

Wasatch Mental Health

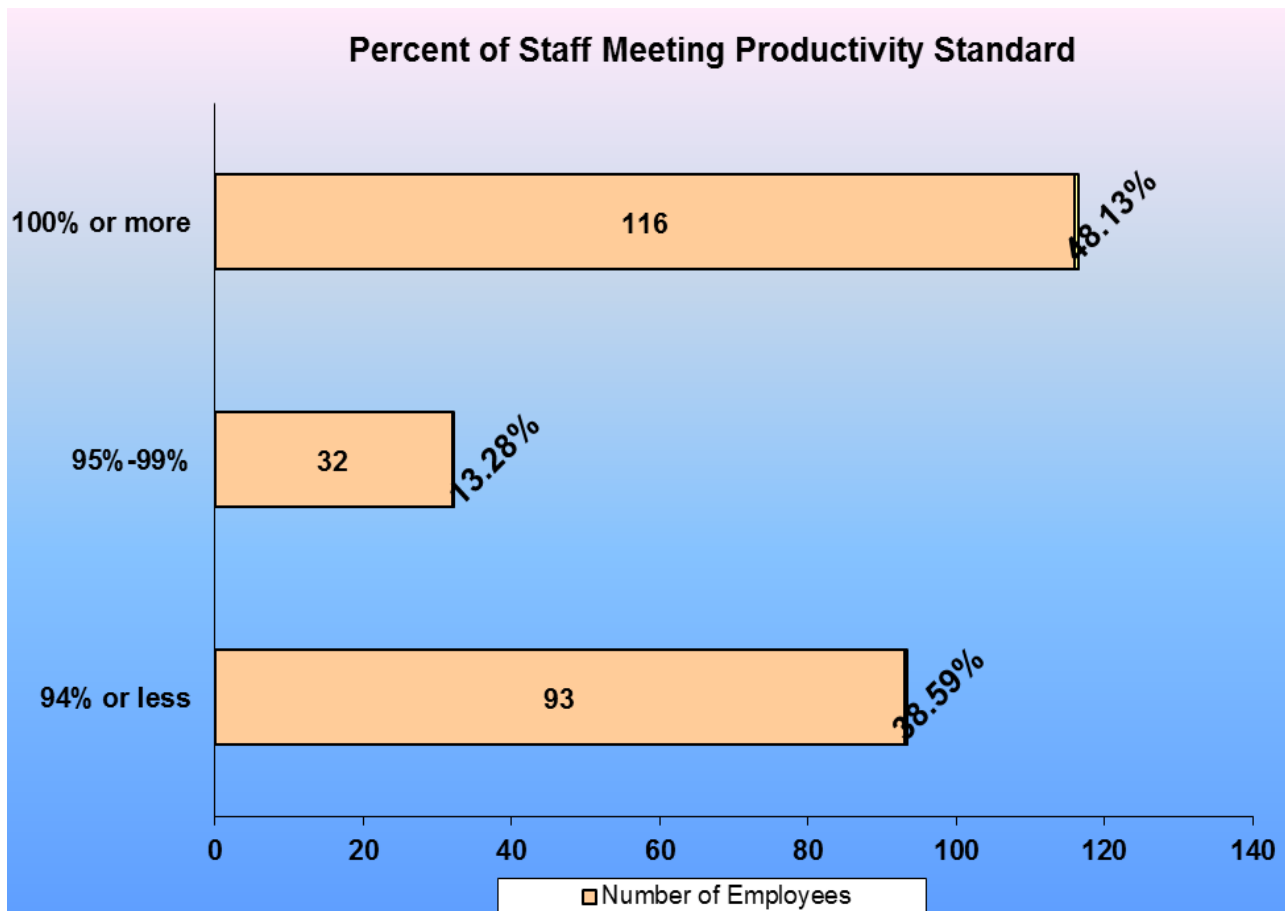
Briefing Report

October 2015

This last month, our planning of the Payson Facility continues to move ahead. We are in the process of reaching a decision whether we should build the entire structure as a shell or whether we should just build one of the wings at this time. The cost difference would be approximately 20% or \$800K to \$1 million. As the structure is drawing down our reserves, we are inclined to build the structure in two phases, even though our reserves will remain well within the required range.

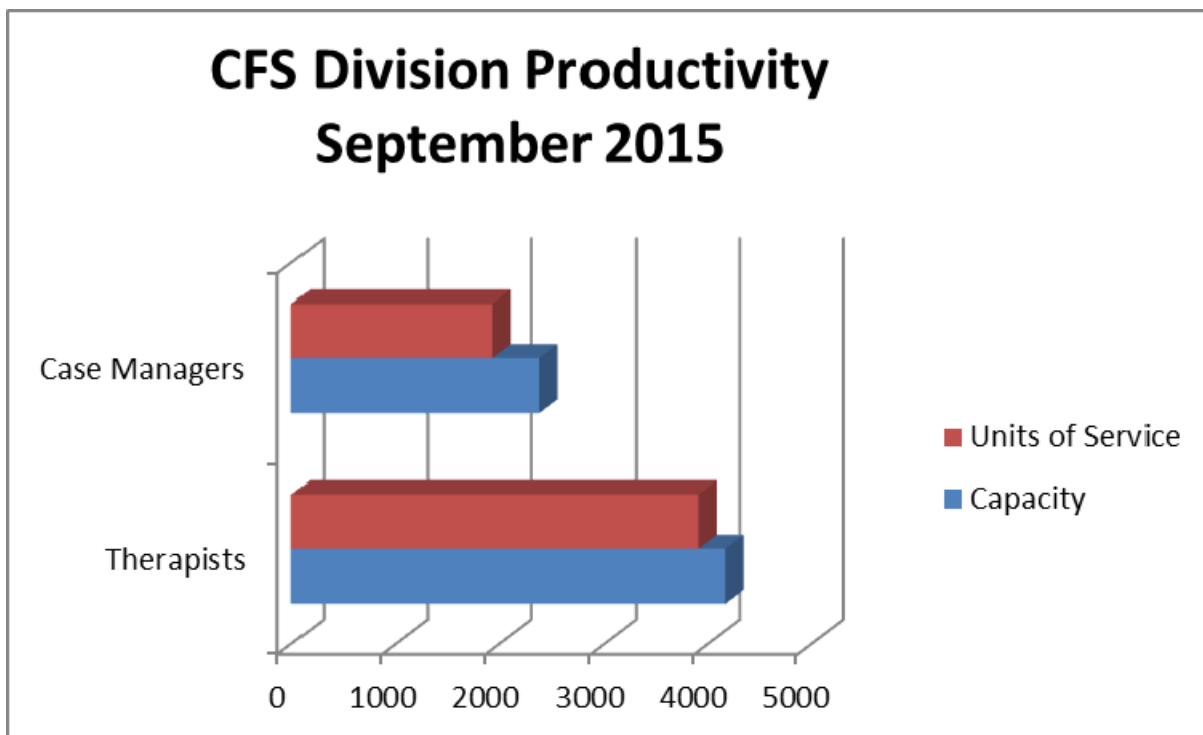
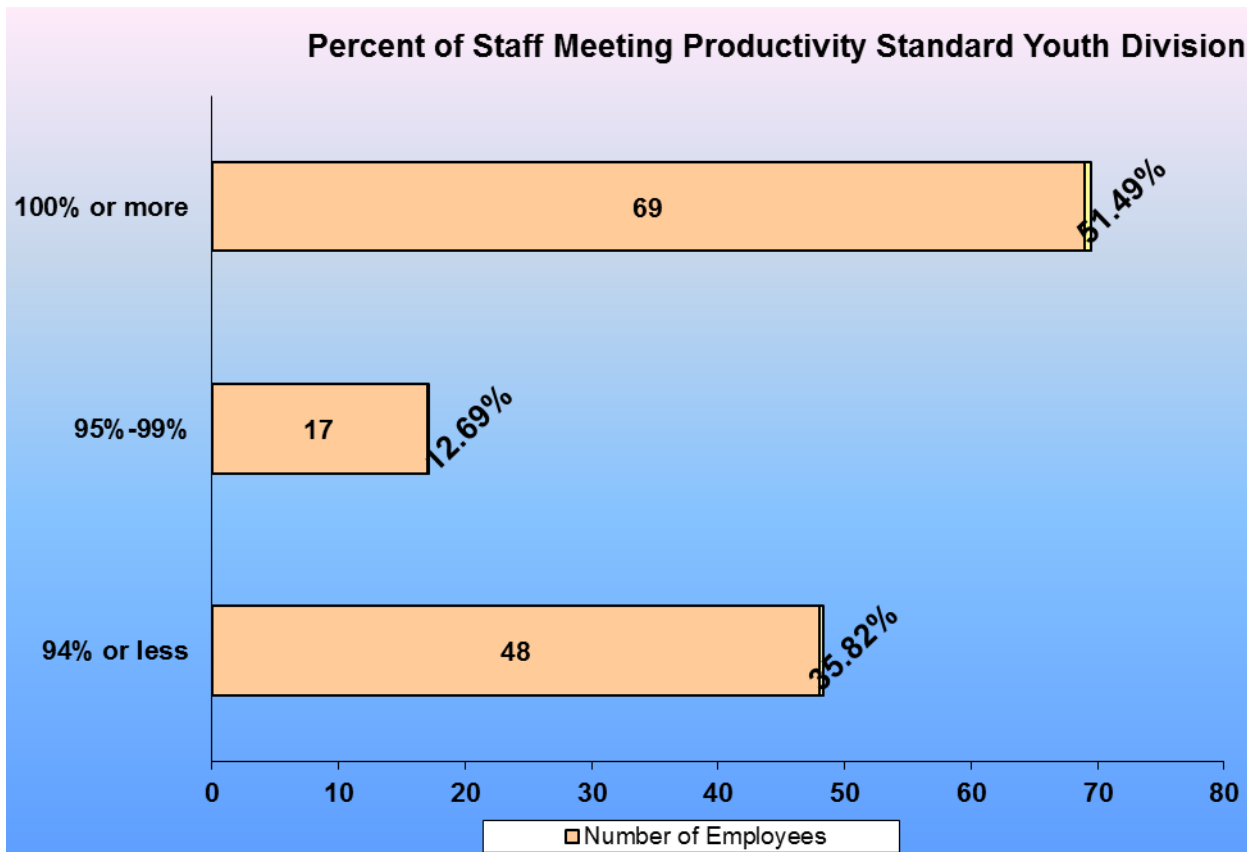
Medicaid expansion has been debated again at the legislative level. It appears that there is little support for any of the plan at this point. However, reportedly, some plan to address the needs of those currently underinsured or uninsured is not entirely off the table. Especially the JRI initiative hinges on some expansion plan, especially for the substance abuse population, as the JRI funding is mostly geared towards assessment and identification. The treatment component was hoped to be covered by Medicaid. As mentioned, this likely will affect the substance abuse related clientele more than mental health, as mental health JRI individuals likely will qualify for Medicaid.

Below is a graph depicting the productivity for all center staff having a productivity standard.

