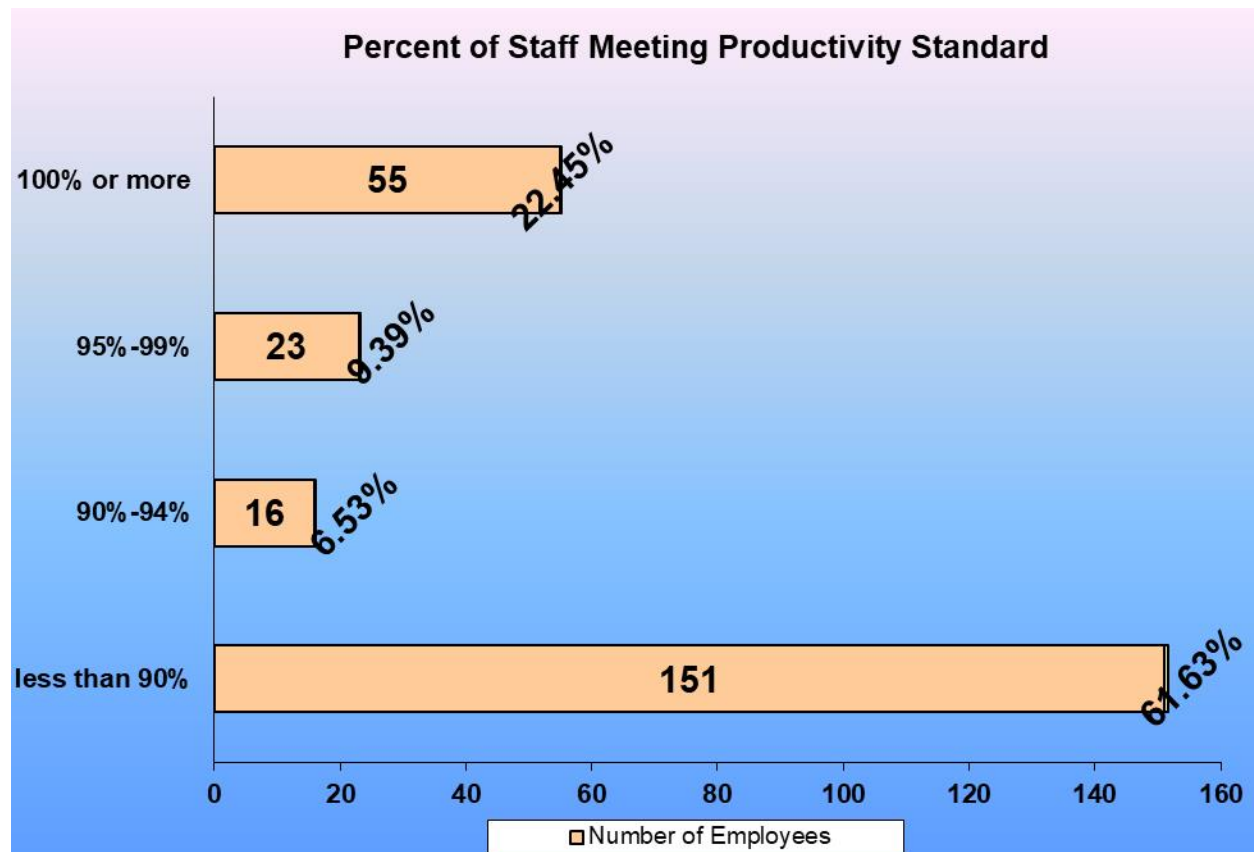


Wasatch Behavioral Health Monthly Briefing Report June 2020

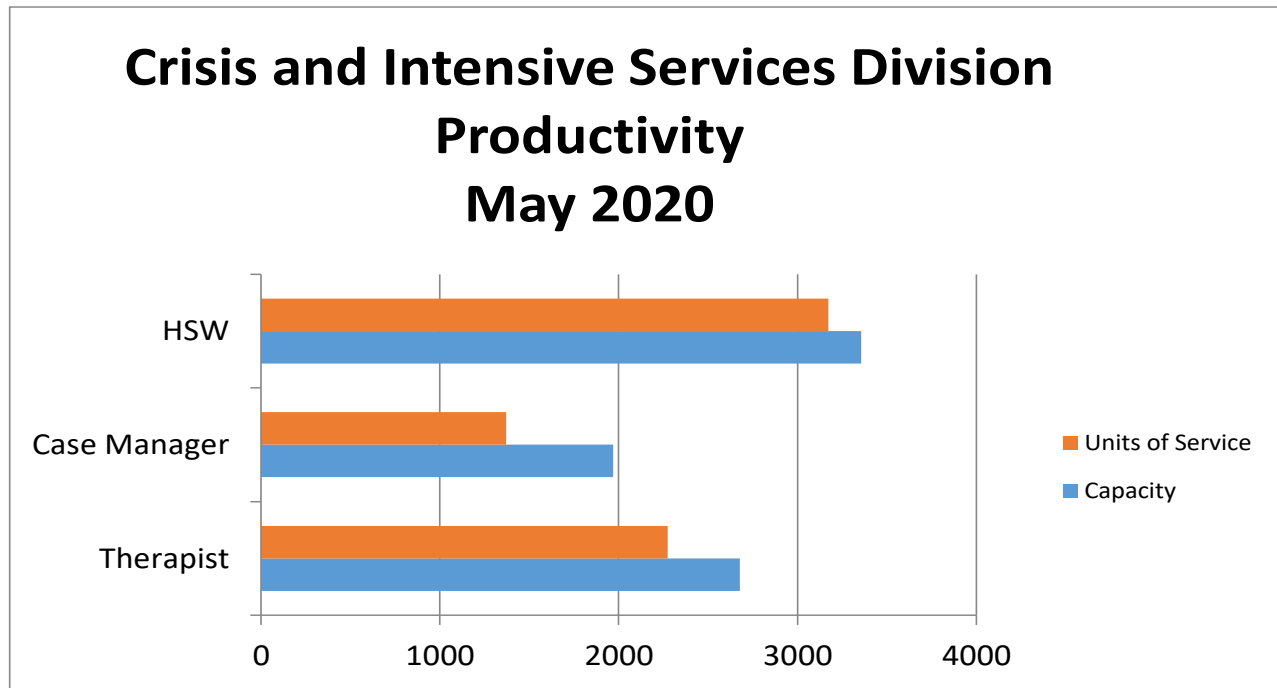
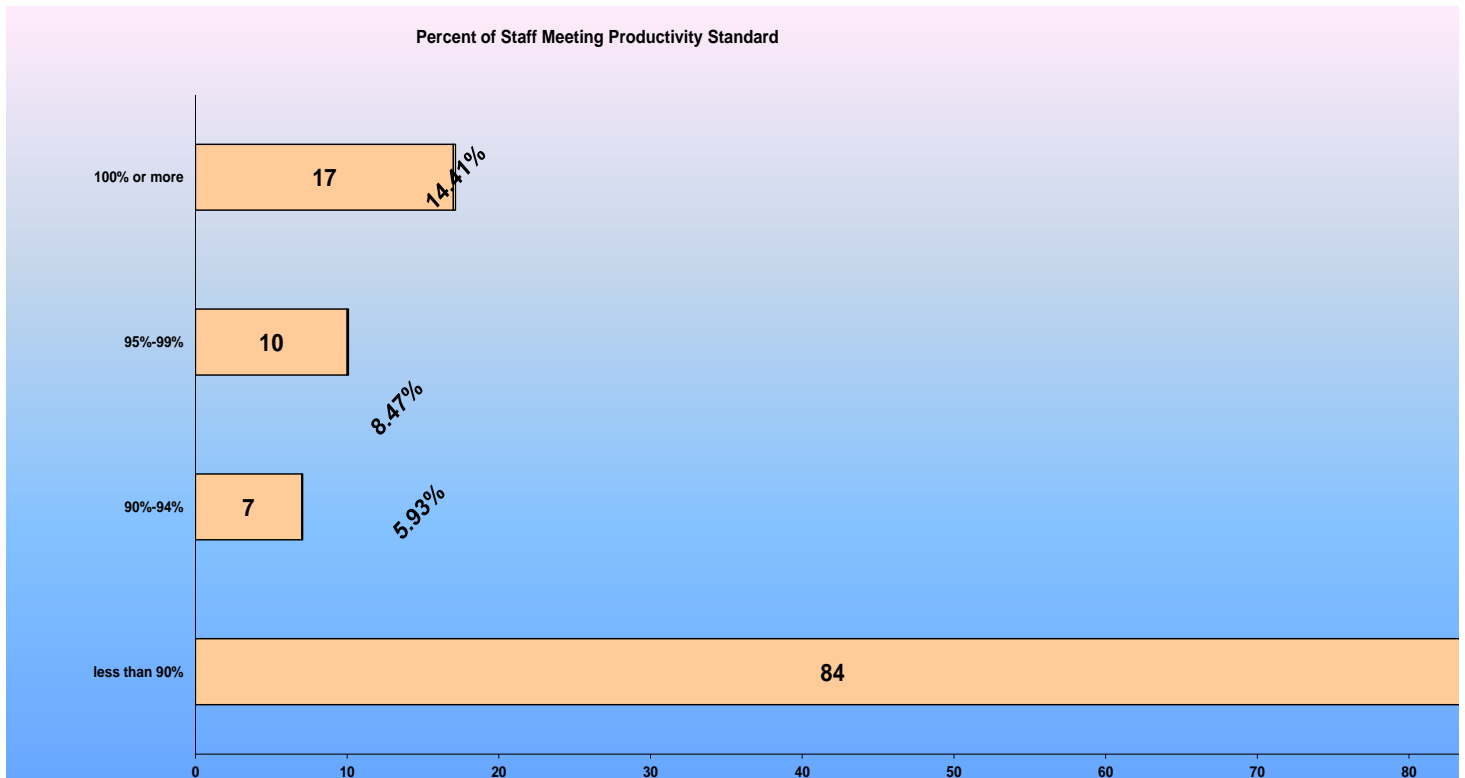
This last month, we worked on finalizing our budget process. This year, in part due to our merger with aDDAPT, we anticipate a deficit. We are still planning to reduce the operations deficit of the SUD operations significantly. The pandemic, however, has further challenged the consistency of our service delivery. This makes orienting the new staff to our service delivery expectations more challenging.

Despite the anticipated revenue shortfalls at the state level, the legislature is funding our Receiving Center and the rural MCOT teams. It is paradoxical and counterintuitive to work on developing new programs while at the same time worrying about service cut backs resulting from the pandemic. Both of these initiatives are under way. We have met with an architect on several occasions to develop plans for our ROC remodel, and we have looked at a facility that we may want to purchase to relocate our IRT.

As anticipated, the service delivery expectation level met have fallen significantly are a result of the COVID-19 challenges.



Crisis and Intensive Services Division



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 May, total therapist time is at 85% capacity. Case manager time is at 69% capacity. Human Service Worker/Autism Aide time is at 94%.

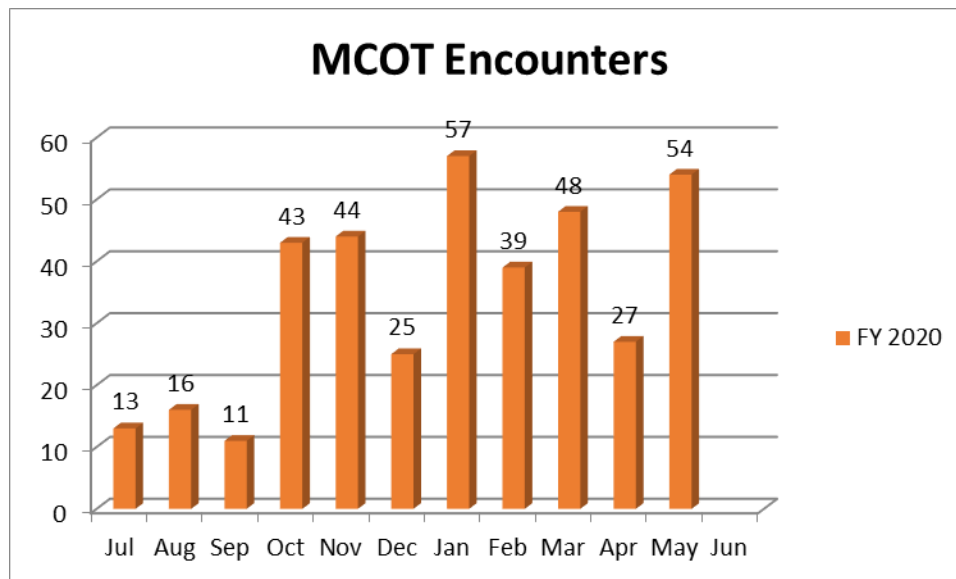
Highlights:

- We celebrated Children's Mental Health Awareness week May 4-8 with a public awareness campaign through social media encouraging children, youth and families to do something specific each day to celebrate Mental Health.
- Catherine Johnson was interviewed by Janae Moss through United Way for a Facebook post on coping with the current COVID-19 crisis and children.
- All programs in the Crisis and Intensive Services division are keeping COVID logs for staff, clients and visitors as they come into our buildings or vehicles.
- The Provo Police department expresses ongoing appreciation for the MCOT teams and their assistance and for being able to bring people to the ROC.

