

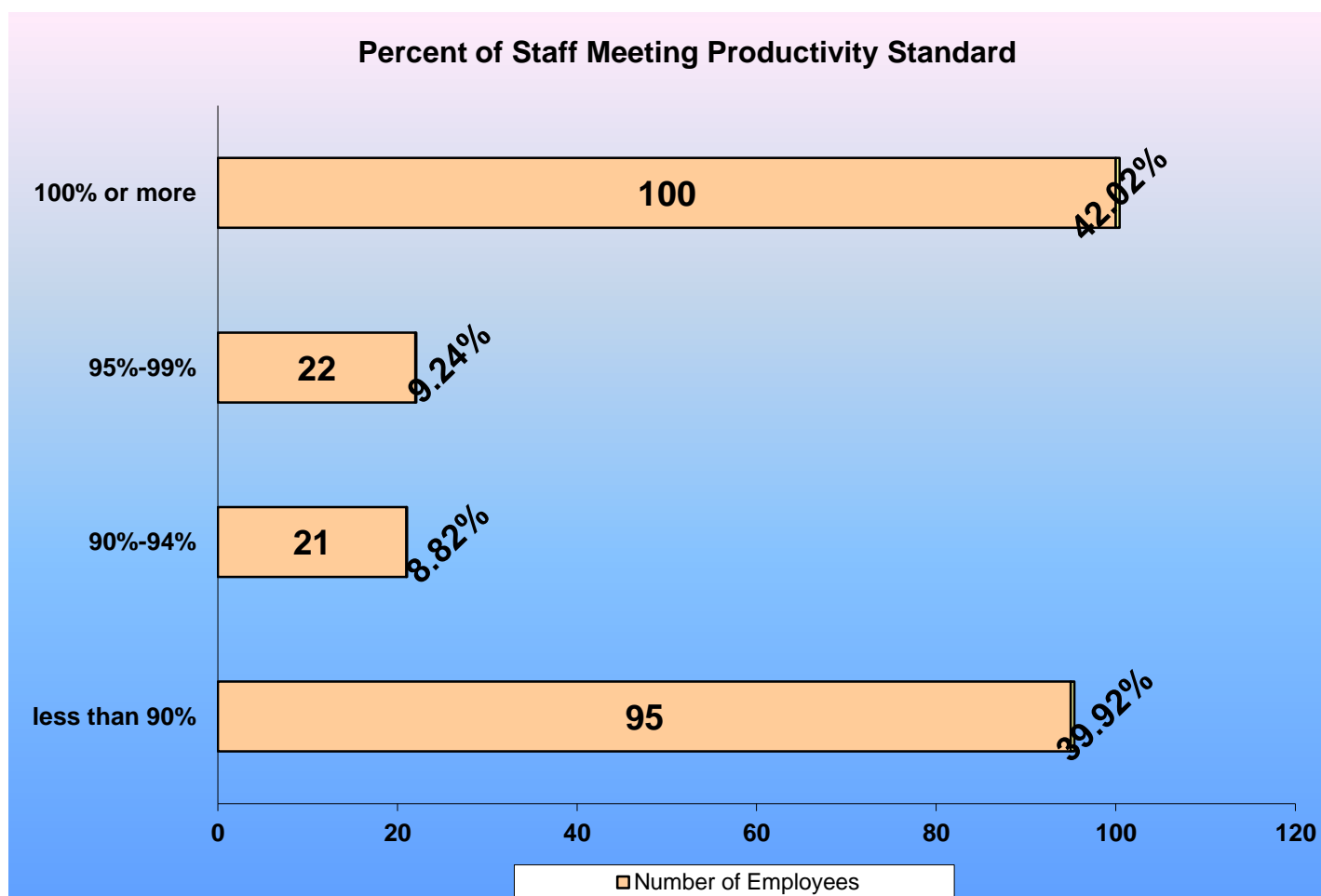
## Wasatch Behavioral Health Monthly Briefing Report August 2020

This last month, we interviewed and hired a replacement for Catherine Johnson, LCSW, who is retiring the end of August. We had three highly qualified internal applicants who made the choice very difficult. Scott Taylor, LCSW, has been selected to be the Division Director over Crisis and Intensive Services at Wasatch Behavioral Health. With this selection process being completed, our clinical Executive Team has changed significantly. While Randy Huntington, LCSW is still with WBH, he is in a new position heading up the SUD services Division. Both Brian Butler, LCSW, and Scott Taylor, LCSW are new member of our executive team. While both are long-term employees of WBH, adjusting to their new roles requires a steep learning curve.

At this point, we are exploring options to re-organize some of our clinical services, as the addition of the Receiving Center will increase the staff of the Crisis and Intensive Services Division by about 75 staff. We are looking at meaningful ways to balance the size and scope of our divisions.

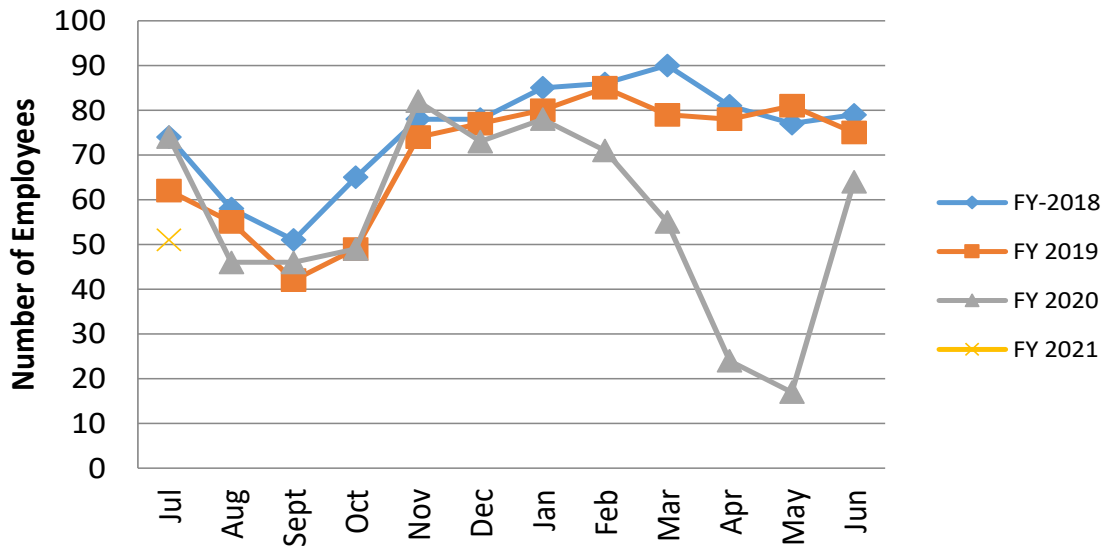
The planning of the remodel of our Recovery Outreach Center (ROC) is going well. We are in the final stages of deciding on the layout and architectural details for the remodel. We also made an offer for a potential building for our Intensive Residential Treatment facility. The offer has been accepted and we hope that needed re-zoning (a contingency of our purchase offer) will commence as planned.

Below a graph depicting the levels of service delivery achieved of our clinical staff.

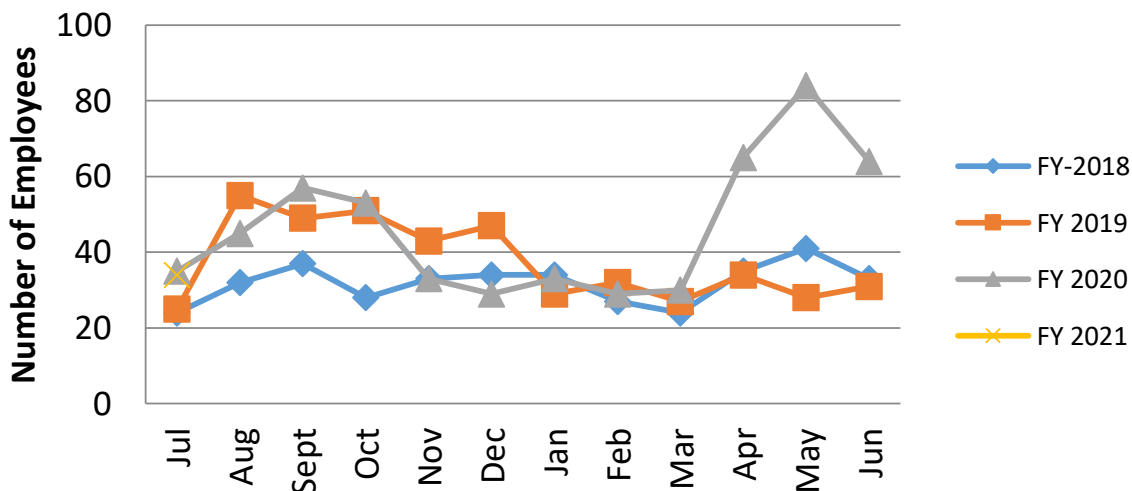


## Crisis and Intensive Services Division

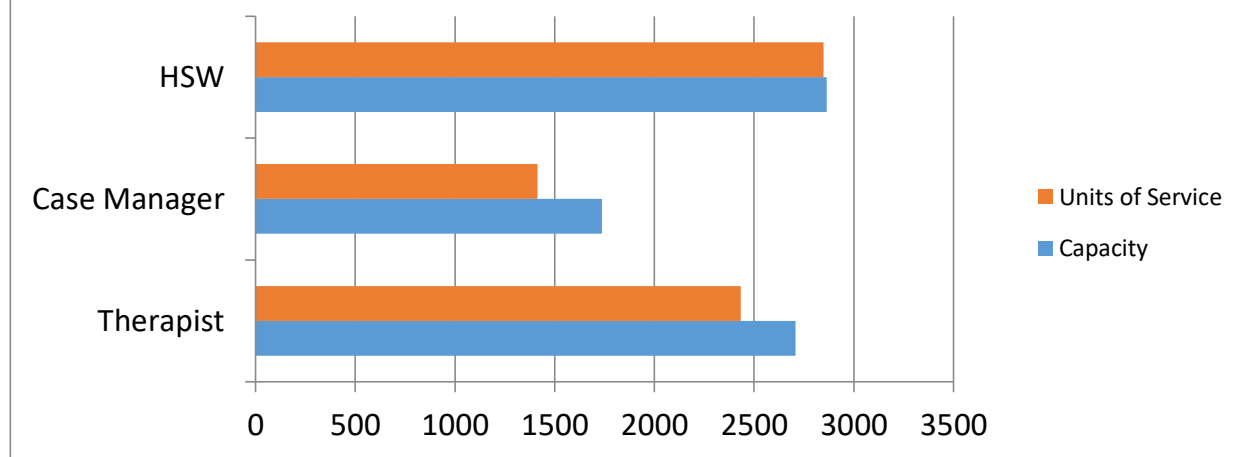
### Employees with Billable Time 100% or More



### Employees with Billable Time Less than 90%



## Crisis and Intensive Services Division Productivity July 2020



The above graph indicates the total capacity of possible units of service based on productivity standards in comparison with the actual units of service provided. For the month of July, total therapist time is at 89% capacity. Case manager time is at 81% capacity. Human Service Worker/Autism Aide time is at 99%.

### **Highlights:**

The following is a great example of how the Family Resource Facilitator who is assigned to work with the Division and of Child and Family Services can make a positive difference in the lives of children. In this case, the child is able to remain with his mother.

“A young 19 year old BYU student, I’ll call her Susan, rushed to the ER with severe abdominal pain at work. She found out that not only was she pregnant, but in labor giving birth to a 5 lb. baby boy. Susan is panicked! She tells the medical staff she is not prepared to be a mother and she can’t keep the baby. She is single, lives in student housing, she will be evicted. She is working full time, the father is not in the picture, and her family will “kill” her if they find out. She will not have support.

CPS is called, they go to the hospital and interview Susan. Talk to her about her options, provide resources and support. They tell her to take a few days to think things over before she makes any decisions. Susan calls her boss, tells him her situation, He tells her to take a 30 day medical leave while she figures things out.

FRF is called in to work with Susan. CPS will take a back seat for 30 days while FRF helps Susan navigate the system, FRF stays in touch with DCFS during the process. FRF Interviews Susan, learns that she does have family (a sister and grandmother) in the area that could be a good support to her. Susan also has a great bishop that she trusts and feels safe telling about the baby. Susan and FRF call these supports. They are more than willing to love, help, and support Susan and the baby. Bishop immediately fills out a food order, Grandma and sister gather baby clothes, bassinet, and other baby items to help. Sister offers child care if Susan decided to keep baby and go back to work. Grandma offers to let Susan and baby live with her since she will now need to move out of BYU housing.

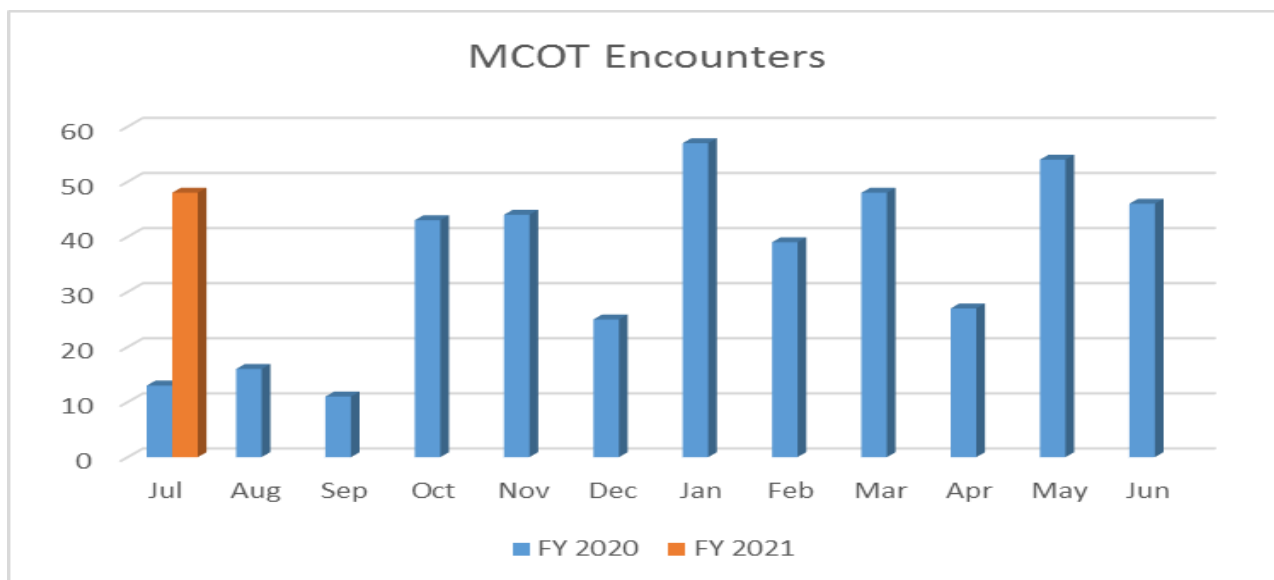
Susan brings baby home from hospital 4 days later for a 30 day trial period. FRF connects her with DWS to apply for Medicaid, food stamps, child care. FRF also helps Susan apply for WIC, and Community Action for rental assistance during the month Susan is on medical leave. We also apply for Provo City Housing.

FRF learns who the baby's father is. Susan gets up the courage to call him and tell him he has a son. He is surprised, happy and excited! He wants to be a part of the baby's life. He offers to support Susan financially so she doesn't have to go back to work full time. His family is supportive too.

After the 30 day trial, Susan decided to keep the baby. She is not so overwhelmed. She has a lot of help and support. She got back together with the boyfriend/baby's father to see if they can make a relationship work. She is currently living with grandma but could end up getting married by the end of the year."