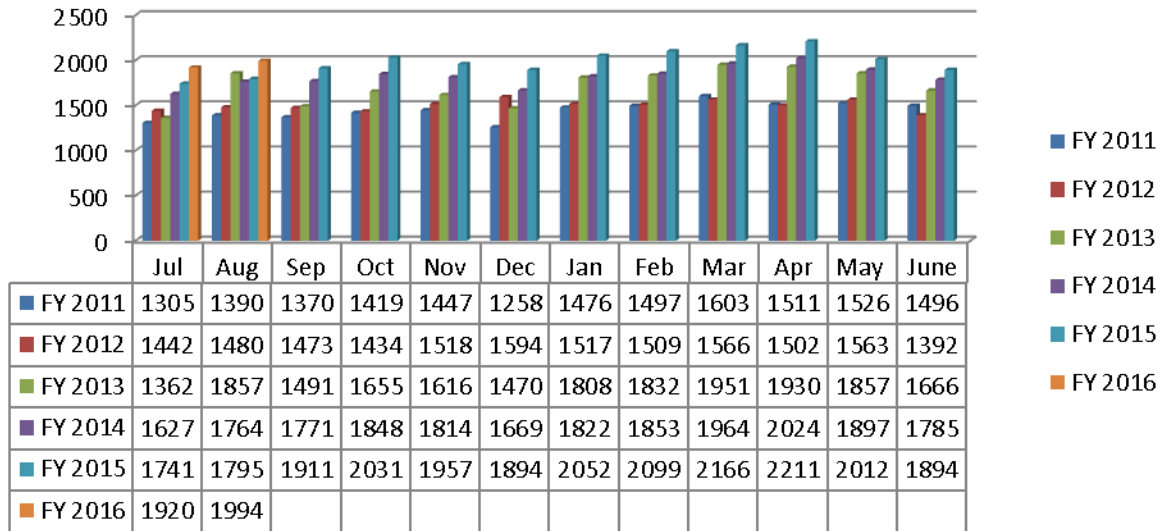


Children and Family Services Division

Performance Indicators



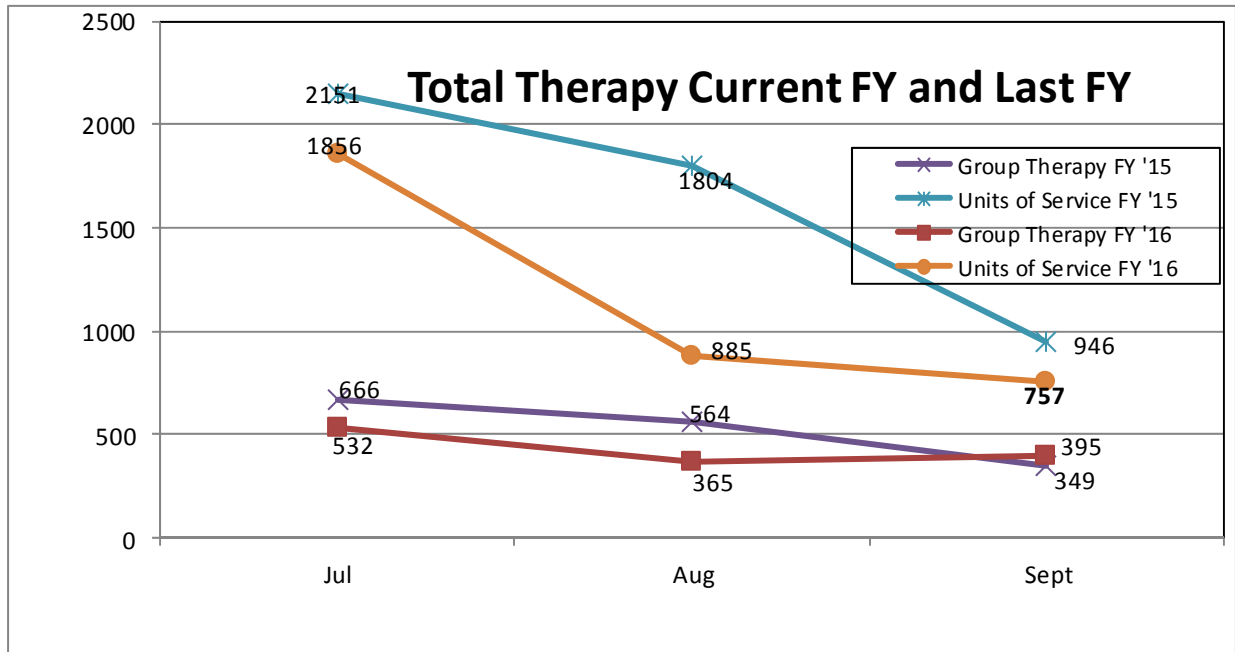
Total Number Unduplicated Clients Served CFS Division



- The Parkview Campus was the recipient of Untied Way's Day of Caring September 10, 2015.
- Wasatch Mental Health Youth and Family Services coordinated providing an information booth at the Provo Pride Festival.
- The average percent of individuals achieving 100% of the productivity standard in the Youth Division is 51.11%

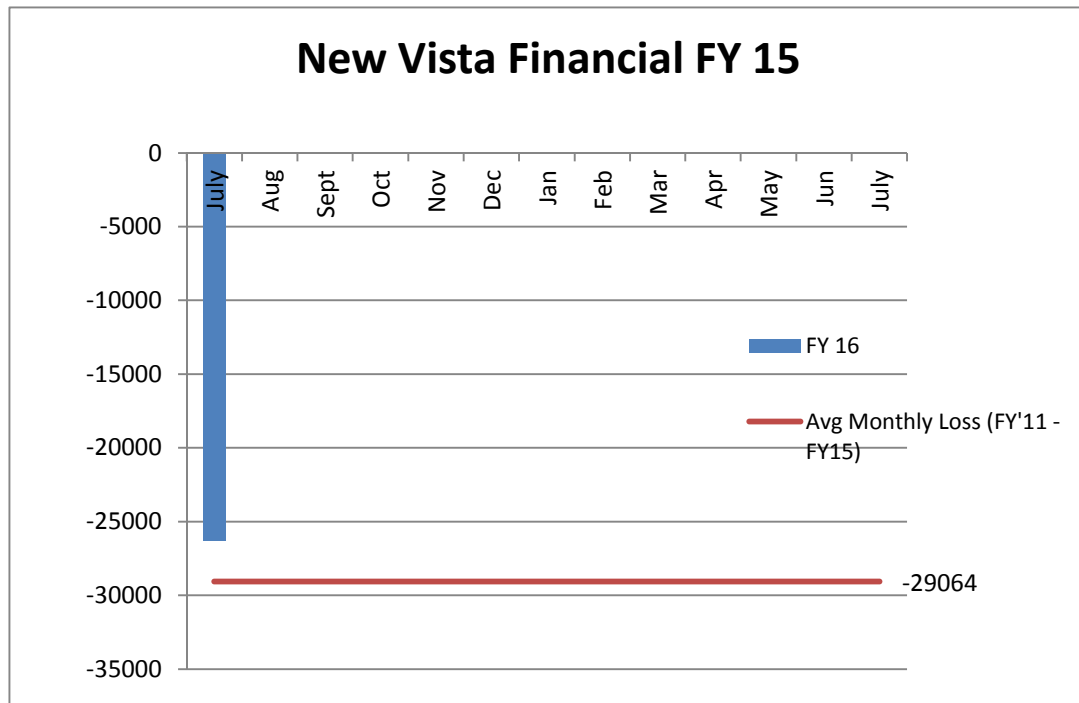
New Vista Youth Services

SEPTEMBER REPORT: The three therapists at New Vista are averaging 108% productivity. They usually average this level of productivity from month to month.



NEW VISTA FINANCIAL REPORT

For the first two months of fiscal year 2016 we were in pretty identical financial situations. Our losses are about \$4,000 less than our average monthly loss for the past four years.



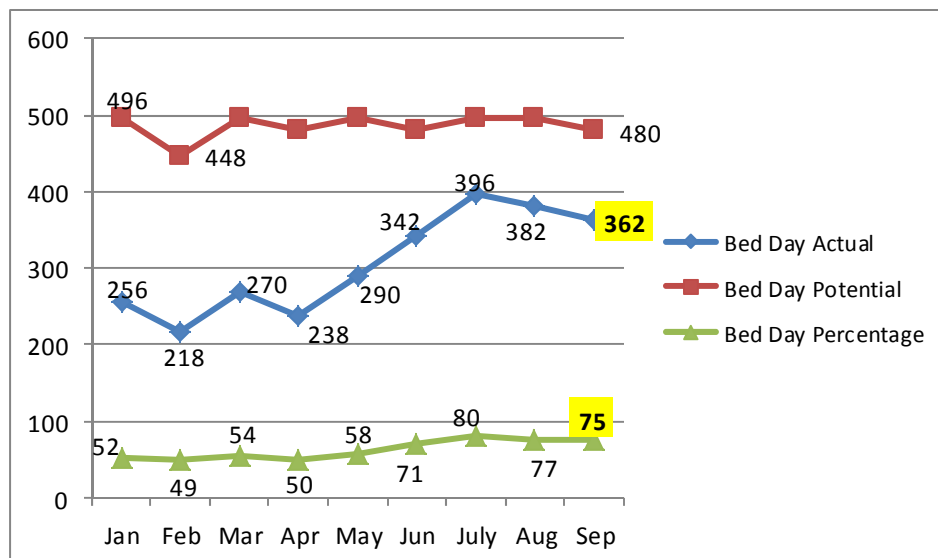
September '15 New Vista Monthly Report

New Vista has 6 Youth that attend Dixon Jr High with staff. The youth at Dixon are in the Focus class room with 2 of the youth needing special education classes. 1 staff attends the Special education classes with the youth. We have 1 youth that attends elementary school and staff transports him to and from school. We have 12 youth that attend Independence High School (HIS). We have 2 youth at IHS that have “out classes” where they attend class without staff to assess their readiness for main stream school. 1 of the 2 youth had several boundary issues and was brought back into the self contained class with staff. We have 1 youth that is non compliant in school, has all failing grades and was sleeping in class. She would not redirect when staff attempted to redirect her in class. She was placed in VP and she has refused to come back to Day Tx. We currently have 3 youth that are in our step down program that attend school in the community and then come to Day Tx after school for groups and individual therapy. We had 2 youth that organized their final service projects this past month. The New Vista youth spent time at the food bank providing service to the community for 1 project and the other project the youth organized a clean up at a park in Provo Canyon. 1 youth was placed on his 30 day trial after his service project was completed. He was scheduled for completion of the program on September 29th but while on his 30 day trial he struggled with some issues and his 30 day trial had to be extended. He is currently working on some issues that have occurred so he can complete the program.

We are currently staffed with 5 FT staff, 7 PT staff, 3 therapists and 1 Intern therapist. 1 of the part time staff has just given her notice because she will be doing her student teaching in Sweden so we have just posted her part time position.

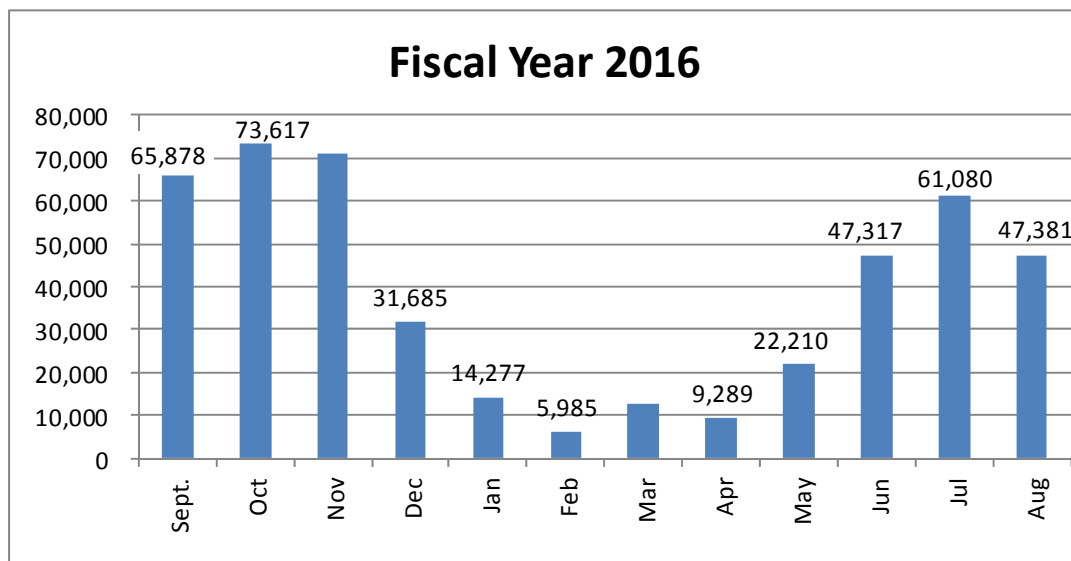
Aspire Youth Services

SEPTEMBER REPORT: Aspire topped out at 80% occupancy in July. Since then our referrals have dried up and we have had several residents complete their programs and transition to foster homes. Three of them moved to continue their treatment at New Vista. They are working on their trauma issues and are not girls with sexual behavior problems.



ASPIRE YOUTH SERVICES FINANCIAL REPORT

Our August bed days slipped down to 77 percent and that translated to a slight decrease in monthly revenue for August.



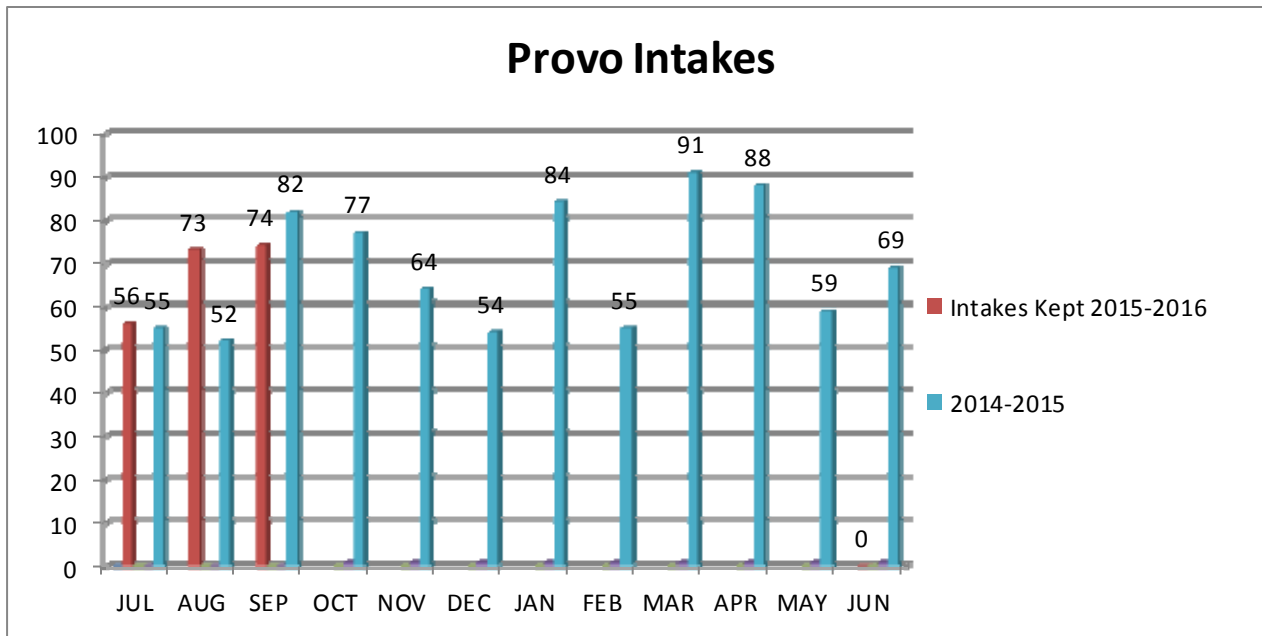
September 2015 Monthly Report.

