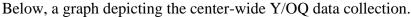
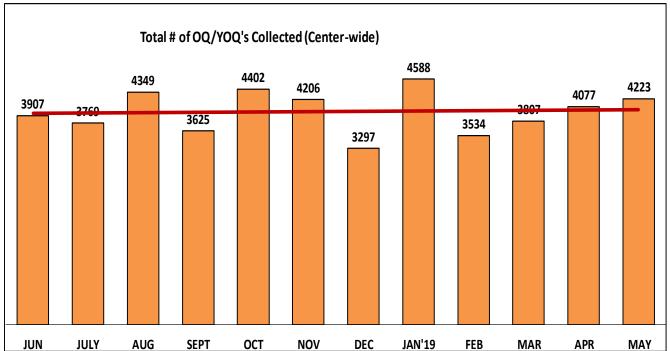
# Wasatch Mental Health Monthly Briefing Report June 2019

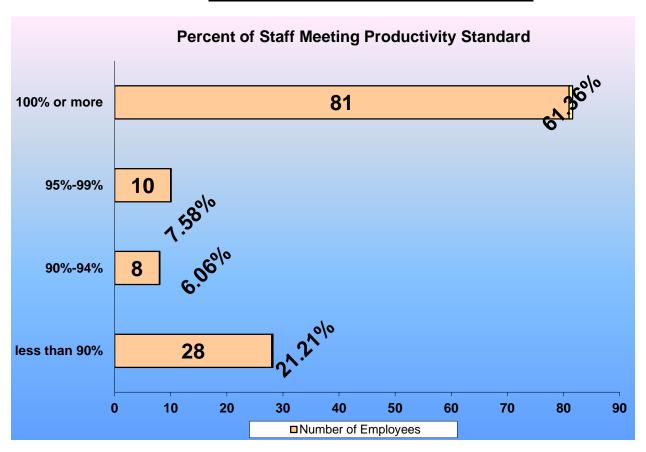
Over this last month, we have continued to refine our budget for the upcoming year. This has been complicated due to not having Medicaid rates for the upcoming year, and by us planning to implement the results of the recent salary update we conducted. With the implementation of the salary survey, we also plan to align our salary range to be more in line with industry standards. Currently, we have an almost 65% spread between starting salary and the highest salary in a given step. The industry standard is around 50%. In light of this, our entry level salaries tend to be below market, while we tend to reward longevity and top out at a slightly higher than average salary. We are hoping to have a proposal for implementation that addresses that issue as well later in the summer.

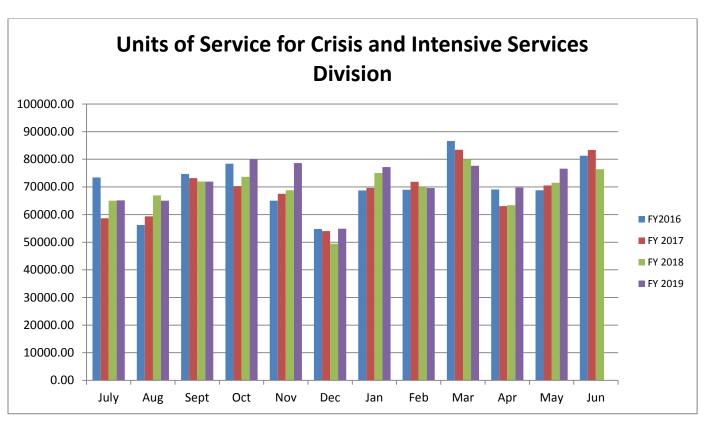
As our financials for FY 2019 have tracked at or above expectations, we are scheduled to pay out the retro COLA for the first 6 months prior to FY 2019 ending. As in previous years, we had planned for a COLA for the entire year. However, to assure that we are able to afford the COLA, we have implemented it in January 2019 (i.e. 6 months into the fiscal year), and pay out the first six months in a lump sum in June. This provides some protection against adverse financial results, as we could withhold the lump sum payment, if need be.

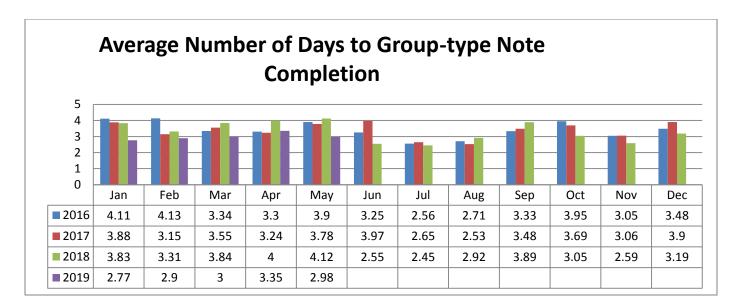




# **Crisis & Intensive Services Division**







#### **Highlights**

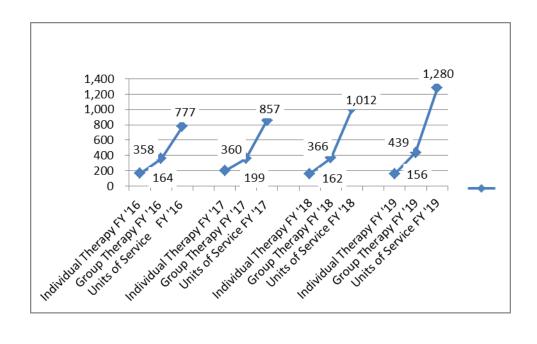
- A review for IRT we received on Google, "The IRT is just one component of Wasatch Mental Health, an effective integrated mental health treatment organization. WMH is a great organization with caring people. The IRT provides a broad program, teaching skills and providing varied opportunities for learning and recreation. They really care about the patients."
- A new Strengthening Families 14 week session started May 8, which included seven families; 5 teens and 12 kids.
- The next Grandfamilies session starts on July 11.

