership/Allied Agency Participation/Initiatives/Successes

- The American Psychological Association Commission on Accreditation has officially credentialed Wasatch Mental Health as an APA approved internship site until 2019. We express our “thanks” to Dr. Randy Pennington, who submitted data, hosted on site credentialing personnel and then submitted more information to make this happen.
- We are advertising the Resident position through the training director network in Utah so we can get the word out to other Utah internships that we have this opening. We have some strong internal candidates this year.
- As full time staff have visited staff meetings around the center we have been given some important feedback about how we can make our assessment recommendations more user friendly for therapists. We also heard that clients do not always understand what we are saying in feedback sessions. This will challenge us to translate our jargon to lay language as we speak and write about results. Great feedback!
- Lisa Schumacher indicated that the Internship page is the most frequently visited page on the WMH Website. Lisa has orchestrated some enhancements to it recently which is great since the traffic will likely increase for the next month. Internship applications are due in November and our interviews are planned for early December.
- September was very busy, we exceeded our projected goal and moved passed last years total with **81 referrals**. We had 45 youth and 36 adult referrals, with 16 being for Autism.

The table above shows the current number of referrals and compares it to previous years. It appears so far this year that we may be leveling out rather than growing, which is good.

Below are the billable hours and revenue for psychology interns thus far.

TOTALS	Total hours
\$22,163.75	143.5
\$21,515.00	167.75
\$28,290.75	187.75
\$33,661.50	264.25
\$17,985.75	112.75
\$19,821.25	129
\$123,616.75	876

Outside Providers/Mountainlands

Mountainlands was open 21 days in September

#Appointments scheduled---111

#Appointments Kept---83

#Appointments Canceled---8

#Appointments Failed---20

Kept New Client Appointments----18

#Scheduled Appointments per day---5.3

#Kept Appointments per day---4.0

Summary---September showed an increase in appointments scheduled, appointments kept, as well as new client appointments. In fact, we had 3 times as many kept new client appointments in September than we did in August. However, we had more failed appointments and fewer canceled appointments than in August. We did go from having only 2.7 kept appointments per day in July and 3.1 in August to 4.0 in September, which is the highest we have had since we started keeping record. Surprisingly, more than half of the no-show appointments (14 of 20) were for clients with case managers. Although the case managers may have been unaware of a few of those (i.e. the client called and scheduled themselves for a same day appointment and then failed), this is an area we should be able to improve on as even last minute cancellations can often be filled by Mountainlands, helping them keep their clinic time full.