We currently have 9 residents at Aspire. We just had a resident graduate this past week and it was really exciting. She will be attending New Vista Day Treatment Program and is looking forward to this. This resident came into Aspire 4 or 5 months ago and struggled at first to engage and get along with the other residents but as she built her relationships with staff, therapists and the residents she really began to open up and look at herself. Through therapy and feeling loved and cared for by her peers, staff and therapists she thrived. She jumped into therapy allowing herself to heal and make amazing changes. She was an inspiration to the other residents and really inspired them to put more into their treatment. This was an amazing experience for all of us!

The resident's and some staff also went the Labyrinth in West Jordan and Liz conducted a group there. This was a very powerful experience for all of us as we all participated and processed what our experience was. For the therapists, residents and staff it was an emotional humbling experience and one in which we were all able to bond and feel closer to one another.

Therapy is going well for most of the girls and their families. Some of the girls are more engaged than others, but for the most part all of the girls are doing well in therapy.

Provo Family Clinic



Groups currently running: Grand Families, Strengthening Families, Child Parent Relationship Training and a Dialect Behavior Training group are continuing to run this month.

Leadership/Allied Agency Participation/Initiatives/Succ

-Larry Dunning and Victoria Crowe did play therapy training on September 16th and 23rd. Clinicians reported it was very informative and helpful.

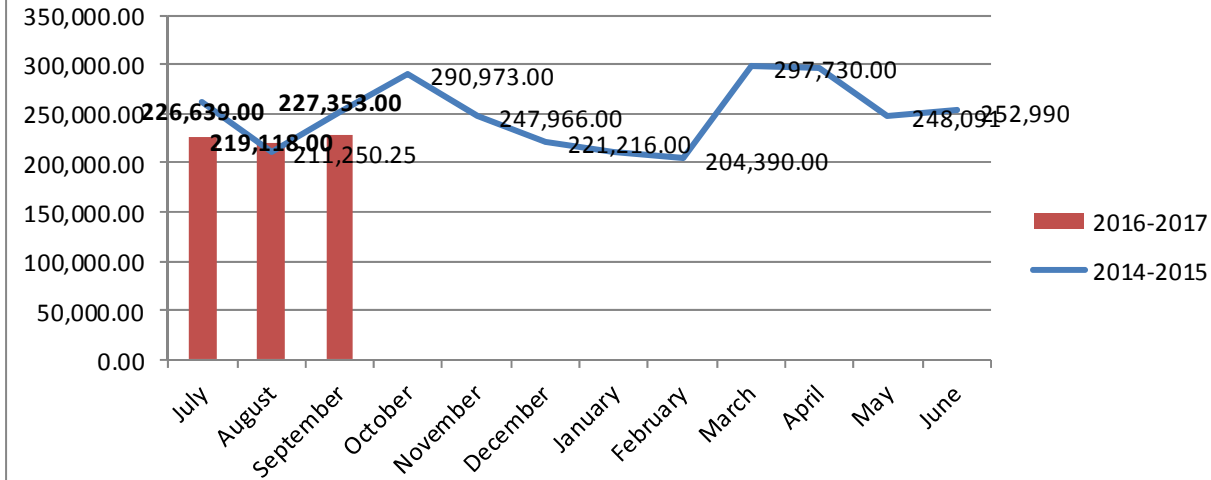
- Chad Shubin did a presentation on the Stride and Excel Programs to staff members

- United Way Day of Caring came and washed our walls, cleaned toys, glass wall blocks, cleaned up the grounds and cleaned play therapy room. It was much appreciated.

-Eye Movement Desensitization & Reprocessing lunch group was stated. It will be the first Tuesday of the month at the Provo Family Clinic conference room from noon to 12:55 pm. This is an opportunity to staff cases and exchange ideas.

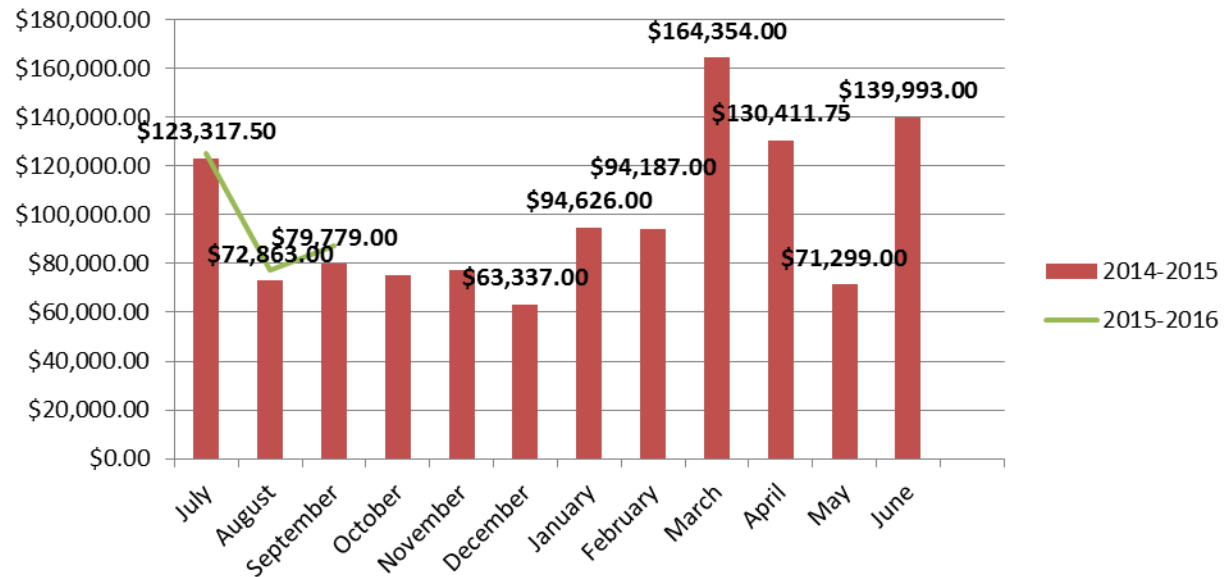
-A very helpful presentation from Jennifer Rogers and Joseph Fair of the Psychology Testing Department was given at our staff meeting.

PFC Revenue FY'16 vs FY'15



STRIDE

Stride Revenue FY'16 vs FY'15



GIANT Steps

Highlights

- Amber Hopkins and Michael King gave presentations about autism and Giant Steps to three classrooms at Wasatch Elementary. Since we are new to the school, we wanted to help the teachers and the children understand who we are and what we do. The principal expressed appreciation for this and the teachers all said it was very helpful.
- We offered parent training and support groups for families in the program and some from the community on 9/8/15 and 9/22/15. Topics discussed included signs & symptoms of autism as well as proper ways to respond to certain kinds of behaviors. We also reviewed core principles related to healthy ways to help children with sensory issues learn to eat new foods.
- We collaborated with Utah Valley University a lot this past month. On 9/2, we attended their field instructor training as we continue to recruit interns from their school. We also attended a volunteer and service fair on 9/15 and a career fair on 9/30 to present about our program and recruit new volunteers and aides.
- On 9/22, each of the full time staff members of Giant Steps attended a training presented by Adam Schebach, Ph.D about why children with neurodevelopmental disorders struggle with basic tasks of daily living and how to help them be more successful. Giant Steps, as a member of the Autism Resources of Utah County Council, helped organize the event which turned out successful and very informative.
- The Giant Steps waiting list currently includes 112 non-Medicaid children.

Positive Reports from Families or the Community:

- One of the parents remarked last week about how much she likes the program and how happy she is that her son is in the program. She also told me that she loves the way we work with him and making him feel welcome.
- One of the children in the Provo classroom made it through his first official day of toilet training without any accidents!
- Another child in the Provo classroom slept in his own bed for the first time in his life.
- A parent commented at the fieldtrip that her child is “already talking a ton more and [they] can understand her better.”
- Another child’s mom brought us cookies and said she is so happy with her boy’s potty training and success so far.
- A child the other day chewed and swallowed a bite of all his food to earn a reinforcer. Even meat which mom said he will never eat.
- One of the children in Orem has really bad separation anxiety. (To the point where they had to sneak out the back door to help avoid a meltdown.) Since school started he has been getting on the bus with little fuss. Mom recently came in and volunteered. When it came time for mom to leave, he was sad, but was able to calm down and say goodbye to mom without a meltdown. Mom is super happy and excited about this change.

GIANT Steps Volunteer Hours

Community Volunteer Hours: **106**

GIANT Steps Volunteer Hours: **26.75** hours

Parent Volunteer Hours (FYTD): **26.75** hours

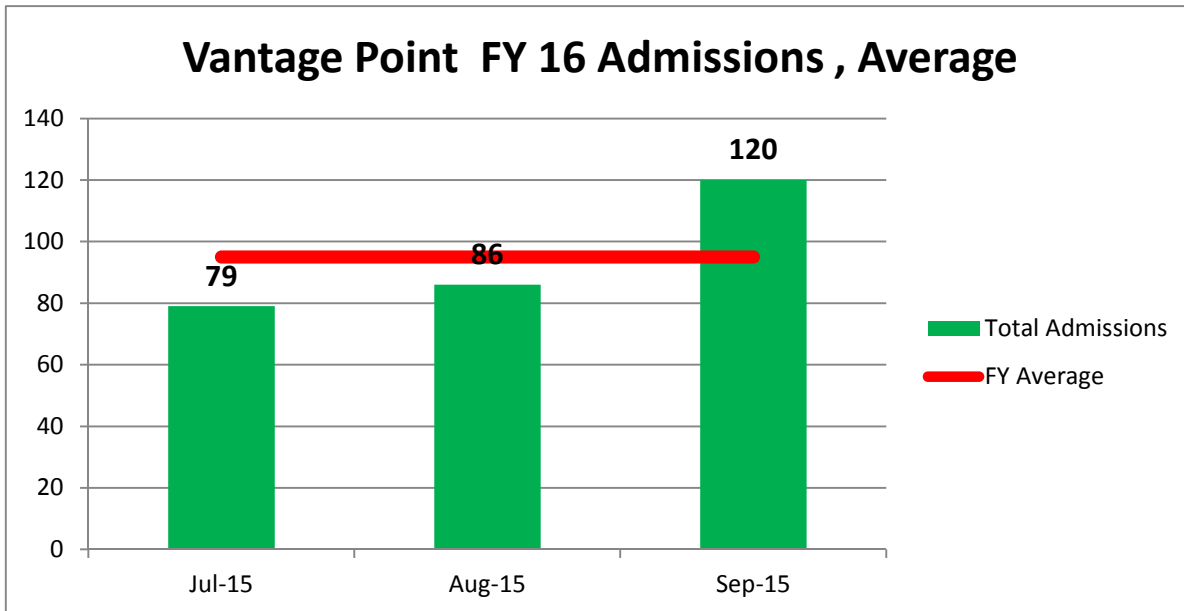
Productivity:

Department Productivity: **99%**

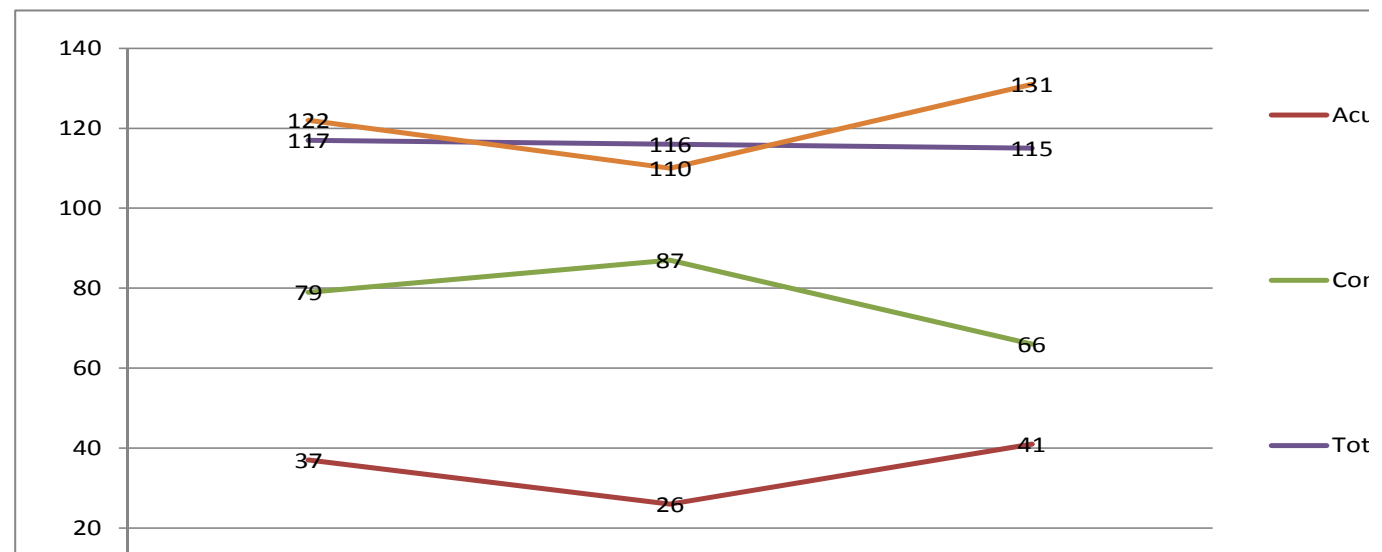
Number of Employees with Productivity Expectations: **35**

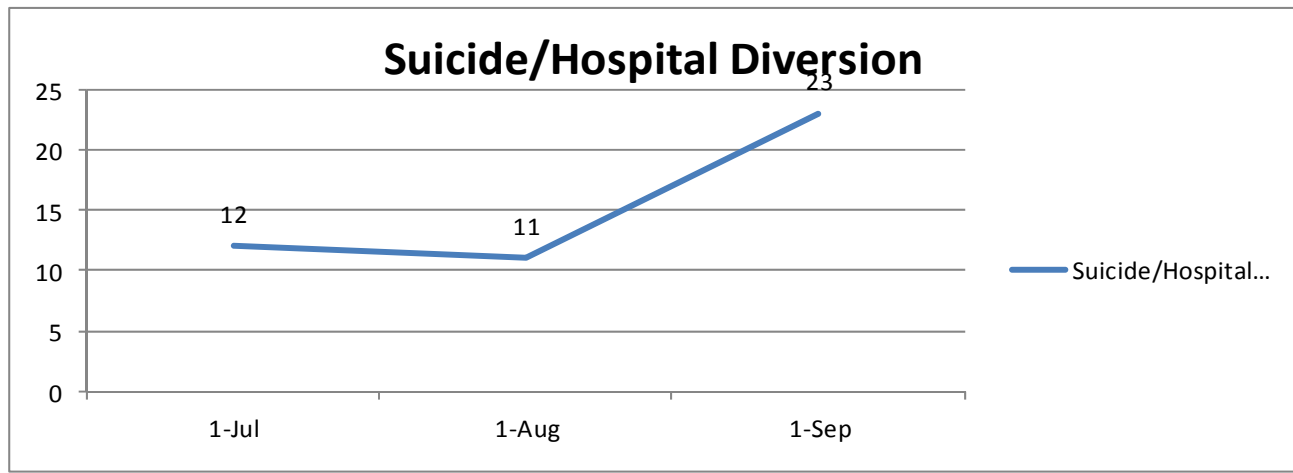
Vantage Point and CYFAST

We had **120 admissions** this month, **111** were unduplicated.