### May Unduplicated Clients served in Family and Specialty clinics:

Clinic	Adults	Youth	Total
PFC	146	596	742
Payson	198	246	444
AFFC	330	474	804
WCFC	139	55	194
WFC	745	31	776
Med Services	1129	228	1357
Psych Services	93	113	206
Crisis	68	7	75

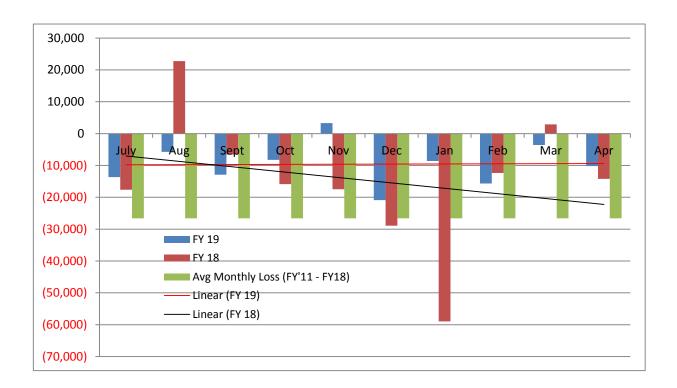
## **New Vista Youth Services**

<u>MAY REPORT:</u> May continued our string of good months, especially compared to previous years. Last fiscal year was our strongest show ever and this fiscal year is looking like an even better year, with one month to go.

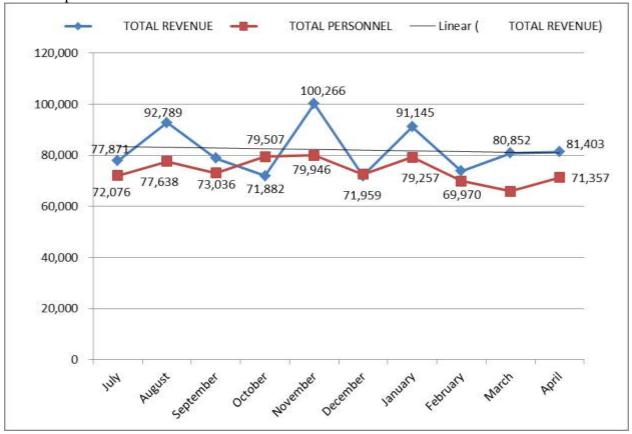


### **New Vista Financial Report**

The timelines in the chart show the downward trend last year (black trend line) which was a record breaking month versus the red trend line showing the consistency over this year.



This chart is included because it shows that we generate enough revenue to pay for our personnel costs. This is seen as a positive indicator.

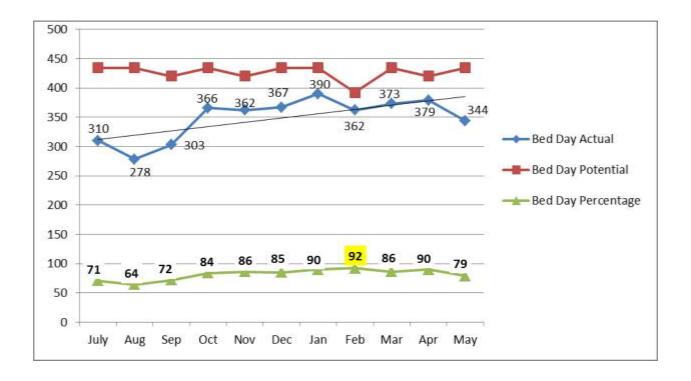


### **Highlights:**

- New Vista had a busy month with the end of school and the summer starting. New Vista started the summer program on Tuesday, May 28<sup>th</sup>. New Vista has summer program Monday Thursday. This past month the youth at New Vista were able to present and share their stories with their "Spirit Dolls". During the summer program the youth will be able to continue to develop and process their stories with their story telling and skits. The youth will be sharing their stories with those that they trust so they can begin to process the trauma that they have experienced. The youth will also be developing healthy relationships with one another and working on conflict resolution in a healthy manner.
- We currently have 23 full time Day Tx youth with 1 youth that attends after school. New Vista had 4 youth that were discharged in May and 7 new youth who started the program.

## **Aspire Academy**

<u>MAY REPORT:</u> Our bed occupancy for May was at 79%. We had discharged a couple of girls in May and had just one referral in May which we admitted on June 4<sup>th</sup>. Our financial picture was slightly down in April but our year to date occupancy percentage is about 82% which is on course for the best year long average we've ever had. We have been given our accreditation dates from CARF. We will have one surveyor come from August 21 through August 23.



### **Aspire Academy Financial Report**

Our financial picture is slightly down for the month. We have spent more on meals this FY, of course this makes sense because we have had more girls to feed with a YTD 82% occupancy, best ever YTD.

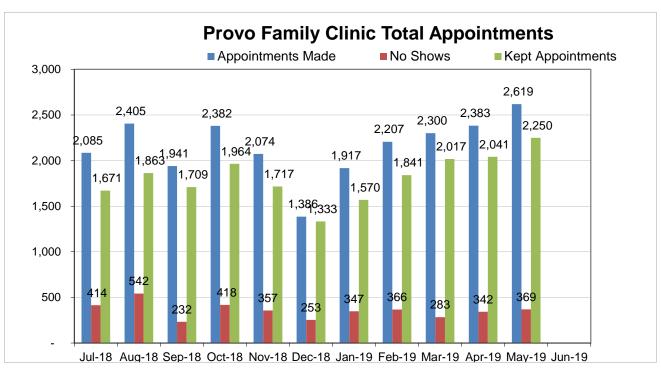


### **Highlights:**

- We currently have 12 residents at Aspire. We are finally fully staffed with 21 HSW'S, 2 full time therapists, and a full time case manager supervisor.
- In addition, during the month of May our girls have been busy with individual therapy and group therapy. The therapist and staff have been continuing to focus on the following programs: survivors group, DBT groups, experiential groups, Thinking Errors group, and self esteem groups. The Case manager is continuing with the Seeking Safety group, and Voices.