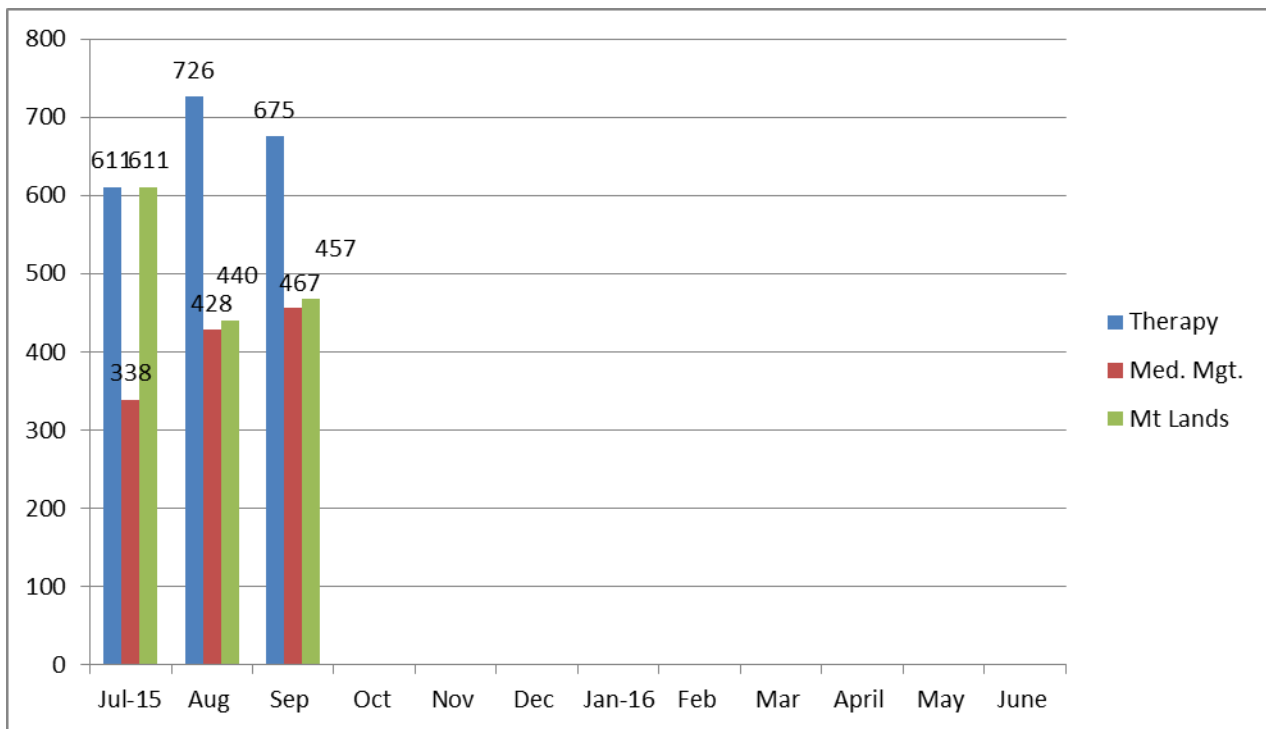
Care Team Services

Leadership/Allied Agency Participation/Initiatives/Successes

The first Care Team Assistant Center wide quarterly meeting was well attended, had good support from administration, had good discussion, helpful suggestions were made on how to improve communication across the center and a definite plan for handoff to a new host was made. The next meeting will be anchored by Jennie Reese. It will be held on January 20th at 8:00 am in the Boardroom at West Park with others joining remotely from the far reaches of the Wasatch universe.

Performance Indicators:

Care Team Assistants served 1,599 clients at the front desk during the month of September; we are not counting those who check in for case management services.