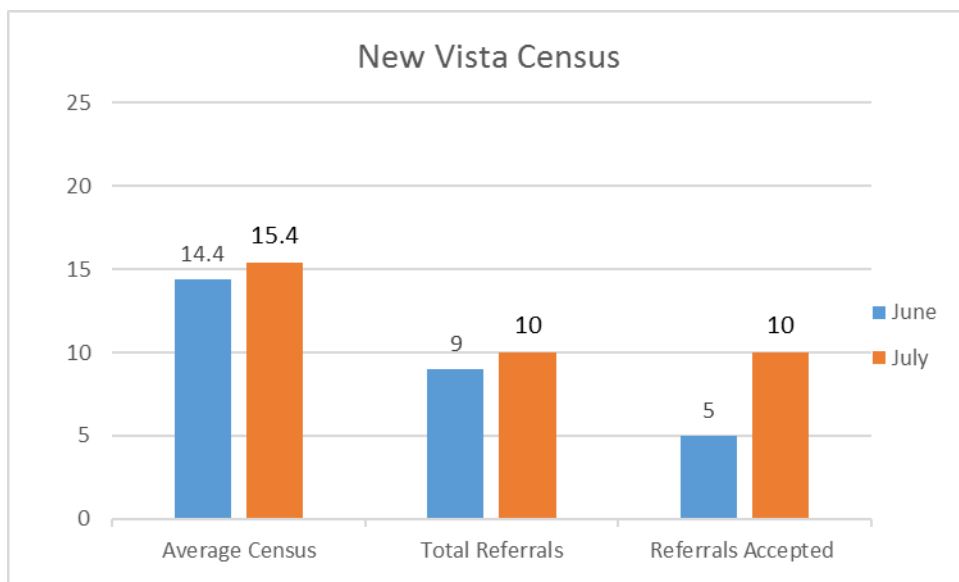
### **July Unduplicated Clients served in Family and Specialty clinics:**

<b>Clinic</b>	<b>Adults</b>	<b>Youth</b>	<b>Total</b>
PFC	147	547	694
Payson	277	180	457
AFFC	392	420	812
WCFC	125	46	171
WFC	169	23	192
Med Services	1170	202	1372
Psych Services	68	61	129
Crisis	88	9	97



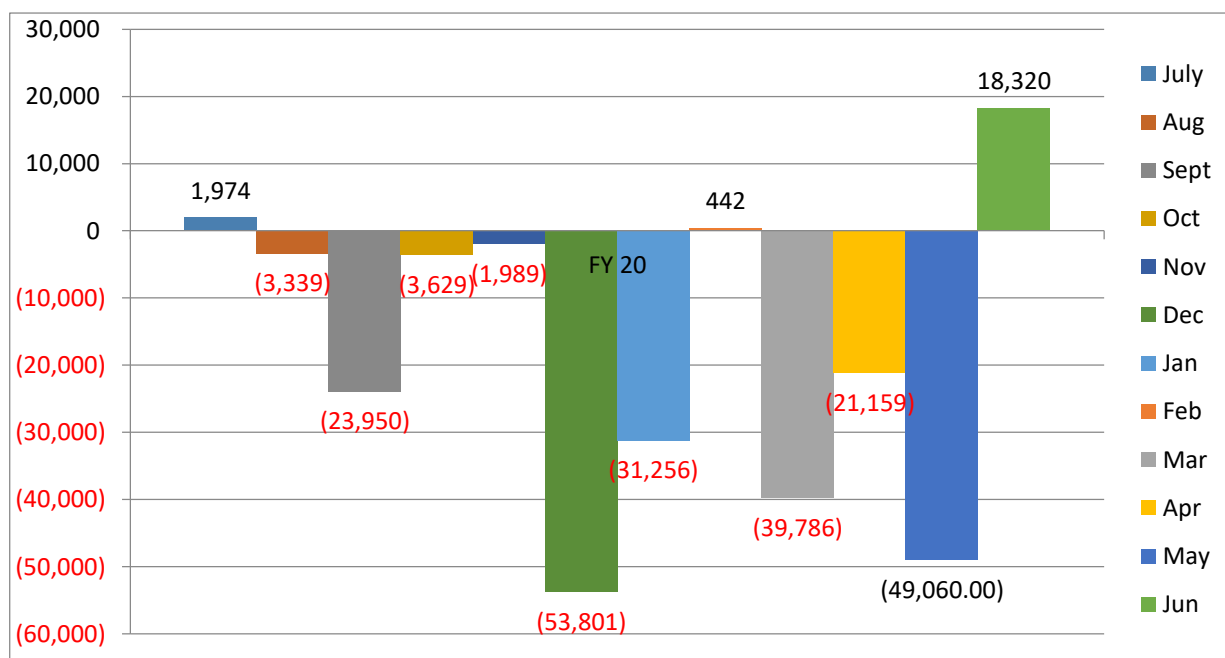
### **New Vista Youth Services**

**JULY REPORT:** Overall census increased by a client from June to July. Referrals continue to come in, with half of those referrals being accepted into the program. The New Vista therapists remain very busy with clients in the day treatment and outpatient programs. Justin Fagnant trained on the financial impact that providing and documenting services has on the New Vista program and on WBH as a whole. Over the past two months, New Vista has made significant improvements in the utilization of SMART objectives, YOQ discussion, and CST utilization. YOQ discussion improved by 50% from April to June. CST utilization improved from 0% in May to 100% in June.



### **New Vista Financial Report**

New Vista made a total profit of \$18,320 in June. This is a \$67,000 increase from May to June!



**Financial Summary:** New Vista saw a significant increase in total revenue for the month of June, specifically in the amount of Foster Care Medicaid Revenue and “Other FFS Revenue”. Total revenue not only covered the cost of personnel, but more than paid for the entire program. This is attributed to a lot of hard work by therapists and staff providing and billing for services. There is also a renewed focus on having a healthy census.

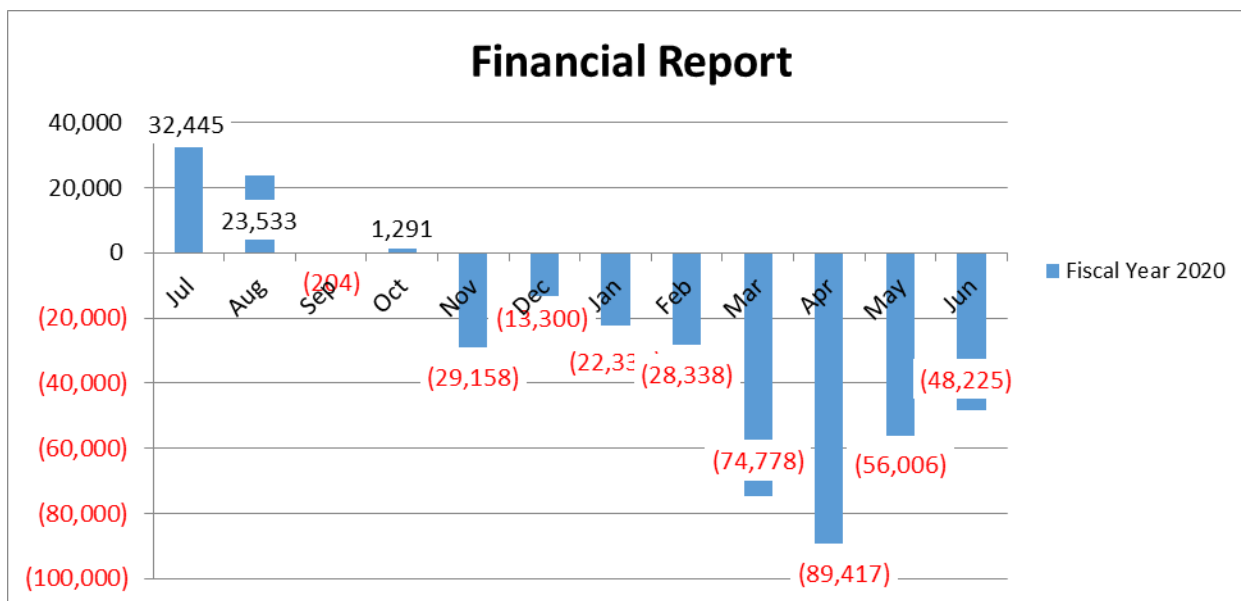
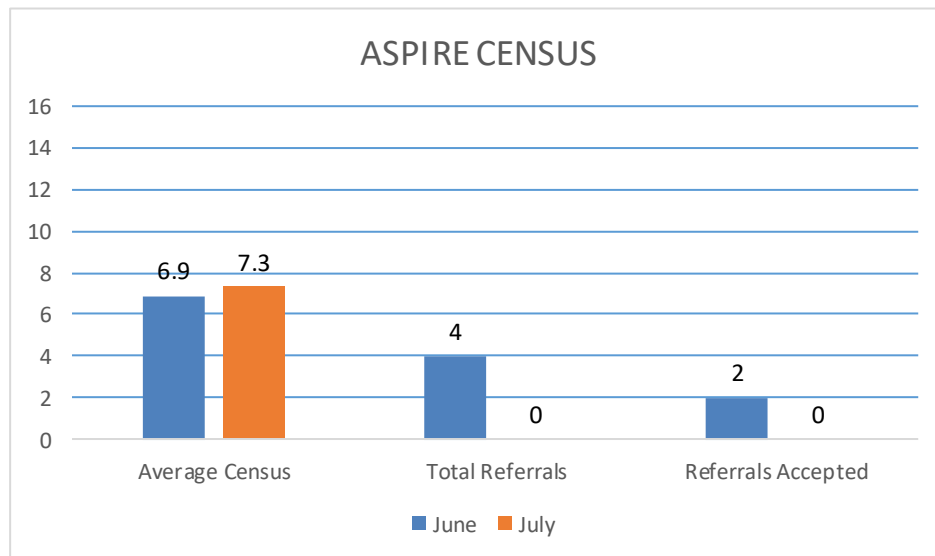
### Highlights:

- The New Vista summer program is being held Mon-Thursday and focuses on enhancing the skills the youth already have to develop healthy relationships so they decrease their maladaptive behaviors. Due to the COVID-19 restrictions, New Vista takes temps of all youth prior to getting on transport and once again in the afternoon at treatment. New Vista takes advantage of the Summer Breakfast & Lunch Program that the school district provides.
- New Vista YSD groups focus on building and maintaining healthy relationships. The youth are focusing on developing emotional regulation skills they can use in their daily lives. The youth, with assistance from staff, are working to enhance their coping skills. The youth are working on trauma narratives in the therapist groups. The trauma narrative enables the youth to express themselves to peers and others by working through the shame, guilt, and embarrassment they feel from their past experiences. The youth will continue to work on the trauma narratives for the remainder of the summer. The youth participate in a group every week that enables them to discover who they are. This group assists them in building self-esteem to enhance their own personal growth. This helps them learn that they are worth more than their trauma.
- New Vista received ten referrals, five of which were accepted into day treatment and five were accepted into outpatient. One youth went AWOL shortly after returning home from Vantage Point. He is no longer in Day Treatment. One youth went AWOL from her foster home, and her DCFS team determined that she needed a higher level of care.

## Aspire Academy

**JULY REPORT:** Overall census increased slightly during the month of July. Unfortunately, we received zero referrals during the month. We had eight clients for the first ten days of the month, and then one girl

stepped back down into her home, leaving us with seven girls the remainder of the month. Our CARF survey took place July 29-31. Although a difficult three days, this was a great learning opportunity for Aspire personnel.

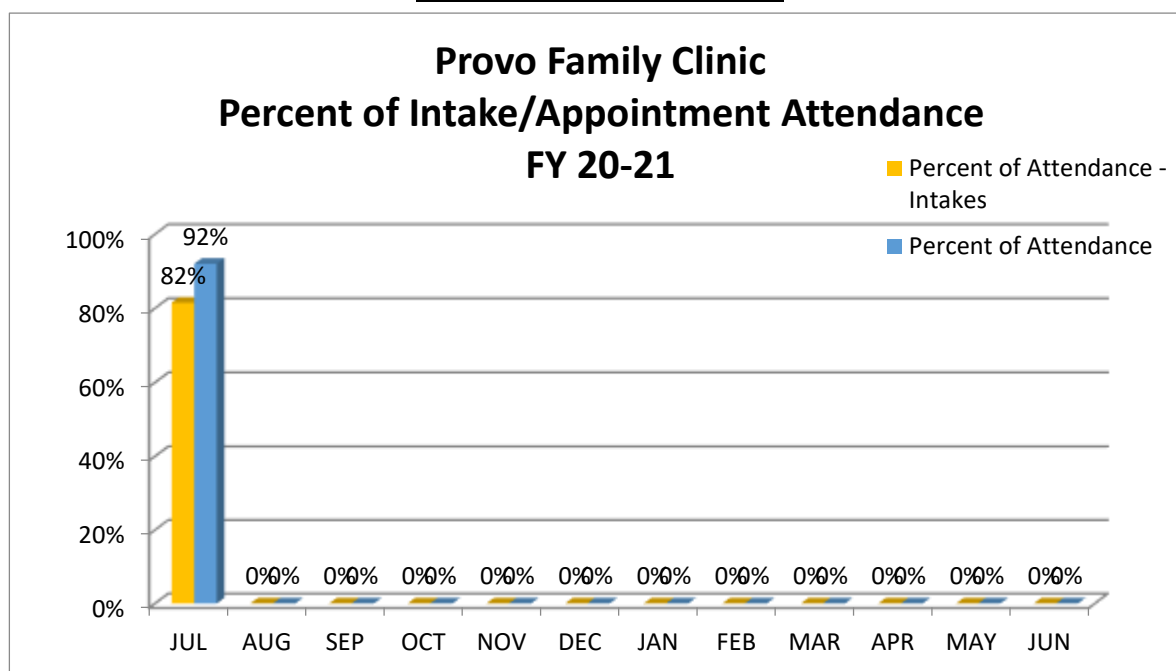


#### Highlights:

- We currently have seven residents at Aspire. We are staffed with 16 HSW'S, 2 full time therapists, a full time supervisor case manager, and a program manager.
- In the Month of July we had no admissions and one discharge. The resident who was discharged on 7/10 stepped back down into her home with additional supports of a day treatment program in the Salt Lake City area. It is reported that she is currently doing well in her home and at her day treatment program.

- During the month of July, our girls have been busy with individual therapy and group therapy. The therapists and staff have been continuing to focus on the following programs: survivors group, DBT groups, experiential groups, and self-esteem groups.
- This month our case manager focused on socialization, community skills, and developing healthy relationships.

### **Provo Family Clinic**



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

A note from our comment box this past month read, “Kari at the front desk is amazing!! She is very caring and attentive to our needs. She goes above and beyond!”



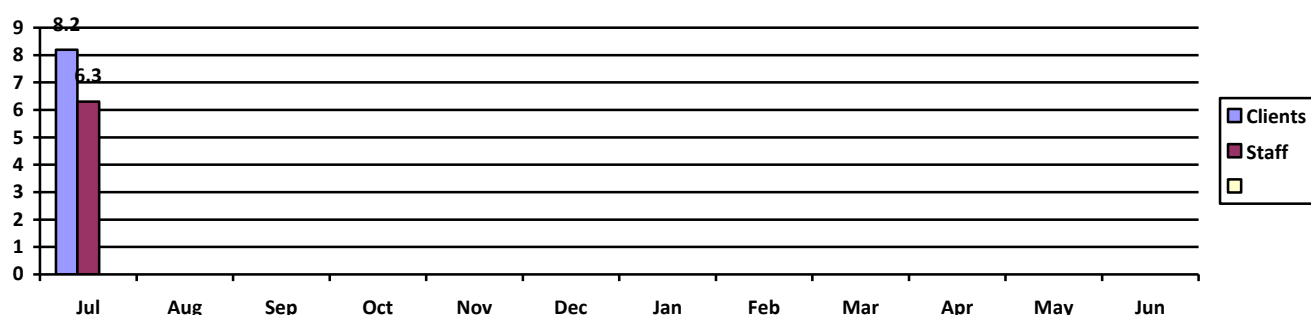
A PFC therapist shared the following:

Mom said: "Derek was a real game-changer in Y's (age 8 now) life. Y only saw Derek for a few months, but he became emotionally stronger and more in control of his emotions. Before he had zero control. He is still learning, but he is doing so much better. He adjusted to the move to N. more easily than the other kids did. He has made friends. He was still nervous about going to school but not hanging onto me like he used to".