• Our girls were very excited about helping with the Nu Skin Force for Good, and working along with the volunteers who helped to make our building look amazing inside and out! This helped to show our girls that they are cared about by the community and that they can also make a difference in others' lives when they go out into the community.

# **Provo Family Clinic**



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

### **Outside Meetings and Presentation Times**

### Elizabeth Feil:

DCFS Placement meeting , 1.0 hours Adoption Subsidy: 2.0 hours

Scott

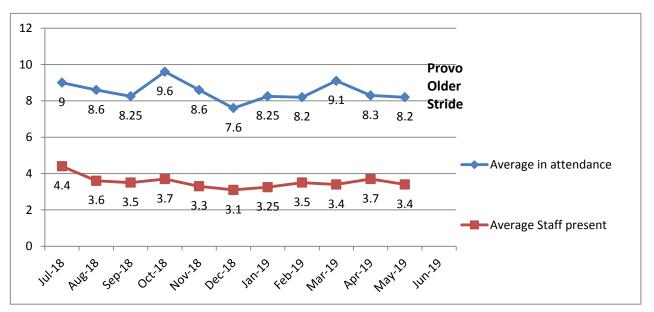
DCFS placement meetings 2.0 hours South Franklin Partnership 2.0 hours **Financial Status/Executive Director Information** 

Through **April 30, 2019 PFC's** budget shows a profit of: \$60,734

## **Stride and XCEL - Partial Day Treatment Programs**

#### Stride

Graph of average attendance and number of staff present FY 18-19



### Total Stride unduplicated clients served this month: 71

- Summer Stride and Summer XCEL are now underway! The Payson School Based crew is running a Stride program out of the Provo South Campus.
- Stride/XCEL HSW's continue to focus on completing notes in a timely manner. 83% of notes were completed within 24 hours of the time of service during the month of May.
- Also please note that it is typical for May to have a large number of graduations in the classes due to the
  end of the school year. This also causes a temporary decrease in average number of youth served until
  summer programming begins.

#### **Stride Program Discharges:**

North County Stride: 5 graduations Provo Older Stride: 5 graduations Provo Younger Stride: 6 graduations Payson Stride: 8 graduations

#### **Financial Status**

Through **April 30, 2019, Stride's** budget shows a profit of: \$48,246 Through **April 30, 2019, XCEL's** budget shows a loss of: (\$18,839)

## **GIANT Steps**

### Highlights & Program Updates

- The Commissioner's Cup golf tournament was held this month. Janeen McFadden and Chase Stuart ran an information booth at one of the holes and we appreciated our Executive Committee supporting us that day. We hear the event was very successful in its fund raising and we are very honored to enjoy such strong support from the Utah County Commission and our community.
- During this quarter's Autism Discussion group with DSAMH and the other contract providers, we learned that it is more likely that the Office of Quality and Design will take over specialty contracts

including the Autism Contract. Codie Thurgood has been our auditor and has done a great job understanding the clinical side of what we do. We are staying tuned about what changes might accompany this shift, including what metrics they will be using to measure whether or not we are meeting program objectives.

• We learned that the Friends of Giant Steps Auction had a net income of \$28,262.54 and we are very grateful for all the parent and staff support to make that happen.

### **Upcoming Dates / Events**

• Giant Steps Graduation – Friday June 28<sup>th</sup>, 2019 at 11:00 am

(**Note about Graduation Location**: There is an HVAC upgrade occurring at Foothill Elementary, so the location of the Graduation may need to change to another venue).

### **Service Delivery:**

Current Month – 21,331 units of service were provided to Giant Steps clients/families.

Last Year Comparison – 16,892 units of service were provided in the same month last year.

**Financial Information:** Fiscal Year-to-Date Income Gain (Loss)\* – (\$67,021.36)

### Vantage Point **Average Length of Stay 2018-19** 12 <del>11</del> 10 10 10 10 8 8 8 8 ■ Total Days DCFS 6 ■ Total Days Parents 4 2 July Aug Sept Oct Nov Dec Jan Feb Mar Apr MayJune

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

#### **Vantage Point**

With the year coming to a close, it is a great time to see how our numbers have been matching up to prior years. Here are some highlights.

Numbers of	'Runawa	. <u>ys</u>	Kids w/ S	Suicidal Ideation	<u>Total</u>	<u>Kids</u>	<u>Parents</u>
2016-17	365	2016-17	215	2016-17	1022	2016-17	692
2017-18	346	2017-18	180	2017-18	1034	2017-18	709

Kids with M	<u>ledicaid</u>	Hospital Di	verted	DCFS		Juv. Receiv	ing
2016-17	525	2016-17	78	2016-17	124	2016-17	206
2017-18	435	2017-18	153	2017-18	125	2017-18	200

Kids who are adopted DT kids (stepping out)

2016-17 98 2017-18 14

2017-18 102 \*we started tracking this since HB239

We will report 2018-19 stats in next months' report.

# **CY FAST- Respite**

**CY FAST** 

Respite families: 6
Total: 239
Total new: 189

**CY-FAST continued cases**: 50 **FRF cases**: 15

Out of home: 31
Avoided legal: 185
Danger: 44
Police avoided: 168

### **PREP**

We have a PREP Team client that entered services almost two years ago under a civil commitment. Since that time, he has worked hard to complete his treatment and educational goals. His civil commitment was recently dropped and he has remained compliant with medications. He also completed a Bachelor's degree and subsequently a Master's degree. He has since obtained full time employment with a growing local company where he was starting out making \$55,000 a year. Although he continues to have involvement with auditory hallucinations and delusional thoughts, he has been able to manage them and is successfully employed in the community.