May Unduplicated Clients served in Family and Specialty clinics:

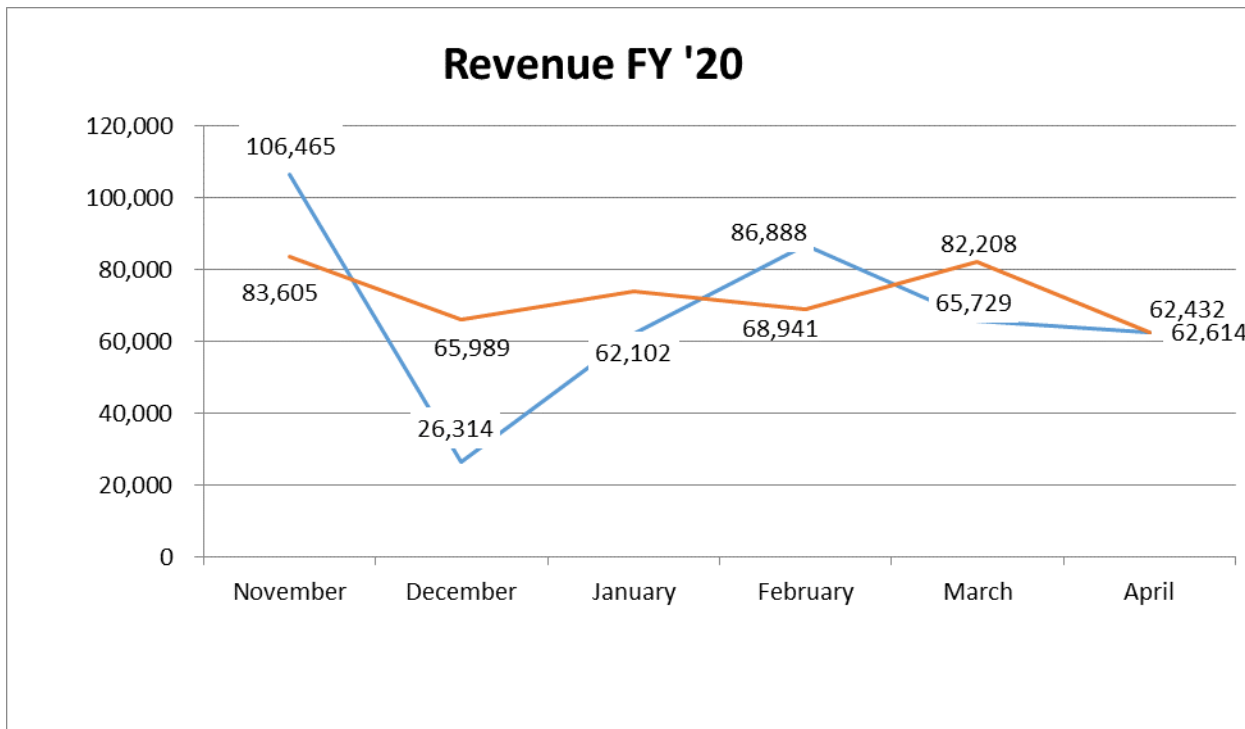
Clinic	Adults	Youth	Total
PFC	166	465	631
Payson	225	181	406
AFFC	342	370	712
WCFC	109	49	158
WFC	748	26	774
Med Services	1072	167	1239
Psych Services	97	70	167
Crisis	81	6	87

Children, Youth and Family Services was at 86% capacity for the month of May 2020.



New Vista Youth Services

APRIL REPORT: New Vista, just like all other programs, was in the middle of the COVID-19 precautions during April. Individual therapy increased, but group therapy decreased. Therapists discovered that individual therapy was much easier to administer via telehealth than group therapy. Complications were discovered using technology to administer group therapy. Thus, more individual therapy was administered. Overall units of service decreased due to the lack of availability of clients. Many staff members, however, kept busy working for other departments doing a variety of different tasks. The New Vista crew was proactive in helping where needed cleaning the Parkview building, helping in maintenance, and helping at Aspire Academy. New Vista also saw a significant increase in the amount of YOQ's administered during April, more than any other WBH program.



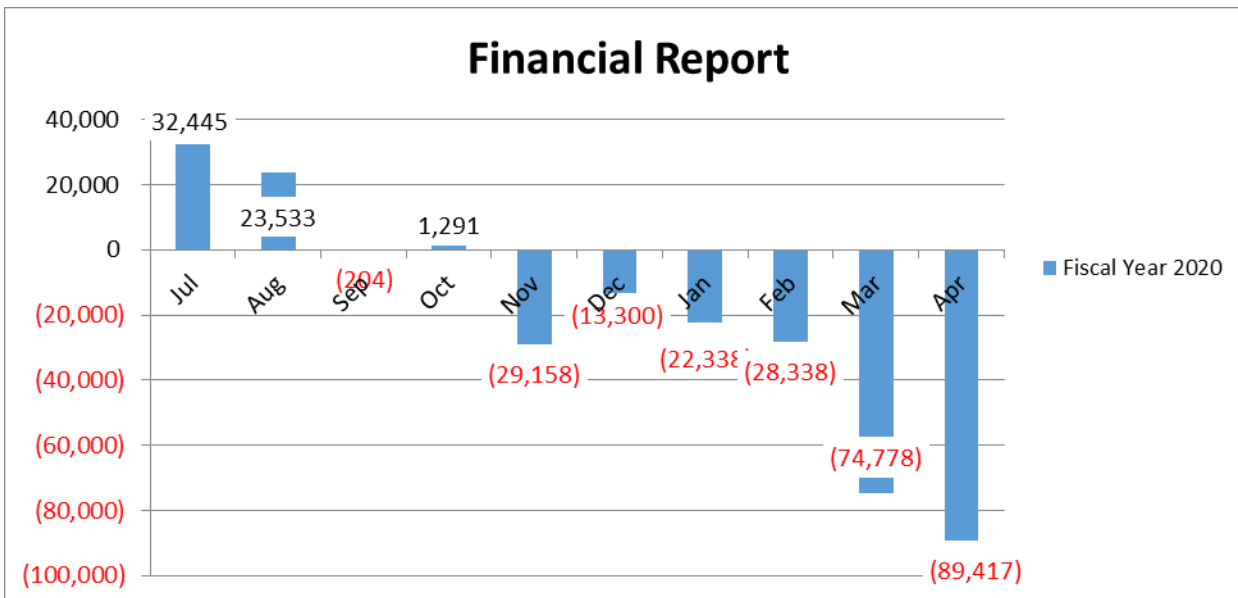
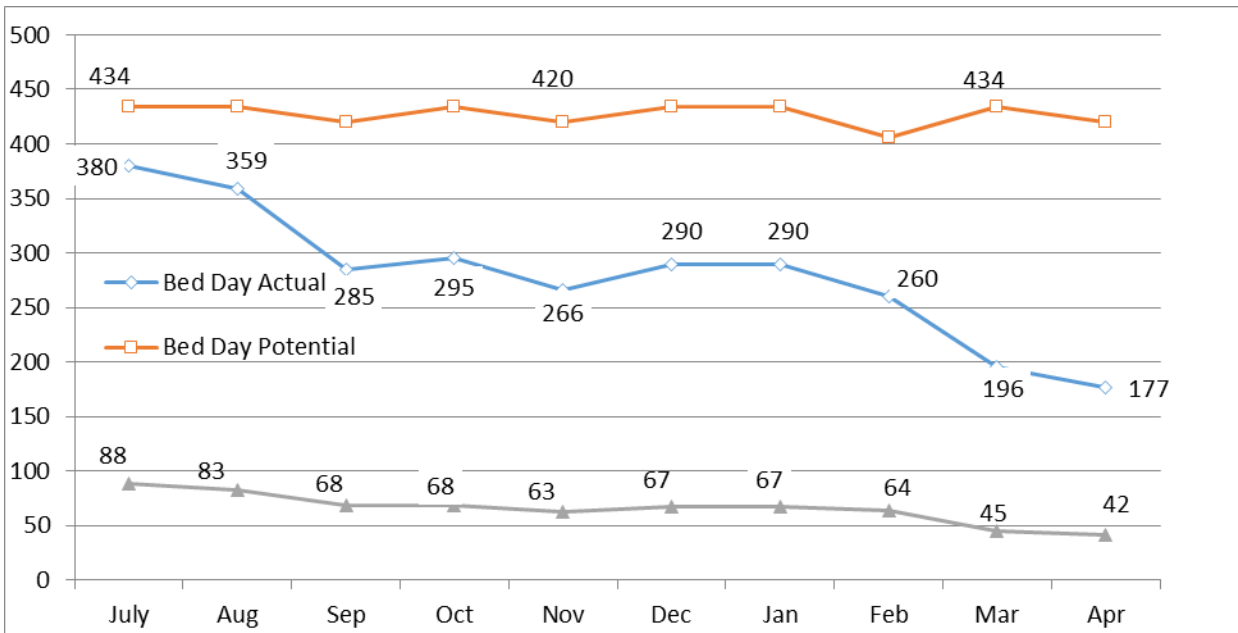
Financial Summary: During the month of April New Vista was able to bring in enough revenue to pay for personnel. This was quite a feat considering youth were not attending in person. This shows that our staff were creatively figuring out how to provide services in a distressing situation. Our overall loss was the second lowest it has been in four months.

Highlights:

- New Vista started having youth attend on site on May 4th. The New Vista program follows the recommendations of the CDC and the temperatures of the youth are taken prior to them getting into the van for transport. The staff take the masks on route and the youth put the mask on prior to getting in the transport vehicle. The youth are required to wear a mask if they cannot safely social distance. The youth attend day treatment Monday-Thursday. The rooms at PV that New Vista uses have all been taped for the desks to be 6 feet apart. We are using Zoom when necessary to conduct groups with the therapists so all youth can have the group experience as needed.
- New Vista started back with the youth still needing to complete school/school assignments. The staff provided support and assistance where needed for school. They also facilitated groups that focused on coping skills and processing skills to assist the youth in getting through daily life.
- New Vista had 1 day treatment youth that graduated from High School during this time.
- New Vista had 11 referrals and we started 1 new youth in day treatment and 6 outpatient youth. 2 youth cannot start until the first of June due to Medicaid issues.
- New Vista staff continue to work where and when they are needed. They have provided service to the Respite program with crisis.

Aspire Academy

APRIL REPORT: Census at Aspire remained low during April. Trends that started in March such as low referrals amidst COVID precautions continued into April.



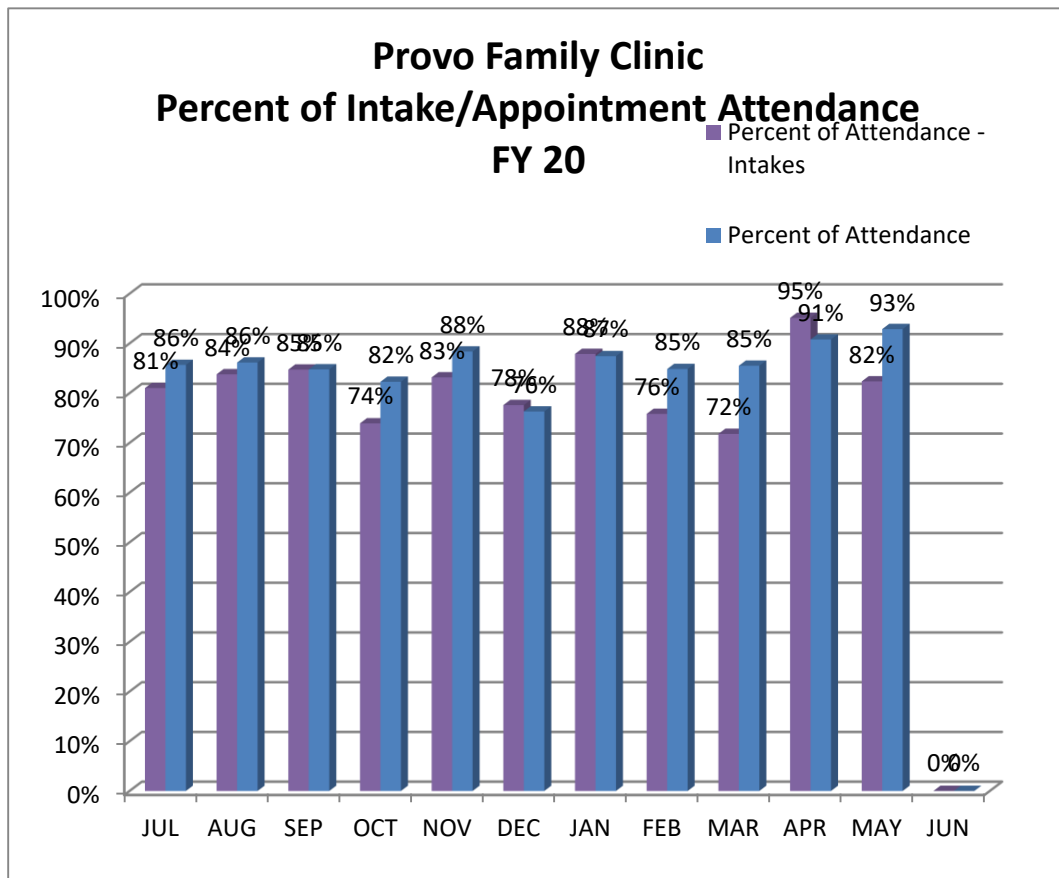
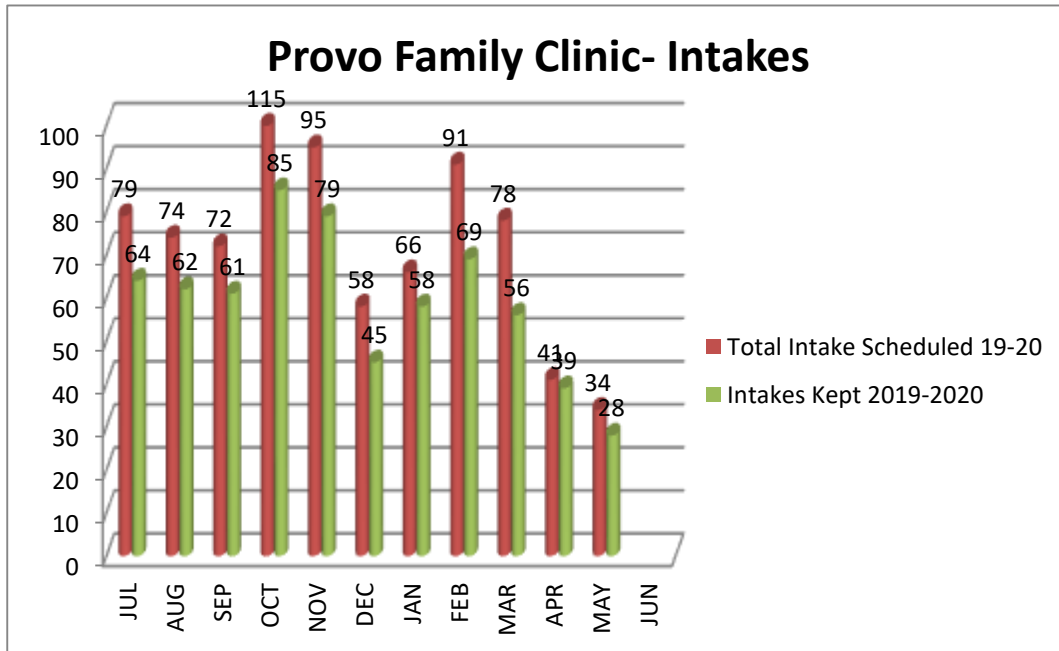
Financial Report Summary: April was a very challenging month financially for Aspire. There were three main factors that contributed to this decline. First, census continued to be low. Referrals were very slow due to COVID-19. We remained around six girls for the entire month.