CY Fast





Financial Report – FY 2016 through August 2016

Youth Crisis (250): profit of \$23,387

Vantage Point (350): loss of \$29,635

DHS Case Management

Case Load:

| | |
|----------------|----|
| Katy Gibson: | 20 |
| Suzanne Jasper | 5 |
| Aaron Hayes | 8 |

All DCFS case reviews and court reports are completed and current.
DCFS data base task items are completed or scheduled.

Leadership/Allied Agency Participation/Initiatives/Successes

Our new case manager Aaron is really getting the hang of things now. In comparing his progress to other DCFS workers hired at the same time, he is ahead of the game with the number of assigned clients and the things he's learned to do already!

Katy and Suzanne are still beloved by DCFS and represent WMH just wonderfully. Hopefully, for Suzanne's sake, her case load will disappear this next month as she transitions to Aspire.

Financial Report FY 2016 through August 2016

DHS case management is showing a **loss** of \$24,488

Due to financial loss on this contract we have elected not to replace our part time case manager vacancy. Catherine and Scott Taylor, LCSW have a meeting scheduled in November with DCFS regarding the contract and options to make it viable for us.

American Fork Family Clinic (AFFC) & School Based Services

of total clients served last month: Total: 605 Adult: 191 Youth: 414

of YOQs/OQs administered: YOQs: 424 OQs: 326

Unduplicated # of YOQs/OQs: YOQs: 248 OQs: 174

Groups in AFFC

Child/Parent Relational Training
The Strengthening Families Program
School Based Social Skills

Leadership/Allied Agency Participation/Initiatives/Successes

We have started our Fall round of The Strengthening Families Program. Greenwood Elementary School is the host site again. We have regular staff, student interns, and volunteers from the school district and UVU helping us.

Acuity Based Care Implementation

Recovery Services Coordination: We discussed with the staff about how to have the recovery services coordination conversations with their clients.

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

Performance Indicators

of total clients served last month: Total: 351 Adult: 110 Youth: 241

of YOQs/OQs administered: YOQs: 290 OQs: 152

Unduplicated number of YOQs/OQs: YOQs: 175 OQs: 91

Groups in SFFC

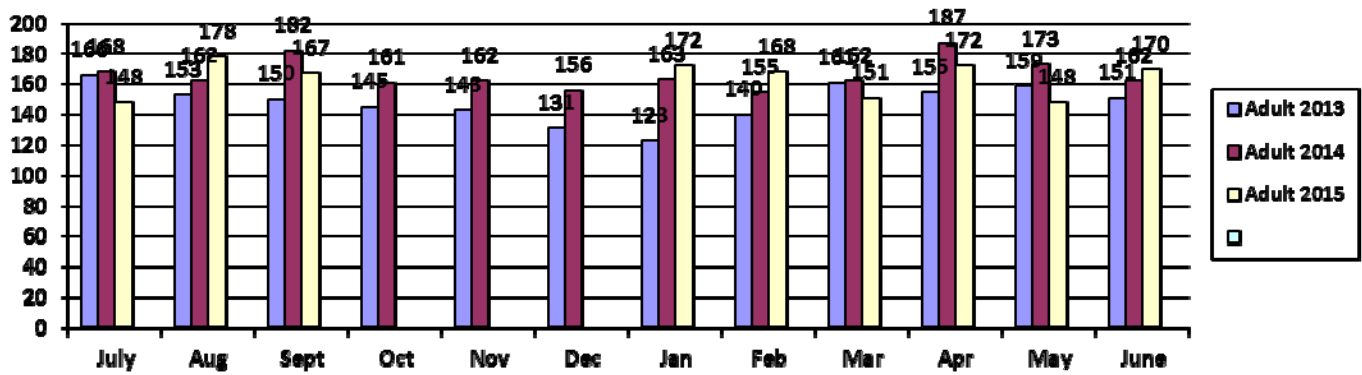
CPRT parenting group
DBT
The Strengthening Families Program

Leadership/Allied Agency Participation/Initiatives/Successes

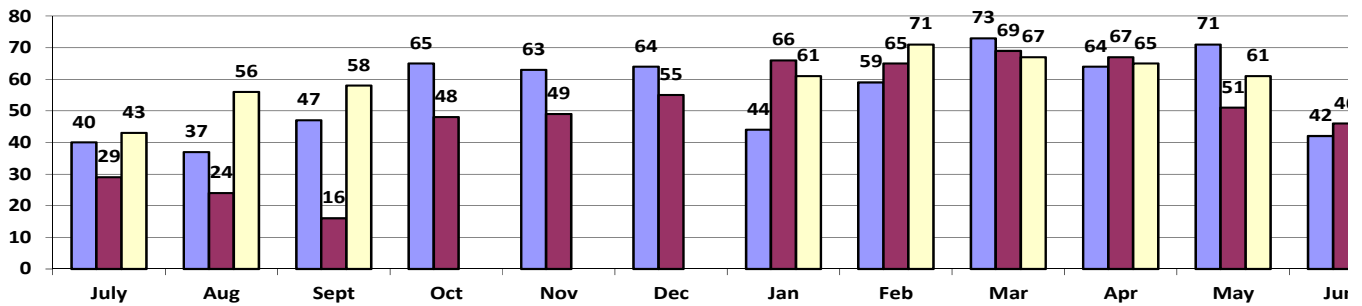
SFFC started the Fall round of The Strengthening Families Program in the Spanish Fork DCFS training and conference rooms. We have 10+ families attending. This year we have added three parent mentors to visit the families during the week and reinforce what they are learning in the class.

Wasatch County Family Clinic

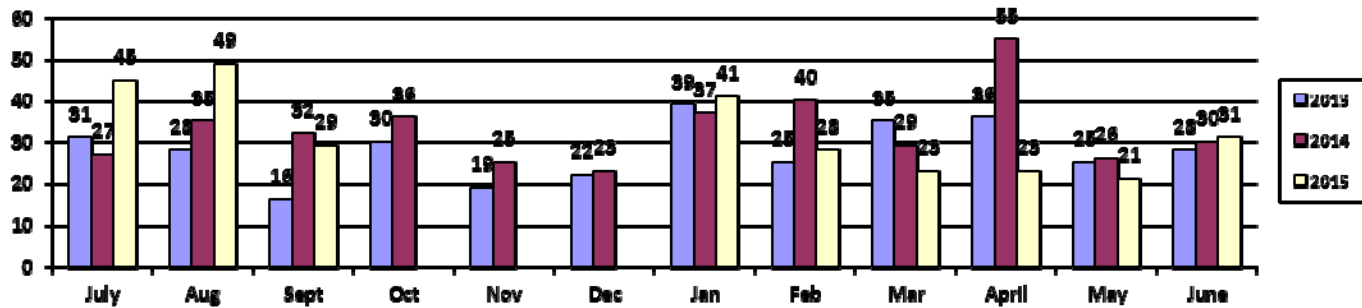
Adults: 167



Youth: 58



September Monthly Intakes: 29



Number of YOQs/OQs administered: YOQs: 63 OQs: 159

Unduplicated number of YOQs/OQs: YOQs: 34 OQs: 90

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

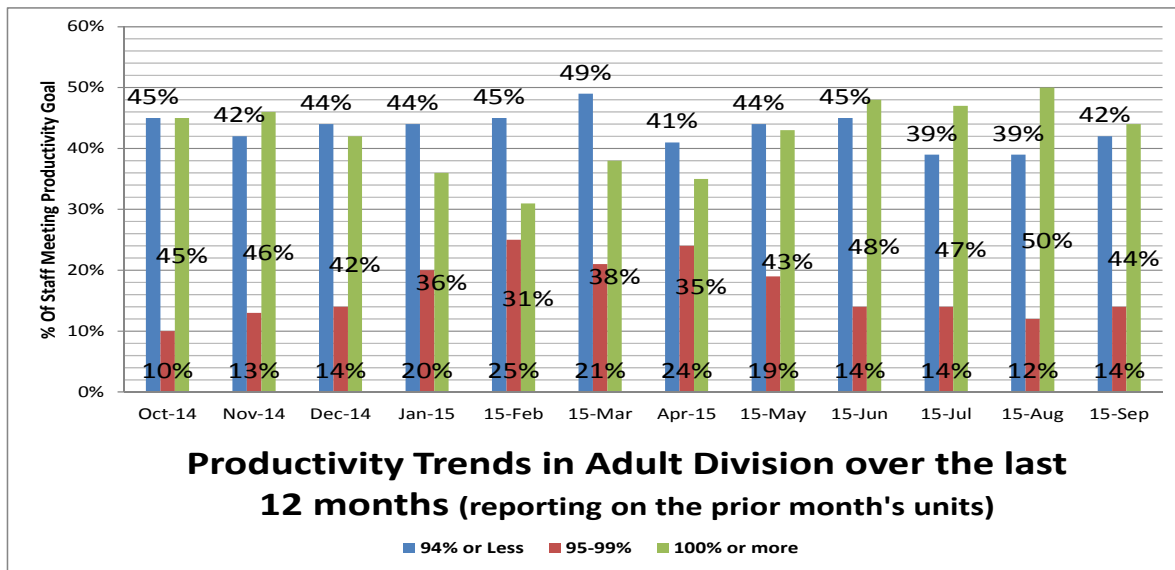
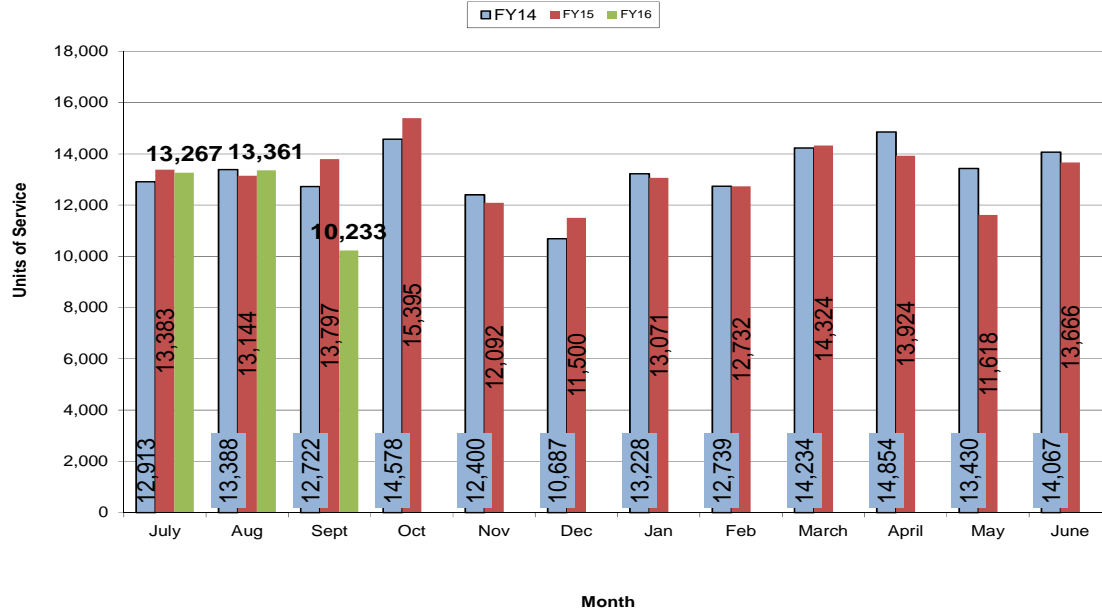
Leadership/Allied Agency Participation/Initiatives/Success

In September the Caring Community Coalition, which WCFC co-chairs sponsored the 2nd Annual Dinner in the Park. This was an event to promote eating dinner together as a family. As participants arrived they were able to visit various community partner booths and receive information on alcohol prevention and other wellness tips. They were then given an item to take home and when all booths were visited each family would have the ingredients to make their own family dinner. They then were served dinner in the park. We estimate that 470 individuals had dinner in the park. Other partner agencies involved with this event include the Wasatch County Health Department, DCFS, Heber Hospital, Wasatch County School District, Heber City Police and many contributions from local businesses.