Number of total unduplicated clients served last month: 82

Number of OQ/ YOQs administered: 55

Number of unduplicated clients who completed an OQ/YOQ:

## **CRISIS SERVICES**

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

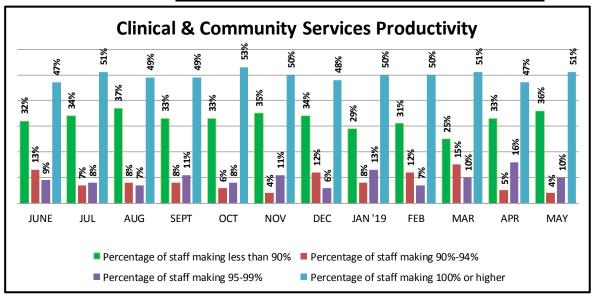
**Success Story** 

MCOT is well underway and going well thus far. Staff are responding to the charge of doing whatever we can, whenever we can, to resolve crises in the community when diverting to the ROC is not possible. The concept of going out with police both during the day time and after hours appears to have reinvigorated tenured staff, and also attract newer staff with a sense of "fire in the belly." Our newer day time crisis worker and Peer Support responded to an MCOT with the support of OREM PD. There was some dispute about PD transporting when PD were not the ones completing the original pink sheet. With some coaching, PD was able to transport a very manic individual who kept disrobing while staff and PD were on scene. The client was able to be taken to the hospital and is now under civil commitment. We have plans to meet with various police agencies at their change of shift meetings to integrate further the MCOT idea and how WMH can help.

The BRIDGE team was started approximately 8 years ago. It had grown quite a bit as the following metrics demonstrate:

- 65 high demand and chronic clients, will certainly grow to 75+ (started with 20)
- 48 clients with pill boxes filled and stored at IRT
- 36 clients that require med drops of some kind
- 26 daily med drops and (17 twice a day med drops), 7 twice per week, 3 once per week
- Weekly grocery shopping and laundry with most clients as skills development, otherwise they would go hungry and wear very soiled clothing.
- The majority of BRIDGE clients live outside the traditional WMH Housing Continuum (Alpine House, SRT, Mapleview, Yarow etc.) meaning case managers have brokered or arranged living arrangements in the community and assisted in keeping these clients stable.
- Keep 99% of the clients Medicaid eligible, which is a major feat, when most don't think they need Medicaid, won't sign Medicaid paperwork the first time requested, or would miss Medicaid or SSI review deadlines without oversight from case managers.

## **Clinical & Community Services Division**



### **OQ/YOQ Administration**

	Number of	total un	duplicated	clients served	last month:	4217
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Adult Clients Served 2573 Child/Youth Clients Served 1644

### Number of OQ/ YOQs administered: 4111

Clinical & Community Services Division 3058 Crisis & Intensive Services Division 1053

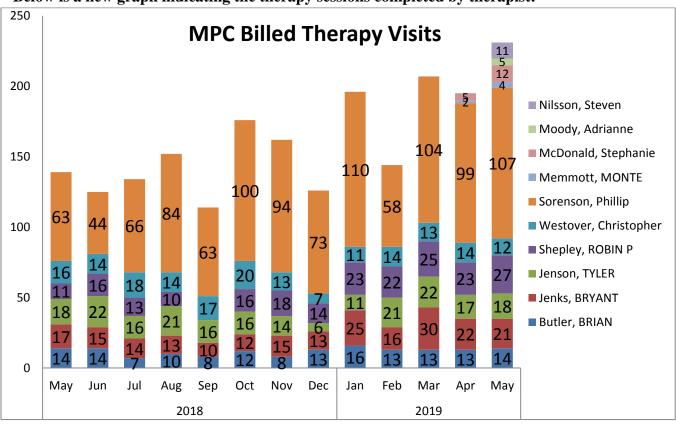
### Number of unduplicated clients who completed an OQ/YOQ: 2434

Clinical & Community Services 1834 Crisis & Intensive Services 600

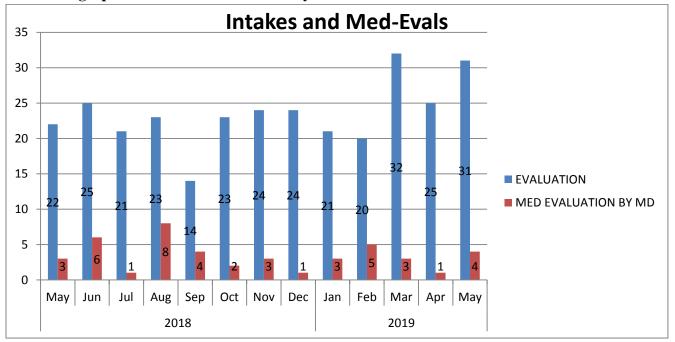
% of Unduplicated Clients Completing an OQ/YOQ 58%

**Mountain Peaks Counseling** 

Below is a new graph indicating the therapy sessions completed by therapist:



#### Below is a graph of the number of intakes by month.



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

- We have seen steady growth in the MPC and are excited to see the new part time therapists come on board and are getting busy in their schedules. It has allowed us to more freely schedule intakes and the steady demand without advertising continues to be present. Adrianne Moody has been a great addition in regard to working with younger children as we have had several intakes of younger children. We are expanding some basic resources for therapists to use, such as some games, a sand tray collection and a few toys. As the number of children increase, it is nice to have some treatment tools to assist in therapy.
- We had a success recently in MPC, where a client came in and was very paranoid and uncomfortable being around others in social settings. She did not adjust to change at all, such as a new CTA assisting her. She came to us in October and Tyler Jensen worked with her in therapy helping her to cope and adjust. With MUCH encouragement from Tyler, she agreed to see Clint Petersen for a psychiatric medication evaluation. She was very hesitant to do this, but after meeting Clint, she was VERY excited to have him help her. The medications have helped tremendously as well as therapy. She is very friendly now, adjusts much easier to change and can't say enough praise for Clint. She says: "he is the greatest ever."