Highlights:

- During April we had 6 residents at Aspire.
- In April we had 1 admission and 1 discharge. The resident who was discharged stepped back down into her home.

- During April our girls were busy with therapy. The therapists and staff focused on groups and interventions that helped the girls build up their confidence and self-esteem, helped them improve their copings, and helped them work through trauma.
- School was via Zoom during April. The girls were able to adjust well to this change. They did remarkably well with this change.

Provo Family Clinic



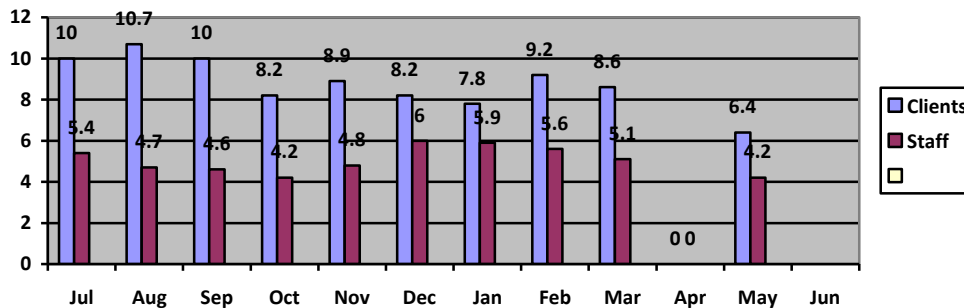
Through **April 30, 2020** PFC had a profit/(loss) of: (\$78,139)

Stride and XCEL - Partial Day Treatment Programs

Stride Program Discharges:

North County Stride: 2 graduations

Xcel Class: Monthly Avg Census



XCEL completion/discharge: 6

Total Xcel unduplicated clients served in class this month: 35

Financial Status

Through **April 30, 2020**, Stride's budget shows profit/(loss) of : (\$5,073)

Through **April 30, 2020**, XCEL's budget shows profit/(loss) of : (\$66,479)

Grand Families/Strengthening Families

Highlights:

- Staff started a Grandfamilies session on May 19. Due to the pandemic, this class is smaller than usual to allow for appropriate distancing in the classrooms. We have two families; 5 kids and 2 adults enrolled.
- Sara and Carrie conducted the annual CBCAP grant Peer Review. Participants who reviewed the program with us included a past-participant of the Grandfamilies program and a peer from the Utah County Health Department.
- Due to the pandemic, summer reading logs were emailed to all Grandfamilies households to begin tracking the time their child reads between June 1 and August 3. This was in lieu of hosting the activity in the gym. Families received links to several online sites they can use to find free books for their kids to read.
- Grandfamilies received a donation of 19 boxes of children's clothing from The Children's Store in Lehi, to be used at the Christmas shopping event in November.

Success Stories

During the CAP grant review process of the Grandfamilies program, the participating grandmother reported:

“Life was chaotic at the time I found Grandfamilies. The program was a life saver for both me and my grandson.” Client stated the therapy offered to both of them through Grandfamilies was helpful and that she does not think they would still be together if they did not have this intervention. Client stated “Grandfamilies was the only thing that was just right for me.”

GIANT Steps

Highlights & Program Updates

- Services in May were down again this month compared to May of 2019. We were able to achieve fewer telehealth services as a department compared to April, but more services overall. (Twice as many.) We also were able to have some classes begin doing face to face services at temporary locations at Wasatch Behavioral Health thanks to some interdepartmental collaboration.
- By the end of the month, most school districts allowed our program to be back into our schools, with some extra stipulations and safety precautions, which we were already mostly doing.
- Group sizes are smaller in order to comply with DHS guidelines, and because of the nature of our clientele and their unique behavior characteristics, we are running 1:1 services with our groups so we can more effectively keep rooms and equipment sanitized and help children maintain proper social distance whenever possible.

Community Involvement

- Autism Resources of Utah County group
- Social Emotional Subcommittee with DSAMH
- Critical Issues Conference planning meeting
- Adoption Subsidy Committee
- Partners for Infants and Children Committee
- Friends of Giant Steps Meeting
- DSAMH Autism Discussion Group

Billable Units of Service

Current Month – 7,363 units of service were provided to Giant Steps clients/families.

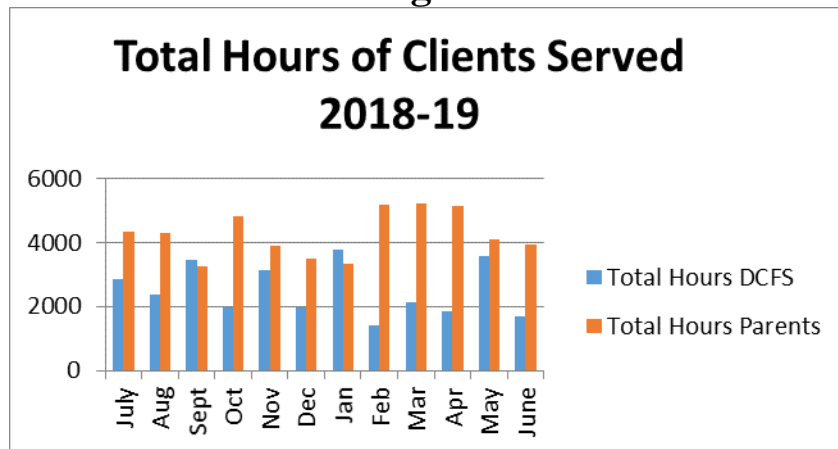
Last Year Comparison – 25,711 units of service were provided in the same month last year.

Financial Information

Fiscal Year-to-Date Income Gain (Loss)* – (\$259,262.92)

The lack of services we have been able to provide because of the pandemic has left a profound impact on our ability to provide enough services to achieve financial solvency. Now that all of our classrooms are back into our schools, we should be able to continue providing more and more services and gain more revenue. The limiting factor will be the number of children we can see at a time, which currently capped at around 6 children per class, which is half the clientele we normally serve. If school districts and DHS allow more, we will be able to provide significantly more services.

Vantage Point



Leadership/Allied Agency Participation/Initiatives/Success

- No surprise that our stats are low due to COVID-19. Since the beginning of the sheltering in place, we had to take our census to 7 and we stayed full almost the entire time. DCFS youth who were in between placements were with us until it was safe for them to be transferred so their length of stay dramatically increased.
- The last week of May, we increased our census to 12, still practicing social distancing and using face masks with staff at all times. The youth are required to wear them if they cannot maintain 6 ft. distancing. We had to make modifications in the way the beds were placed in the rooms so that we follow DHS guidelines while sleeping. All in all, we are returning back to “normal” operations.

BRIDGE

Many of our services are still mobile. Our treatment teams are still going to the clients and services are being provided in their homes. Starting in June, we will be providing more skill based services instead of just delivering basic needs like money and meds. We have a full staff now so we can focus more on that. The staff received training in IMR (Illness Management and Recovery) this month. This should help CM's and clinicians to help teach skills to clients. It's a manualized treatment and easy to teach and detail the treatment.

PREP

From Clint Peterson:

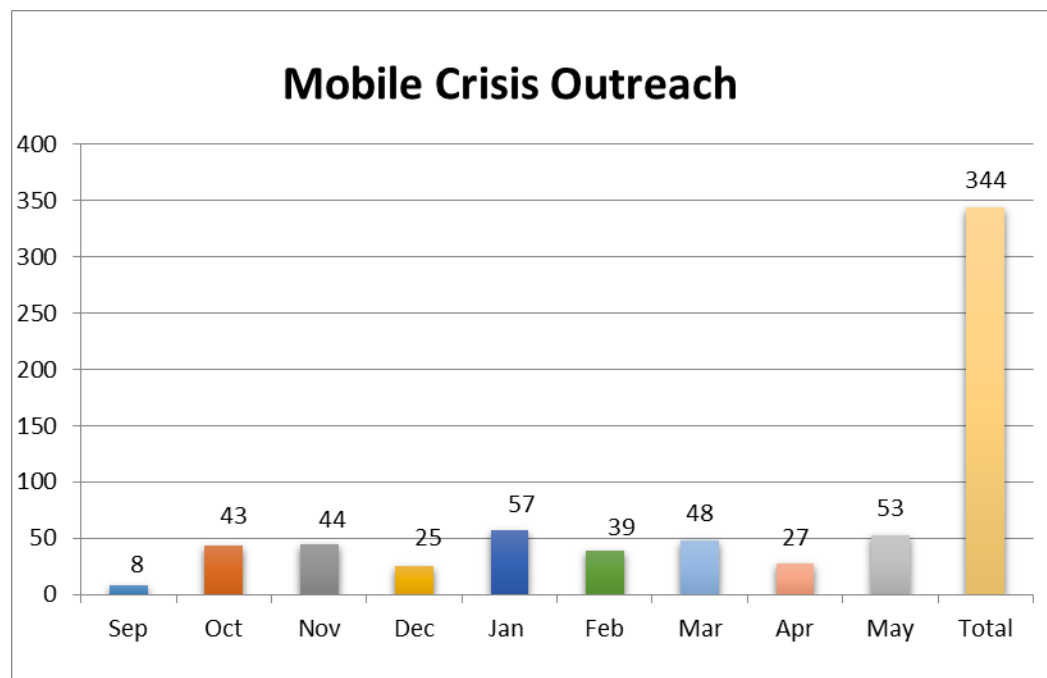
During the Zoom meeting with N and parent, shared how grateful they have been to the PREP team. N brought up that it has been almost 2 years since N's last hospitalization. He had worked some during that time. He has less behavioral issues at home. He is working towards independence and is now on disability. N mentioned a previous conversation where we had challenged her to allow him to have some increased independence, even if it meant he might fail, and how positive it has been to have that paradigm shift. I fully credit the great work of the PREP team, having the supportive services provided here, along with the nursing staff that has helped keep him up to date on his injection and Clozapine. It is so nice to hear the positive feedback and wanted you all to share in that. Great work!

Program Overview			
	PREP	CHR	
Total # of clients:	37	19	
Adults (over 18)	34	5	
Adolescent clients (16-18 yo)	3	9	
Youth Clients (under 16)	0	5	
Funding sources:			
PCN/None	3	3	
Medicaid	5	9	
Medicare	1	0	
Expanded Medicaid	13	1	
Private Insurance	14	7	
Private Pay	1	0	
Involved in work	13	15	
% involved at work	35%	79%	
Involved at school	10	0	
% involved at school	27%	0%	

CRISIS SERVICES

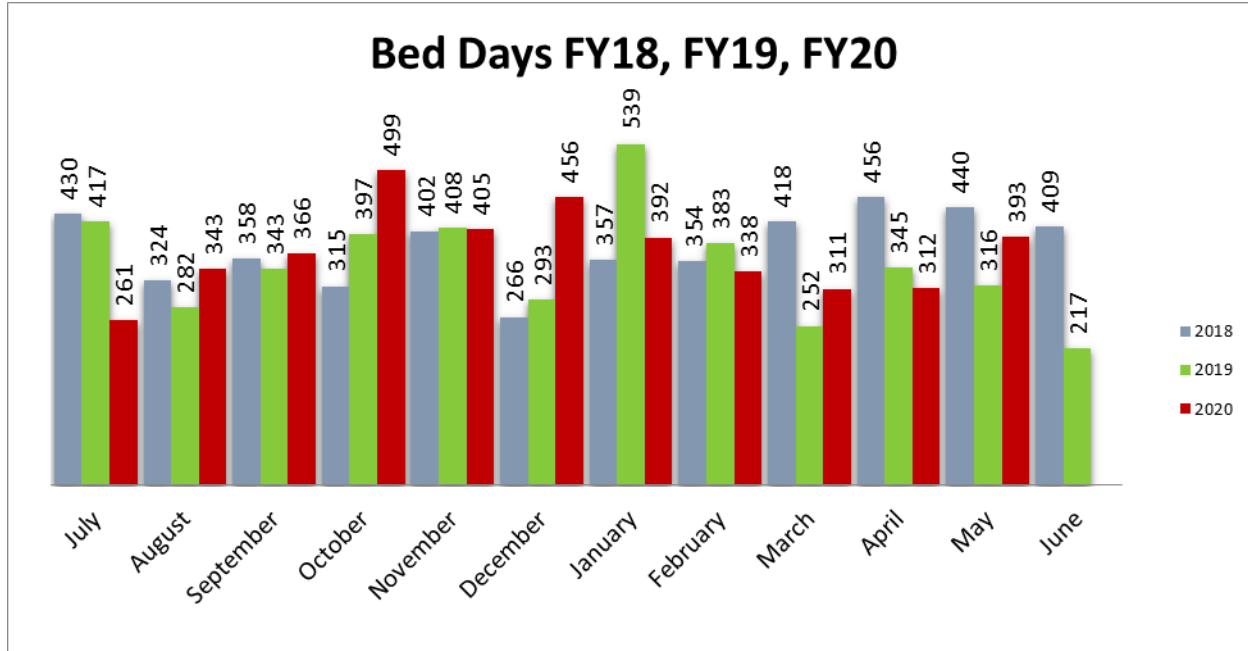
The following graph represents Mobile Crisis Outreach's the team has done since September 2019.

Mobile Crisis Outreaches in May: 53, Since starting the MCOT grant, May was the second highest number of MCOT's in a month our team has had!