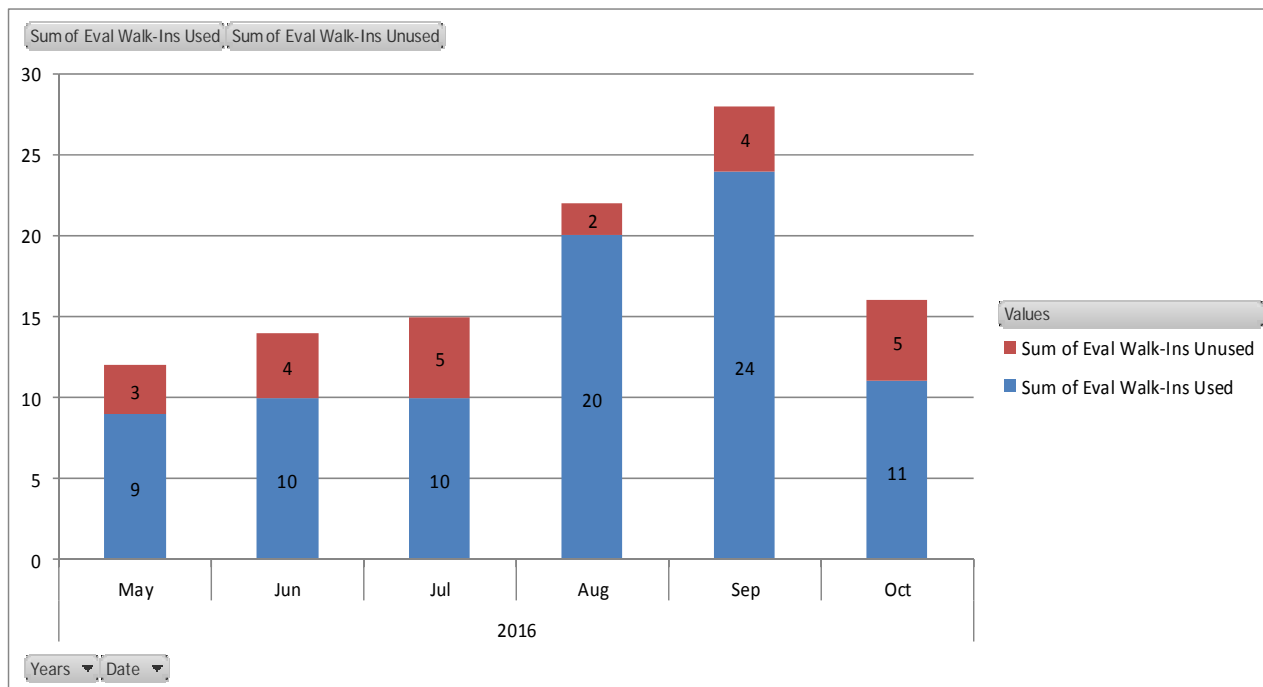


The walk- in clinic continues to be successful and is a work in progress.

Walk-In Clinic Graph

Blue= walk-in used

Red=walk-in unused

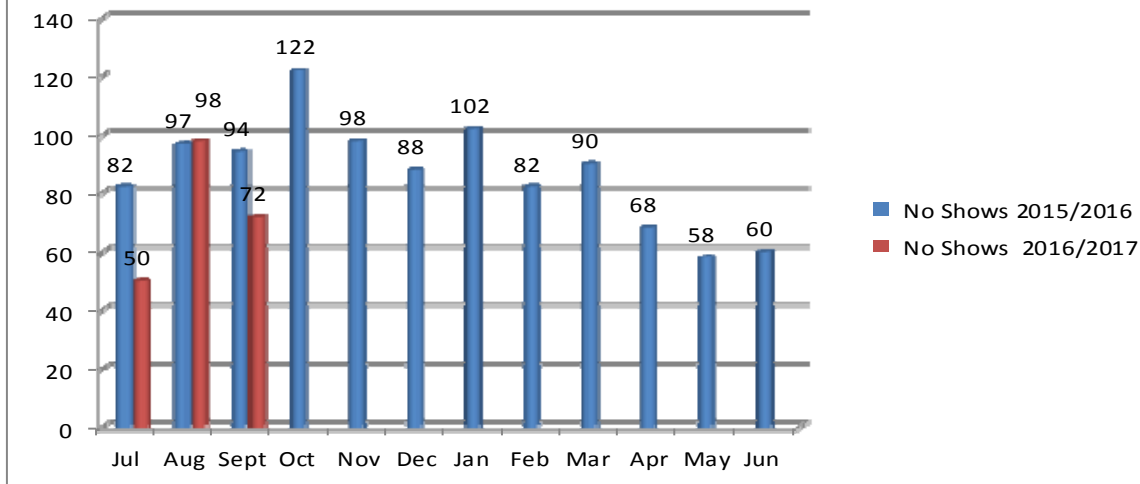


No Show rates pre and post implementation of the walk-in clinics

Blue=Fiscial year 2015/2016

Red=Fiscial year 2016/2017

No Show Graph Comparing Fiscal Years 2015/2016 to 2016/2017



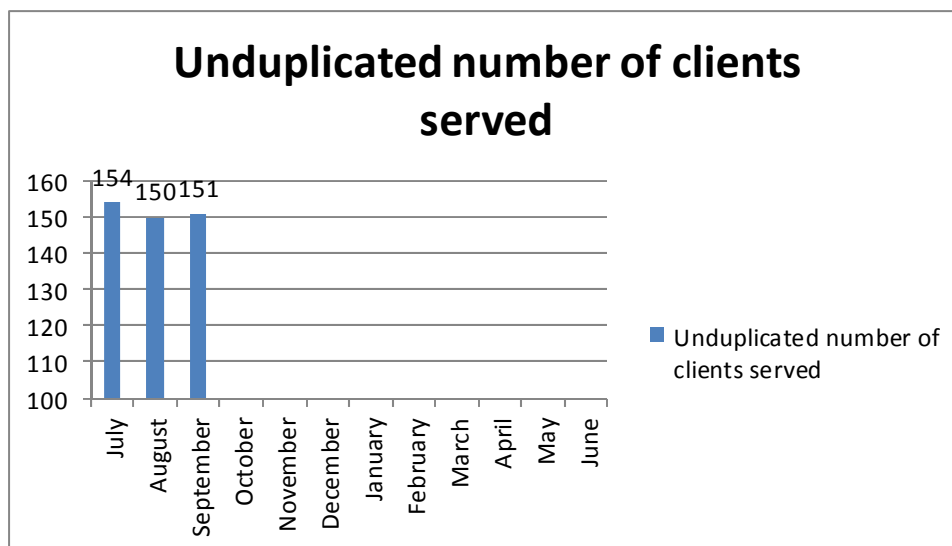
NAMI

Shiralee continues to attend Board meetings. She posted information about the annual NAMI/Professional meeting that is held at BYU. It is being sponsored by IHC this year.