Number of OQ/YOQs administered: 192

Number of unduplicated clients who completed an OQ/YOQ: 99

Number of unduplicated clients served: 126 (28 were youth)

### **Westpark Family Clinic**

- In May, PASRR staff completed 82 PASRRs for generated revenue of \$29,345.
- WMH PASRR staff continues to provide IDRC PASRR evaluations for individuals who have intellectual disabilities. In May 2019, PASRR staff completed 18 IDRC PASRRs for generated revenue of \$4,154.85.
- The number of OQ/YOQ questionnaires collected in WFC increased significantly this month, consistent with the seasonal pattern typically seen following the administration of MHSIP questionnaires during the month of March. WFC collected 786 OQ/YOQ questionnaires during the month of May. This is up by 84 questionnaires from the 702 administered in April.
- In addition to focusing on the collection of outcome questionnaires, we are also working to maintain 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 WFC revealed that an outcome questionnaire was administered in 15 out of 16 cases for a sample administration rate of 93.75%. 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 13 out of 15 cases or 86.67% of the time.
- During the last quarter (beginning with the pay period starting on 3/3/2019 and ending with the pay period ending 5/25/2019), WFC staff with productivity standards achieved a total of 5368.43 productive hours, which equates to 101.2% of the department's cumulative productivity standard
- During the same period of time, RPS staff with productivity standards achieved a total of 810.8 productive hours, which equates to 110.7% of the department's cumulative productivity standard

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

Mental Health Courts in Utah County:	Number in the program:	Graduates:	New Clients Accepted:	Clients who dropped out or removed from program:
4 <sup>th</sup> District Court:	19	0	0	0
Provo Justice Court:	5	1	1	0
Orem Justice Court:	5	0	0	0

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

- Our success story for this month comes from a therapist in the men's DV group. Just prior to graduation, the participant fills out a "Personal Change" form where he summarizes his growth and the changes he is implementing in his life. To others participating in the DV group he said, "I used to feel that other people's behavior caused me to act the way I acted. I am aware that this is false. I am responsible for the way I act, react, behave, talk, thin and deal with my feelings. Learn all you can about these skills and use them, know your triggers, know how your body responds to triggers, know your thinking errors and believe this stuff works. I sure do now."
- Wasatch Mental Health and the Provo Mountainlands Health Center have recently been selected by the Division of Substance Abuse and Mental Health to receive a Federal Integrated Health Grant. This Grant is designed to insure that clients with severe mental health and medical health challenges get the care

they need. It is also the goal that WMH and Mountainlands Health Center work seamlessly to provide this care

- Due to the increased intake volume since the Medicaid Expansion, WFC therapists continued to complete 1 intake per hour as needed in order to accommodate for the increased intake volume.
- During the last month, a total of 84 walk-in intakes were performed, 5 nursing home intakes, and 4 DV/MHC assessments were scheduled/completed. Total intakes then for May were 93. Intake volume increased by 21.67% compared to April. Of the 84 walk-ins, 29 or 34.5% had Medicaid Expansion as their primary insurance. This is consistent with the previous month which accounted for 34.78% of the new walk-in intakes.

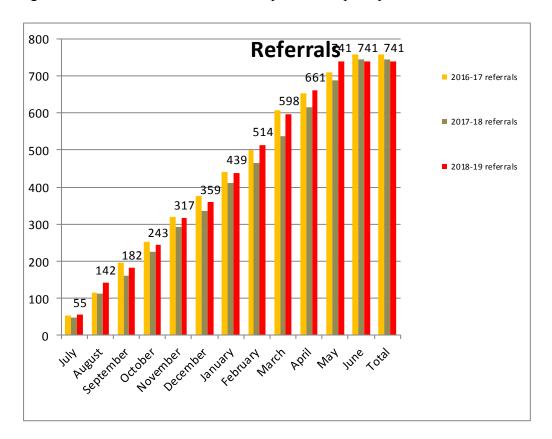
### **Medical Department**

- Medical Services is busy as we approach the end of the fiscal year. The wellness coordinators continue
  to be above 100% productivity and the nursing team continues to expand coverage. In the near future,
  we will be providing an additional nursing day to the Payson Family Clinic as medical services in that
  location continues to expand.
- Medical services has recently welcomed two new nurse practitioner interns, and is preparing to welcome
  Kelsie Balmsforth, our newest APRN. Dr. Balmsforth has recently passed her licensing exams and looks
  forward to joining WMH in July. Currently, it is the manager's intention to place her in the Payson,
  Provo, and Westpark Family Clinics. It is possible that Tom Yee may also experience a transition
  around that time he may be needed full time in the American Fork Family Clinic, and a schedule
  change is being considered.

# Psychological Testing/Interns/Form 20m

- May and June are also busy months in Psychological Assessment Services. The department is preparing to say goodbye to its extern, Sean Aaron, in June, followed shortly afterwards by the graduation of the four psychology interns. Shannon Cayer, of course, will return in September as a psychology resident under Dr. Korbanka's supervision. In reviewing the department's finances, it appears to have been costly to move forward with only four psychology interns for the year. Although the overhead expenses were generally similar save actual intern stipends and a handful of supervision hours, there were two fewer bodies generating revenue, which was reflected in the department numbers for the year. This is one reason among many that we look forward to welcoming the full six psychology interns in the upcoming training year, starting on July 8<sup>th</sup>.
- 2019 is the year the psychology internship's APA accreditation expires. Dr. Pennington has recently submitted his self-study report to APA, and will shortly be scheduling a site visit for autumn of this year.

Below are the tables related to the number of referrals PAS has been receiving. We are on track to have the highest number of referrals since the department's peak year in 2015-2016.