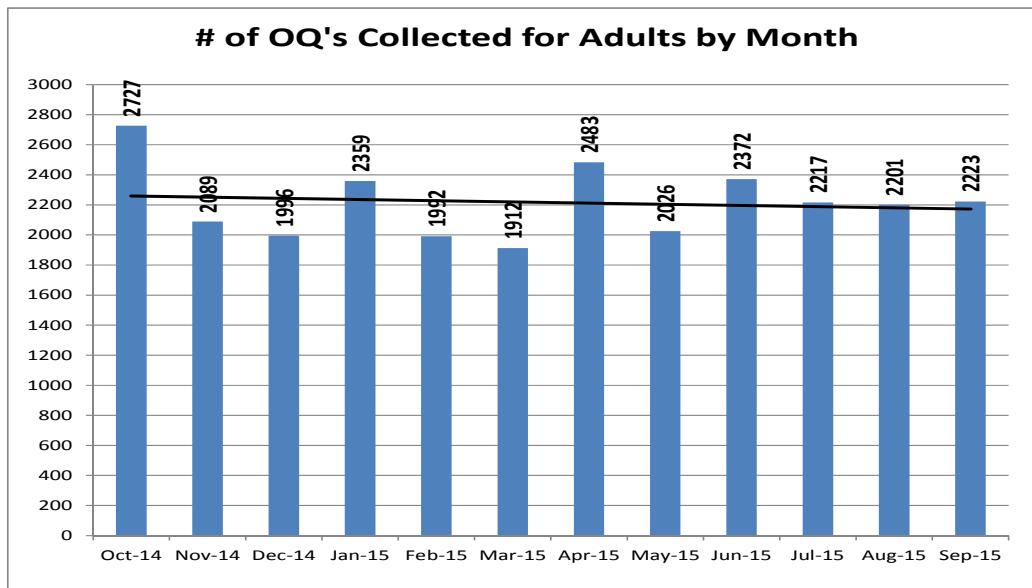
We completed the first session of The Strengthening Families Program. We received very positive feedback from the families that participated in this program.

Adult Services Division

Units of Service Provided in Adult Services



The average number of staff reaching 100% of the productivity standard since January 2015 is 41%.



OQ/YOQ Administration

Number of total unduplicated clients served last month: 3881

Adult Clients Served 2355

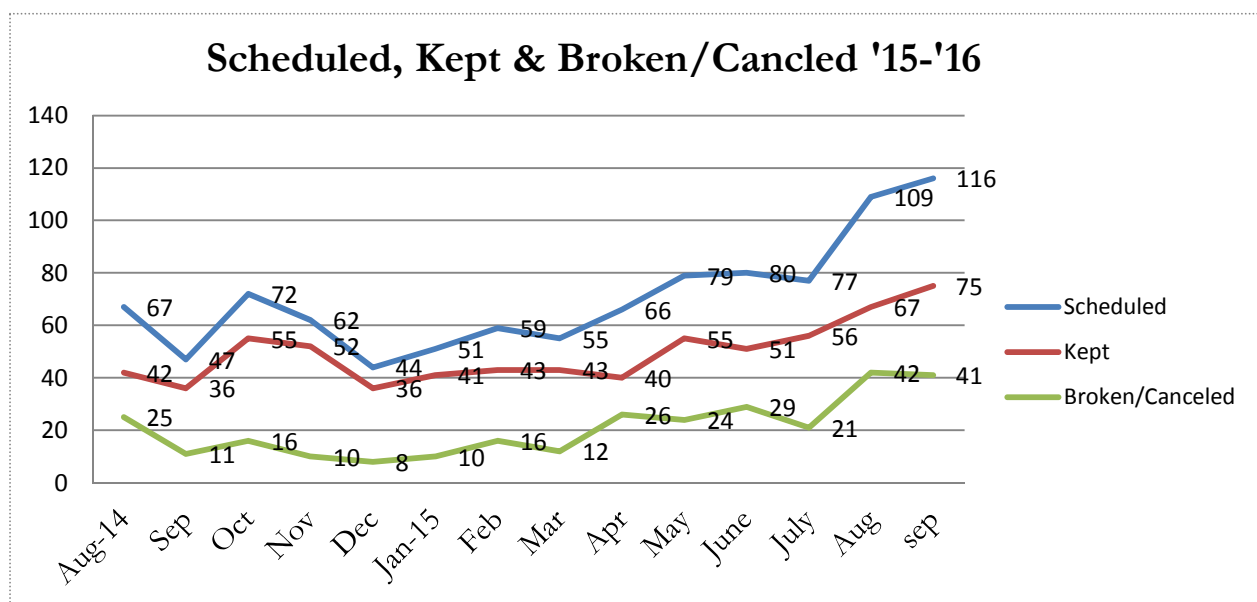
Child/Youth Clients Served 1526

Unduplicated Count of All clients Served at WMH 3881

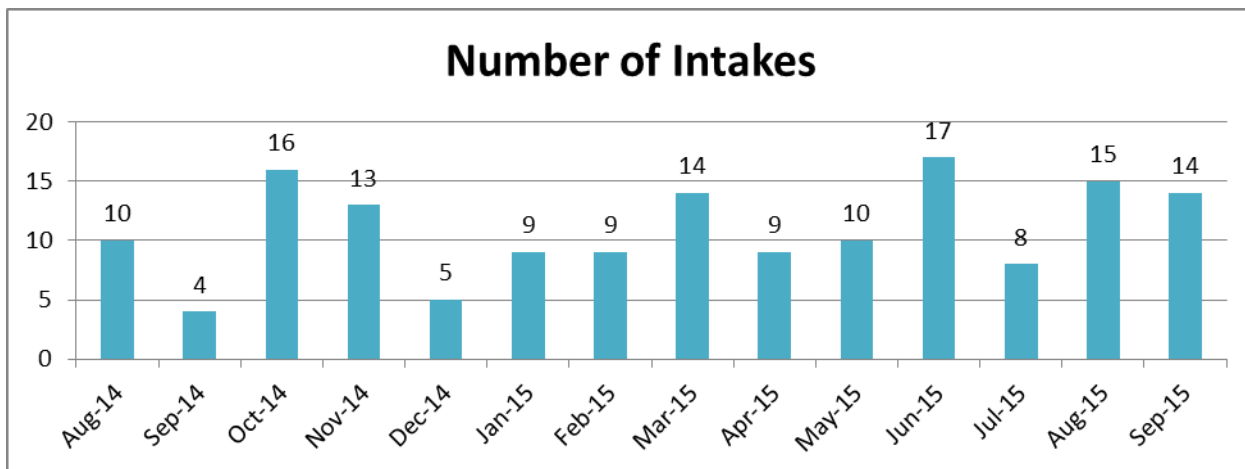
% of Unduplicated Clients Completing an OQ/YOQ 60%

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



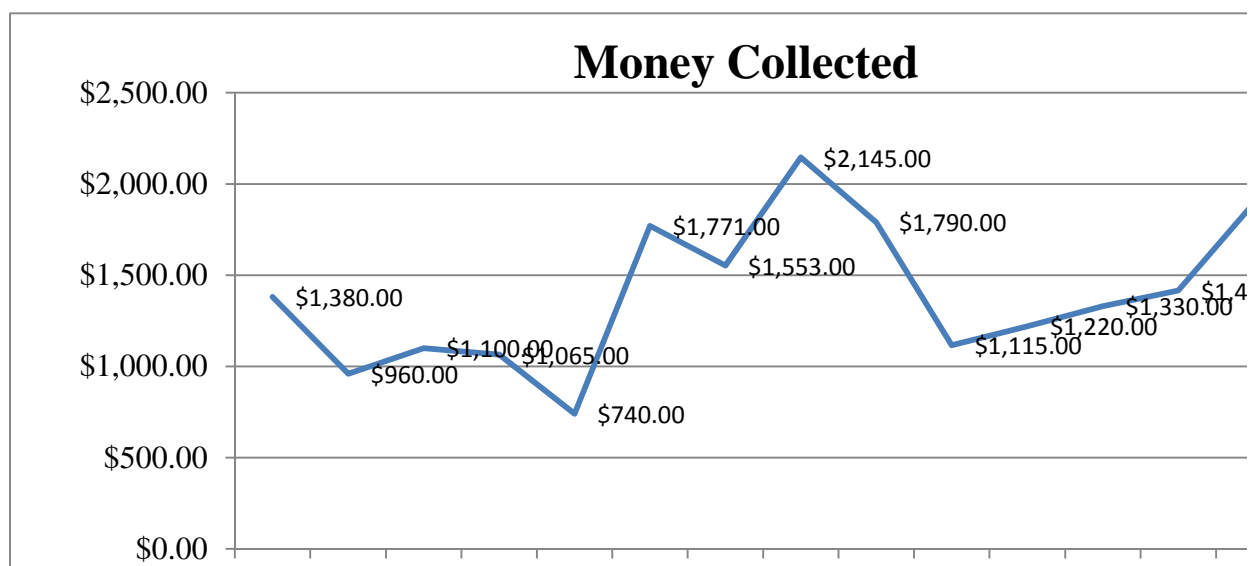
Leadership/Allied Agency Participation/Initiatives/Successes

We have hired a new secretary, Alex Crist to work at Mt Peaks. He is learning the ropes and is adapting well to the system. Alex comes with some great skills in Excel and some research experience. We will be modifying the reporting process at Mt Peaks as there are some areas that need updating and simplification as we incorporate Junction reports to gather data.

Since we have hired Alex, he is shared 50% at Mt Peaks and 50% at South Campus/Supported Housing. He spends his afternoons working alongside Jennie Reese, where he is getting some excellent training. Having him in the same building during the day has offered some great advantages where customers come in during business hours to resolve insurance questions or need access to Alex during the day, where he is available.

Financial Report:

Below is a graph showing the amount of money collected each month.



Adult Outpatient

Performance Indicators

During the last quarter (beginning with the pay period starting on 6/28/2015 and ending with the pay period ending 9/19/2015), AOP staff with productivity standards achieved a total of 1,967.2 productive hours, which equates to 94.6% of the department's cumulative productivity standard. This is down by 1.7% compared to last month.

The number of OQ-45 questionnaires collected in AOP decreased slightly in September after an increase in August. AOP collected 599 OQ questionnaires during the month of September. This is down from 638 questionnaires administered in August, and down from 688 questionnaires administered during September of last year. Of the OQs collected this September, 360 were unduplicated, which was a decrease from the 381 unduplicated questionnaires collected during the previous month, and a decrease from the 390 unduplicated questionnaires collected during September of last year.

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 all 18 cases or 100% of the time.

Leadership/Allied Agency Participation/Initiatives/Successes

Success Story: Our success story this month comes from our Domestic Violence Treatment Team. "The WMH crisis team handled a crisis call from a victim of long term domestic violence in her over 40 years of marriage and referred her to AOP for treatment. This unfunded woman was put on Title XX for 9 individual therapy sessions. She is currently living with her daughter, but has contact with her husband. Great progress has occurred. She is better able to identify what she wants in life and tactfully asserts herself with her husband. The client is able to identify the controlling and manipulative behavior of her husband and recognize when he is not accountable. She has boldly stated that she will not be rushed into making a decision about returning to the relationship. The client is now attending the domestic violence treatment group and expresses gratitude for the treatment WMH has provided."