CIT

The first independent/non-State sponsored academy will occur next month at NuSkin.

Wasatch House



Leadership/Allied Agency Participation/Initiatives/Success

We had a productive phone call with WMH administration Robby Vorspan from Clubhouse International and Amber Mackay from Alliance House to discuss our progress with accreditation. We have already made

significant progress with the recommendations given and Robby gave praise for the progress we have made thus far. We specifically asked for clarification regarding expectations for a full-time Director as delineated in the report. After our conversation, we received assurances that implementing an Assistant Director, as we had previously planned to do, would be acceptable as we apply for an upgrade to a 3 year accreditation.

Financial Report

Our proposal to the Foundation to fund up to 6 individuals without Medicaid funding to attend Clubhouse was approved. This was well received by our membership, especially those who will benefit from this funding. We express our thanks to the Foundation and WMH for making this possible. We will continue to explore options to open up Clubhouse to more potential members without funding.

Number of total unduplicated clients served last month: 151

Number of OQ/ YOQs administered: 29

WATCH/CABHI/JRI Program

Unduplicated number of clients served in the WATCH Program

The WATCH program served 136 unduplicated individuals in September. This statistic includes all CABHI and JRI clients.

Leadership/Allied Agency Participation/Initiatives/Successes

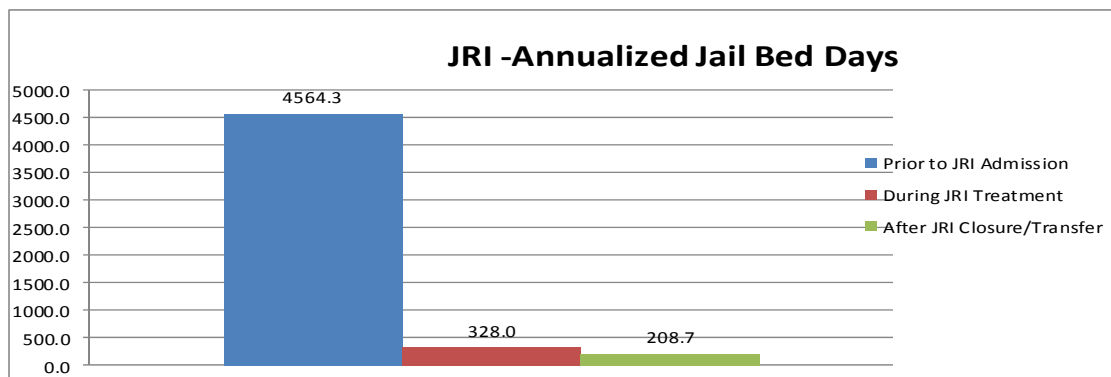
Since we began the JRI program last November, we have opened 67 clients. In total, we have offered over 967 services to our clients with a wide variety of needs. Some of the efforts we have made thus far include building our relationship with Adult Probation and Parole, Vocational Rehab, the Housing authorities and the Department of Workforce Services. Our clients have reaped the benefits of these relationships and have made successful progress while in the JRI program. Since starting the JRI program, we have had several success stories but we would like to share a personal story from a client who has been with JRI since the very beginning. Since being released from jail, she has found permanent work, is currently taking several classes at Utah Valley University and is living in permanent stable housing. She has not returned to jail since she began treatment with JRI, and is on the road to successfully completing probation.

“When I got out of jail I had nothing, no money, no car, no job and was couch surfing. It was a major struggle just to get my basic needs met which is stressful and overwhelming all by itself. On top of trying to survive I had to try and get my life in order, stay off of drugs and complete probation requirements... No easy feat when it all seems so hopeless.