## **Outside Providers/Mountainlands**

Mountainlands was open 20 days in May 2019

% Appointments Kept---91.5%

% Appointments Canceled---3%

% Appointments Failed---5.5%

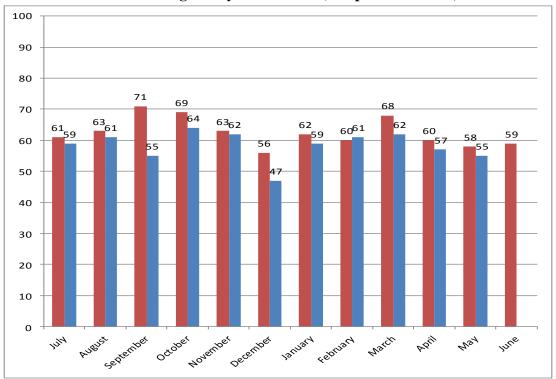
% Appointments Kept Follow-up's---86%

% Appointments Kept New Clients----14%

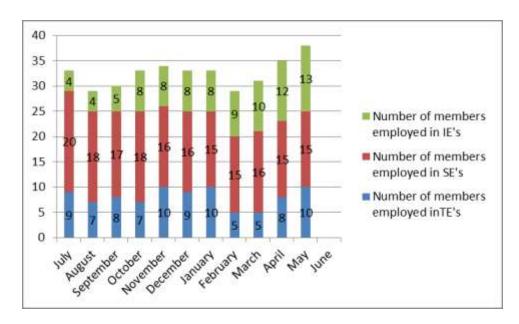
#### **Summary:**

May saw a decrease in the number of appointments scheduled per day, but an increase in the number of appointments kept per day. The failed rate dropped dramatically to 5.5%, and we averaged 5 kept appointments per day as compared to 4.8 last month and 4.3 per day in May 2018, making this the month with our highest amount of kept appointments per day since we started tracking statistics. We continued with a good number of new clients at 14 for the month. The percentage of clients with case managers dropped as we seem to be getting more of the Adult Expansion Medicaid folks referred to Mountainlands as well as them referring their existing patients who qualified for Medicaid to us for ongoing treatment now that they have insurance.

Wasatch House
FY19 Average Daily Attendance (compared to FY18)



#### **FY19 EMPLOYMENT**



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

- Our employment numbers this month are the highest they have been during the entire fiscal year at 38 members employed! This is 66 percent of our Average Daily attendance of 58!
- After 7 months of work on our self-study, Wasatch House hosted 2 faculty from Clubhouse International (Lisa Soucie a Clubhouse Director from Maine and Anna Park, a member from Alliance House in SLC)

for our Accreditation visit. Over 3 days, the faculty observed every aspect of our Clubhouse to evaluate how well we adhere to the 37 standards of Clubhouse International. A findings meeting was held first with the Director and Assistant Director and then with the entire House. We are thrilled to announce that we received a very favorable evaluation

### During the findings meeting, the faculty noted the following strengths:

- The Reach Out process to members who have not attended regularly
- Relationships between staff and members
- Beautiful building and grounds
- 360 staff evaluation process
- Variety of TE placements available
- Supported Employment and Independent Employment numbers exceed requirements
- Educational opportunities for members
- Tuesday and Saturday activities
- The strength of the Advisory Board
- Wellness Race fundraiser
- The operation of the Thrift Store
- Work-Ordered Day with a special commendation to the WAG unit
- The productive administrative relationship observed between the Director and Assistant Director in spite of initial doubts about the functionality of having a Director offsite a good portion of the time and the administrative authority of the Assistant Director.

Congratulations to the Advisory Board, staff and members for their efforts and commitment to making Wasatch House an exceptional Clubhouse!

Number of total unduplicated clients served last month:

131

Number of OQ/ YOQs administered:

53

Number of unduplicated clients who completed an OQ/YOQ:

42

## WATCH//JTP Program

**Unduplicated number of clients served in the WATCH Program:** 102

JTP- Unduplicated number served: 131

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

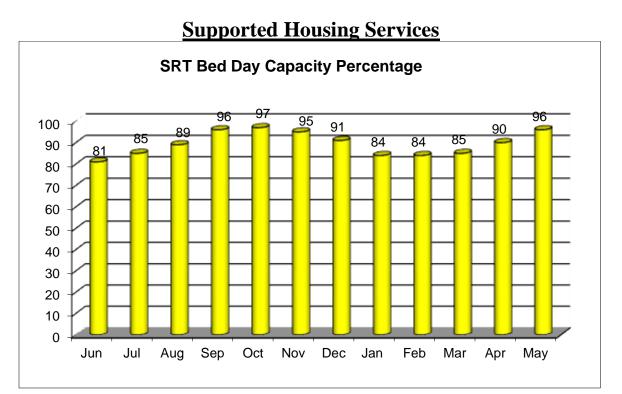
- WATCH and JTP have increased our intakes from 29 in March to 37 in April and **46 in May**. The increase is likely a direct result in Medicaid expansion and our daily walk-in intake clinics.
- In the 6 weeks since implementing our new intake process, Case Managers have helped 39 individuals apply for Medicaid expansion. Many have already been approved. This is boosting our overall numbers served and we are continually refining our other processes to improve services to our new and existing clients.

### Number of unduplicated clients who completed an OQ/YOQ:

38 of 94 clients served completed an OQ in WATCH. 38 of 129 JTP clients completed a survey. .

### Number of OQ/ YOQs administered:

81 OQ's were completed this month in WATCH. 75 OQ's were completed in JTP. Our new CTA has brought new energy to collecting these and our numbers have increased significantly.



#### Participation/Initiatives/Success

- Our bed day rate at Alpine house has been very hard to keep up or even increase because they are going through a significant remodel in the client's bathrooms and we have not been able to admit any new residents as a result. We had to have the single female move out as the majority residents are male and only one bathroom facility to use. We are still waiting for the remodel to be completed so we can admit new residents.
- We moved this one female to SRT temporarily and the little success is, she did very well with the temporary move in taking care of her apartment and her ADL's in general. She has remained psychiatrically stable and she requested to stay in SRT and we were able to make that happen. She was more than excited to become more independent and self-sufficient.
- We had a client who had over \$13,000 in debt and in 3 1/2 years with the help of our services she is now debt free. Her case manager, Lindsey Bingham and the RPS worker, Janalee Eyre, worked very closely to help her budget and control her spending. She was on a \$5 weekly allowance in addition to a \$25 food budget for over the first year of this problem. Resources were sought from the community and a placement at SRT with UT Co Housing support was given. She is now debt free. During this time she has also decreased the amount of controlled medications she is on with the help of our medication prescriber. This has helped her become more stable and has shown better insight into her addictive behaviors.