Y. said to tell Derek "You're the best therapist ever!" And asked if he could come visit Derek while he's visiting his grandparents in Utah this month.

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

### **Class: Monthly Avg Census**



### **Stride/Xcel details for the reporting month**

	American Fork Stride	Payson Stride	Provo Older Stride	Provo Younger Stride	XCEL
Group Billable: Avg. Clients	3.9	4.1	1.2	0.6	4.1
Group Billable: Total Clients	54	73	22	10	74
Group Billable: Avg. Staff	1.5	1.3	0.4	0.3	2
Group Billable: Total Staff	21	23	8	5	36
1 to 1: Avg. Clients	2.6	2.6	3.2	2.8	4.1
1 to 1: Total Clients	37	47	58	50	74
1 to 1: Avg. Staff	2.6	2.7	3.2	2.6	4.3
1 to 1: Total Staff	37	46	58	47	78
Total Present: Avg. Clients	6.5	6.7	4.4	3.4	8.2
Total Present: Total Clients	91	120	80	60	148
Total Present: Avg. Staff	4.1	4	3.6	2.9	6.3
Total Present: Total Staff	58	69	66	52	114
Average Absences	0.07	1.7	0.4	0.9	2.3
Graduations	2	2	2	2	1
Number of unduplicated clients served for the month in Stride:			46		
Number of unduplicated clients served for the month in XCEL:			32		

## **Grand Families/Strengthening Families**

### **Success Stories**

Grandfamilies received the following feedback from adults who graduated from Grandfamilies on July28:

Tell us what you have enjoyed about Grandfamilies:

The conversations with each other. Everyone was open and okay with being honest and even vulnerable. I looked forward to coming. Please keep having these classes. Carrie and Sara have been outstanding! I liked sharing reality with others. I benefitted from legal help and directions, as well as others' ideas on parenting and coping.

What are some suggestions for improvement? What else would you like to see in the Grandfamilies program?

I can't wait to see the program in action when there isn't a pandemic going on. Zero complaints. Keep doing what you are doing.

I have enjoyed both sessions we attended. I learned different things each time.

Other comments:

I am so glad I 'accidentally' stumbled into finding out about Grandfamilies. Thank you everyone. I guess I should mention my grandson has only had positive comments about his time here.

**GIANT Steps****Highlights & Program Updates**

- Total services are still down compared to last fiscal year. We have been seeing half the number of students daily that we typically do because of school and DHS guidelines. We plan to start with greater numbers in the middle of August 2020.

**Community Involvement**

- Utah Infant Mental Health Alliance Conference Planning Meeting
- Partners for Infants and Children Committee
- Head Start Advisory Board Meeting

**Preschool Outcome Questionnaires:**

Administered: **24**

Unduplicated: **22**

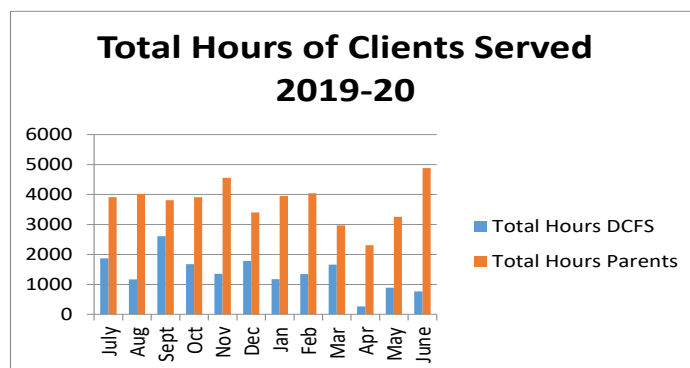
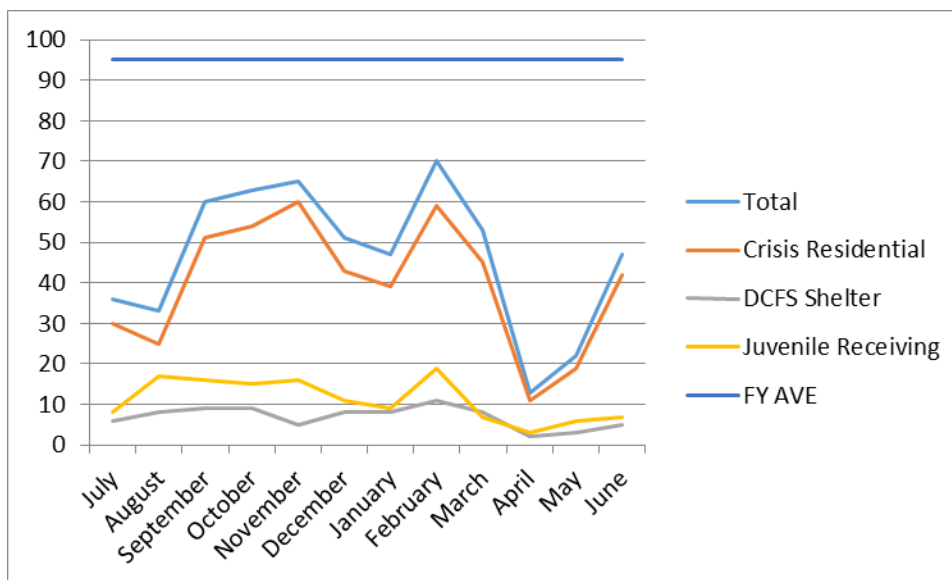
We were able to administer three times as many POQs this month compared to last month. We attribute much of the improvement to online administration. When regular treatment begins next month, we should have even more.

**Billable Units of Service**

**Current Month – 12,017** units of service were provided to Giant Steps clients/families.

**Last Year Comparison – 12,815** units of service were provided in the same month last year.

**Vantage Point**



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

#### Vantage Point

- We are excited to announce in partnership with Provo School District, we will again have school available at Vantage Point. They will be providing brand new 12 Mac computers for the youth to use at Vantage Point so that they can work on school assignments and packets virtually to help the youth who stay more than a couple of days. There will be **no** cost to the youth in completing packets for high school.
- We are in the process of talking to IT to see if we will be able to connect the computers safely, as well as finding enough space to keep the units according to social distancing guidelines. School has not been available for several years so to have it back is short of a miracle!

**BRIDGE**

- We found out at the end of this month that a couple of our clients tested positive for COVID. Staff continued to provide personal services to them and the rest of the clients. PPE's were used, however it is hard to say exactly how it was spread to staff. As a result, there was a positive exposure to one staff that has been confirmed so far. The 3 more are symptomatic and are pending testing results.
- We would just like to recognize these incredible and dedicated workers. As things panned out, each one stepped up to pick up the slack so that all the client's needs were provided safely. Even as they became ill themselves, they continued to stay connected to each other, calling clients from home to check on their health to monitor any possible transmission/exposure. They coordinated with each other and communicated fluidly daily, moment to moment. The goal with BRIDGE is to help SPMI clients maintain living in the community. Because they are a vulnerable population, a disruption could mean that they go inpatient. I am so impressed by the staff's dedication and Craig's leadership in directing the day to day tasks that needed to be done.

## **PREP**

Clients Screened for PREP													
		JAN	FEB	MAR	APR	MAY	JUN	JULY	AUG	SEPT	OCT	NOV	DEC
Total Number		7	7	5	9	8	3	7	0	0	0	0	0
Screened with PRIME		4	3	1	3	2	2	5	0	0	0	0	0
Screened with PQ-B		0	2	1	1	1	0	0	0	0	0	0	0
Screened with SIPS		1	1	2	3	4	1	2	0	0	0	0	0
Comprehensive Assessment		2	1	1	2	1	0	0	0	0	0	0	0
Psychosis Risk Questionnaire		0	0	0	0	0	0	0	0	0	0	0	0
Basle screening instrument		0	0	0	0	0	0	0	0	0	0	0	0
BQSPS		0	0	0	0	0	0	0	0	0	0	0	0
Other		0	0	0	0	0	0	0	0	0	0	0	0

**\*PREP 50% Involved in school/work**

**\*CHR 50% Involved in school/work**

**Number of total unduplicated clients served last month:** **55**

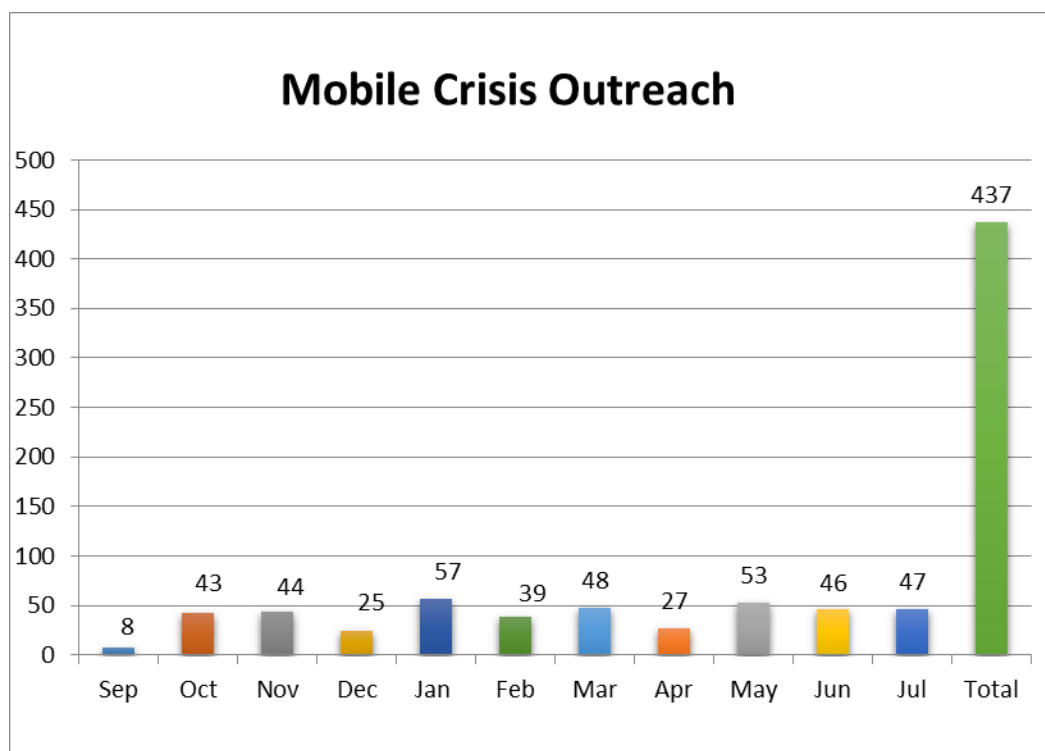
**Number of OQ/ YOQs administered:** **41**

**Number of unduplicated clients who completed an OQ/YOQ:** **31**

## **CRISIS SERVICES**

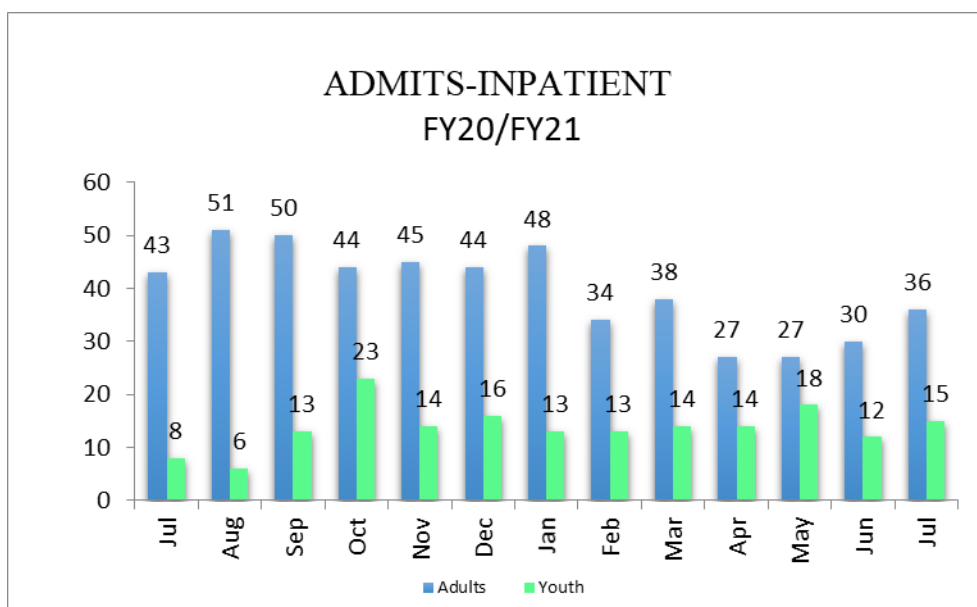
The following graph represents Mobile Crisis Outreach's the team has done since September 2019.

**Mobile Crisis Outreaches in July: 47**



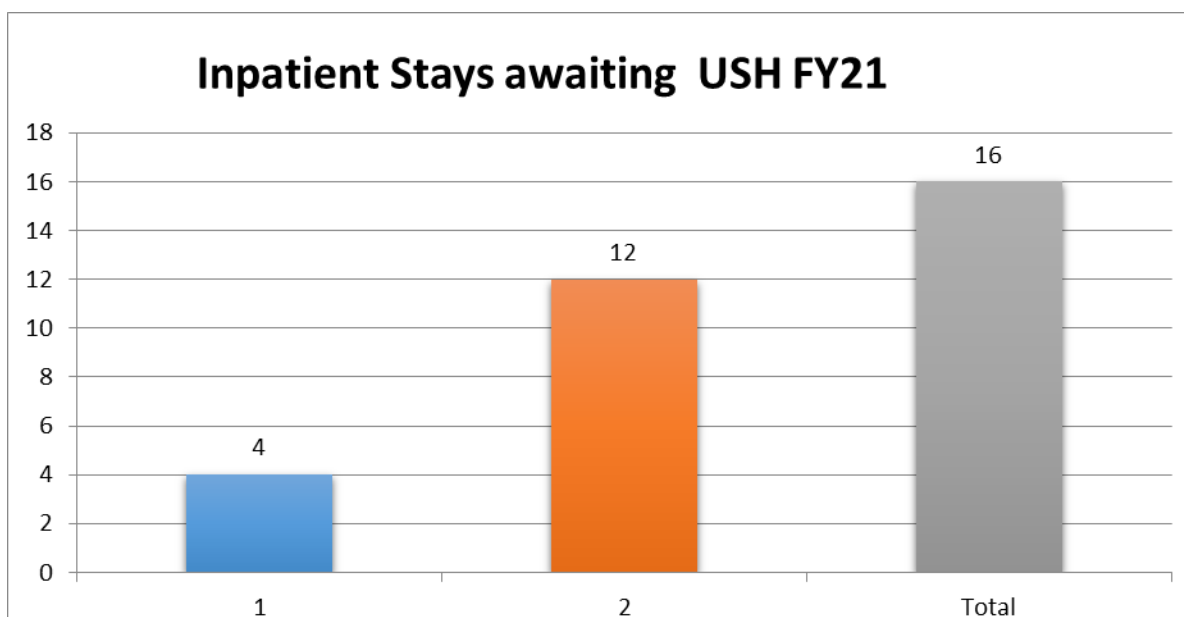
### Inpatient Psychiatry

Following graph represents Adult and Youth Clients admitted to inpatient psychiatric units for the last 24 months (FY2020 to FY2021). Blue bars represent adults and green represents youth.