JRI was very helpful to me by giving me assistance with housing, food, Vocational Rehab, etc. Also having a caseworker to support me helped me feel that I wasn’t doing this alone and that it was possible to get everything done that I needed to. She relieved a lot of stress helping me get into school with things I didn’t know how to do and left to my own devices probably would’ve given up with all the obstacles we encountered.

When I finally started working, going to school and attending Intensive Outpatient Drug Treatment, I was extremely busy but still had a lot of other agencies/obligations to keep up appointments with. My caseworker helped me by making appointments for me and reminding me when they came up and what we needed to do for them and even going with me to some which lent credibility to me (my memory is horrible and I had NO time to get everything done, this was a HUGE help). JRI set me up with therapy and medication for mental health. My caseworker and therapist have both been very good about giving me positive reinforcement

and encouragement and support in general when I was going through rough times. It is apparent that they really care and that has made a huge difference to me.”



This is annualized data, corrected for LOS. We took the last 3 years of jail data and divided it by three and then used a multiplier based upon how many months they have been on the program so we are comparing apples to apples.

Number of unduplicated clients who completed an OQ/YOQ:

28 of 136 clients served completed an OQ in September. 20 percent of clients served completed an OQ with each client completing an average of 2.17 OQ's. It has proven difficult to give an OQ to clients who are seeing only the case manager since they are often seen outside of the office and case managers are not well trained in the administration and use of this instrument.

Supported Housing Services

Leadership/Allied Agency Participation/Initiatives/Success

We are happy to report that the team of 6 case managers here in SHS is averaging 99.3% of their productivity as a collective team. The Case Managers are inserting themselves into the home life just a little more when a need presents. Recently we had a client who was not presenting too well and has been noted to have a bad odor coming from him. The case manager had that difficult conversation and found out that he was rotating a few pairs of socks and 2 pairs of pants without washing them for several months. The client reported that his dryer quit working and he felt like he couldn't wash his clothes. The case manager delicately put together a plan to get the client on track and the client was very appreciative. Remembering that our clients have some serious limitations and, at times, need a little nudge, to improve the quality of their lives is an important part of what we do. We are trying to focus on improving the quality of life as well as take care of the linking and connecting to community resources as usual. It has been an excellent approach to quality mental health care.

We have a new therapist, Erin Henley, who shares her time between the WRC and Supported Housing. She has shown to be an excellent therapist and team player. It is a little challenging for her to balance her time and get to know two different programs, but she is fitting in very nicely and the clients are adjusting to their new therapist very well.

Number of OQ/ YOQs administered:

118

Number of unduplicated clients who completed an OQ/YOQ:

64

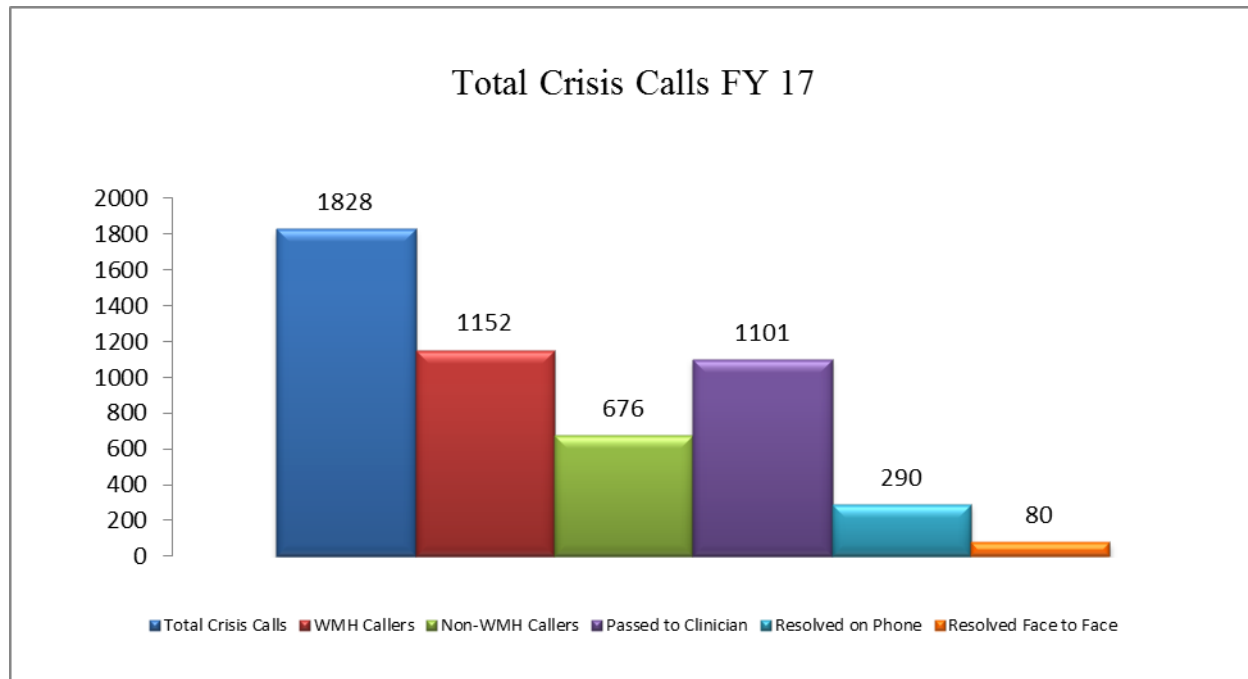
Number of total unduplicated clients served last month:

159

CRISIS SERVICES

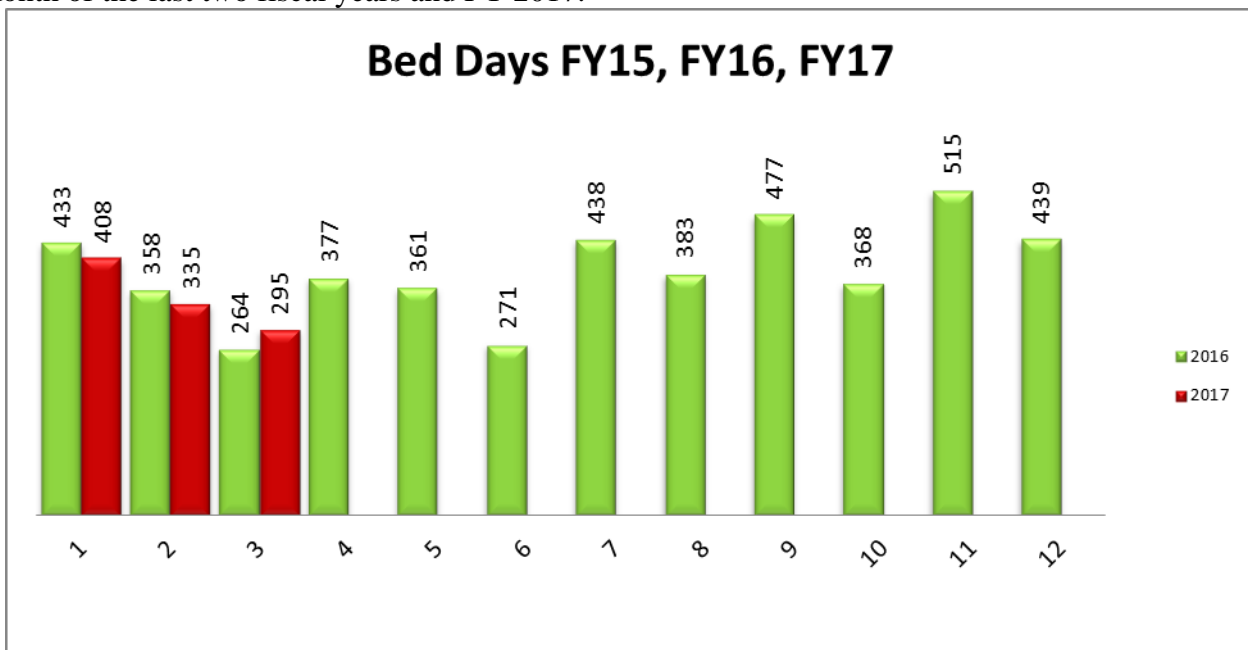
Crisis Calls

The following graph represents the total breakdown of Crisis calls received thus far for fiscal year 2017