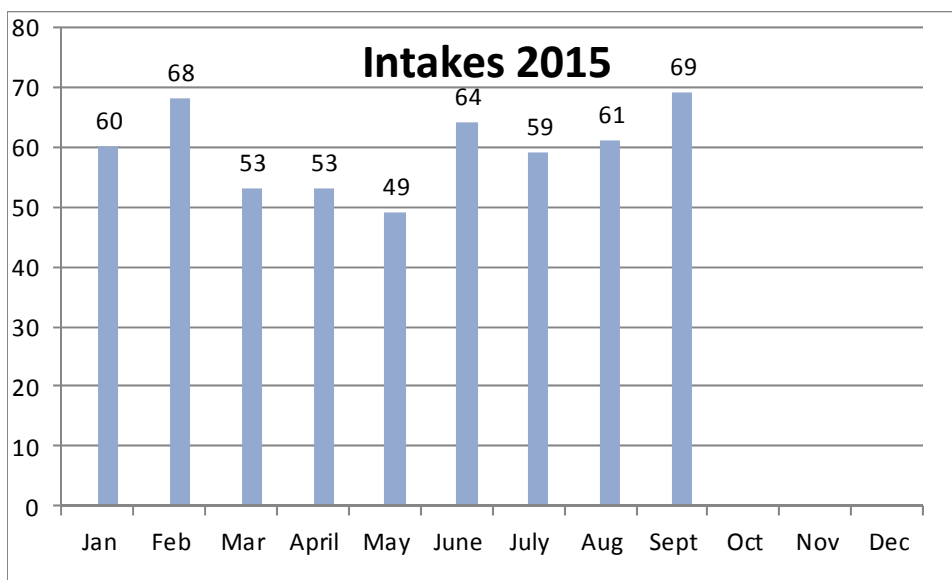
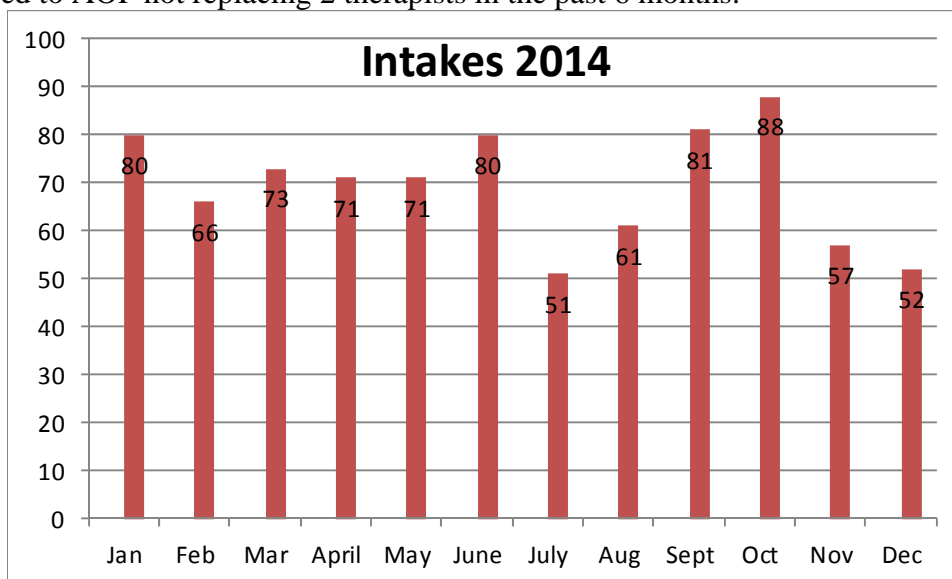
As was stated in past reports, AOP and CSS department were combined in May of 2015. We are excited to announce that this merger of departments will become formal and complete in the next few weeks. On November 1, 2015 these two departments will officially become West Park Family Clinic (WPFC). This clinic will enable us to see adults as we have done for nearly 50 years, but will now enable us to start seeing children. We are already getting referrals for children of parents who are treated in our current clinic. The West Park Family Clinic (WPFC) will be unique in some of the teams that will be a part of the clinic. In our traditional family clinic we will have 3 teams of therapists and case managers who will serve all ages of clients. In addition, we have several other teams that will be an exciting part of WPFC. One of these teams is our Nursing Home and Assisted Living team. This team is designed to serve clients who reside in nursing homes, assisted living facilities, and who are elderly and home bound and need services delivered to their home. Our PASRR Evaluators will now be a part of this team for consultations and providing information. Another team that is a part of WPFC is our Domestic Violence Team. For the past nearly 20 years we have been providing perpetrator and victim services to adults. We will now be able to provide DV treatment to children and adolescents. We have a therapist researching treatment group curriculum in preparation for adding this treatment to our list of DV treatments. Another specialty team that is a part of this Family Clinic is our Mental Health Court. This team consists of two therapists and two case managers who work directly with clients and three courts in Utah

Wasatch Mental Health October 2015 Briefing Report

County. Being accountable to the courts each week and making sure they receive good care are essential to helping them live better lives and remain free from crime in the future. Lastly, we have a Dual Diagnosis team who provide combined treatment for individuals who have both mental illness and substance abuse challenges. In addition to individual therapy that is provided, 4 different groups focusing on different phases of recovery are provided.

The number of walk-in intakes performed in AOP increased again this month as did the utilization rate. During September, a total of 51 walk-in intakes were performed, filling most of the 61 available slots, for an average utilization rate for the month of 83.6 percent. This is up 18.5% from the utilization rate observed in August.

When one looks at the bigger picture and we compare 2014 intakes to 2015 intakes we see an interesting picture. As can be seen from the graphs below, intakes in 2015 are over all lower than they were in 2014. This pattern was what led to AOP not replacing 2 therapists in the past 6 months.



Community Supportive Services Representative Payee Services

Performance Indicators:

In September PASRR Staff completed 69 PASRRs for a generated revenue of \$25,875. The RFP for PASRRs for intellectually disabled individuals was submitted in August. We have not yet heard back on whether we got this contract or not.

The number of OQ-45 questionnaires collected in CSS remained stable in September compared to the previous month. CSS collected 105 OQ questionnaires during the month of September. This is up from 104 questionnaires administered in August. Of the OQs collected this last month, 61 were unduplicated, which was increased from the 56 unduplicated questionnaires collected during the previous month. The number of daily administrations during August increased minimally to 5 questionnaires per day compared to 4 questionnaires per day last month.

CSS staff with productivity standards achieved a total of 2,485.7 billable hours, which equates to 92.6% of the department's cumulative productivity standard. This is down 4.5% compared to last month

RPS staff with productivity standards achieved a total of 1,184.1 productive hours, which equates to 96.7% of the department's cumulative productivity standard. This is up 0.6% compared to last month.

Mental Health Court

Fourth District MHC

In September, 3 screenings were scheduled. 1 screening appointment was kept and 1 is still on hold. 2 individuals were admitted to the program. 1 individual was terminated from the program. 32 individuals are currently participating in the District MHC program. There were 2 graduations this month and 1 prospective graduate for next month.

Provo City Justice MHC

Currently, there are 10 participants. Screening appointments set for next month are 2 with no prospective graduates for next month.

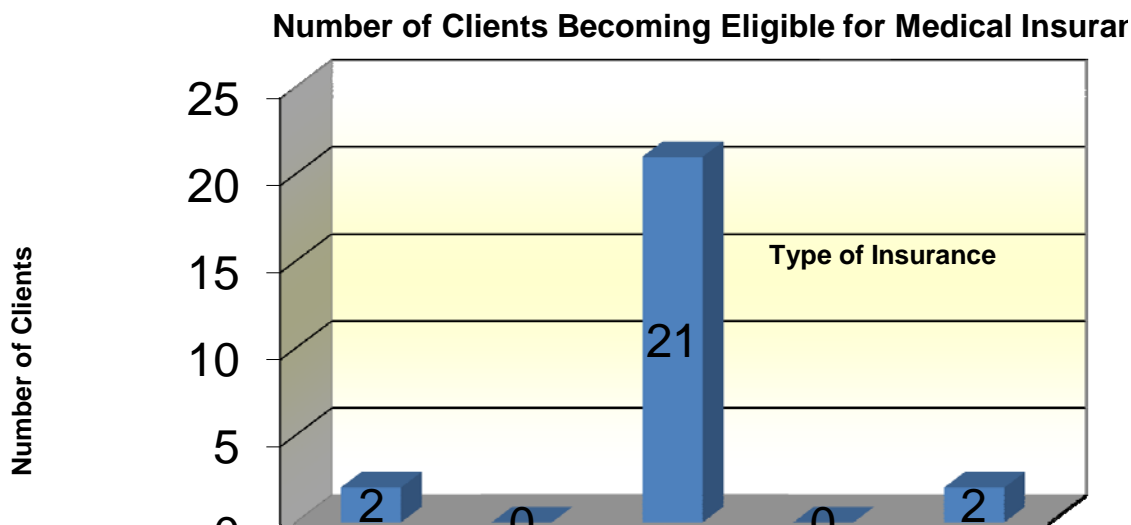
Orem City Justice MHC

Currently, there are 3 participants. 1 screening appointment is set for next month with no prospective graduates for next month.

Number of Unduplicated Clients Served last month: **374**

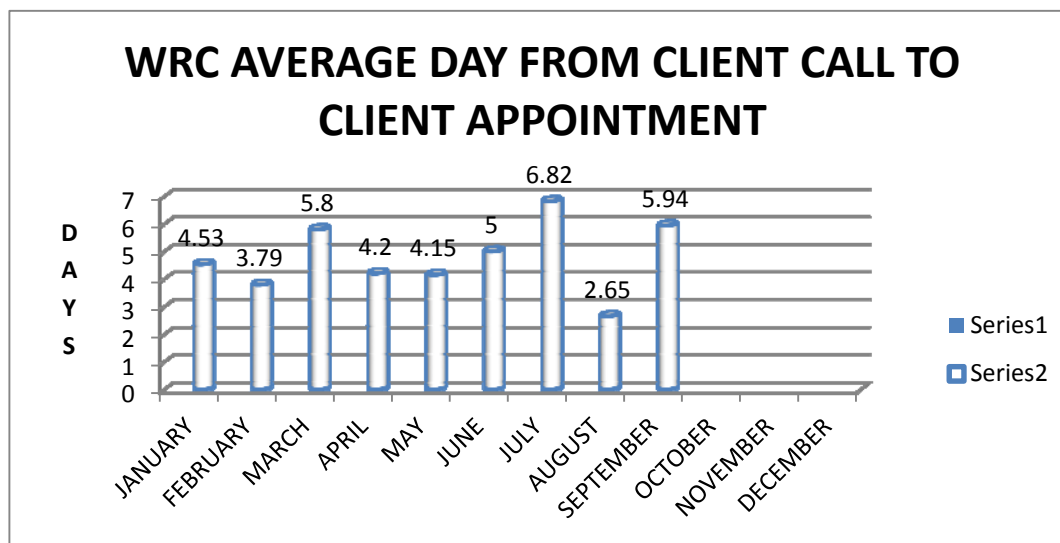
Wellness Recovery Clinic

The following chart shows the number of individuals working or who were approved for some kind of insurance funding for FY 2016.



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.



Leadership/Allied Agency Participation/Initiatives/Success

This past month we have been in contact with the state organization that monitors the Primary Care Grant. As a new manager reporting for the first time for this grant, Dave Blume had many questions and they gave some specific directions for reporting accurately for new encounters vs followup care. We have developed a simplified reporting process that meets the states requirements. We have also asked to be notified when this grant comes available again this coming July. The application process will likely begin February, we should get a notification.

We are working closely with Ransom, the liaison from UVRMC. He comes weekly to our WRC meeting and updates us on who is on inpatient that may need services from the WRC. We have been able to meet with a few clients right at UVRMC to get the client open into services, at least the paperwork and a face to face that helps make the connection to the WRC.

| | |
|---|-----|
| <u>Number of total unduplicated clients served last month:</u> | 172 |
| <u>Number of OQ/ YOQs administered:</u> | 323 |
| <u>Number of unduplicated OQ/YOQ:</u> | 137 |

Medical Department

Leadership/Allied Agency Participation/Initiatives/Successes

Clint reported the following regarding the nursing staff.

“Recently a client had some Lithium toxicity. She reached out to multiple sources as she was struggling with this. She says that our nursing staff were the quickest and had the best responses she had gotten. She felt like other places she reached out didn't take her crisis seriously, but that we did. Thank you nursing staff and crisis!”

The following was reported by our liaison with Mountainlands, Cari Greenwood.

“The Bridge Team currently works with a client that really struggles to manage his serious physical health issues. He generally refuses to see doctors, fill out forms, or wait in lines. We worked closely with Mountainlands to create an experience where the client could receive the necessary medical care with minimal agitation and disturbance. Everyone from the billing department and front desk to the direct care staff and prescriber prepared beforehand so that he could be brought directly to the clinic by his case manager and therapist and receive the medical care he needed. This was a great example of how medical and mental health can work together to make sure that our clients recovery needs are met!”

The following was expressed by a student whom Dr. McGaughy graciously allowed to shadow him.

"Dr. McGaughy,
Thank you for allowing me to shadow you with the Bridge Team. I thoroughly enjoyed the experience that morning. It has definitely encouraged my interest in psychiatry. It seem to me that the efforts made by yourself and WMH are having a positive effect in the community. Thank you for your efforts."

Mountainlands referrals report from Cari Greenwood and Wellness Coordinators

WMH clients scheduled at Mountainlands for the month of Sept---104
Kept Appointments---71---approximately a 68% kept rate, or 32% cancel/no show rate

There were several days without a doc and they only see clients half days on Wednesdays (plus we had flu clinics). So if you look at how many days they were open for services, there were 15.5 days. This averages 6.7 WMH clients scheduling per day with 4.5 showing.

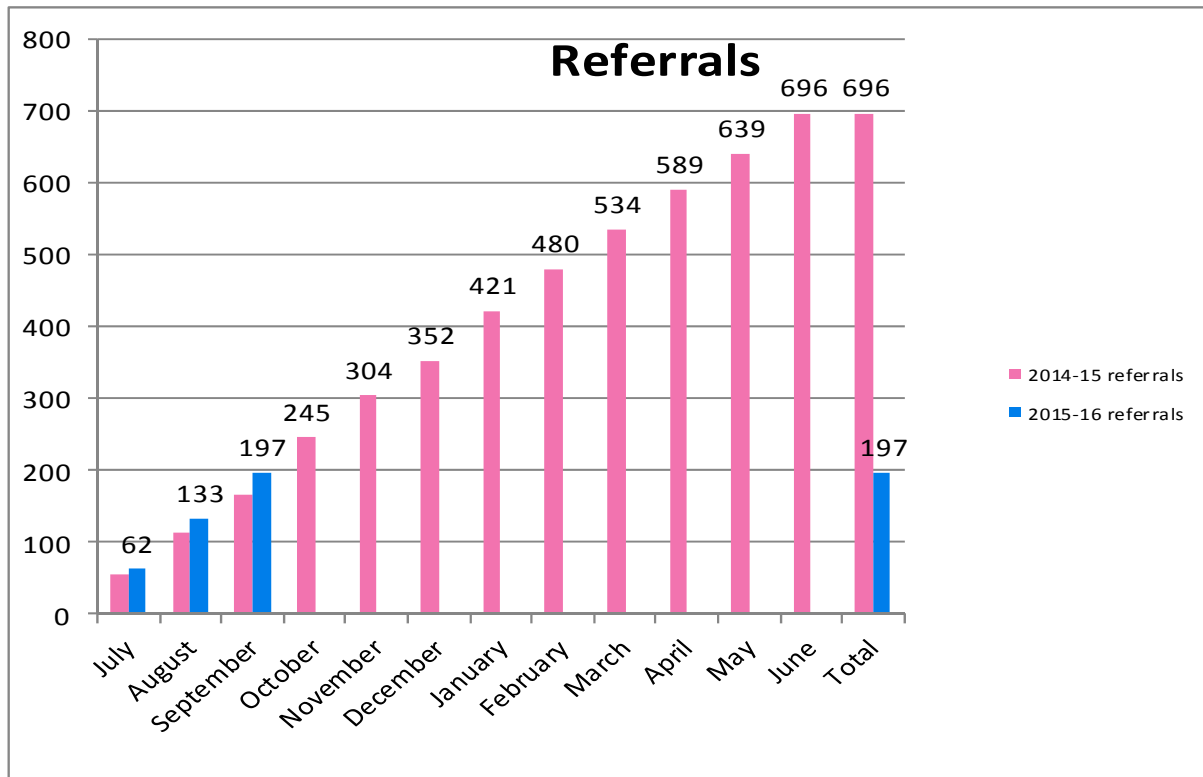
Wellness Coordinators referred 12 WMH clients to Mountainlands. 6 of those 12 scheduled appts.