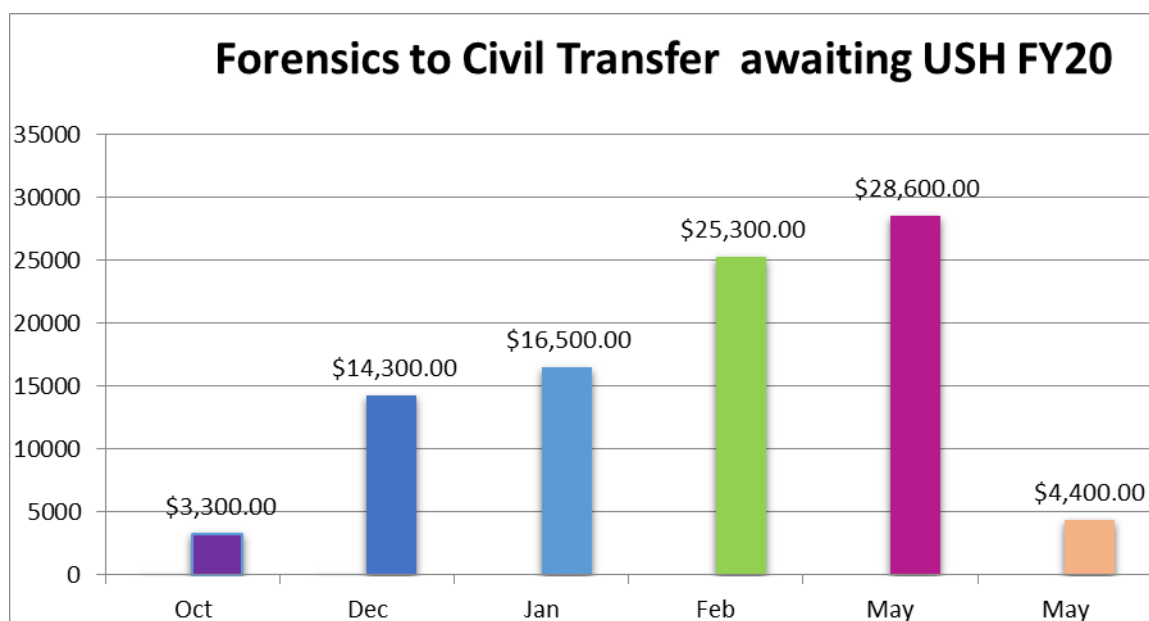


### Inpatient stays waiting for USH Hospital bed placement

The following graph represents those waiting for admission to the Utah State Hospital. The numbers on the bottom of the graph represents 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 \$5,626,719. Total cost for FY 21 thus far is \$17,6000.**

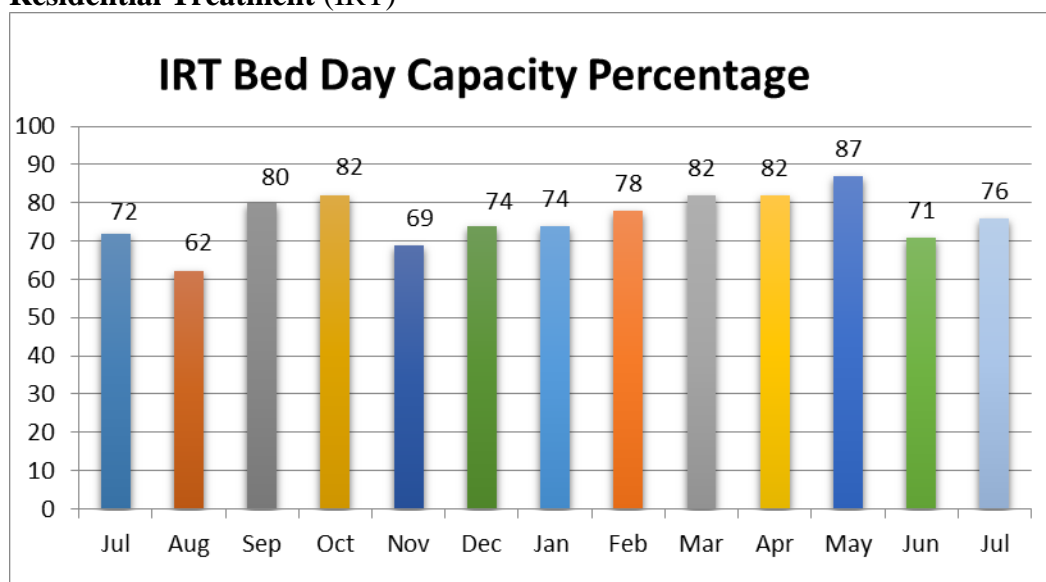


Starting in FY18, the USH prioritized the transfer and use of USH civil beds to accommodate Forensic Unit patients first and foremost. Before this decision, admissions to the USH Civil Unit would alternate between community needs and forensic needs. The Following graph represents the number of patients who were declined admission to the USH Civil Unit because USH Forensic patients were prioritized admission to the USH Civil Unit regardless of the community needs at the time of an open USH Civil Unit bed during FY18. The following graph displays each of the community patients who were denied admission due to forensic transfers taking priority. Also the cost associated due to the extended acute hospital length of stay.



### **Intensive Residential Treatment**

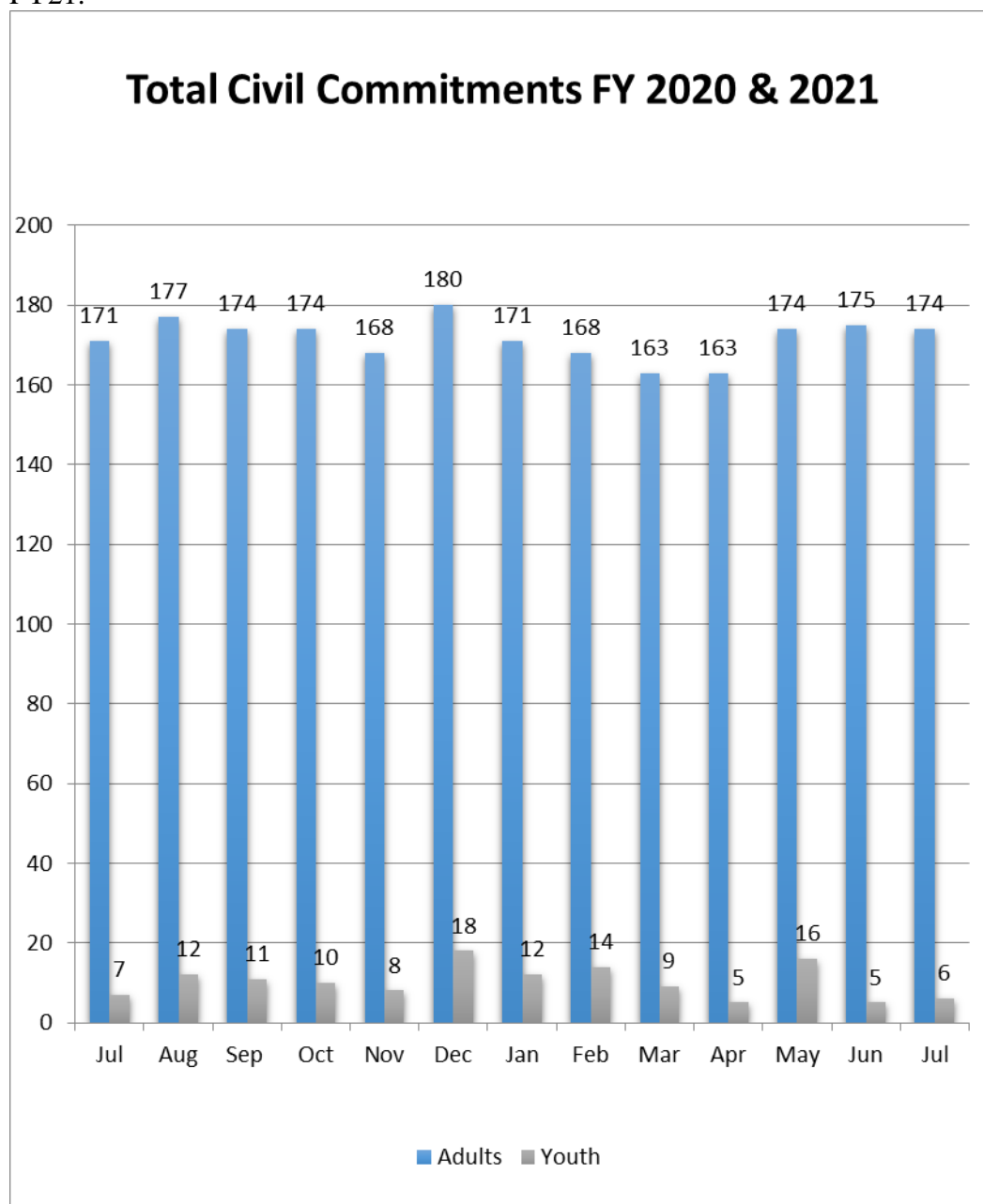
**IRT** - The following graph illustrates the bed day capacity percentages from FY20 to FY21 at **Intensive Residential Treatment (IRT)**



### **CIVIL COMMITMENT**

In FY18 Crisis Services acquired the complete oversight and monitoring of all adult and youth civil commitment initial applications, monitoring review and ongoing civil commitment compliance oversight, and all discharges and drops from civil commitment. This had been previously divided among various departments and is now more centrally located and managed within Crisis Services. The following graph illustrates the total

number of youth and adult involuntary civil commitments to Wasatch Mental Health for each month in FY20 & FY21.



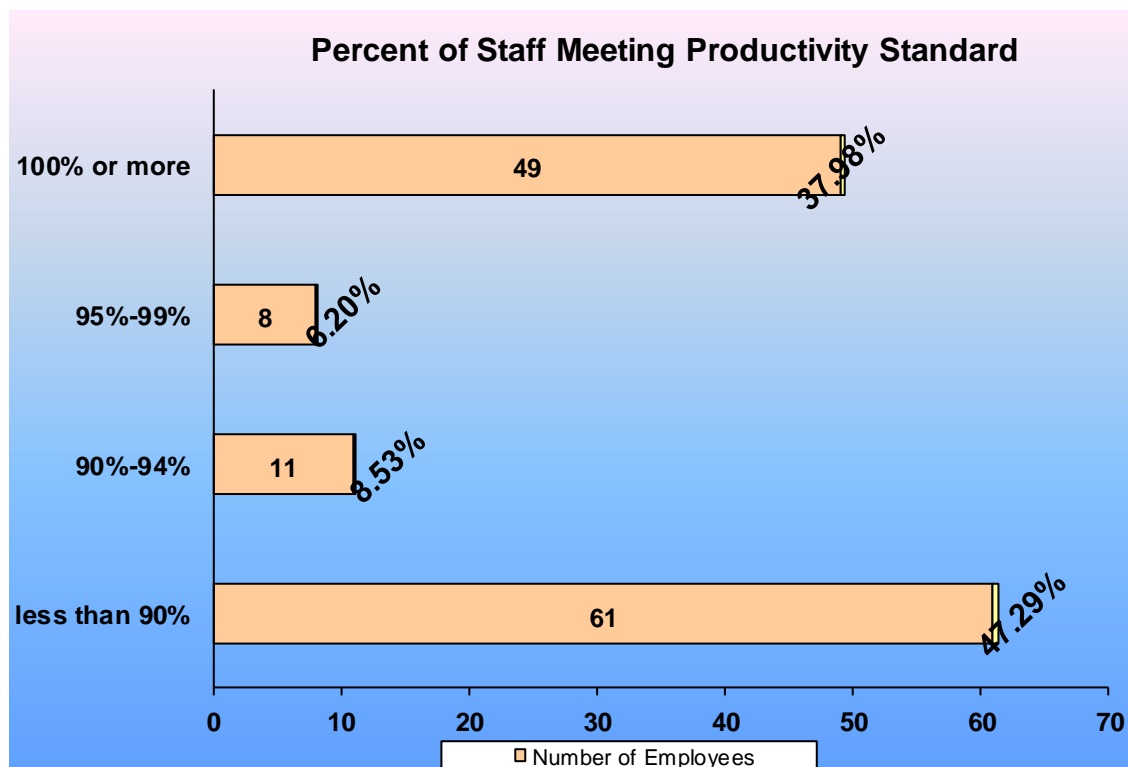
### **Leadership/Allied Agency Participation/Initiatives/Success**

#### **Success Story**

We have had several requests for IRT beds, where the client to be admitted were really rough around the edges. On several occasions we have had to ask the client admitted, to leave IRT based on not following COVID precautions and other basic IRT rules. We have been pleased with staff's patience with these challenging clients, and our ability to continue the constant work to keep clients engaged while COVID restrictions continue for residential programs. About half of these clients have been able to work back to IRT programming after being asked to leave. As a manager, it has been difficult to balance enforcing rules and safety, while also knowing we need to be flexible and allow for some imperfections, as recovery has its ups and downs.



## Clinical & Community Services Division



### OQ/YOQ Administration

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

Adult Clients Served	2705	
Child/Youth Clients Served	1386	
<b>Total</b>		<b>4091</b>

**Number of OQ/ YOQs administered:**

Clinical & Community Services Division	2481
Crisis & Intensive Services Division	567

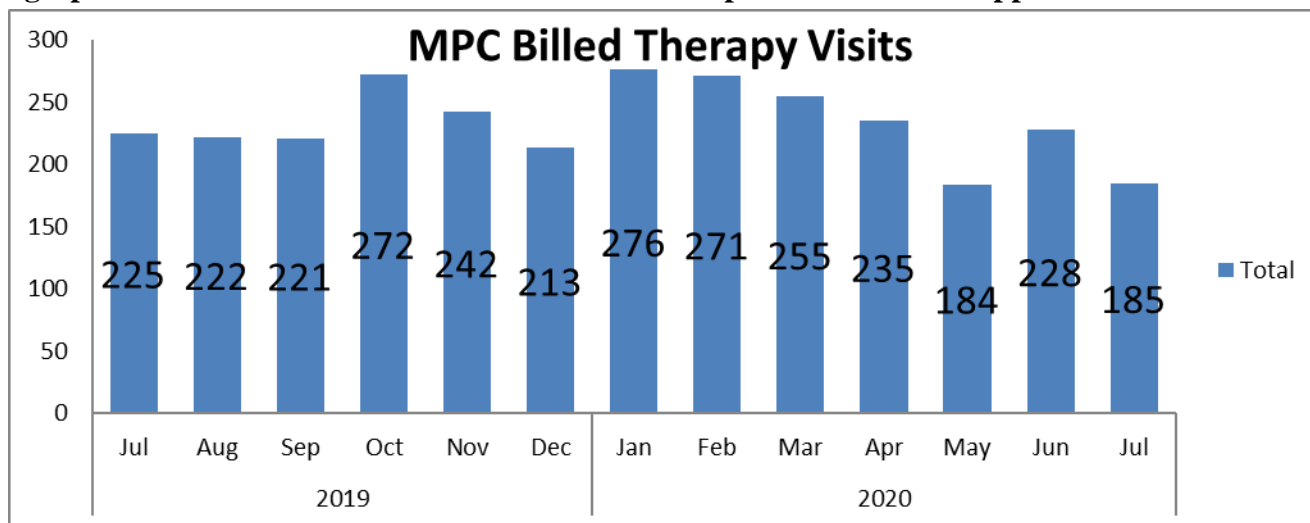
**Number of unduplicated clients who completed an OQ/YOQ:**

Clinical & Community Services	1469
Crisis & Intensive Services	337
<b>Total</b>	<b>1806</b>