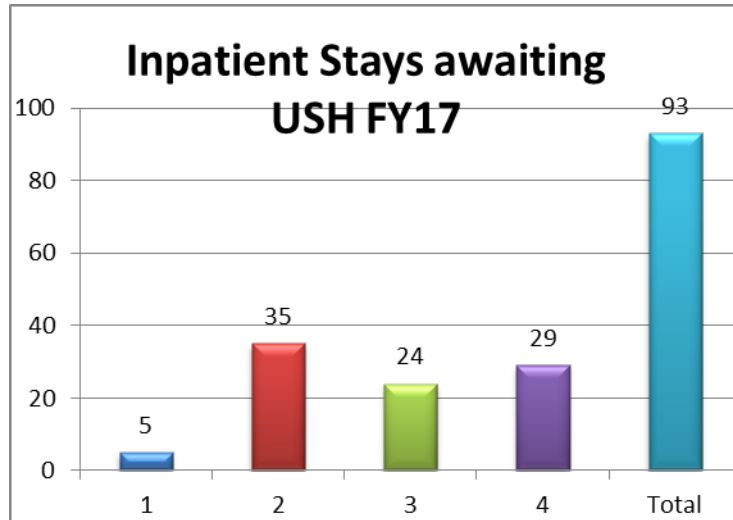
Inpatient Psychiatry

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 2017.



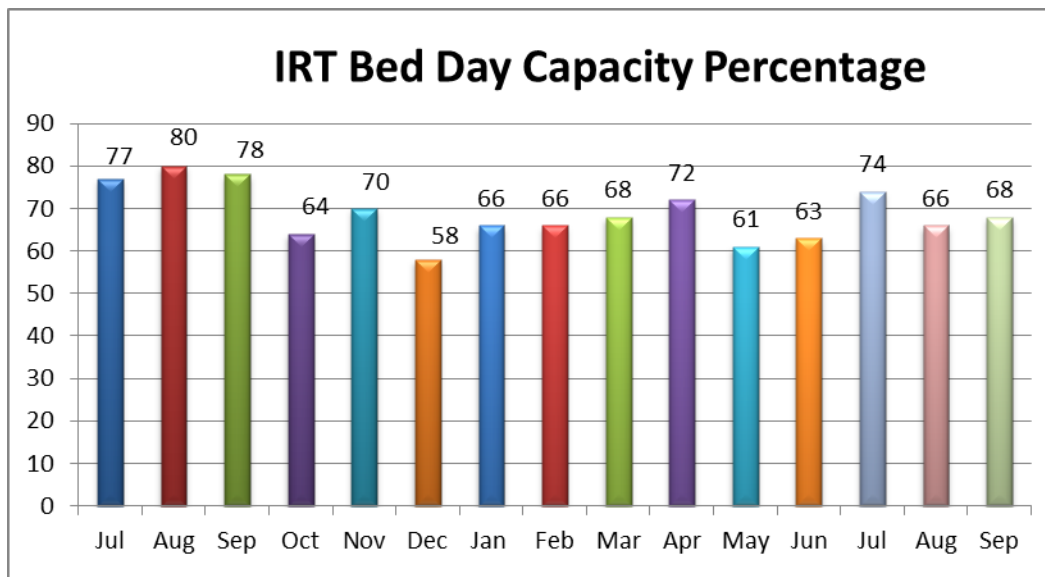
Inpatient stays waiting for USH Hospital bed placement

The following graph represents those waiting for admission to the Utah State Hospital. The numbers on the bottom of the graphs represent each individual who waited for USH placement. In 2012, WMH started tracking the number of acute psychiatric hospital bed days used for patients awaiting admission to the USH. **The total cumulative cost to WMH since 2012 is approximately \$3,498,093. Total cost for FY 17 thus far is \$102,300.**



Intensive Residential Treatment

IRT - The following graph illustrates the bed day capacity percentages from FY15 to FY16 at **Intensive Residential Treatment (IRT)**