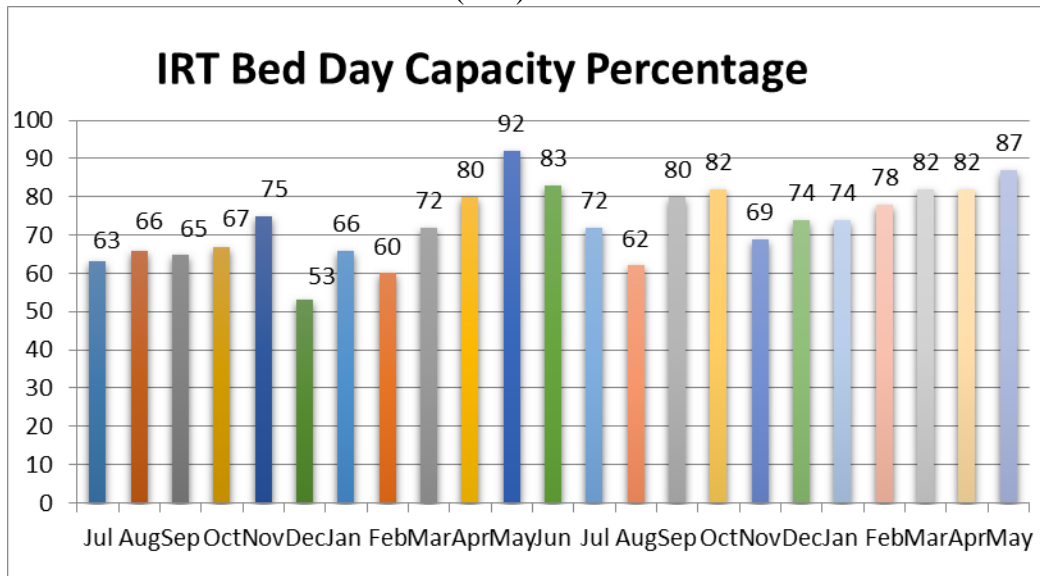
Inpatient Psychiatry

The following graph illustrates the total number of inpatient psychiatric bed days used for WMH clients during each month of the last two fiscal years and FY 2020. These bed days are accrued for all inpatient interests involving various WMH clients. WMH will not necessarily be the Medicaid payer; however we are accruing the worst case scenario.



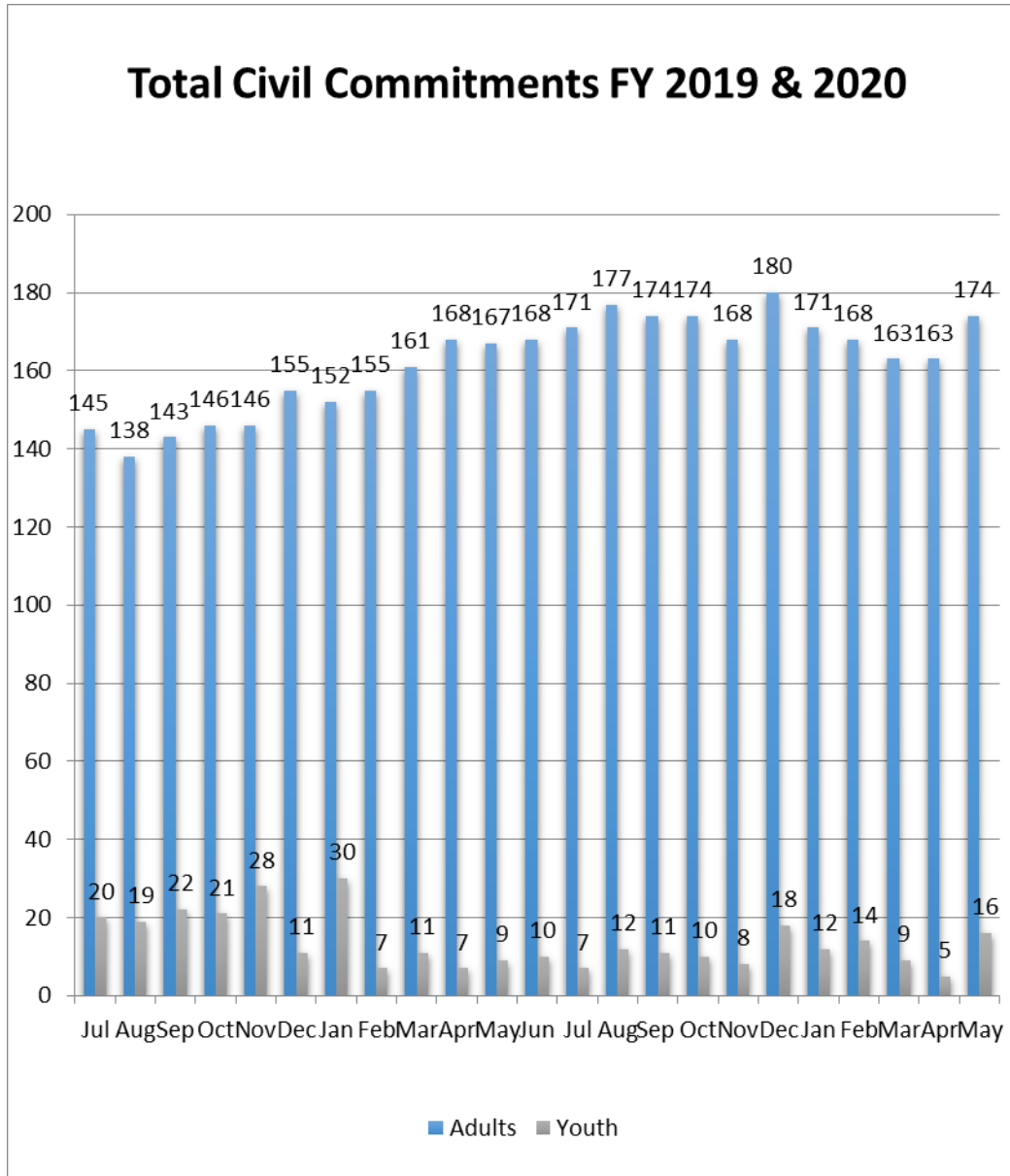
Intensive Residential Treatment

IRT - The following graph illustrates the bed day capacity percentages from FY19 to FY20 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. There does not appear to have been a clear tracking and reporting method to the number of total civil commitments for youth and adult individuals before now. The following graph illustrates the total number of youth and adult involuntary civil commitments to Wasatch Mental Health for each month in FY19 & FY20.



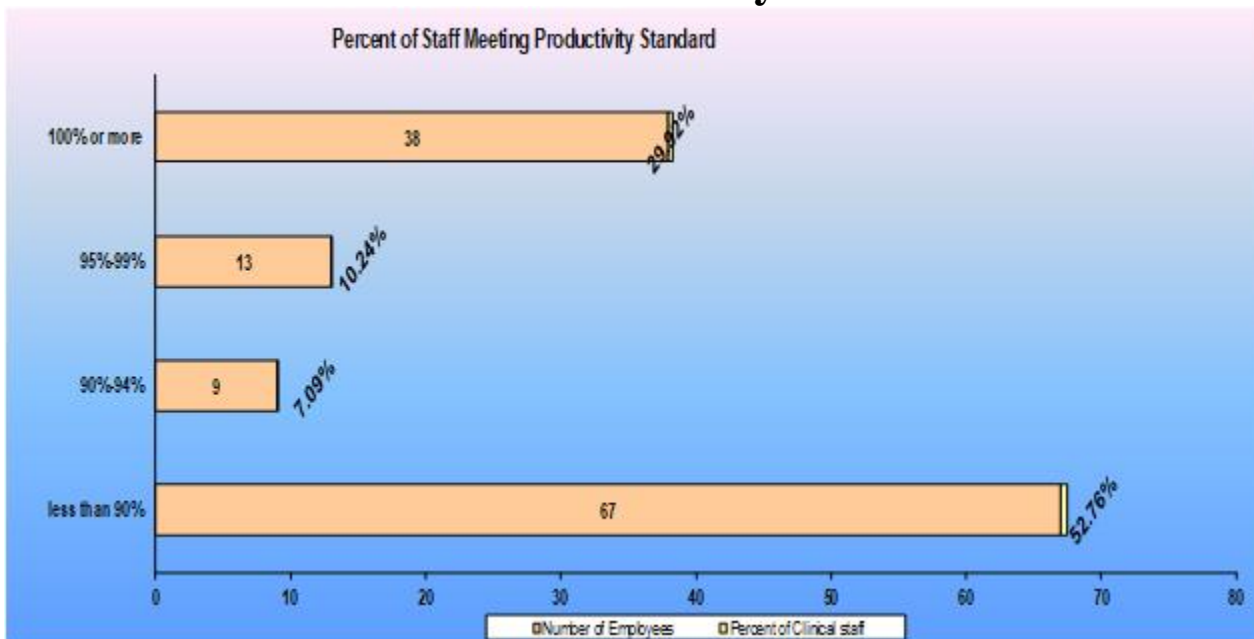
Success Story

- With increasing tensions surrounding police and tactics used by law enforcement, our MCOT team was able to continue strong collaborative success throughout multiple police departments in the county. American Fork Police Dept. has some very stringent policies regarding civil pick up orders and not getting involved in non-emergent cases. MCOT was able to navigate various aspects of red tape, still

follow the law and codes of ethics, to get a 71 year old homeless man with altered cognition into an inpatient setting without harm to police or the patient. Police appear to be visibly weary and on edge. MCOT has had several positive interactions with county police departments that I sincerely wish could be advertised to showcase what health Community Oriented Policing looks like.

- CY-FAST has been running a Trauma-Focused DBT group for the past 4 years. During COVID-19 precautions, WBH was able to reach more clients than before in their own homes using telehealth services. Taking advantage of the opportunity to provide more intensive wrap-around services, CY-FAST has begun piloting Trauma-Focused DBT to fidelity (including diary card and skills check-in via telehealth). Parents give rave reviews about this group and its effectiveness with their children who participate.

Clinical & Community Services Division



OQ/YOQ Administration

Number of total unduplicated clients served last month:

Adult Clients Served	2593
Child/Youth Clients Served	1306
Total	3899

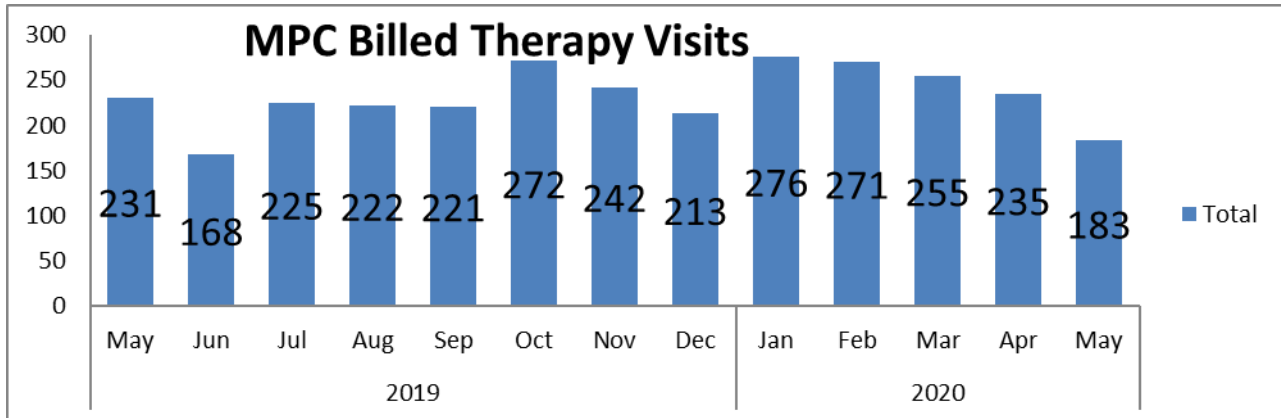
Number of OQ/ YOQs administered:

Clinical & Community Services Division	1187
Crisis & Intensive Services Division	349

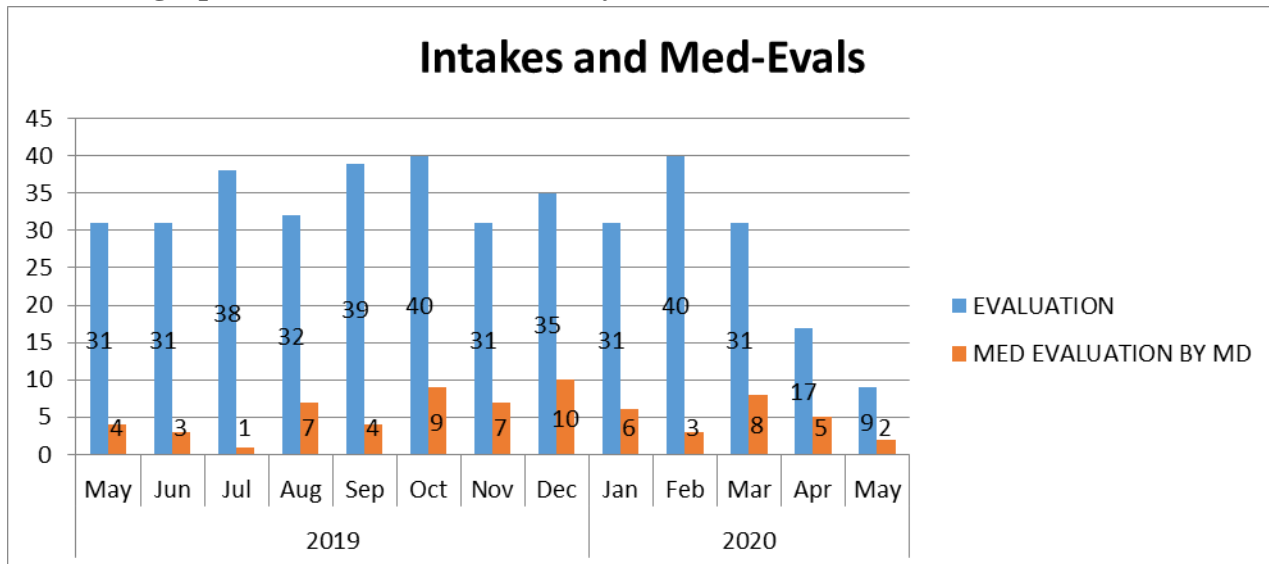
Unduplicated Count of All Clients Served at WMH 3899

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

Our intakes were down significantly for the month of May, compared to April they are down by about 47%. Compared to February, 3 months ago before the Pandemic really took hold, we are down 73% for intakes. There seems to be a clear relationship to the pandemic as many clients don't really want tele-health services and they also do not want to meet in person. Our total number of sessions didn't drop at the same rate, however, it was down from 235 to 183 or about 23% drop. These numbers are alarming, but not unexpected. We know this does affect the bottom line in regards to revenue.