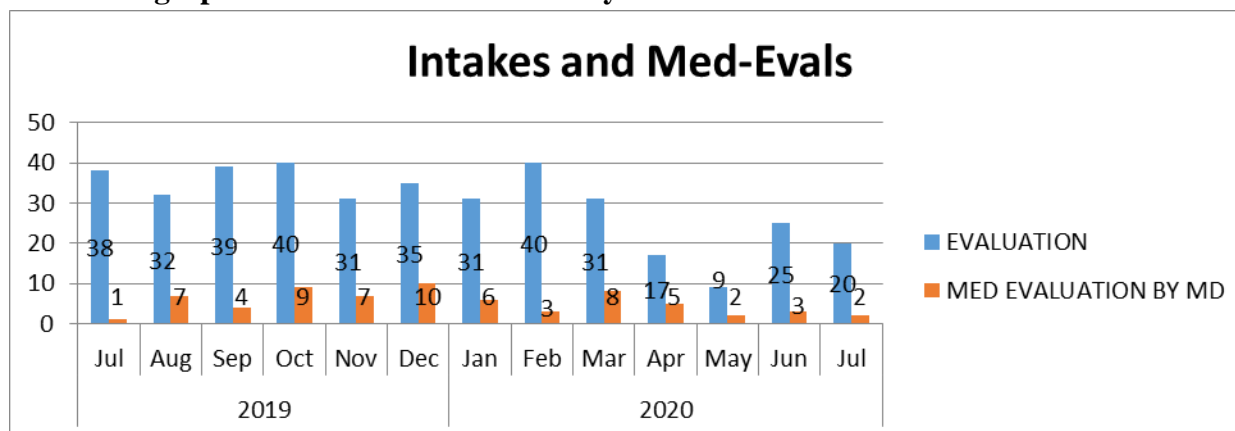
<b>Unduplicated Count of All Clients Served at WMH</b>	<b>4091</b>
<b>% of Unduplicated Clients Completing an OQ/YOQ</b>	<b>44 %</b>

## Mountain Peaks Counseling

The graph below indicates the number of clients who kept their scheduled appointments at MPC



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

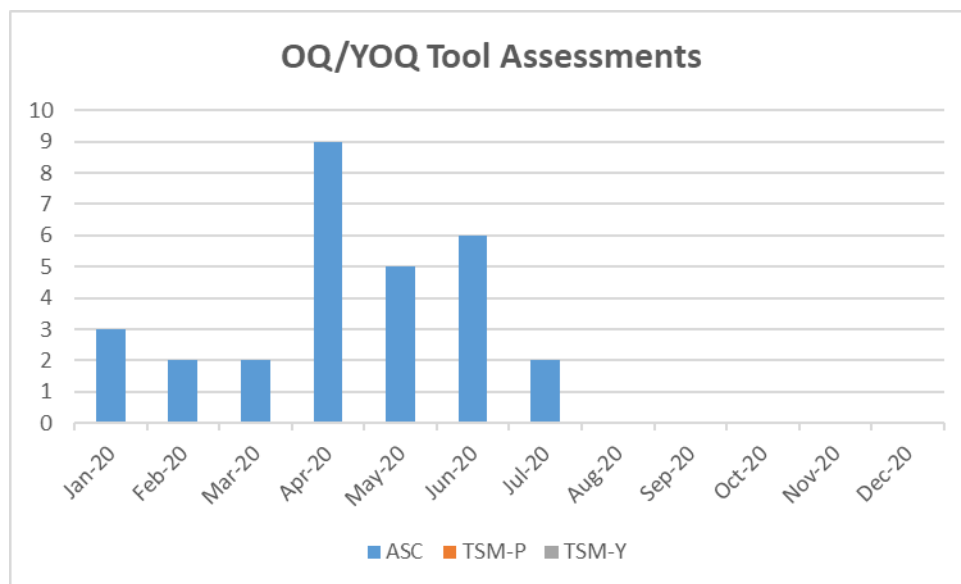


## Financial Report

We are seeing a slight decline in all areas at MPC. Summer time tends to slump in July but we will evaluate in August. Covid is certainly affecting services in a negative way. Overall, we have some decline in therapists participation, such as Brian Butler is pulling out, Robin Shepley is not seeing new clients and has tapered off significantly and a few other therapists are also pulling back on their frequency. We are no longer seeing clients on Thursday night as no clinician is opting to work that night. Mary Jean Pritt will rejoin the MPC after her summer break and will start seeing clients the end of August. She is only works during the day.

## Westpark Family Clinic

- The number of OQ/YOQ tool questionnaires collected in WFC were 2 ASC tools. This decreased from the previous month of 6 ASC tools. In March, we were further trained for the OQ/YOQ assessment tools. The recent month we see a significant drop again. We will remind staff of the assessment tool usage to increase our practice of EBP.



- This month, we continued tracking client treatment progress within the clinic as indicated by the Y/OQ. On average, those clients who took the OQ-45 in the WFC this month had initial scores of 86.36 and current scores of 74.56, showing mean improvement of 11.8 points. Of these clients, 44% currently show improvement on the OQ-45 with 40% and 16% showing no reliable change and deterioration respectively.
- Those clients taking the YOQ-2 in the WFC this month had average initial scores of 67.86 and current scores of 57, showing mean improvement of 10.86 points. Of these clients, 29% currently show improvement on the YOQ-2 with 57% and 14% showing no reliable change and deterioration respectively.
- On average, those clients who took the YOQ-SR in the WFC this month had initial scores of 61 and current scores of 27.4 showing mean improvement of 43.6 points. Of these clients, 60% currently show improvement on the YOQ-SR with 40% and 0% showing no reliable change and deterioration respectively.
- During the last quarter, beginning with the pay period starting on 5/10/2020 and ending with the pay period ending 8/1/2020, WFC staff (420) productivity standards achieved a total of 5007.87 productivity hours, which equates to 92.9% of the department's cumulative productivity standard. Total productivity hours month over month increased 2.97% while total productivity percentage decreased by 0.01%.
  - During the same period of time, RPS staff with productivity standards achieved a total of 783.93 productive hours, which equates to 106.3% of the department's cumulative productivity standard.

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

<b>Mental Health Courts in Utah County:</b>	<b>Number in the program:</b>	<b>Graduates:</b>	<b>New Clients Accepted:</b>	<b>Clients who dropped out or removed from program:</b>
4 <sup>th</sup> District Court:	31	0	3	1
Provo Justice Court:	3	2	1	0
Orem Justice Court:	2	0	0	0

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

Our success story this month comes from The Integrated Health Care Grant Case Manager. He stated, “I been able to help several Mountainlands patients with their Medicaid applications, and guide most of those applicants into services at WBH, for example.

1. A client came in for his medical assessment very anxious about his general weakness and fatigue. He had an EKG and blood work, and it was determined his heart is OK. He was visibly emotionally relieved immediately.
  2. A client who confessed her substance abuse during her NOMs assessment, is now being treated through Mountainlands pharmaceutically for opiate addiction recovery.
  3. A client who had a drain line in her infected hip surgical area for some months, and required weekly appointments at the wound clinic, had her drain line removed, and will graduate from that protocol this week. She is so excited to be able to shower normally once again!
- Due to the increased intake volume since the Medicaid Expansion and unfunded, WFC therapists continued to complete 1 intake per hour as needed in order to accommodate for the increased intake volume. We have shifted our intake process to accommodate scheduled times for new intakes, which continue to be completed via telehealth. This means that we are now seeing failed intake appointments whereas we did not have this issue before. At the end of July, we had approximately 30 clients that have filled out intake paperwork, but they had not returned the CTAs phone call to schedule their appointment.
  - During the last month, WFC completed a total of 86 new intake assessments: 82 walk-in intakes, 0 nursing home intakes, and 4 DV/MHC. These were completed by 15 therapists/interns. Total intake volume decreased by 39.44% compared to June. During the month of July we also had 9 failed scheduled intakes. Of the 82 walk-ins, 72 reported having Medicaid of which 12 or 16.67% had Medicaid Expansion. The average amount of clients with Medicaid expansion last month was substantially lower compared to the past 12 months (38.13%). With the addition of the grants available for client use, 10 or 13.89% were unfunded at the time of intake and were expected to be able to use one of the grants available for services. Intake volume fluctuated last month was about even year of year (90 for July 2019). The slight decrease is attributed to the failed scheduled appointments and COVID-19 related. This means that we can predict to be completing around 94 - 110 intakes in the month of August.



## **Medical Department**

Medical Services welcomed two new employees in July: Lisa O'Donnal, APRN, and Shannon Easley, our newest wellness coordinator. The prescriber team has been supportive in giving Lisa the opportunity to shadow their work, gain consultation, and receive training to which she did not have access in her FNP program. Lisa is amiable and eager to learn; she will be an excellent member of our department. Shannon is already well-known to the agency. She is already demonstrating her ability to be a team player on her newest team. Given the pandemic, billable service delivery is down, for some more than others. Clint Peterson, for instance, is only allowed to see a fraction of his nursing home clients. We are hopeful that having a new nursing home therapist working to increase our access in the facilities will be helpful in this regard.

### **Psychological Testing/Interns/Form 20m**

- July was an adventure (or perhaps misadventure) in PAS. Unfortunately, the entire department was exposed to COVID-19 and had to quarantine for a significant portion of time. The team was lucky in some ways: the exposure took place immediately prior to a holiday, decreasing quarantine time from work, and no additional team members tested positive. Fortunately, the team is well-versed already in telecommuting, and the new psychology interns were sufficiently oriented to have some remote work available to them. Nonetheless, this shook the team up somewhat.
- Dr. Spendlove has been visiting various outpatient clinics to discuss referrals to the testing department. In that capacity, he has addressed questions about medical necessity, autism testing, and what to expect from the process. His most recent visit was to AFFC, and this clearly contributed to an increase in referrals from the clinic.
- One success in our department came from a new psychology intern, Justin Top. Justin was assigned an in-person intake who refused to wear a mask in our building and insisted being seen over the phone or via zoom was tantamount to being refused care all together. Despite being a new member of the team, Justin wisely side-stepped the power struggle, de-escalated the client, and established an agreement with the client that allows him to be seen in the way he wishes to while ensuring the psychological and physical safety of clients and staff. The client agrees to maintain 6 ft distance while in the building and Justin agrees to continue seeing him without a mask provided he is in good health. This is an excellent example of how we can prioritize both the physical safety of staff and clients while continuing to provide excellent clinical care.
- In July, 2020 we received a total of 73 referrals, 36 of whom were children. We had 16 autism referrals this month.

### **Outside Providers/Mountainlands**

#### **Mountainlands was open 19 days in July 2020**

%Appointments Kept---72%

%Appointments Canceled---17%

%Appointments Failed---11%

%Appointments Kept Follow-up's---93%

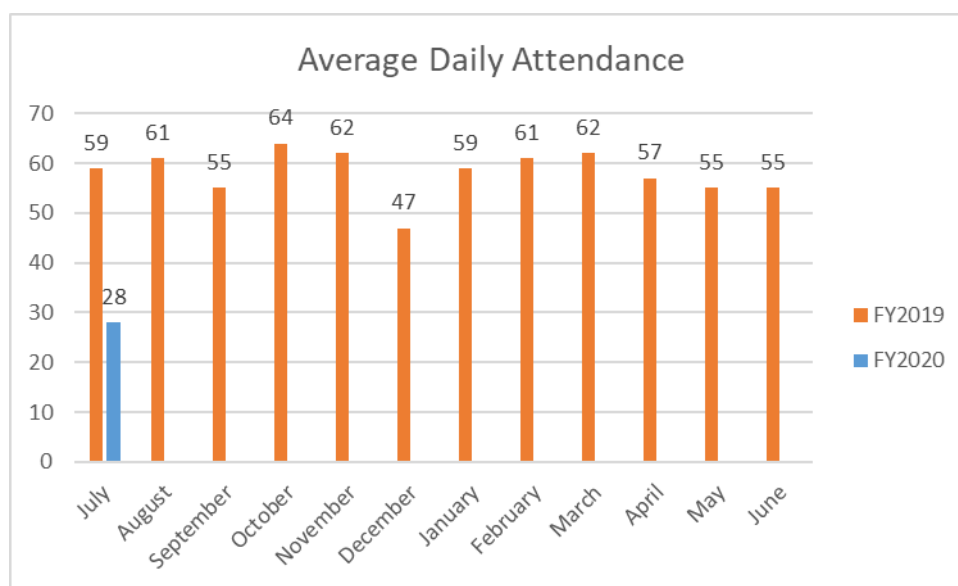
%Appointments Kept New Clients----7%

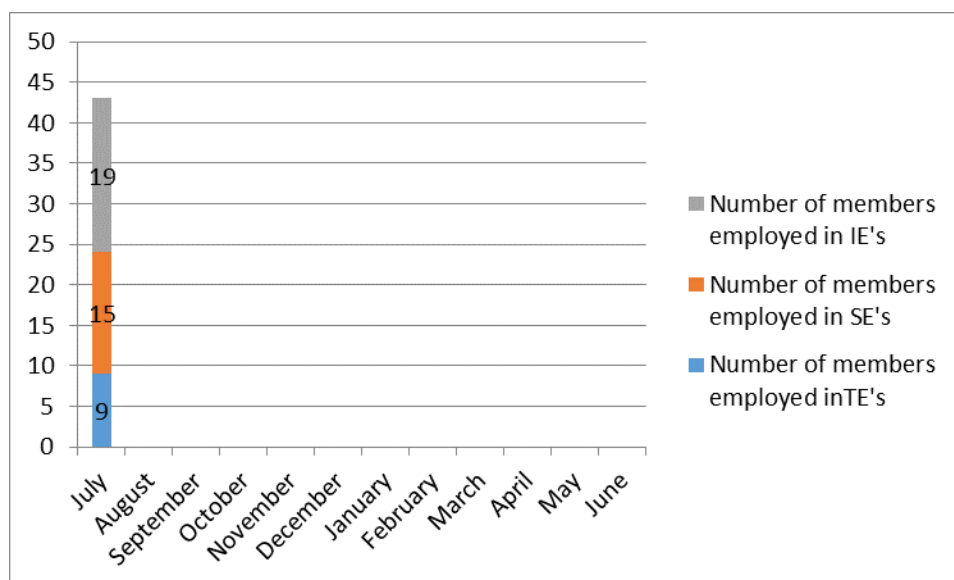
**Summary:**

July saw a decrease in the number of appointments scheduled and kept per day. It is up 8.5% from July 2019. Otherwise, the percentage of appointments being kept has remained fairly stable and about half of the clients scheduling are from levels 3-5 while the others are from a lower level of care.

**Care Team Services**

July saw continued strain and continued resilience from care team services. The team continued to withstand one member on FMLA, COVID screening requiring a full time employee, and additional shortages due to illnesses. At the same time, we covered shifts for other departments and began to improve our Medicaid eligibility screening process. Care team services may be the department most eager to see an end to this pandemic!

**Wasatch House****FY20 EMPLOYMENT**



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

One of our members came in to report that she has been at her (TE) job a year and that she had just received the highest achievable marks on her annual employee evaluation and that she also received the highest % raise that she was eligible to receive.

A sister, of a recently deceased member, came in to say, “Thank you Clubhouse for being so kind to my sister and for always making her feel welcome. She always said that when she was at Clubhouse, she always felt successful.”

**Number of total unduplicated clients served last month: 89**

### **WATCH/JTP Programs**

The WATCH program served 95 unduplicated individuals in last month. JTP served 99 unduplicated individuals as well. The two programs combined served 194 unduplicated clients, which was a decrease of 4 clients since last month.

### **Monthly Evaluations (Intakes)**

- The WATCH program has one full time therapist, while JTP has two full time therapists who each spend between 8-12 hours per week stationed at the jail. (Note: For the month of July JTP only had one full time therapist as one left her position.) The program manager Monte Memmott also has one walk-in clinic (three hours) per week as well for performing evaluations in either the WATCH or JTP programs. The WATCH program completed 9 evaluations for new clients in July while JTP completed 7 evaluations.

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

- Program manager, Monte Memmott, has coordinated closely with several community partners during the month of July. He participated in a telehealth conference call with HMIS, United Way, and several other Wasatch Behavioral Health employees both on the mental health and substance abuse side.