Leadership/Allied Agency Participation/Initiatives/Success

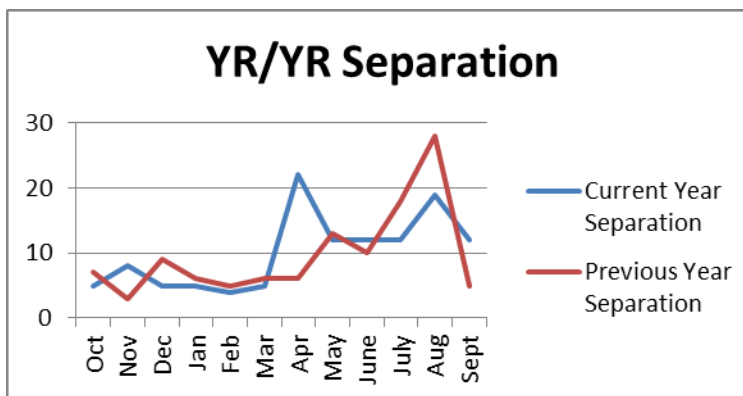
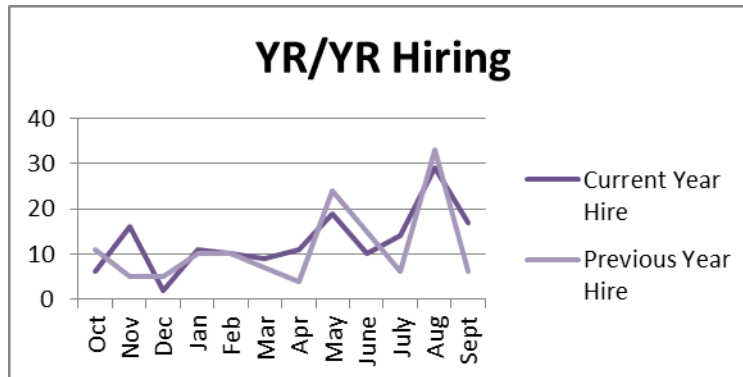
Success Story

We often struggle to get some of our paranoid clients to sign necessary paperwork for DWS and other benefits that will only help them. The BRIDGE team has a client who has been particularly difficult to get to sign paperwork to coordinate and keep his Medicaid benefits. With much discussing and relationship building, the BRIDGE team was able to get this client to once again stay qualified for Medicaid. If not he would not be able to afford his medications and the costs of treatment required to keep him and the community safe.

Human Resources

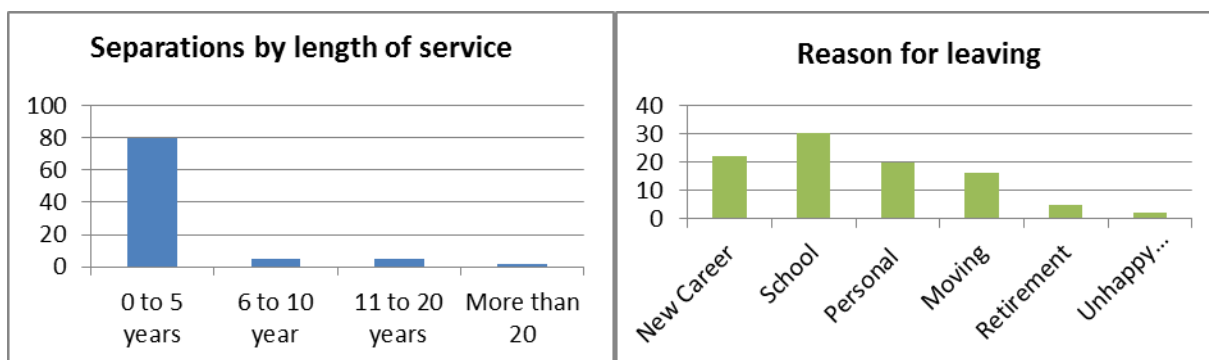
Staffing

The total monthly turnover rate was 2.8%, and annualized WMH is running at 28% overall. September hiring was up significantly, but separations were down year over year. Avg time to hire = 45 days.



Turnover Metrics

Monthly turnover rate for full-time benefitted employees = 1.3%, for part-time employees = 5.1% (70% of total separations). Separations continue to be driven by less than 5 year employees returning to school.



Recruiting and Training

The HR staff along with Scott Taylor, Chad Shubin and Amanda Stansfield attended the fall UVU career fair. The event was successful with several positions being filled with UVU behavioral science majors. Have presented new discipline policy to all managers and supervisors and have scheduled a WMH policy and anti-discrimination training in November.