Psych Testing/Interns/Form 20

Leadership/Allied Agency Participation/Initiatives/Successes

A co-worker remarked that she was very thankful for the psych testing on a client and that the report was really helpful in spelling out why the diagnosis was schizotypal PD and not autism. This type of diagnostic clarification can be very helpful in treatment planning.

Psychological Assessment Services Staff will be visiting individual department staff meetings in the upcoming months to give basic information about testing referrals and services and answer questions.



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

Our September referrals are up 25% over last year, accumulatively for the year we are up 19.4%.

We have had a sharp decrease in no-shows for most testing in September. ADHD no show have remained constant @ 20% Because of the increase in referrals, and lower no show rate, we are currently scheduling out 6 weeks in advance. We have had to move some even further because the evaluators need more time to write the reports. I am positive that by end of October, the wait time will be 2 months. We are constantly trying to accommodate Crisis, Aspire, Provo Canyon and DCFS testing as quickly as possible but it does put other testing out even further.

The interns have done remarkable well assisting with testing. They have completed to date 14 reports (5 interns- and carry larger current testing case loads. This is increased over the 12 reports done by 6 interns last year. “

Intern billable/revenue

| TOTALS | Total hours |
|--------------|-------------|
| \$27,661.75 | 181 |
| \$20,375.00 | 129.25 |
| \$20,403.75 | 133 |
| \$22,555.00 | 225.75 |
| \$28,475.75 | 182.25 |
| \$119,471.25 | 851.25 |

The Annual APA report was completed in September and turned in on time.

In order to comply with the recommendation of last years Interns that Play Therapy Training be presented earlier in the year, Larry Dunning, Ph.D., and Victoria Crowe, LCSW completed their presentation last week.

Outside Providers

Audit reports by Cari Greenwood

Dr. CY Roby was audited this month. There were some deficiencies in his charting. A copy of the Medicaid standards and a letter outlining the specific deficiencies were sent to him. He only sees one client so this is not a major concern.

Audit for RISE was completed and everything looks good.” If only all charts could be so well documented” was Cari’s comment.

Clerical Support Services

Leadership/Allied Agency Participation/Initiatives/Successes

We are so pleased to be fully staffed again at the West Park front desk. We have welcomed Nate Jensen and Julie Hofheinz and re-welcomed Kimberlee Hughes. We have a great customer service team out front to welcome clients and visitors.

Proactive Admin Tech on board....praise from co-worker!

“I just want to pass along some praise for Ana. Not only is she very helpful and on the ball with helping to get things done for Mountainlands on a regular basis, but she has been great with helping me get things done with this transition in the charting system for Mountainlands. We learned (or figured out) yesterday that all of the clients doing labs would need to redo all of their paperwork for Mountainlands. On big lab week. She went through manually and pulled their information out of the old charting system and entered it in the new system so she could print out the forms the clients needed to sign prior to lab day. This has allowed me to get the forms into packets for the case managers to get filled out and turned in ahead of time. Otherwise, we would have had 31 clients lined up out front Thursday morning trying to get new registration forms done. And she went through the old chart system and made copies of insurance cards (for those who had them), copied and cut them down to a size that can be used in the new system and is scanning them in so that we don't have to try and get everyone's insurance cards again. I know that the case managers will never truly appreciate how much time and effort this has saved them but trust me---it is miraculous!

Jail Contract

Monte and crew are administratively moving under Brian. The medical side of the equation is going well.

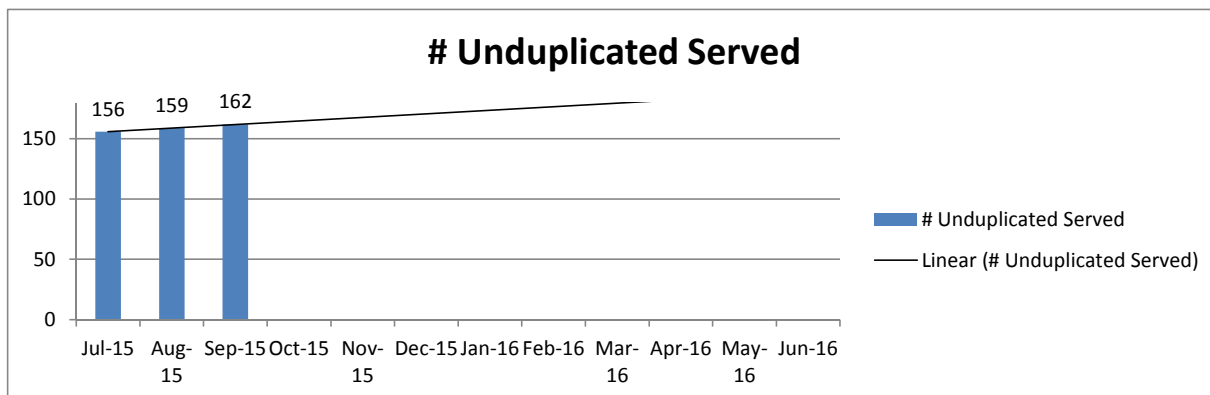
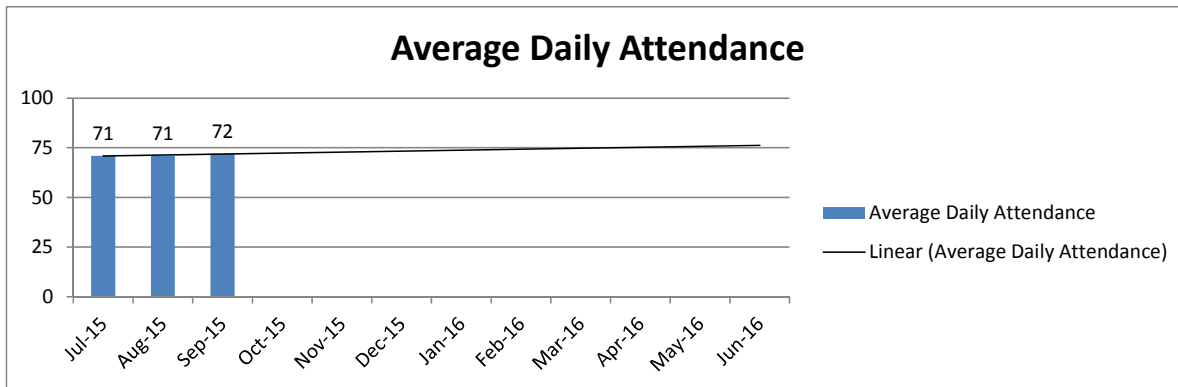
Elder and Vulnerable Adult Coalition (EVAC)

This meeting was cancelled this month.

CIT

There is some slight re-tooling of the schedule and curriculum this round. We are preparing for the November academy and expect a full house. It will be held at UVU this round so new venue.

Skills Development Services



Leadership/Allied Agency Participation/Initiatives/Success

One of our Wasatch House members recently had a situation in her life that necessitated her changing levels of acuity from 4 to 5 and being admitted to IRT. After working very hard to stabilize her condition, she was able to move back to her own apartment. She has worked diligently in the kitchen unit for some time to build up confidence and decided she was ready for the next step. She is now working part time in a Transitional Employment opportunity with one of our employment partners.

In an effort to find more meaningful work for Clubhouse members, we have coordinated with the accounting department to arrange for the Business unit to complete the payment vouchers. This will allow for members to have daily opportunities to participate in the day to day administrative business of the Clubhouse. We will

continue to look for ways in which members can be involved in work that staff may have done themselves, without compromising privacy practices.

A highlight of the month was the opening of a photography exhibit at the Covey Center in Provo featuring 12 Clubhouse members. The exhibit illustrates the contrast between the painful experience of mental illness and the true identity of individuals who must struggle daily with this burden. This exhibit was completed by a BYU photography student with the assistance of the previous Wasatch House Director, Maddy Talbert. We will be having a special dinner and tour of the exhibit later this month with the members who were involved.

Number of total unduplicated clients served last month: 162

Number of OQ/ YOOs administered: 85

Number of unduplicated clients who completed an OQ/YOO: 64

WATCH Program

Number of clients served in the WATCH Program: 76

Leadership/Allied Agency Participation/Initiatives/Successes

The Justice Reinvestment Initiative is getting off the ground in the WATCH program! Monte Memmott, CMHC was recently hired as the WATCH/CABHI/JRI Supervisor. He will oversee this program with new monies from the State. Leadership has met with Brent Crane and the Board Chair of the Food and Care Coalition to present the program to them for their support on 2 occasions. The result has been favorable and we are moving ahead with hiring 2 case managers who will be housed at the Food and Care Coalition to address discharging inmates from the jail. This latest effort is a bookend to the jail internship program instituted last year with the aim to reduce recidivism in the homeless element that is frequently involved in the criminal justice system. Now, the jail interns can refer identified discharges for case management and other services to the JRI case managers out in the community. The population served will be those who are homeless, in jail and not receiving treatment through other service providers.

The CABHI (homeless assistance) program welcomed 5 new individuals into the program this month! They will be moving into brand new units constructed by the Housing Authority of Utah County in Springville which will be completed shortly. We appreciate our partnership with HAUC and our other community partners that have assisted us in expanding the program. There are other initiatives in the works to further expand the number of clients we can serve using an evidenced based Housing First model, with the CABHI team providing the supportive services.

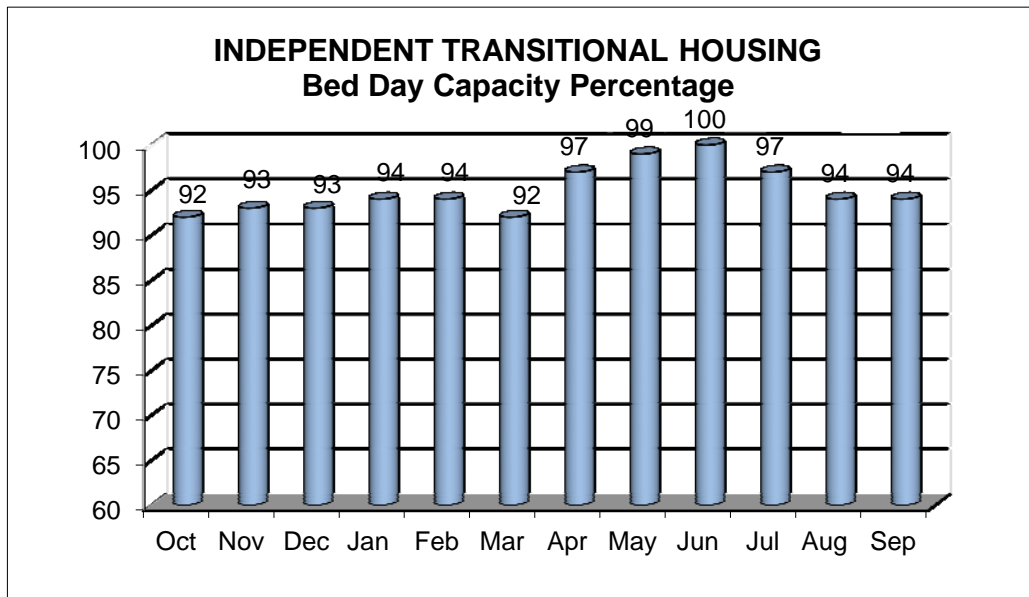
Financial Report

In the month of September, \$3,245 was spent in emergency shelter. In FY16 we have spent a total of \$10,415 to house 34 unduplicated individuals for 253 nights of safe and secure shelter. The average length of stay is 7.44 nights per person. We have expended 31.5 percent of funds for 25 percent of the year.

Number of unduplicated clients who completed an OQ/YOO:

17 of 76 clients served completed an OQ in September. 22 percent of clients served completed an OQ with each client completing an average of 1.88 OQ's

Supported Housing Services



Note: this is all of housing; including duplex, Yarrow, Mapleview and Payson independent.

Leadership/Allied Agency Participation/Initiatives/Success

We are continuing to report on our referrals to Mountainlands clinic at Westpark. We have approached almost every client assigned to level 4. Many have refused to attend due to seeing other providers, but we continue to encourage. We now have over 50 clients attending the Provo clinic. We have basically reached saturation with our current caseloads. We will encourage new referrals as well as those who are current and not attending.