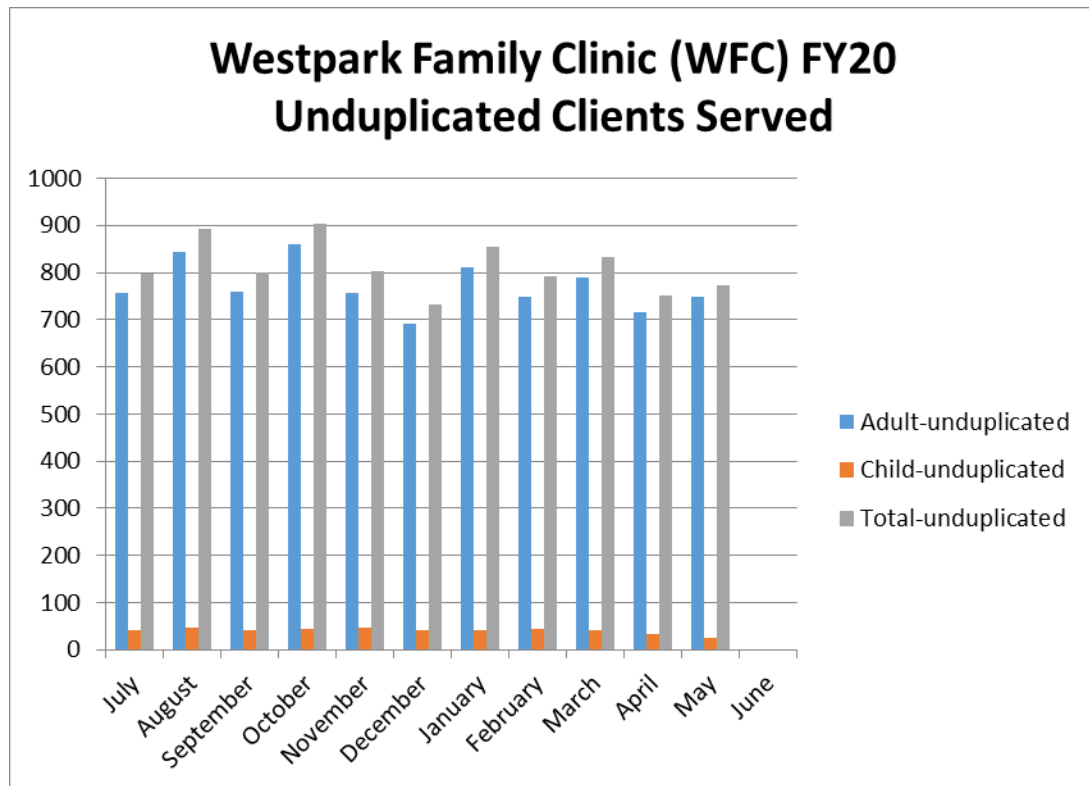
Westpark Family Clinic

- In May 2020, PASRR staff completed 59 PASRRs for generated revenue of \$20,706.
- PASRR staff continues to provide IDRC PASRR evaluations for individuals who have intellectual disabilities. In May 2020, PASRR staff completed 10 IDRC PASRRs for generated revenue of \$2308.25.
- 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 84.61 and current scores of 74.1, showing mean improvement of 10.51 points. Of these clients, 43% currently show improvement on the OQ-45 with 43% and 14% showing no reliable change and deterioration respectively.
- During the last quarter, beginning with the pay period starting on 3/1/2020 and ending with the pay period ending 5/23/2020, WFC staff (420) productivity standards achieved a total of 4785.78 productivity hours, which equates to 89.7% of the department's cumulative productivity standard. Total productivity hours month over month decreased 5.19% while total productivity percentage decreased by 3.65%.
- During the same period of time, RPS staff with productivity standards achieved a total of 760.37 productive hours, which equates to 99% of the department's cumulative productivity standard. This is a 13.17% decrease in total productivity hours compared to last month. Overall productivity percentage increased approximately 9.17% for the department.

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

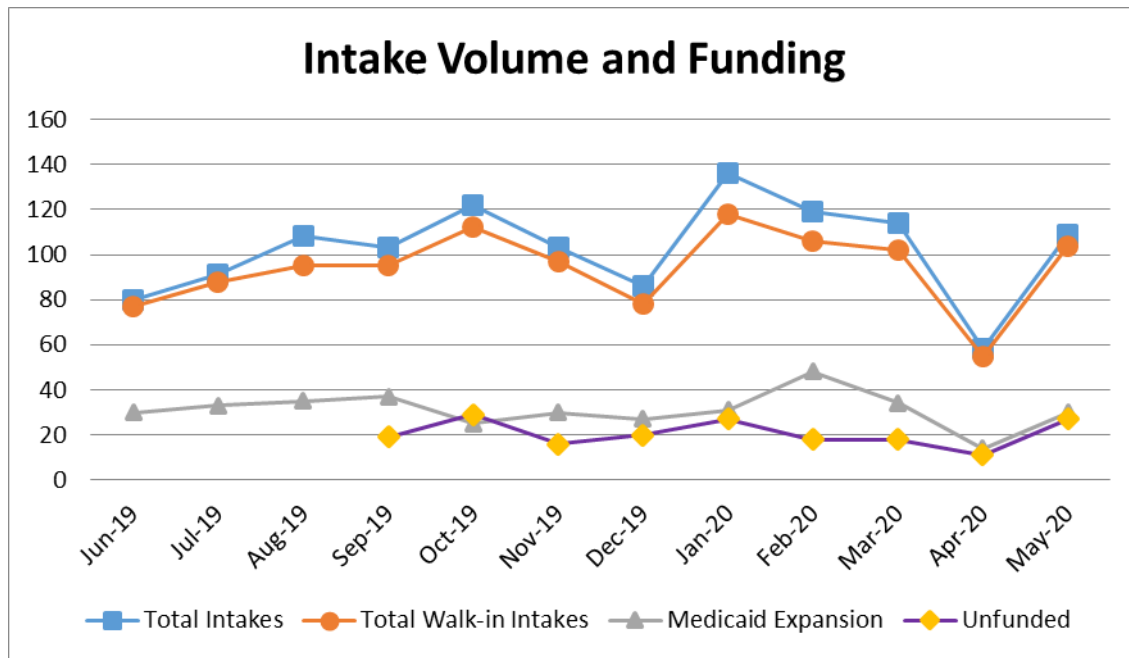
Mental Health Courts in Utah County:	Number in the program:	Graduates:	New Clients Accepted:	Clients who dropped out or removed from program:
4 th District Court:	26	1	0	0
Provo Justice Court:	4	0	0	0
Orem Justice Court:	2	0	0	0

In an effort to track unduplicated clients served in WFC, a report has been created to track this information. The graph below reflects the number of adult, child, and total number of unduplicated clients served in WFC starting July of FY2020.



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.

During the last month, WFC completed a total of 109 new intake assessments: 104 walk-in intakes, 0 nursing home intakes, and 5 DV/MHC. These were completed by 11 therapists/interns. Total intake volume increased by 87.93% compared to April. Of the 104 walk-ins, 77 reported having Medicaid of which 30 or 38.96% had Medicaid Expansion. The average amount of clients with Medicaid expansion last month was similar to the past 12 months (39.70%). With the addition of the grants available for client use, 27 or 25.96% were unfunded at the time of intake and were expected to be able to use one of the grants available for services. Intake volume appears to be consistent of averages prior to the COVID 19 shutdown. With the resumption of work in our state, intake volume has returned to its previous normal and we project another month of 100+ intakes for the month of June.



Medical Department

- Medical services will be expanding wellness coordination in the Westpark and Payson Family Clinics. In order to accommodate our extended prescriber hours and limited office space, we may transition one or more wellness coordinators to a 4 day workweek. Medical services will be interviewing for this position in mid-June. We will also be welcoming Lisa O'Donnal, APRN in the very near future.

Psychological Testing/Interns/Form 20m

- PAS has largely resumed in-person services for psychological testing. May has been devoted to preparations for the next internship cohort and to helping our current cohort wrap up their academic year. Our incoming resident, Scott Curry, is tasked with finalizing his dissertation prior to beginning his residency in August. Finally, PAS has said goodbye to Dr. Seabridge this month. We already have a psychologist position and a resident posted and will not immediately be posting this third position.

Outside Providers/Mountainlands

Mountainlands was open 16.5 days in May 2020

%Appointments Kept---70.5%

%Appointments Canceled---19.5%

%Appointments Failed---10%

%Appointments Kept Follow-up's---97%

%Appointments Kept New Clients----3%

Summary:

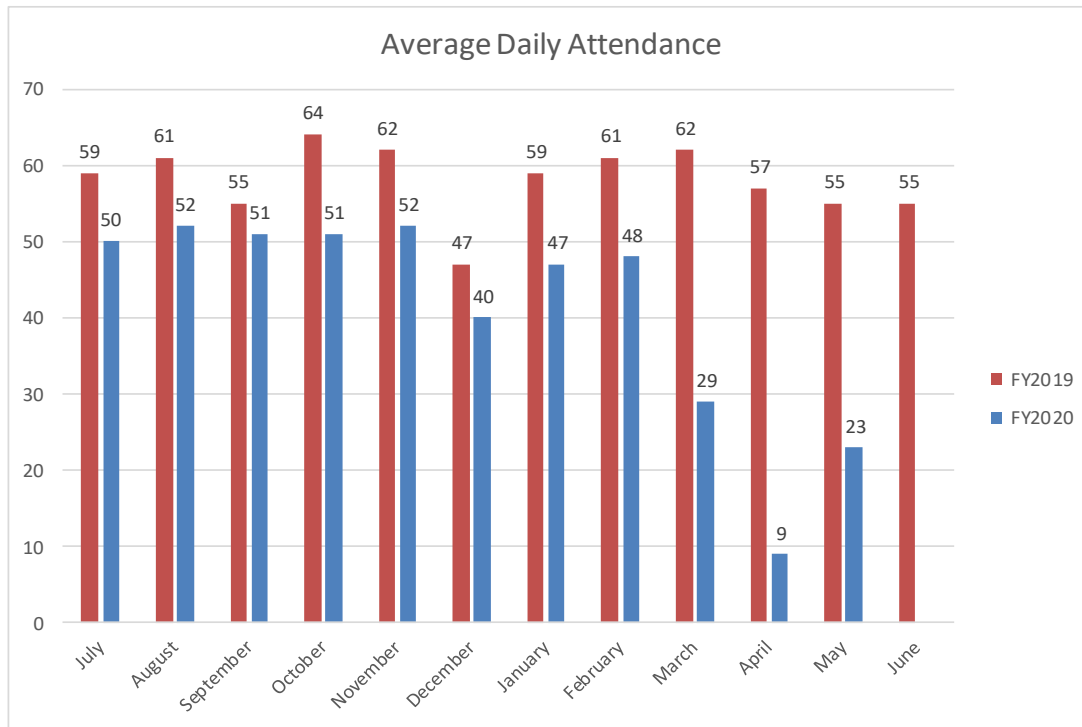
May definitely saw an increase over April's numbers, although we have not returned to pre-COVID-19 numbers. We saw a 38% increase in the number of appointments scheduled per day over April 2020 and a 52% increase in the number of appointment kept per day. As compared to May 2019 we actually had an increase of 15% in the number of appointments scheduled per day, but a 12% decrease in the number of kept appointments. Failed appointments dropped to 10% from 17.5% in April. We continue with very few new clients as only 2

were seen in the month of May. It should be noted that Mountainlands started doing telehealth towards the end of April, increasing opportunities for patients to access medical care.

Care Team Services

- Care team services has been running along while taking on the additional task of doing COVID screening at the front desk with the help of HSWs from another division and from Mountainlands MAs. Thus far, screening has run relatively smoothly and the front desk has been able to manage this extra work because we still have fewer than usual clients attending in-person services. As we begin resuming ‘normal’ operations, this may get unsustainable if it remains a DHS requirement.

Wasatch House



Leadership/Allied Agency Participation/Initiatives/Success

This past month, Clubhouse re-opened for the regular work ordered day with precautions recommended by the CDC. The kitchen began serving lunch following the protocols established by the Utah County Health Department.

Number of total unduplicated clients served last month: 88

Payson Family Clinic & School Based Services

Leadership initiatives/Successes

- PAFC is very grateful for the assistance of Wasatch House staff Michelle Asvitt and Tyler Colby over the past several weeks who have covered the CTA desk as well as performed various Wellness Coordinator tasks. This relieved a burden from our short staffed CTA's as well as the nurses.

Number of total unduplicated clients served last month: *Total: 406 Adult: 225 Youth: 181*

Groups in Payson

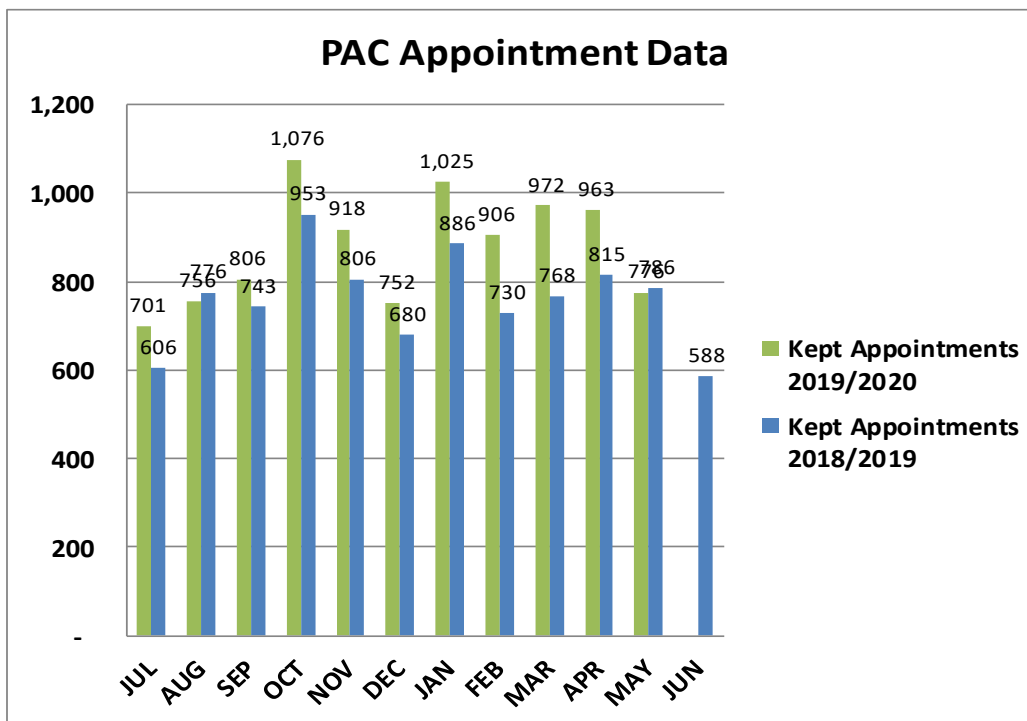
DBT

Parenting the Traumatized Child

Strengthening Families

School Based Skills groups

Seeking Safety



WATCH/JTP Programs

Unduplicated number of clients served in the WATCH/JTP Program

The WATCH program served 83 unduplicated individuals in last month. JTP served 97 unduplicated individuals as well. The two programs combined served 180 unduplicated clients

Leadership/Allied Agency Participation/Initiatives

- Monte Memmott, CMHC, as the new Program Manager for WATCH and JTP has been getting to know and coordinating with community partners during the month of May. Brent Crane of Food and Care Coalition, requested assistance for a grant application to approve the construction of an 85 unit housing facility located north of the Food and Care Coalition. A report was completed and sent to Sarah Moore

of HMIS. A semi-annual report was sent to Erika Garcia of the Housing Authority of Utah County to show that Wasatch Behavioral Health is contributing to the Shelter Plus Care voucher system.