- Monte Memmott had a meeting at Provo City Housing Authority in July with several members of their leadership team. There has been some concern over the past several months with limited amount of visits from WATCH and JTP staff to the Bonneville and Skyline apartments. The housing authority expressed concern that having less ACOT visits may have a correlation between a spike of crime and consequent evictions. These concerns were validated and plans were discussed to provide visits in a safe and healthy manner for both clients and employees during these COVID times.

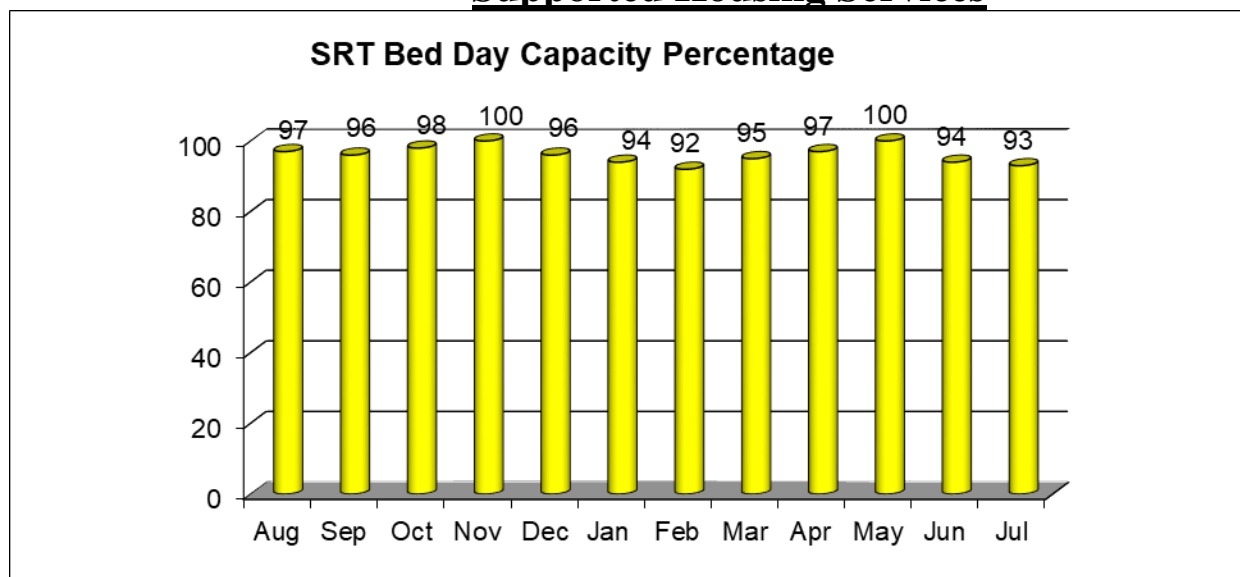
### **Challenges**

- Serve delivery continues to be lower than desired for the WATCH and JTP programs. During staff meetings staff have been challenged to look for creative ways to stay busy while continuing to take safety precautions. Staff have been asked to get out of their offices more and take walks around the lobby, the cafeteria, and grounds at the Food and Care Coalition where clients often spend time. It was discussed that this would be a good way to connect with clients who perhaps aren't making their way to the front desk to schedule appointments.

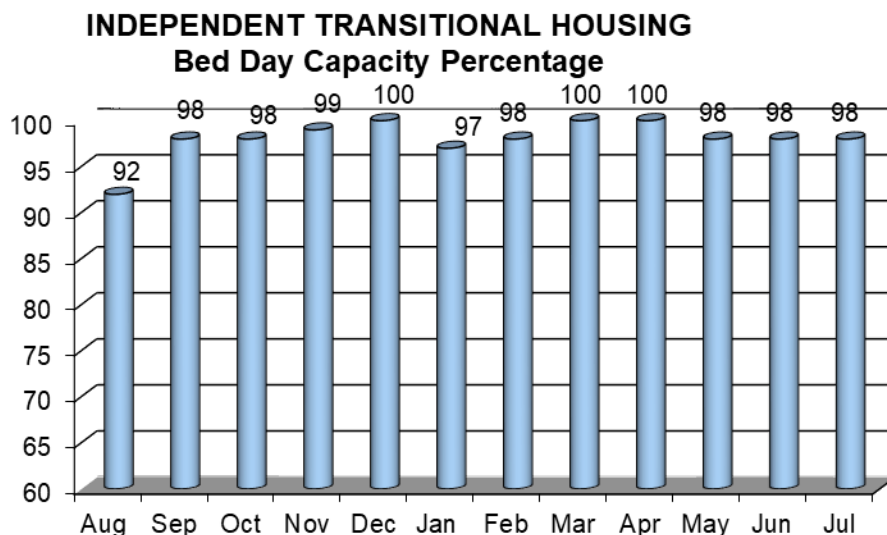
### **Successes**

- A JTP case manager wrote of a recent success: "Suzy (alias) recently starting working as a motel cleaner and is housed at the Bonneville apartments going on close to a year now. She is getting off probation soon. Suzy planted a garden at Bonneville and has really invested in trying to make it look like a better place to live. She has had a couple of relapse struggles, but Suzy has not been this stable in a quite a while."

### **Supported Housing Services**



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



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

A note from Tasi Frampton, case manager:

Women's social skills group was incredible today. A client reported that Valene's lesson on self-love empowered her enough to end a toxic relationship. A different client said that even though she was really scared to share, she said she is focusing more than ever on her own needs and strengths and if her current relationship is benefiting her life (it's not, but we have hope that she might figure it out. Continuing to encourage it!). Another client said that her biggest accomplishment in life was coming to Wasatch to get the help she needed to get healthy and thrive. Another client became a little emotional as she expressed having a hard time accepting compliments but it was neat to see her become real and aware about events in her life that have caused that and how she can navigate the challenge of addressing trauma and triggers. Every single one of our regular attendees is walking a little taller and looking inward to heal.

**Number of total unduplicated clients served last month:** 140

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

**Number of total clients served last month:** Total: 811    Adult: 420    Youth: 391

**Number of Unduplicated OQs/YOQs administered:** OQs: 123    YOQs: 160

**Total number of OQs/YOQs administered:** OQs: 197    YOQs: 249

#### **Groups in AFFC**

Wizards and Wellness  
SBS Summer Groups  
Overcoming Depression  
DBT

#### **Providing Excellent Customer Service**

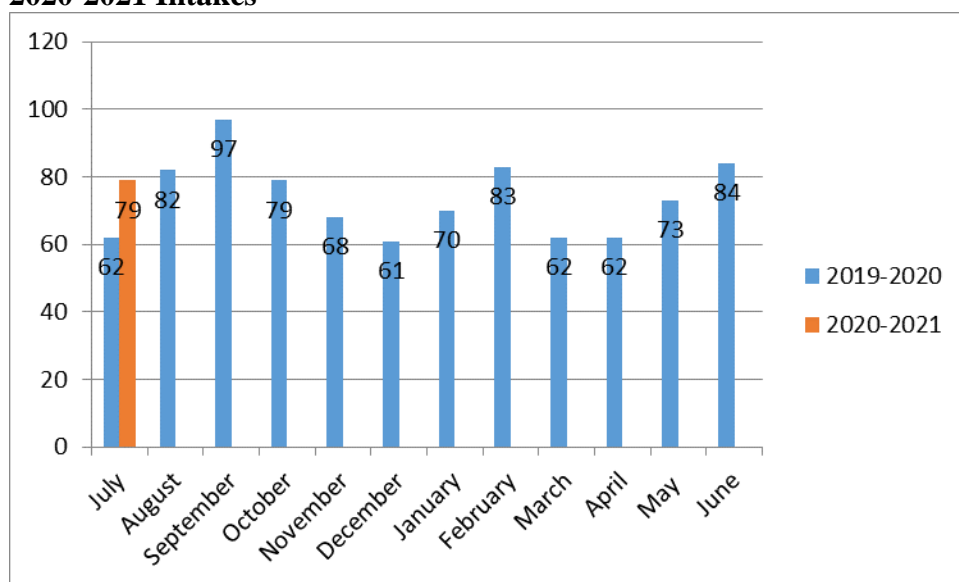
- We participated in a Northern Utah County Latino Resource Fair by creating a video of Alex Ibarra of the Provo Family Clinic talking about the services we provide at Wasatch Behavioral Health. This was made available virtually to the Hispanic community on Saturday, July 18<sup>th</sup>. Here is the appreciation email sent by one of the organizers of the event.

“I wanted to that each of you, our community partners, who contributed to yesterday’s live Virtual Latino Resource Fair! It went very well, and we’ve had multiple comments on how thankful viewers and organizers of the event are for the good you’re each doing in the community to address needs! We heard such comments as “wow, I had no idea they did all of that!”, and “I’m so grateful they’re doing what they do!”, etc.

It’s only been one day since the event and the number of views on the website (<https://utsrrc.org/ferialatina/>) are over 600 and growing, and 146 views so far of the event recording since yesterday. We anticipate the number to continue to grow as viewers spread the word. We hope you find any increase of candidates to your organizations from this event so those needing your services can get the help they need.

We very much appreciate partnering with you! Please feel free to stay in touch with other ideas on how to reach those in need!”

### 2020-2021 Intakes



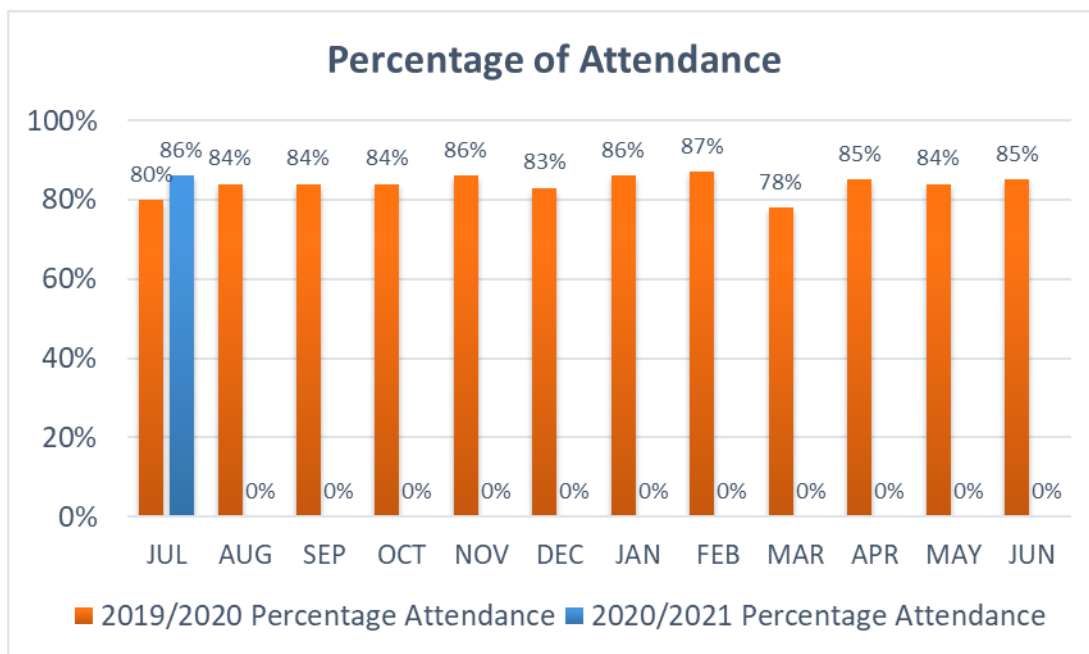
## **Payson Family Clinic & School Based Services**

### **Leadership initiatives/Successes**

Reagan Academy in Springville reached out to us to provide a contract therapist 16 hours a week for the school year. A contract has been formulated and has verbal approval to move forward. Kayelyn Robinson, LCSW was appointed to work this contract and will start August 17.