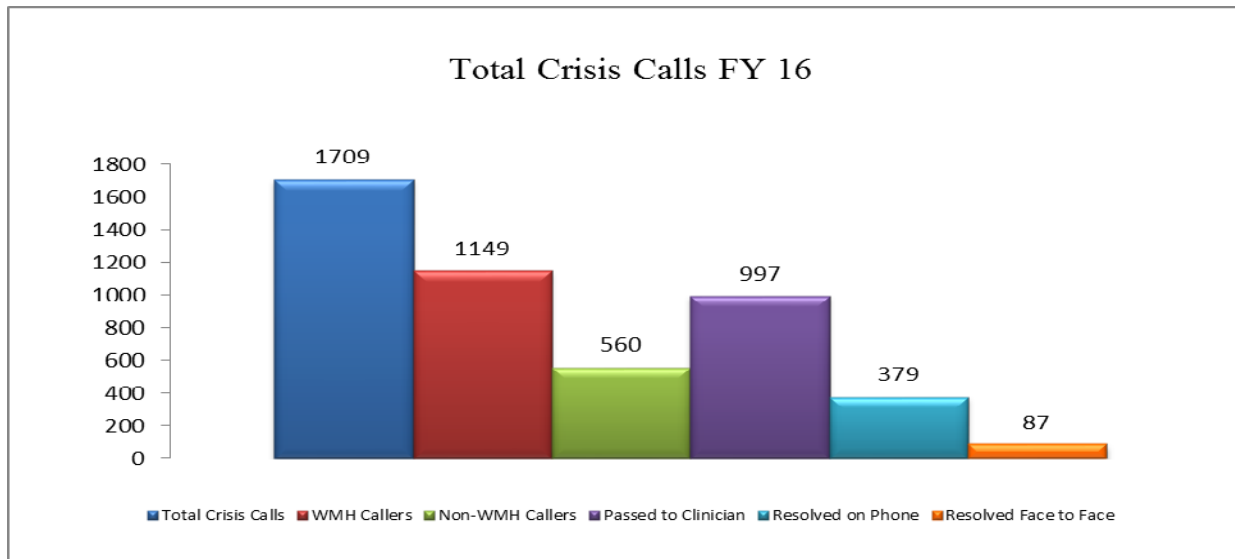
Alpine House had 9 referrals, 5 screenings and 4 clients move out this past month. This is record setting numbers of movement at Alpine house. We will be screening 2 clients per week for several weeks until they all have been screened and Alpine House will make decisions on who they keep. So far they have accepted the first 3 and we will advocate for the others as they are screened. This is exciting to see this resource being more utilized as the census has been extremely low this past 2 years.

Cooking class is being held in level 4, The case managers are working with 2-3 clients at a time to teach them some basic skills. We are seeing more and more individual skills training being done by case managers to help improve the quality of the client's life. We are working better on quality of care rather than quantity and putting out fires each day. All 7 TCM are averaging 103% productivity in our level.

CRISIS SERVICES

Crisis Calls

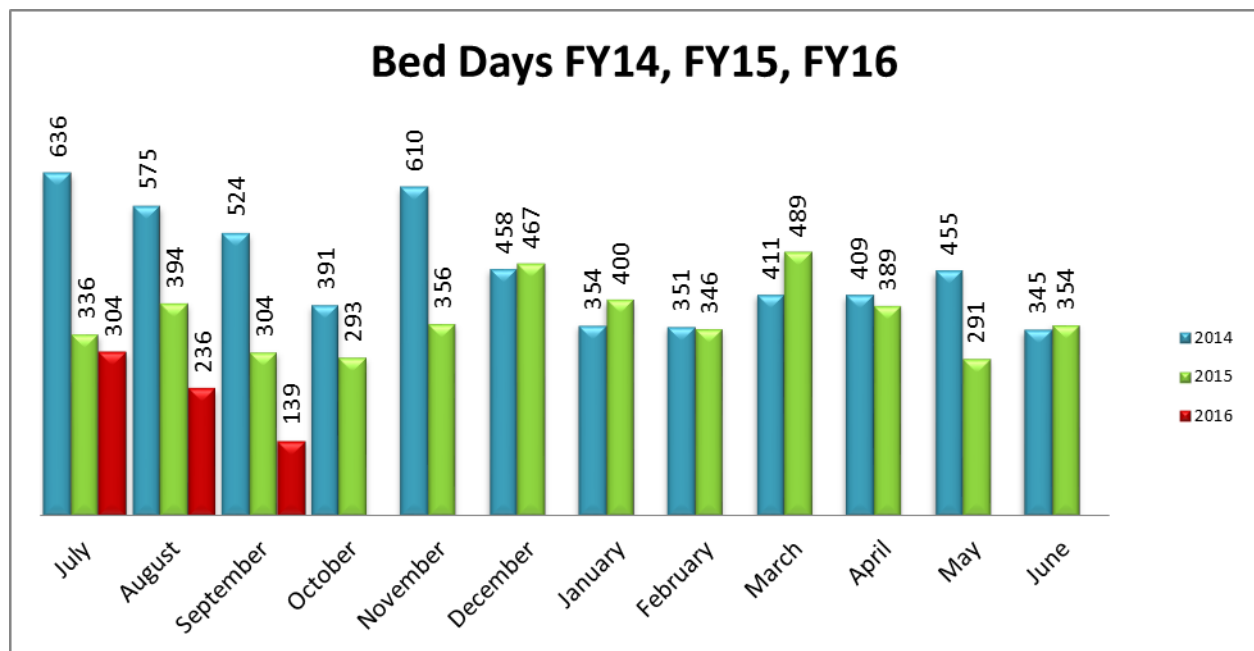
The following graph represents the total break down of Crisis calls received thus far for fiscal year 2016



Inpatient Psychiatry

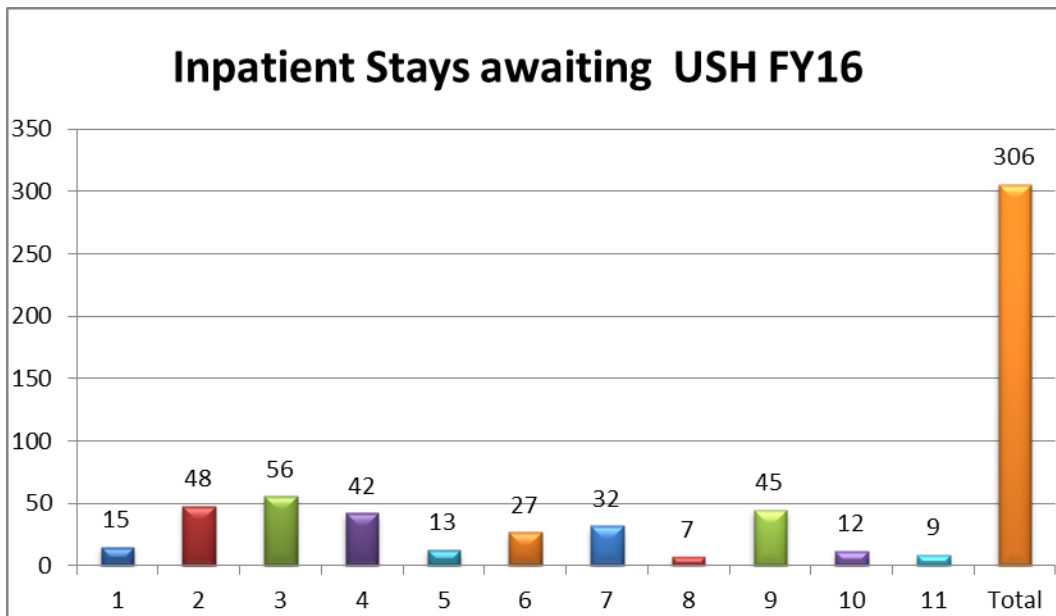
Following graph represents Adult and Youth clients admitted to inpatient psychiatric units for the last 14 months. (FY2015 to current FY2016)

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.



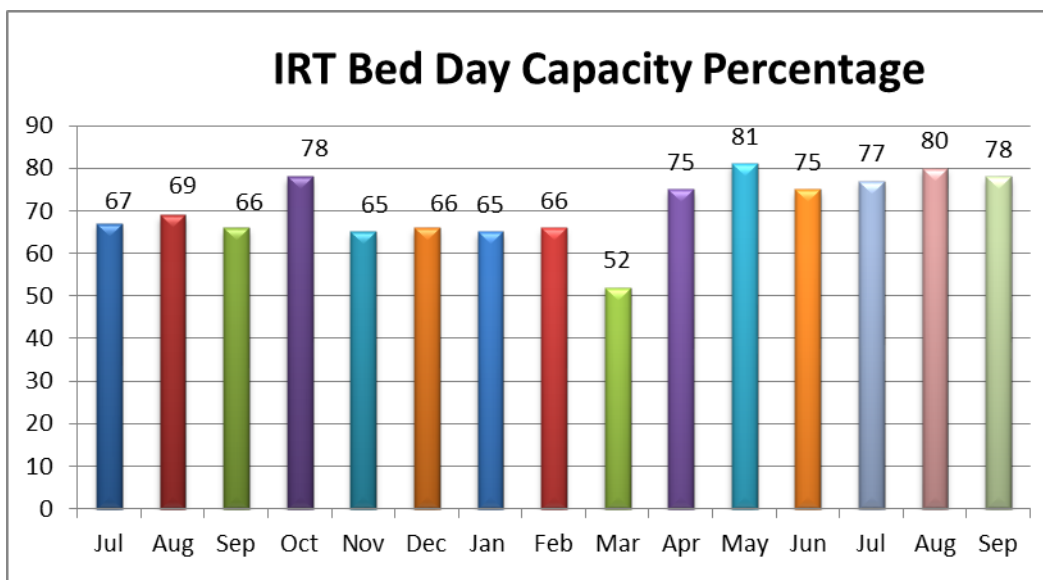
Inpatient stays waiting for USH Hospital bed placement

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 \$2,743,400.** Total cost for FY 16 thus far is \$336,600.



Intensive Residential Treatment

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

During the past month, there have been several very difficult to place clients on the BRIDGE team that have been maintained and placed in a community apartment outside of the standard Maplevue, SRT and what many consider “Wasatch Housing” units. Most of these clients would still likely be in a USH type of setting if it were not for the close daily contact of the BRIDGE staff. Several of these clients have previously been chronically homeless or never maintained in community housing before.

While talking with the intake staff at the Utah State Hospital, they reported that the work done by Craig Limb at WMH, is considered the “Gold Standard” for referral packets and admissions. This key community relationship has assisted WMH in reducing the overall time it takes to place a patient into available USH beds from the time a referral packet is submitted.

Human Resources

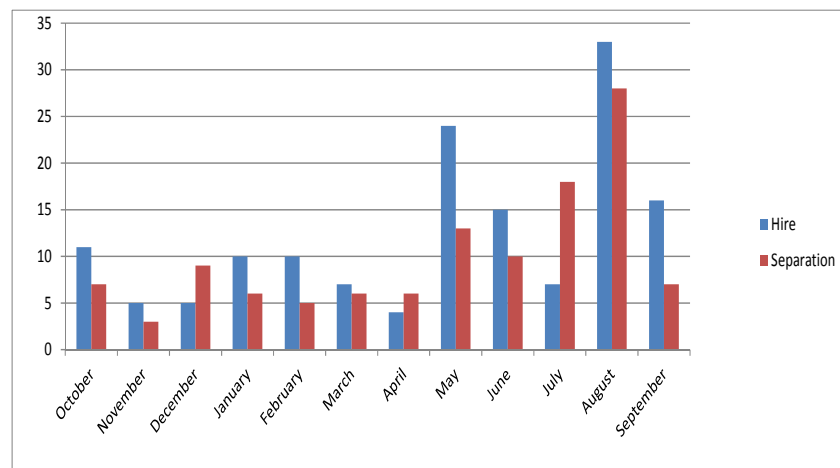
Staffing

The total turnover rate for August was 1.66%, and annualized WMH is running at 27% overall. Historically August has the highest rate of turnover driven by student employees.

September turnover rate for full-time benefited employees = 0.7%

September turnover rate for part-time employees = 3.6%

Due to an increase in end of summer hiring, the HR department added 4 additional orientations and 4 additional CPR classes. This was just sufficient to cover the needs of the organization. We have started to plan our schedule for calendar year 2016 and are using 2015 actual hiring data to match supply and demand for orientation and training. The schedule will be published by the end of October to help program managers plan and so we can schedule training in Relias.



Manager Leadership Training

Update on our 360 extraordinary leadership training: All program managers attended a one day workshop where survey results were analyzed and action plans were put in place. Many managers have already implemented changes based upon survey feedback, and our hope is that we will see a tangible improvement in employee engagement and business outcomes.

ACA Reporting

We are working with our medical carrier PEHP to provide the required year end ACA reporting. We have purchased an ACA tracking tool from our employee portal vendor “Greenshades” to insure compliance with ACA mandates.

HRIS Implementation

Significant progress has been made with transitioning paper and spreadsheet employee records over to Great Plains and improving processes:

Entirety of employee electronic records to be held in Great Plains: Going forward all employee records data will be stored in GP. We have updated approximately 50% of employee records with basic data such as; job, position, status, pay rate, pay history, phone, emergency contact, race, gender , merit date. Most spreadsheet and paper only records have been discontinued.

GP Pay Admin: Pay step tables have been set up in GP so that merit increases can be assigned based upon position in table instead of entered manually. This ensures data accuracy and provides a historical electronic record of pay changes with reasons.

Discipline: Record of employee discipline held in GP for consistency and ongoing record keeping.

Improve Process Efficiency: Beginning with the next new hire cycle, all employee data will be entered into GP by HR and payroll will confirm pay admin. Some multiple steps have been eliminated with payroll action form use reduction.

Reporting: Reports have been created in GP that provide all pay and historical employee data in a snapshot.