- One specific allied agency participation experience happened in May at the Food and Care Coalition when WATCH/JTP staff, joined Food and Care Coalition and Mountainlands Clinic staff in a Sidewalk Chalk Art activity. It was a great occasion for community partners to get together in a casual way to socialize (with social distancing) and clients were able to observe the artwork as well!

Challenges

- The WATCH and JTP programs have both returned to primarily working out of agency offices rather than home setting. While grateful for the success of telehealth at the peak of the COVID-19, productivity has taken a hit and has not recovered fully since staff have returned to their offices. A portion of every weekly staff meeting has been dedicated to coming up as a department creative ways to increase interaction with clients whether by telehealth or in person.

Successes

- The WATCH client named “Jake” had made a lot of progress in the past couple years both in obtaining vital resources such as housing and Social Security benefits, but also his mental health stabilized as well. Part of this success may be attributed to the ACOT model utilized by the case manager, therapist and prescriber who all regularly met with Jake at his residence. The team was a good support to Jake’s ex-wife and his kids in assistance with closing out benefits after he passed away.
- “Sean,” a JTP client, passed away in his own apartment in May that his case manager was instrumental in helping him obtain. Sean had been booked into the Utah County Jail more than 50 times in his adult life but had not been to jail in his final year of life. His treatment team has found comfort knowing his final year of life was spent living on his own and out of jail.

Financial Report

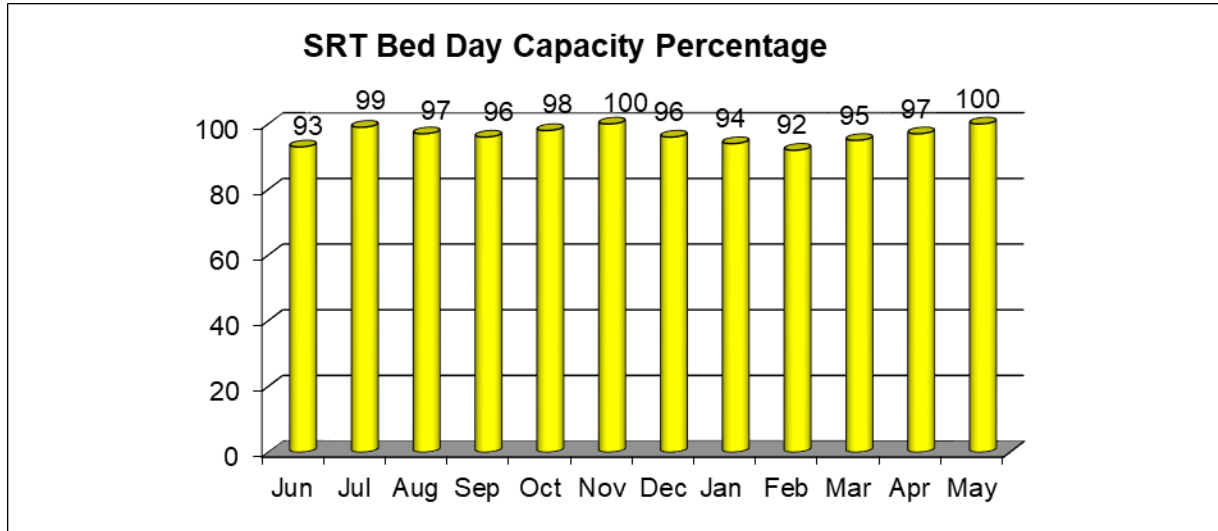
This past month Monte Memmott has completed a report for The Housing Authority of Utah County. This is a report that indicates whether or not Wasatch Behavioral Health is “matching” the funds required for HAUC to provide Shelter Plus Care housing vouchers to our clients. After crunching the numbers WATCH and JTP provided over \$166,000 in combined services and treatment to the 61 clients who received housing vouchers this past year, which is well above the financial contribution WBH was asked to match.

Number of OQ/ YOQs administered:

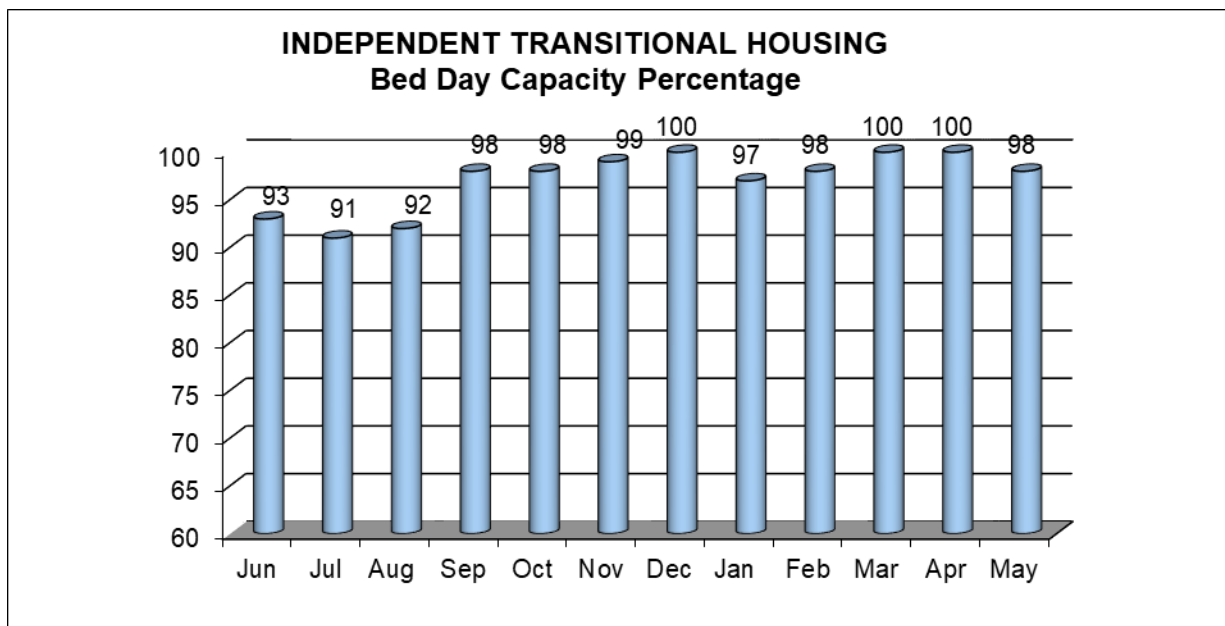
52 OQs for WATCH and 73 OQs for JTP totaling 125 OQs for May. 80 total unduplicated clients received OQs in May.

Supported Housing Services

Performance Indicators



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



Leadership/Allied Agency Participation/Initiatives/Success

- We had a heartwarming donation come to the Mapleview apartments this past month. Qualtrics is a local tech company who usually feeds a lot of their staff lunch during the work day. Since the pandemic their staff are tele-commuting and they have been donating these lunches to local non-profit agencies. The apartments at Mapleview was a recipient of some lunches served to the clients there. This is a great service from a local company to those in need.
- At the beginning of the year, we had a client who was diagnosed with Type II diabetes. He visited his primary care physician to check his blood sugar level and his blood sugar was "too high to read. Well

over 500" (as stated by his primary care physician). Thanks to the prompt intervention of his treatment team, he has remained compliant with his new medication, checks his blood sugar daily, and has educated himself on ways to manage his diabetes. His blood sugar has successfully dropped to the low 130s. His primary care physician, as well as his treatment team, are excited for his great success.

Number of OQ/ YOQs support tools administered: 19

Number of total unduplicated clients served last month: 139

American Fork Family Clinic (AFFC) & School Based Services

Successes:

Reported by CY-Fast: "The CY-FAST team received a referral for a family whose daughter was consistently suicidal, anxious, and depressed. Her mental health was seriously interfering with her school work and social life. In addition, the entire family had a trauma background that hadn't really been addressed. The CY-FAST team began doing in home family therapy and case management. It was discovered that all 3 children were struggling with their mental health, so our team did the intakes for the other two kids and began doing individual therapy in addition to family therapy. When the time came, AFFC was extremely cooperative in transitioning the clients to their facility and assisting in making appointments. J has reported that they love AFFC, the therapists, and especially the CTAs who are so helpful and kind in scheduling appointments. 8 months after CY-FAST got involved, the mom reports that the oldest daughter, "has come really far and thinks she is in recovery" and is preparing to end individual therapy, something that was unimaginable earlier this year. The family is still pursuing individual therapy for the other kids, but don't feel the extra support of family therapy is needed. The Mom said, "I appreciate your help so much!!"

Number of total unduplicated clients served last month:

Total: 712 Adult: 370 Youth: 342

Groups in AFFC

Wizards and Wellness

SBS Summer Groups

Overcoming Depression

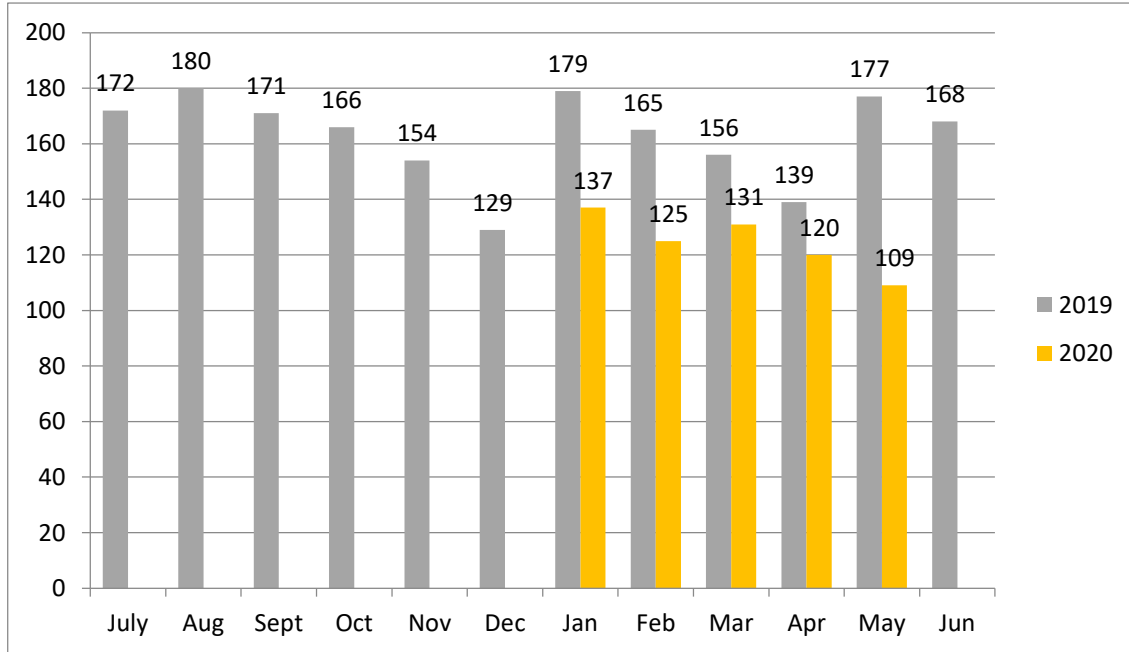
CIT Academy

Our next CIT Academy, scheduled for July 27-30, 2020 has been cancelled due to COVID.

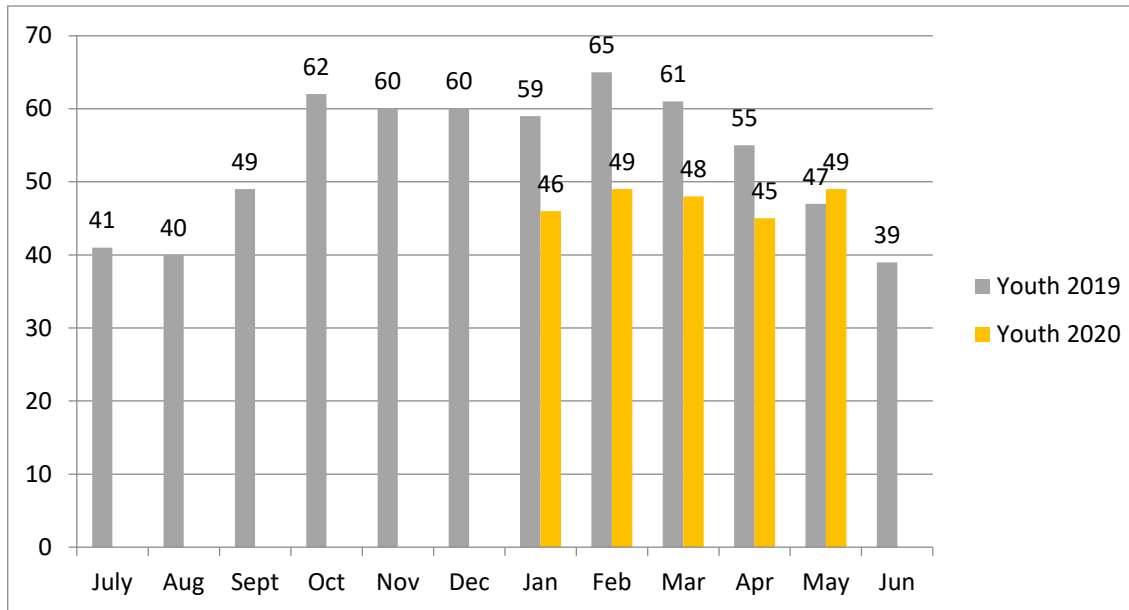
Wasatch County Family Clinic

May - Total Unduplicated Clients Served:

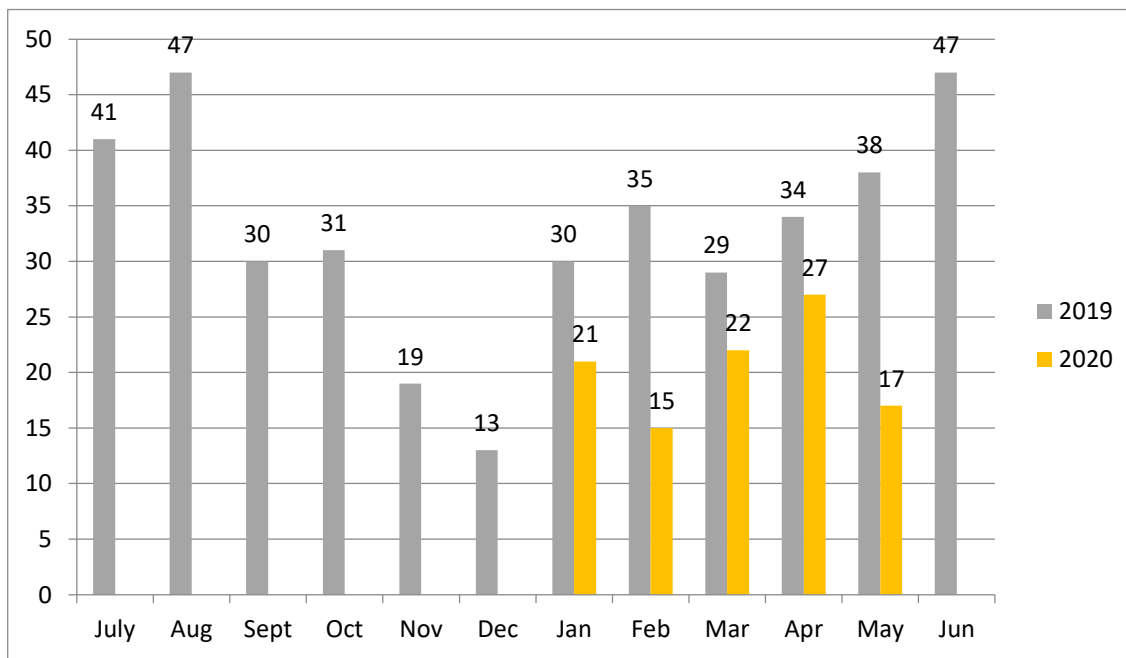
Adults:



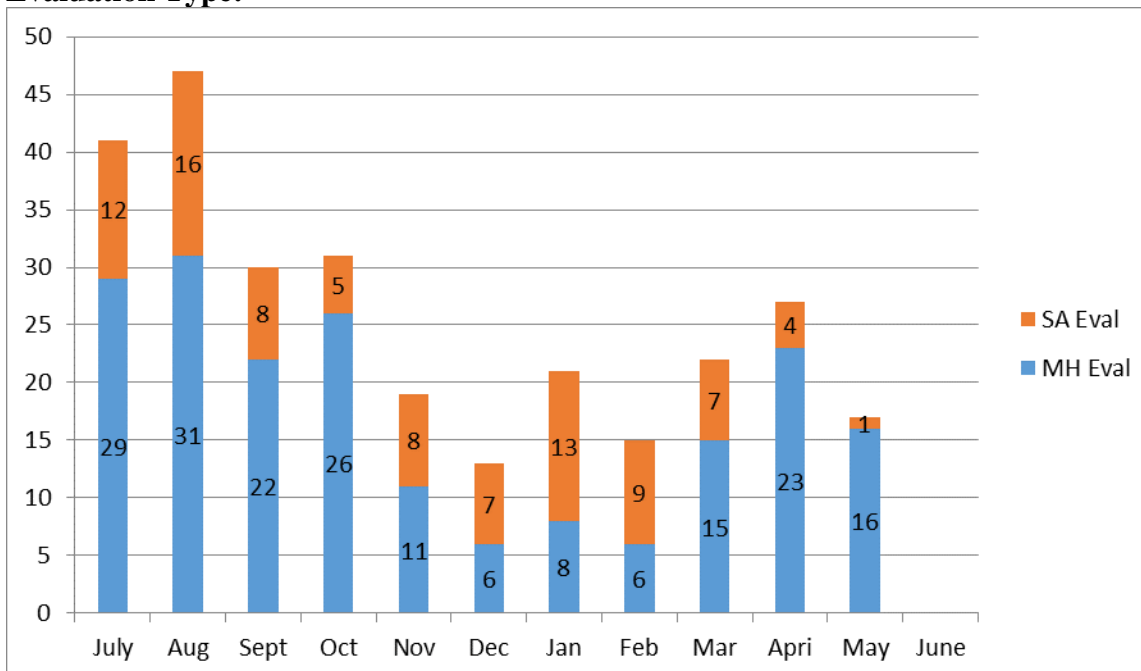
Youth:



May - Total Monthly Intakes: (EVL & SEVL)



Evaluation Type:



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:

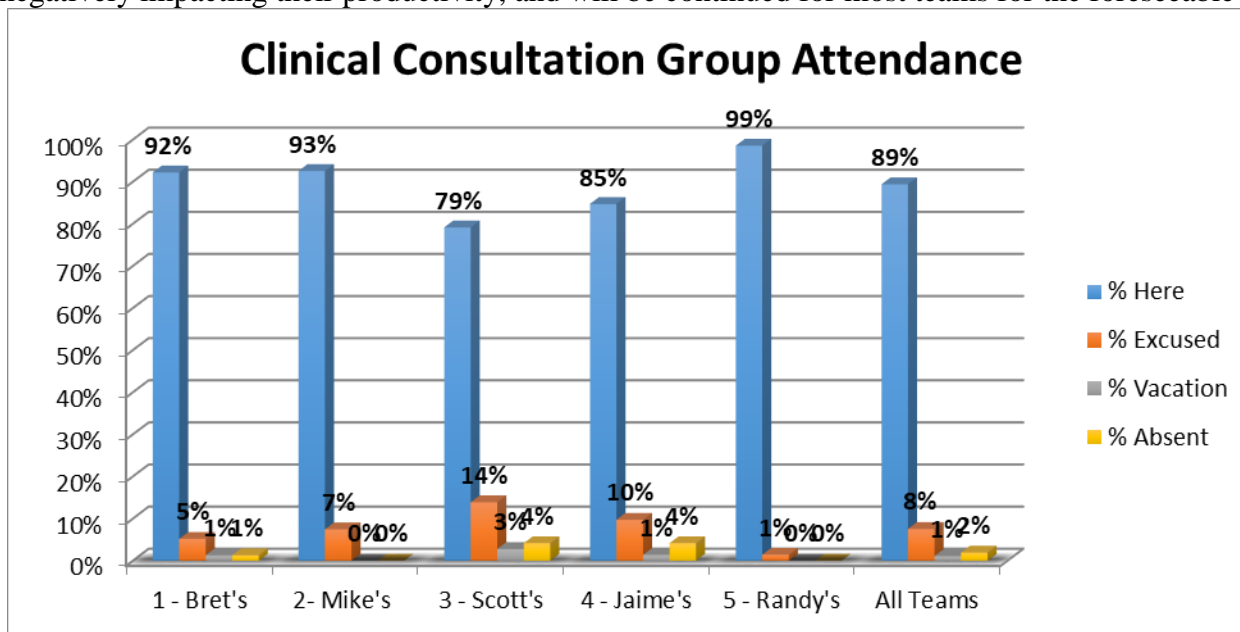
- We have had numerous meetings with Use Only as Directed staff to review and decide on a media campaign. This will include a billboard on Main Street which has now been posted, county wide mailings with information on opioids that have now been sent out, sandwich boards with information on prescription drop off boxes at the Police and Sheriff Departments and Lee's Pharmacy, 300 face masks with a message in both English and Spanish, bottles of hand sanitizer and t-shirts with pictures of how to stay active safely and de-stress in Wasatch County. Pictures include hiking, fishing, jogging, horseback riding, golfing, and camping. Pictures on the billboard and sandwich boards are customized with Timpanogas in the background.

April 2020 - Financial Report:

- April – Negative (\$16,970) for the month.
- April – Positive \$22,556 Year-to-Date.

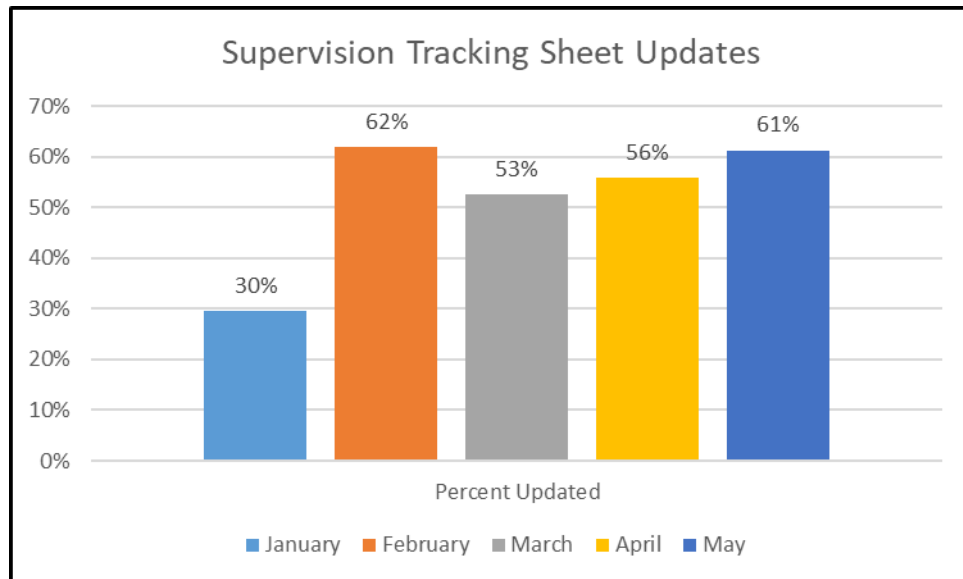
Clinical Performance and Compliance

During the month of May, clinical consultation group attendance remained high and very stable for all teams. Aside from reducing the likelihood of Covid 19 transmission, meeting virtually (over Zoom) seems to have the additional benefit of making it easier for team members in the outlying clinics to attend groups without negatively impacting their productivity, and will be continued for most teams for the foreseeable future.



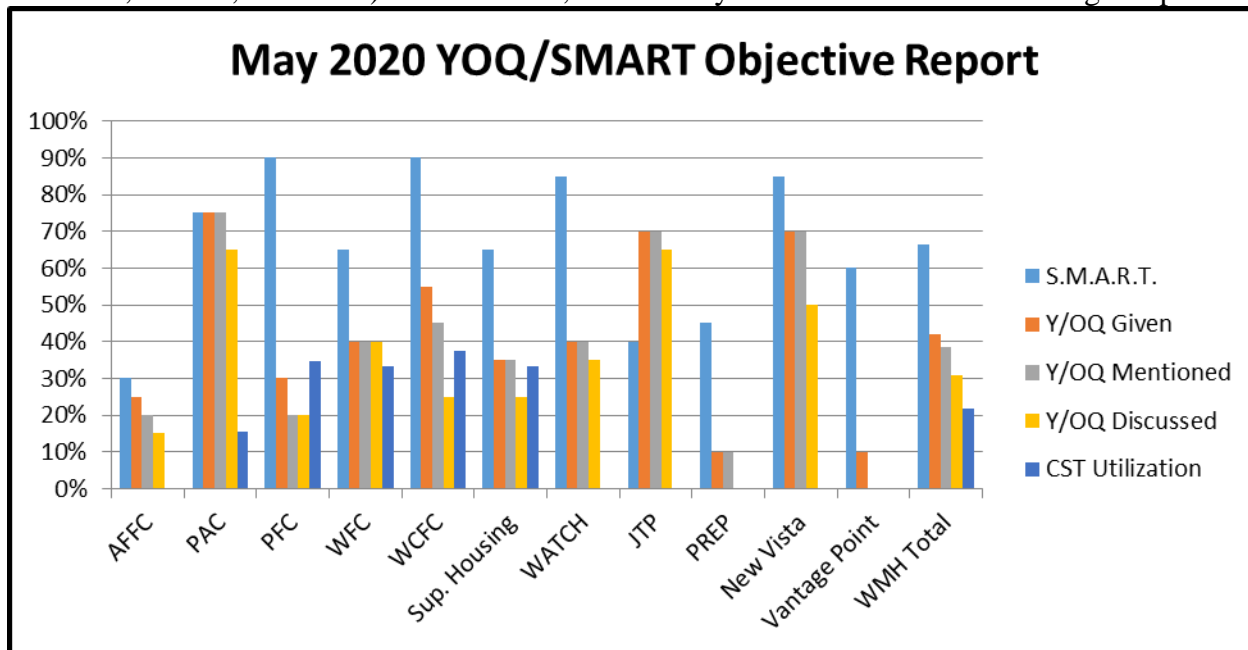
Supervision Tracking Sheet Updates

Midway through January, tracking sheets were introduced to all employees who are currently receiving supervision at WMH. Their clinical supervisors were provided with links to view their supervisee's tracking sheets. During March, meetings of clinical supervisors were held to re-orient them to the process of and rationale for using the tracking sheets, with follow-up meetings held in May. The chart below shows a slow but steady progress (53% to 61%) in tracking sheet utilization from March to May. Numbers are still likely low due to the decreased emphasis placed on this initiative during the last two months due to the pandemic. Another meeting with clinical supervisors is scheduled for early July.



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 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.



Substance Use Disorders (SUD) Division

Throughout 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

Below are the data of how many samples we collected (note the analyzer was down from May 12 – May 21). We are looking forward to the new analyzer and software that will be coming at the end of June.