### **Number of total clients served last month:**

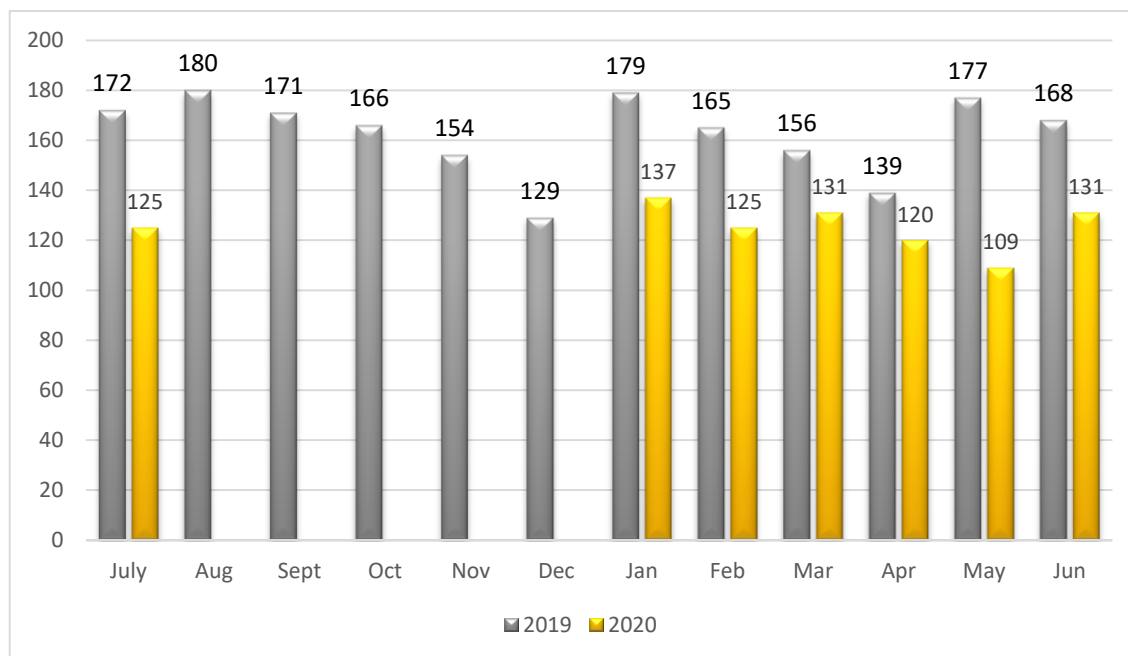
Total: 457    Adult: 277    Youth: 180



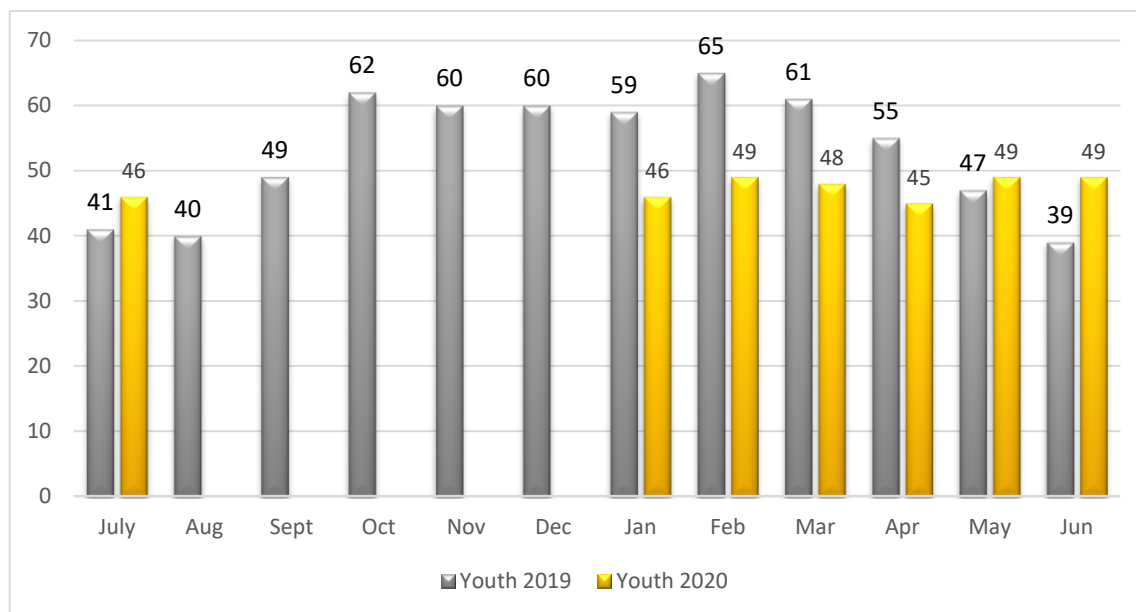
## Wasatch County Family Clinic

### July - Total Unduplicated Clients Served:

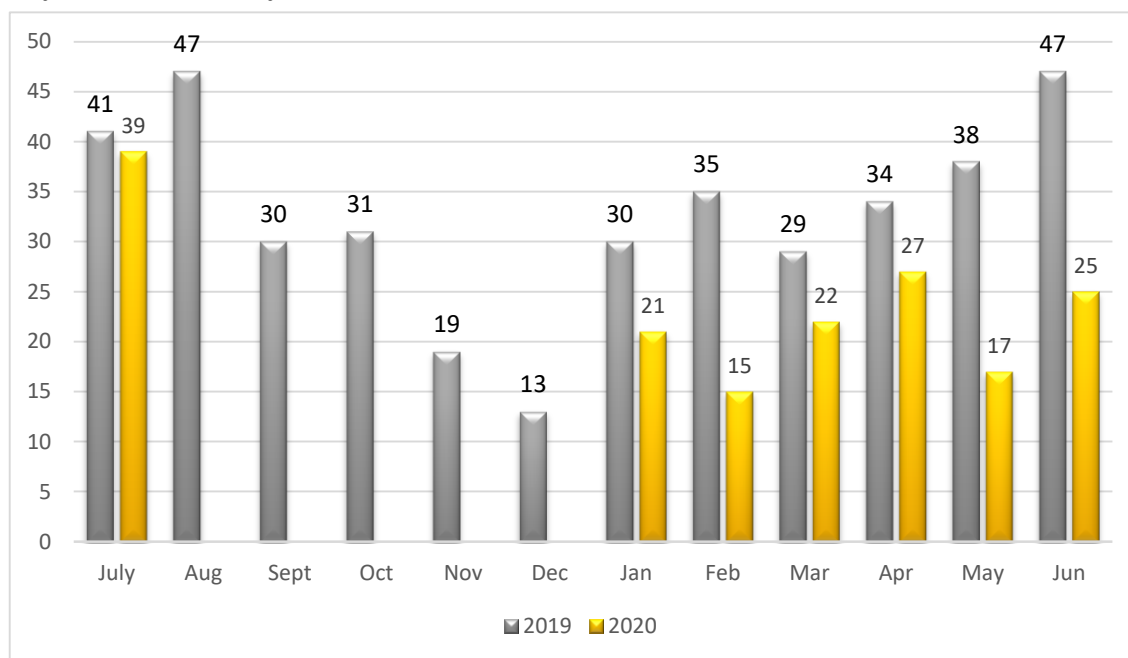
#### Adults:



#### Youth:



### July - Total Monthly Intakes: (EVL & SEVL)



### Groups at WCFC:

Gender Specific Male and Female SA groups  
Thinking Errors  
Anger Management

MRT  
Prime for Life  
SMART Recovery  
Connections

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

For the month of July we were fortunate enough to having a billboard displayed for free on Main Street with prevention messaging related to opioids. Signage was established with prescription drop off information at the Heber City Police Department and Lee's Pharmacy. In an effort to extend prevention efforts to the local schools, our Prevention Coordinator, Colleen Oshier was able to meet with the school district to discuss possibilities for the coming year. And finally, with a substantial contract award from the state, efforts are gaining substantial momentum as we partner with Summit County to establish a joint Wasatch County / Summit County Mobile Crisis Outreach team.

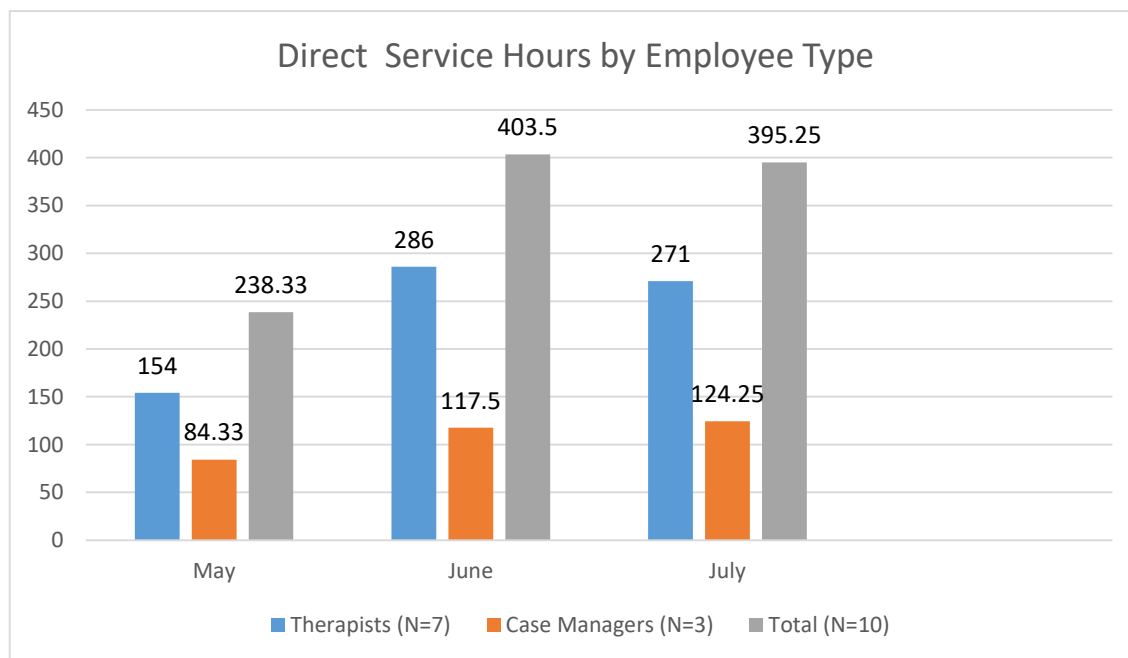
## **Substance Use Disorders (SUD) Division**

In this report you will notice several different data markers that we are analyzing and paying attention to. These data points will continue to be refined as we continue the merge of SUD and Mental Health Services. In this section we will highlight the following: 1) Urine Analysis Drug Testing 2) Day and Night Outpatient Treatment, 3) Clinical Information System and Screening (CIS) 4) Promise North and South – Women's Treatment.

### **Urine Analysis Drug Testing**

The UA Lab collected 930 specimens last month from 284 donors, with a total of 6,141 assays. Our highest number of clients came from ATR. The assay that tested positive most frequently was Methamphetamine with 35.5% testing positive.

### **Day and Night Outpatient Treatment**



### **Clinical Information System (CIS) and Screening**

88 screenings were completed in July; this was an increase of 11 screenings from the previous month. 16 screenings resulted in referrals to Residential treatment, 43 screenings to Outpatient treatment, and 29 screenings to a PRI recommendation or No Treatment. CIS also completed a 3-month (April-June 2020) summary.

Referrals	Started Tx	% Started Tx
FHR -- 32	7	22%
Outpatient -- 53	21	40%
Promise North -- 13	3	23%
Promise South -- 11	4	36%
House of Hope -- 3	2	66%
YAP -- 5	2	40%

### **Promise North and South – Women’s Treatment**

#### **GOALS:**

- Have discussion with teams about No show rates and set goals for improvement.
- Look at ways to increase productivity in clinical staff.
- Work on adding information to WBH website of the Promise programs to promote interest in SUD services with WBH.

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

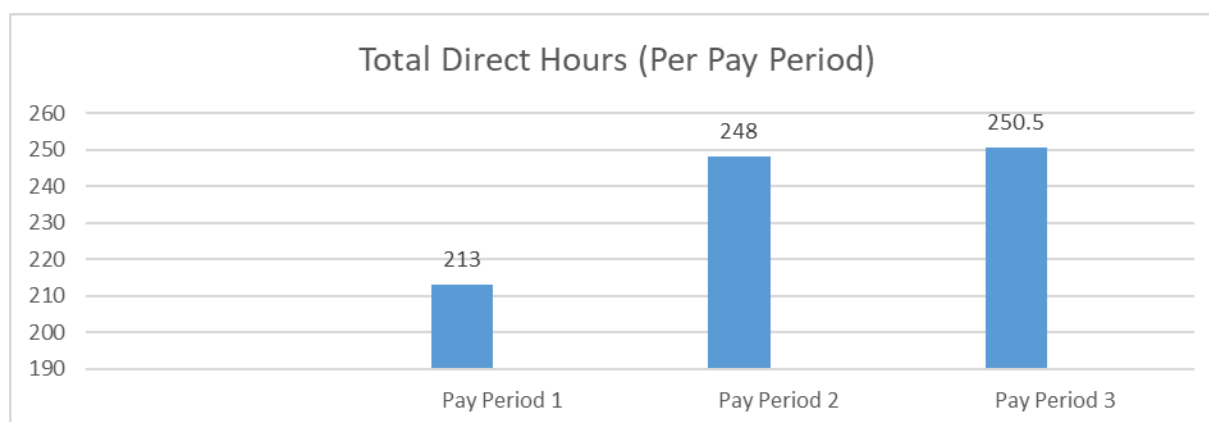
We continue to meet with sister agencies and receive feedback about what has went well and what not gone so well. We focus our efforts on how we can improve the process service to our clients and to our community. This month we met with the Project Reality, DSAMH, Building Beginnings, Utah Valley Hospital, and the

House of Hope. Feedback has been generally positive since the merger. Here are a few comments: “We can already see a difference in the responsiveness” “We got paid faster than we ever have been” “Having everyone at the table (Community Coordination Meeting) was very helpful for a client” – that has a dual diagnosis. “We are excited for this partnership” “Thanks for being willing to coordinate with our clients”

We are moving forward with hiring a Therapist Supervisors Position at WATCH, JTP, and OUT.

### **SUD-Criminal Justice Programs**

- Total billable encounters decreased slightly within Wasatch Behavioral Health’s Criminal Justice Programs. July encounters for all CJ programs was 1029 while the previous month’s total encounters was 1132. One reason for this decrease was due to an employee in UCAP transferring to Foothill Residential.
- Since the merge occurred in late June, Wasatch Behavioral Health’s new employees (former Utah County Substance Abuse employees) have had the opportunity to complete three pay periods (6 weeks total.) On their timesheets each employee is to indicate their Direct Time (billable) and Indirect Time (non-billable.) While overall productivity is lower than desired, the chart below indicates that each pay period has shown an increase of Direct Time.



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

- Monte Memmott, along with the other Substance Use Disorder program manager, Sue Leavitt, has been working to establish sober living opportunities for Wasatch Behavioral Health’s SUD clients. It has been confirmed that WBH has been awarded \$265,000 annually for the next 4 years to utilize for sober living. Several meetings have already been completed with the owners of Building Beginnings, a sober living agency with an established history and positive reputation in the community. There are current plans for Building Beginnings to purchase a home in Payson, Utah for the purpose of providing sober living opportunities for WBH clients.
- Progress has been made in July in an effort to provide the medication Vivitrol to Wasatch Behavioral Health clients who are participating in substance abuse treatment in the Utah County Jail. Vivitrol (Naltrexone) blocks the effects of opioid use which helps to prevent relapse. Historically the Utah County Jail has been resistive to providing this medication to their inmates for several reasons including cost, manpower for administrating, and not having a consistent hand-off of inmates to a treatment agency in the community. The following points are now in place:



- Utah County Jail Administration, including their Medical Director and Health Service Administrator, have agreed to allow Vivitrol. They have even offered their nursing staff to administer the injection.
- Candidates for a Vivitrol injection would be Wasatch Behavioral Health clients who are currently incarcerated and are participating in Drug Court, UCAP, or the OUT program when they are about to be released from jail.
- The candidate receiving the Vivitrol injection would need to have a follow up plan with Wasatch Behavioral Health's Substance Use Division and an appointment to see their Medication Assisted Treatment (MAT) prescriber.
- Monte Memmott has been meeting with the pharmaceutical company that makes Vivitrol, Alkermes, who will be providing Vivitrol at no cost.

### **Challenges**

While there has been a lot of growth and adapting for our employees and programs in the Substance Use Division of Wasatch Behavioral Health, challenges big and small remain a constant. Struggles continue with little things like learning WBH's timesheet system and determining what constitutes a billable service. Bigger challenges also remain such as changing the culture of service (offering services to anyone who walks through the agency's door rather than screen out). Each month progress is being made towards overcoming the growing pains of the merge.

### **Successes**

A therapist in SUD services wrote of a recent success he had:

"One of our clients was able to reach financial and housing independence after years of difficulty in this problem, and all that amidst chronic pain, borderline personality, and sleeping issues. I am very proud of her. She has since completed treatment with us."

### **Summary/Updates of Programs**

**UCAP:** UCAP (Utah County Alternative Probation) is a partnership program where Wasatch Behavioral Health provides mental health and substance abuse treatment, while the Utah County Sheriff's Office provides probation officers.

The UCAP program has been decreasing its caseload since COVID due to the courts being largely shut down and not referring clients. UCAP has one full time and one part time case manager who have been feeling the pressure of not having enough to do. The part time case manager suggested she could move to Foothill where she has worked in the past. After considering this, it was decided to move the part time staff to Foothill where she will be busier and consequently the full time UCAP case manager will also have a busier caseload. The part time position will remain with UCAP to be filled when caseloads increase.

**OUT Program:** The OUT (On Unit drug Treatment) program has been providing substance use treatment in the Utah County Jail for many years. They have a 90-day substance abuse program that provides treatment in jail including group and individual therapy, as well as case management. Staff include two therapists and two case managers. They also have an administrative assistance position, however that position has been not been filled for several months.

The OUT program did not operate in the jail during the month of July due to the jail not allowing programs to work because of COVID restrictions. There are active plans at this time to restart OUT program activities in the month of August. For several months the OUT staff have worked in other SUD locations including Foothill, Promise North and Day/Night treatment.

**PATR:** PATR (Parolee Access to Recovery) is a program to assist people who have been released from prison recently to transition back into the community. PATR has two full time case managers and they work closely with two full time peer support specialists to provide both substance abuse treatment as well as community resources and support.

PATR may be the exception to the rule of lower client numbers during COVID because they continue to get referrals from individual recently released from prison. Currently PATR staff have a caseload of more than 200 clients that they see every 1-3 weeks.

**Peer Support Services:** Substance Use Disorder's Criminal Justice Program has two full time peer support specialists who can work wherever they are needed within the program. They have offices at the Health and Justice Building where they run a weekly orientation group, however they are often at Foothill and the Promise program offering "their story" of recovery to clients. They also offer on-call services on the weekends and evenings in case hospitals call needing support to patients who may be struggling with their recovery.

**Drug Courts:** Wasatch Behavioral Health participates in two adult drug courts, Felony Drug Court and Probation Drug Court. Each Drug Court has a case manager who tracks and monitors these clients as well as writes court letters weekly.

Currently there are 40+ clients participating in the two courts, with the capacity to serve about 60 clients. COVID has slowed the court system and the referral process down, however the case managers are still working hard to screen potential clients who are incarcerated or residing at Foothill. Judge Taylor and Judge Eldridge hold drug court every other Friday via Webex tele-conferencing and the case managers and program manager attend those courts as well to offer assistance and support.