Number of OQ/ YOQs administered: 58

Number of unduplicated clients who completed an OQ/YOQ: 32

Number of total unduplicated clients served last month: 119

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

### **Successes:**

### A success from Lone Peak High School and SBS services:

"[My son] would not be here tonight (at graduation) if it wasn't for you. You made such a positive impact in [his] life and filled an empty space that I had been trying desperately to fill, but could not because I am "the mom."

I appreciate your support and willingness to mediate a rather precarious situation over the past month and for being his voice among administrators when he could not be there. But I am most grateful for listening to [him] when he needed it most. He is here tonight not just at graduation, but existing, present and ALIVE. You played an instrumental part in that!!

Saying thanks seems far too inadequate. I can't express in words how grateful I am. Our family is so blessed you came into [his] (and our) life!! #ittakesavillage"

# of total clients served last month: Total: 828 Adult: 355 Youth: 473

Number of YOQs/OQs administered: YOQs: 409 OQs: 337

**Unduplicated number of YOQs/OQs:** YOQs: 246 OQs: 191

### **Groups in AFFC**

Child/Parent Relational Training and Kids group Parenting the Traumatized Child DBT group Mindfulness

**Economic Stability:** We have done 101 more intakes July18-May19 than we did July17-May18.

### Payson Family Clinic & School Based Services

#### **Successes**

In our school based services:

"The counseling that our family has received has been beneficial and we have learned new ways to perceive our child's situation. And more ways to cope with it effectively. Our child has gained some increased understanding into his mental health challenges."

"My therapist helped me realize that my thinking is getting in the way. For example I stopped making the decision of going or not going to school the night before. My therapist made me commit to wait until the morning to make that decision when I felt more relaxed. I went from missing 3 to 5 days a week to not missing at all. My parents are very happy, and me too."

"I've learned a lot in therapy. I am able to pay attention to my feelings and the causes of why I'm feeling them. I breathe more. I used to freak out. I was also able to get over my trauma and coming to term with what happened. I am graduating which is a miracle thanks to my therapist's support and helping me find the resources I needed. I beat the odds and I didn't have to go to any alternative high school. Thank you so much!"

# of total clients served last month: Total: 426 Adult: 197 Youth: 229

Number of YOQs/OQs administered: YOQs: 318 OQs: 183

**Unduplicated number of YOQs/OQs:** YOQs: 211 OQs: 112

### **Groups in Payson**

**DBT** 

Parenting the Traumatized Child Strengthening Families School Based Skills groups

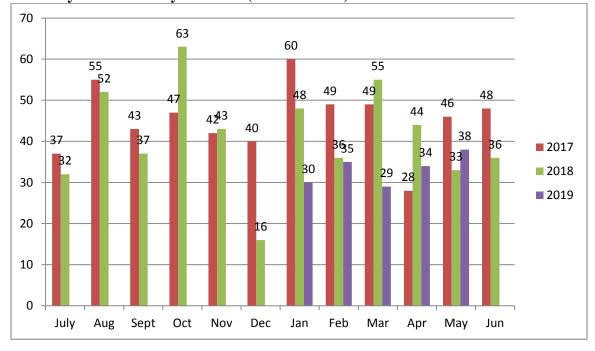
### **Community Meetings and Presentations**

Nebo Clinical Staffing—Myriam Bardsley, Chelsea Seegmiller Restorative Intervention Team—Myriam Bardsley Blue Ribbon—Chelsea Seegmiller

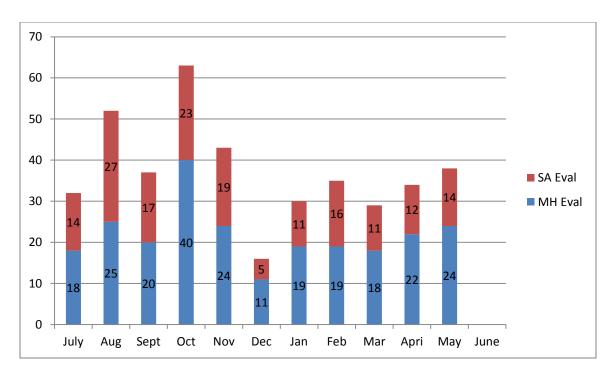
## **Wasatch County Family Clinic**

**Total Unduplicated Clients Served in May: 224** 

**February Total Monthly Intakes:** (EVL & SEVL)



### **Evaluation Type:**



Number of YOQs/OQs administered:

YOQs: 302 OQs: 1140

### **Groups at WCFC:**

Recovery Day Tx School Skills Program

Drug Court Group Gender Specific Male and Female SA groups

Relapse Prevention Thinking Errors

Anger Management MRT
Prime for Life Why Try

Strengthening Families SMART Recovery

Connections (New)

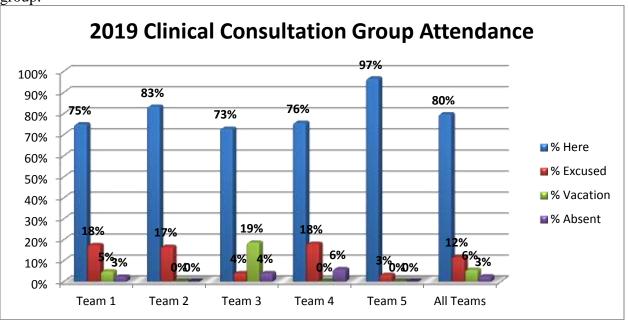
### Leadership/Allied Agency Participation/Initiatives/Success:

- We recently met with Ben Springer with the Wasatch County School District to discuss how Wasatch Mental Health can contribute to the district's new Family Education Center. The Education Center will be launching in the next school year. The intent of the center is to link families with important information pertaining to general wellness. Wasatch Mental Health will be contributing to the center by providing educational courses using Prevention Dollars to fund the efforts. The project is in a formative state with August 1 as our deadline for a solid plan.
- With new funding the Wasatch County School District will be hiring a new full time therapist for the coming school year. The more intensive format of service provided by Wasatch Mental Health (WMH) did not fit the District's model of desired service to the student population. The new therapist will hopefully better fill this need. The District has additional monies that may be purposed to purchase a WMH therapist's time. For now, there have been no negotiations to this end and school based therapy services from WMH have been discontinued. WMH's school based behavior manage program will continue to provide service to elementary age children.
- Efforts are in motion to negotiate a new contract with the county jail

## **Clinical Performance and Compliance**

The tracking sheet designed to assist clinicians participating in consultation groups in maintaining their focus on deteriorated clients and on remembering to record their sessions was completed this month. Two of the clinical consultation groups have been trained on using the new tracking form, and two more groups are scheduled to be trained during the month of June. The fifth group (comprised of psychology interns) will begin using the tracking form when the new cohort starts in July. It is anticipated that the utilization of these forms will assist clinicians in maintaining focus on those clients that are not progressing in treatment as would be expected, and that it will help them remember to implement all elements of Wasatch Mental Health's clinical consultation model.

In order to determine whether the clinical consultation groups are effective at improving client outcomes, it is first necessary to determine whether or not clinicians are participating in the groups as designed. To this end, all clinical consultation groups have begun using an attendance form showing whether clinicians assigned to the consultation groups are present at each group meeting (or alternatively, if they are absent, excused, or on vacation). Initial indications are that attendance is very good overall (though this will likely decrease slightly over the summer due to vacations). Since tracking began in March, average attendance for all teams was 80%, with very low rates (3% on average) of absenteeism without a valid reason for missing the group.



#### Y/OQ Utilization

WMH has long been a leader at administering outcome measures to a high proportion of clients. Recent audits have shown some potential deficiencies in clinician's use of the information obtained from the instruments, particularly in the area of discussing the results of the questionnaires with clients. Beginning this month, audits were performed to monitor these aspects of Y/OQ utilization in ten departments throughout the center that provide outpatient services. This information will be presented to program managers during the coming month, and will be followed by ongoing updates on the performance of individual departments and the center at large.

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

#### Outcome Improvement Initiative Application

In April, WMH applied for one of three slots to participate in the Outcome Improvement Initiative (OII) being conducted by the Division of Substance Abuse and Mental Health. The initiative includes a \$15,000 grant for agencies wishing to work collaboratively with the division over the course of the next year and four months to implement evidence based practice in their organizations. WMH was selected for participation as the "urban mental health center" in this program. Meetings associated with the initiative will begin in late June. While the time commitment on the part of administration will be considerable, it is anticipated that the

opportunity to participate in the shaping of policies related to the implementation of evidence based practices in community mental health centers will be beneficial to WMH and mental health centers throughout the state in the long run.

### **Clinical Training**

During the month of May, twelve interns and newer clinicians were given an introductory training on how to use of the Y/OQ and the clinical support tools. New reference materials were developed to assist clinicians in remembering the information learned in the training, with the hope of increasing overall utilization of the instruments. Another similar training will be scheduled for July.

There are also several clinicians and interns currently working at WMH that have not received training on S.M.A.R.T. objectives. Trainings on this topic have been scheduled for June and July in order to accommodate current and incoming staff. If possible, this training will be recorded in order to make it available to new staff in the future or to use it as a refresher course in cases where it is needed.

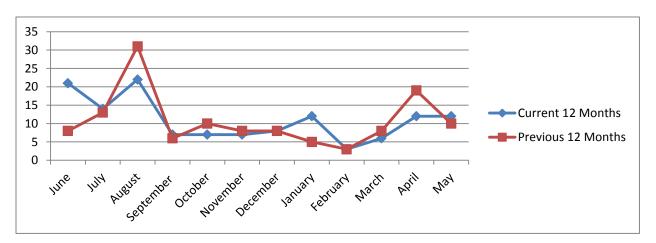
### **Human Resources**

### **Managerial Training**

In May we started the third class with 16 participants, of which, 10 are current supervisors or managers. The second class has two more classes left and will complete on July 11<sup>th</sup>.

### **Employee Turnover**

We had 2 more employees leave this May vs the past May, but otherwise the cyclical trend is about the same.



#### Credentialing

Our number of credentialed providers increased very slightly in the last month.

	Credentialing								
							U of		
	Medicaid	Molina	Regence	PEHP	EMI	Aetna	U	Select Health	
New									
Providers									
Approved	5	1	1	0	2	0	0	2	
Renewals	0	0	0	0	3	0	0	0	

Pending	16	9	3	3	6	8	22	12
Total	400 approved	83	107	103	58	12	79	64

## **Accounting Department**

In preparation for the end of the year close, we have created a plan of action that includes deadlines that were distributed to center employees this month. We are reviewing accounts, balances, and pending actions, to avoid any forgotten transactions. The most pressing deadlines will be processing payments for in the month of June to meet any requirements, and billing on a timely manner.

We are continuing to explore further automating our A/P processing through new software. Further demos are scheduled.

# **Billing Department Report**

The billing department continues to lead our efforts related to the new Medicaid expansion program. During April & May there have been 276 new clients under expansion with 36 who have had their eligibility terminate. We have experienced some unusual and unexpected events happen related to eligibility and Medicaid has acknowledged there have been some errors. During the month of May, services were delivered to 237 unique clients worth approximately \$70k.

Discussions and efforts continue with the Junction programmers regarding the billing rewrite.

The billing department has been missing one of its team members for a couple of weeks as Colin Bliss and his wife Meredith have welcomed a new child to their home and Colin has taken some time to be at home.

### **IT Department**

Removed Kaspersky anti-virus to install Carbon Black. Took about 3 hours to install new anti-virus Carbon Black.

SQL server software was upgraded. This brings Wasatch in line with Weber so both centers are using the same operating system and SQL server. Makes upgrades and deployments easier for programmers without having to worry about making Junction work with older software.

Closing in on finishing new SDS module. Programmers would like a small group of providers to beta test when the time comes.