**Sober Living:** July was an exciting month filled with researching and coordinating regarding sober living opportunities for Wasatch Behavioral Health's SUD clients. It had been reported that in FY2020, ADDAPT had been awarded \$260,000 for sober living but had not been able to spend any of those funds for that purpose. WBH will receive \$265,000 annually for the next 4 years that will be dedicated for sober living use. In the month of July, Monte Memmott along with Sue Leavitt (another SUD program manager) started conversations with Building Beginnings, a facility who offers sober living.

## **Residential SUD Services**

- This month has been a busy month. Sue Leavitt, the PM, spent a great deal of time helping Foothill staff understand the importance of having the beds at Foothill filled with appropriate referrals. They have averaged 11-14 client a day and currently at 21 client with a max of 22 clients.
- Sue is currently being trained on the 7 challenges program used in youth outpatient programs.

## **FOOTHILL RESIDENTIAL**

- Number of total unduplicated clients served last month: 21
- We are working on getting outside funding sources to pay for remodel of kitchen at foothill
- We are working on getting staff meetings down to one hour from 2 plus

**MAT/ Medical SUD services:** Number of total unduplicated clients served last month: 57

### **YOUTH OUTPATIENT TREATMENT**

Number of total unduplicated clients served last month: 25

New clients opened for services 17

- Started to provide services to Slate Canyon, Vantage Point Youth treatment staff has Started going to VP staff meeting to identify SUD clients
- Developed a referral process for in-house referrals to SUD meet with program manager to assure they all understand the process

### **YOUNG ADULT PROGRAM**

Number of total unduplicated clients served last month: 30

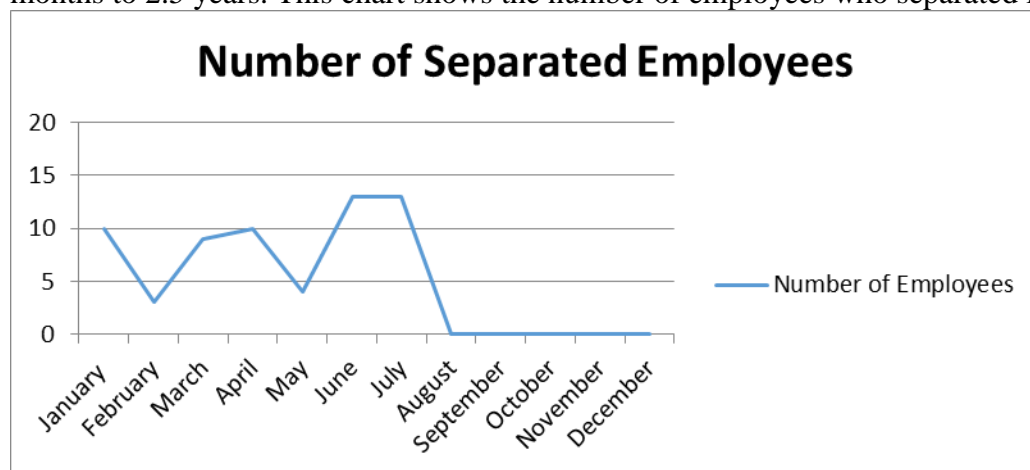
New clients opened for services 7

### **Human Resources**

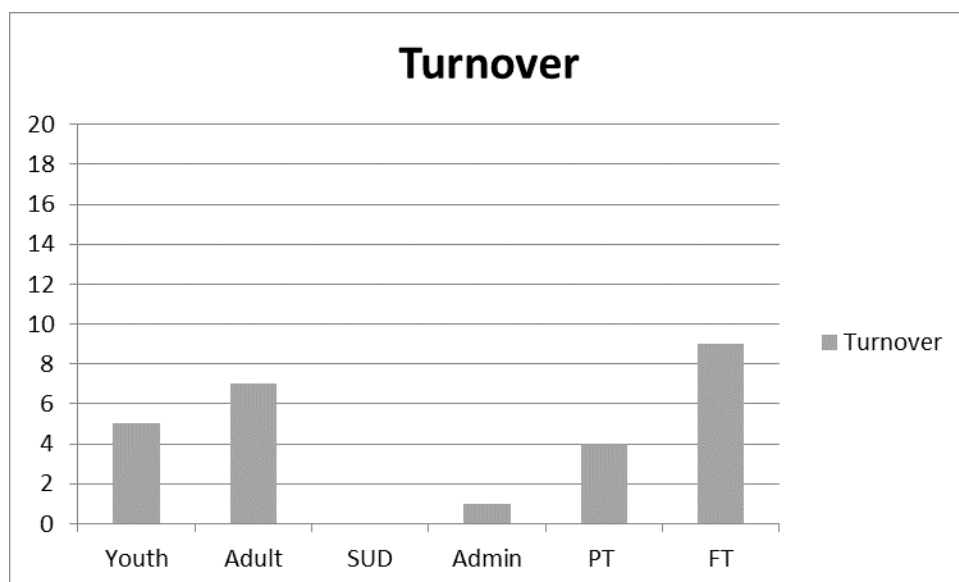
The first month in the fiscal year presented some challenges as well as some returns to “normal.” We have successfully integrated the SUD team into WBH and are now excited to move forward as one. This report will provide an overview of our staffing for the month of July, remote work hours, and FMLA usage.

#### **Employee Turnover**

In July 2020, we lost 13 employees from WBH. The average tenure for WBH employees was 14.92 months. One employee had just over 2.5 years of service with WBH. The other WBH employees’ tenure ranged from 2 months to 2.5 years. This chart shows the number of employees who separated from WBH in July.



Youth (Crisis) division lost 5 employees, only 1 of which was Full-Time. Adult (Clinical) division lost 7 Full-Time employees. 6 of these separate Full-Time employees were our Psych Interns with a one year term. Administration lost 1 Full-Time employee.



### Recruiting Data

The average rank for 8 of our 9 July New Hires was a 2.25. This is slightly above 1 due to multiple positions being hired from the same pool. The data is also incomplete as HR is still waiting on information from one supervisor. Therefore, the average rank could be closer to 1 than present data reflects. The average pay scale step for July reflects an average step of 4.78. This is slightly lower than last month because we filled several positions with candidates who fewer years of experience. We should anticipate a variance in this number from month to month since some months we will hire more entry level positions while in others we may hire more professional level positions.

	Positions Filled	Average Selection Ranking	Average Step	Average Days Posted	Average Days from Posting to Selection	Average Days from Posting to Start Date
January	16	1.71	4.43	17.16	21.92	46
February	9	2.67	3	101.67	97.33	14.3
March	18	1.13	5.83	26.23	28	44.11
April	7	1.67	6	29.86	29.86	45.29
May	6	1	3	18	21.67	45.83
June	17	1.63	5.29	18.32	21.7	42.7
July	9	2.25	4.78	20.5	20.8	37.78
August						
September						
October						
November						
December						
<b>Average</b>	11.71428571	1.72285714	4.618571429	33.10571429	34.46857143	39.43

### Remote Work

The HR office has been experimenting with remote work arrangements. We have “scaled-back” to 16 hours/week per employee starting in the month of August. We have had good success with the remote work arrangements, as our staff is able to focus on completing projects without as many in-person interruptions. We

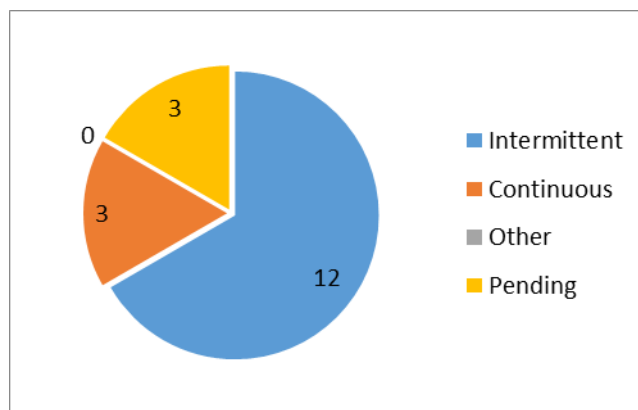
are still forwarding desk phones so each staff member is available during the day. Also, we have the practice of posting the office schedule on the main door so employees are informed of our schedules. Each morning, we hold a 10-20 minute staff meeting in order to keep our tasks and assignments straight and so we can continue to be “in touch” socially. We staggered the schedule such that at least 2 members of the department were in the office during daily regular business hours. Currently, each staff member is allowed up to 16 hours of remote work, other than the part-time staff, who do better at their work at their regular work location.

### **FMLA Leave Usage**

The graph represents employees that are currently on FMLA. The FMLA carryover from 2019 shows the number of employees that are still on FMLA from last year. Since the FMLA max is 12 weeks, the 13 individuals represented here are on intermittent leave. WBH increased one continuous FMLA leave since last month and increased one “pending” from last month.

#### **Current year FMLA as of 6/10/2020**

<b>Intermittent</b>	12
<b>Continuous</b>	3
<b>Other</b>	0
<b>Pending</b>	3
<b>Total FMLA</b>	<b>18</b>



<b>FMLA Carryover from Prior Year</b>	<b>13</b>
<b>Current STD as of 8/10/2020</b>	<b>4</b>

### **Forms & Workflow Management Solution Software**

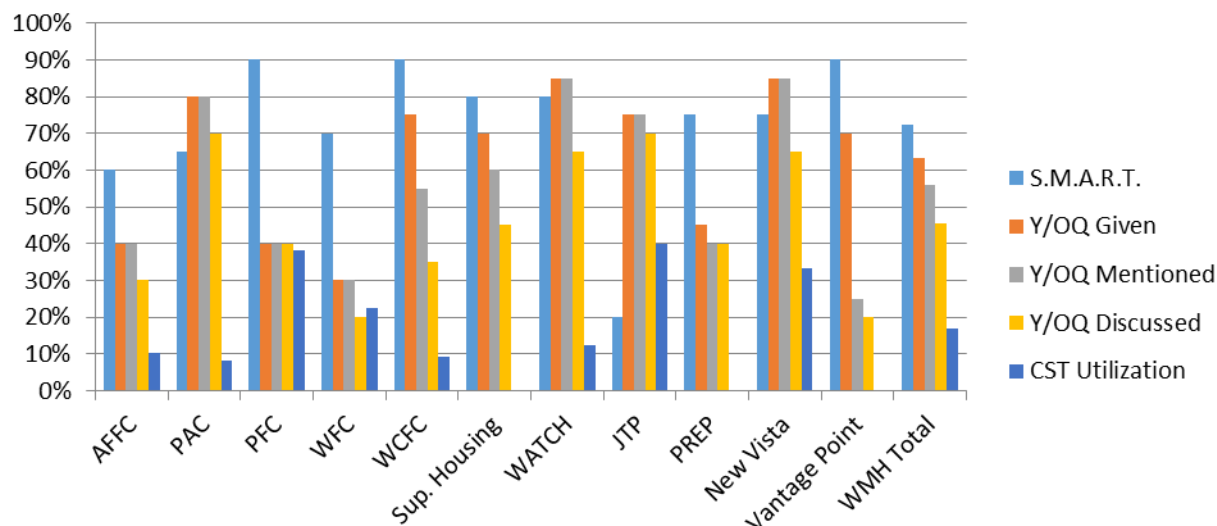
We have recommended to select DocuPhase as the solution for our automation software. We are excited for this solution since the addition of 100+ employees will require some more efficient ways to handle internal documents. A side-benefit is that we can process a lot of the clinical forms through the new system as well!

## **Clinical Performance and Compliance**

### **Y/OQ and SMART Objective Utilization**

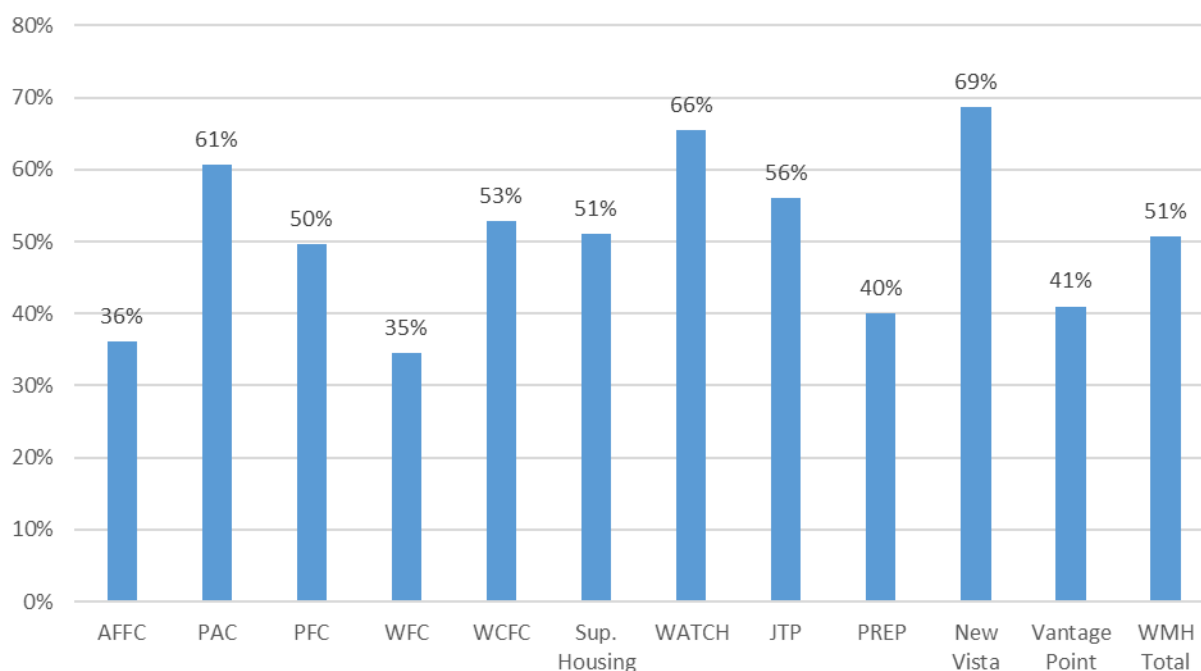
In an effort to maintain high rates of Y/OQ administration and S.M.A.R.T. objective utilization, and to increase the practices of referencing the Y/OQ in clinical notes, documenting that the instrument has been discussed with clients, and using clinical support tools when appropriate, an audit of notes for clients receiving individual therapy at WBH continues to be performed on a monthly basis. Notes from eleven departments that provide significant amounts of IT services (AFFC, JRI, New Vista, PAC, PFC, PREP, Supported Housing, Vantage Point, WATCH, WCFC, and WFC) were selected, with twenty notes from each clinic being sampled.

## July 2020 YOQ/SMART Objective Report



In the comparative data this month, most of the family clinics continued to struggle with significant reductions in the Y/OQ related metrics compared to normal levels due to difficulties administering questionnaires to clients who were seen remotely. It should be noted however, that several clinics (including PAC, PFC, WCFC, Supported Housing, and WATCH) seem to have stabilized in this regard and improved this month compared to last month. During July, Vantage Point made significant improvements on the Y/OQ related metrics compared to all previous months that have been tracked. This month, New Vista took first place in this audit (for the second month in a row) with a 69% compliance rate overall (with all five areas monitored by this audit weighted equally). While this is down from the same department's 82% performance in June, it remains well above New Vista's previous performance.

## July 2020 Total Audit Score



During the last month, agency-wide rates of Y/OQ administration (63%), the Y/OQ being mentioned in clinical notes (56%), and documentation of the YOQ being discussed with clients (45%) all continued to rebound after the significant decreases seen during April. During the same period of time, SMART objective utilization decreased to 72% after a high of 78% last month. This reduction appears to be related to the addition of new staff in a few departments that have not yet been trained in using SMART objectives. Agency wide rates of clinical support tool (CST) utilization decreased to 17% in July. This reduction is mostly an artifact of the increased level of Y/OQ administration observed during the last month, though it does highlight the need for continued emphasis on the administration and use of CSTs.