Agency Collection Summary

Collection Date: 05/01/2020 - 05/31/2020

Agency	Subagency	Collection Total
UTAH COUNTY	ATR	116
UTAH COUNTY	CLINICAL INFORMATION SYSTEM	4
UTAH COUNTY	DCFS DRUG COURT	91
UTAH COUNTY	DORA	46
UTAH COUNTY	DRUG COURT	112
UTAH COUNTY	DUAL DIAGNOSIS	3
UTAH COUNTY	EVALUATION	21
UTAH COUNTY	FOOTHILL RESIDENTIAL TX	16
UTAH COUNTY	GOP	150
UTAH COUNTY	GRANDVIEW	10
UTAH COUNTY	HOUSE OF HOPE	21
UTAH COUNTY	ICT	9
UTAH COUNTY	IOP	63
UTAH COUNTY	NO. PROM	48
UTAH COUNTY	PROBATION DRUG CT	22
UTAH COUNTY	SO. PROM	45
UTAH COUNTY	UCAP	86
UTAH COUNTY	YOUNG ADULT PROGRAM	13
UTAH COUNTY		9
Agency Total:		885
Total Collections for All Agencies:		885

Day and Night Outpatient Treatment

The following information is the number and type of services rendered by provider. We have slowly and carefully starting bringing clients back into face to face

Hours of Service Delivered- May 1-31.

Therapist	IT	GT	GBM	GSD	Asmt	Total
Karen Carter	6.25	3	0	4	0	13.25
Theresa Young	29.5	12.25	0	0	4.5	46.25
Devin Monahan	47	20	0	0	0	67
David Skiles	28.6	15	0	0	4	47.6
Zach Larkin	21.5	4	0	0	0	25.4

Case Manager	IBM	ISD	GBM	GSD	TCM	Orient	Screening	Total hrs		DLA NB	Medicaid NB
Jessica Cox	0	7.13	0	11.8	1.5	1	3.75	25.18		6	1
Cerissa Hayhurst	6.6	0	8.2	0	2.3	1.75	1	19.65		3	0
Alicia Shupe	13.25	0	8	0	5.75	7.5	0	39.5		4	1

Clinical Information System (CIS) and Screening

CIS completed 58 screenings during the month of May, which is down from 122 screenings last year May 2019. This can be directly related to Covid -19 and courts having limited cases so screenings are not being courted order.

13 Residential - 4 completed assessment= 30%

35 Outpatient- 11 completed assessment= 32%

2 Prime for Life

8 No treatment recommendations

We are looking forward to streamlining the screenings and intake process. The goal being that we can have intakes done in several locations. Our new intakes had decreased significantly and we are hopeful that as the restrictions with COVID-19 decrease, we can admit more people into services.

Promise North and South – Women’s Treatment

The following information listed below are the number of services provided and the type of services by provider.

THERAPIST	Assessment (hours) NS appts (no show)	IT NS appts T Cancel	GT --	Education Gp --	TOTAL
Amy-Supv (vac 5/25-29)	0 0	5 4 appts	1.5	0	6.5
Jeremy Jensen	8 1	29.5 4	21	1.5	60 (15)
Marilee Van Wagenen - PT	0 0	8 0	18	0	26 (6.5)
Ericka Hickman	2 1	21.5 6 15	22.75	0	46.25 (11.6)
Ke’ala Cabulagan	2 1	40.25 18	31.5	0	73.75 (18.4)

Case Manager	Education Gp	Individuals (TCM, ISD, IBM) NS appts C-Cancelled	DLA’s completed	TOTAL
Becky Duebeck (Va 5/18-22)	24.5	5.5 6	2	30 (10)

Emily Reed	28.5	18.25 6	2	46.75 (11.7)
Cami Quinto	31.25	24.75 11	2	56 (14)
Stephanie Lukaszewski	32.25	28 18	3	60.25 15)

Goals:

- Improve engagement and decrease No show rates. Ideas: Text clients, call clients prior to appointment; Zoom session if they are unable to make it due to transportation issues, etc. (We do this already though, but we can really focus on it more).
- Improve productivity with existing employees. We are not getting referrals to increase opportunity to improve productivity. PS just transitioned several clients from IOP to GOP, and several in GOP have completed the program. And we have had very few referrals to our program to build up numbers again.

Leadership/Allied Agency Participation/Initiatives/Successes

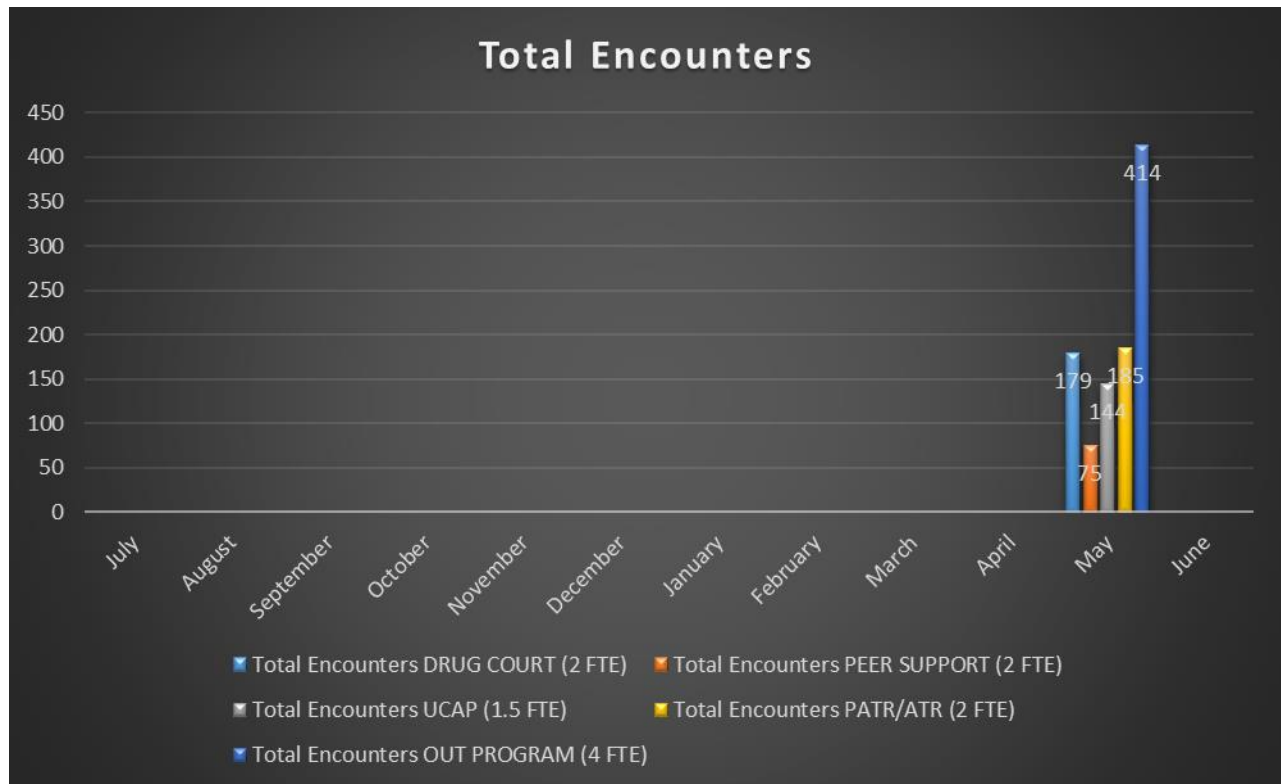
Over the last month we have had several discussions with our community partners. We are letting them know of the merger and the benefits of combining mental health and Substance Use treatment. All organizations have been supportive of the merger. Some of the comments include: “Finally, I can’t believe we didn’t do this sooner.” “I have always wondered why the two were not combined.” “I think this will be so helpful for people to get treatment.” “It just makes sense that SUD and MH be together.” “I am excited about this change and let me know what I can do to help.”

We have effectively moved everyone out the 3rd floor suite at the Health and Justice building. We will be completely vacated by June 17, 2020. We have worked with public works, and the County IT department to move furniture, computers and other necessary items.

SUD-Criminal Justice Programs

Total encounters served in the SUD-Criminal Justice Programs

In the first full month of Substance Use Division integrating into Wasatch Behavioral Health’s culture of tracking Service Delivery Expectations, each staff member was asked to keep track of every encounter with a client that they could (our should) be able to write a billable note. Below is a chart indicating the results of the tracking data:



In the coming month, there will be discussions with each employee in the various Criminal Justice Programs to determine what Service Delivery Expectations would be important to them to track in the coming months.

Leadership/Allied Agency Participation/Initiatives

As the new Criminal Justice Program Manager in the Substance Use Division, Monte Memmott, CMHC, has participated in many meetings both within ADDAPT and in the community. He has been meeting with leadership at the Utah County Jail to coordinate the OUT program returning to the jail. Additionally, he has been in communications with a detective in American Fork who is requesting someone from ADDAPT attend their staff meetings. He has also been corresponding with representatives from the State Division regarding the GPRA (Government Performance and Results Act) grant that funds the Peer Support program as well as the MAT program.

Challenges

One of the challenges that is currently being addresses is the Sober Living situation in Utah County. There has been mixed information on how much money is available and which clients and programs can access those monies. One report from the former Deputy Director, Cindy Simon, indicated that there is more than \$200,000 awarded and not a cent has been spent. One of the larger issues in regards to Sober Living facilities is that many of them will not allow MAT clients, and according to the grant rules a client cannot be turned away from a Sober Living facility (using this funding source) for being on MAT. Monte Memmott and Sue Leavitt are working together to learn more about the grant money and associated rules for utilizing this funding source. Additionally, a vetting process for potential Sober Living facilities that can accommodate our clients will begin soon.

Successes

A recent client in the PATR program wrote this note:

“Being locked up for as long as I was you just hear all these horror stories of caseworkers and parole officers sabotaging the progress of a parolee. I never wanted to believe it, but it was hard not to wonder how much I mattered as a person to these strangers. To my genuine surprise, they care. And I believe they care because I care. I want my life to be more than an average ex-prisoners life and honestly everyone at P.A.T.R. makes me feel like it will be. They have so many resources for people in this same situation. Take advantage of what’s available to you and don’t be afraid to ask for help. I think as humans in general we get so prideful and worried that if we can’t do it on our own we’ll never make it. That’s not the case. Everyone needs a little help. And this agency has provided me with the tools and resources to ensure I am successful in all aspects of life. You can go on to do great things. We are not limited by society. Only by ourselves.”

Summary of Programs

WATCH and JTP will be reported in a separate monthly report provided by Monte Memmott.

UCAP is a program shared by the Utah County Sheriff’s Office and ADDAPT. Due to COVID-19 and courts not operating at capacity there have been no new clients added to the program. There are nearly 40 clients currently participating in UCAP. A typical week in the life of a UCAP client is to check in with both his/her ADDAPT case manager and Utah County Sheriff’s deputy, as well as complete any therapy recommended by the treatment team. The treatment team meets weekly on Mondays to discuss possible sanctions and rewards. Currently, the treatment team is working to come up with a more systematic approach to sanctions/rewards based on a matrix provided by Adult Probation and Parole.

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, however due to COVID-19, the OUT program has not been allowed to work in the jail for the last several months. The current team consists of two case managers and two therapists who are working in other substance use programs until they are given permission to return to the Utah County Jail. The team has one vacant position, an administrative assistant, which will be filled once the OUT program is running again.

ATR (Access to Recovery) has two employees which work as case workers, as well as two Peer Support Specialists. The Peer Support workers recently took over running a Recovery Group that had been staffed by another county program. The plan is for Peer Support to run this group as part of the orientation process for new clients entering services. Currently ATR staff have a caseload of more than 200 clients that they see every 1-3 weeks. If a client participated in treatment in prison, they may qualify for up to \$3200 through a related program called PATR.

Peer Support Services are funded by the SOR (State Opioid Response) grant, which is up for renewal in September 2020. Wasatch Behavioral Health recently learned that SOR grant funds will be re-awarded this September although the actual amount has not been determined. Depending on the awarded amount of SOR grant, a third Peer Support Specialist may be hired.

There are two adult Drug Courts that will be monitored in this portfolio, 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. Felony Drug Court has 33 clients currently with a capacity for 39 participants. Probation Drug Court has 20 clients of 22 possible slots. Currently there are 8 Drug Court clients who are scheduled for graduation in June, which will leave more vacant slots to fill, however, COVID-19 has slowed the court system and referrals have in turn been slow in Drug Courts.

Sober Living housing oversight has been assigned to Monte Memmott to manage, as many of the potential clients who would benefit from Sober Living are involved in the Criminal Justice system. While there appears to be \$260,000 set aside specifically for Sober Living ADDAPT has struggled historically with utilizing these monies. Currently there are four Sober Living agencies that are contracted with ADDAPT but there continues to be struggles to put clients in these agencies. One known issue is that many Sober Living agencies do not want to work with clients who participate in MAT (Medication-Assisted Treatment) which provides medications such as Methadone, Suboxone, and Naltrexone to treat opioid dependency/abuse. The funding source mandates that the Sober Living agencies allow MAT. In the coming weeks/months, there will be a push to learn more about the requirements of this funding source as well as vet Sober Living agencies and build relationships with reputable Sober Living agencies.

SUD SERVICES

We continue to evaluate each program and their performance. We also continue to reviewing state licensing rules and requirements for the programs in my portfolio. Working on having a clear understanding of the 42 CFR and 42 CFR part two. Attempting to help supervisors the importance of meeting performance standards. Also reviewing preferred practice guidelines for the programs in my portfolio.

FOOTHILL RESIDENTIAL

Number of employees who are below 95% of the productivity standard Everyone is below this standard at this point in time. The supervisor had 15 hours of billable and the therapist had 56 hours of billable for the month Case managers have an avg of 40%.

MAT/ Medical SUD services

Number of total unduplicated clients served last month: 65
No shows 8

Highlights:

1. Doctor has resumed services in his office.
2. Discussed with Doctor about treating Youth coming out of Slate Canyon.
3. Exploring bulk buying medications to prevent throwing away a 1800 shot

YOUTH OUTPATIENT TREATMENT

- Number of total unduplicated clients served last month: 18
- Working to increase numbers through JJS, Vantage Point, Aspire Courts and DSI
- Meeting with the U of U to come up with outcome measure that will be helpful to the program.

YOUNG ADULT PROGRAM

Number of total unduplicated clients served last month: 30

Highlights:

Discussed productivity standards

SUD Staff toured Wasatch Behavioral Health programs
Contacted youth drug court coordinator Leslie Johnson to discuss a time to meet Court are slow to start up again in person

Liaison of contract and client coordination with

- a. House of Hope
 - 1. Reviewed the contract and continue to learn about program
 - 2. Continue to have open communication with treatment provider.
- b. Odyssey House
 - 1. Reviewed this contract and we currently have 4 clients at this facility
 - 2. Currently asked for documents to do a UR on each client
- c. First step House
 - 1. Reviewed the contract and currently have no clients being treated at this facility

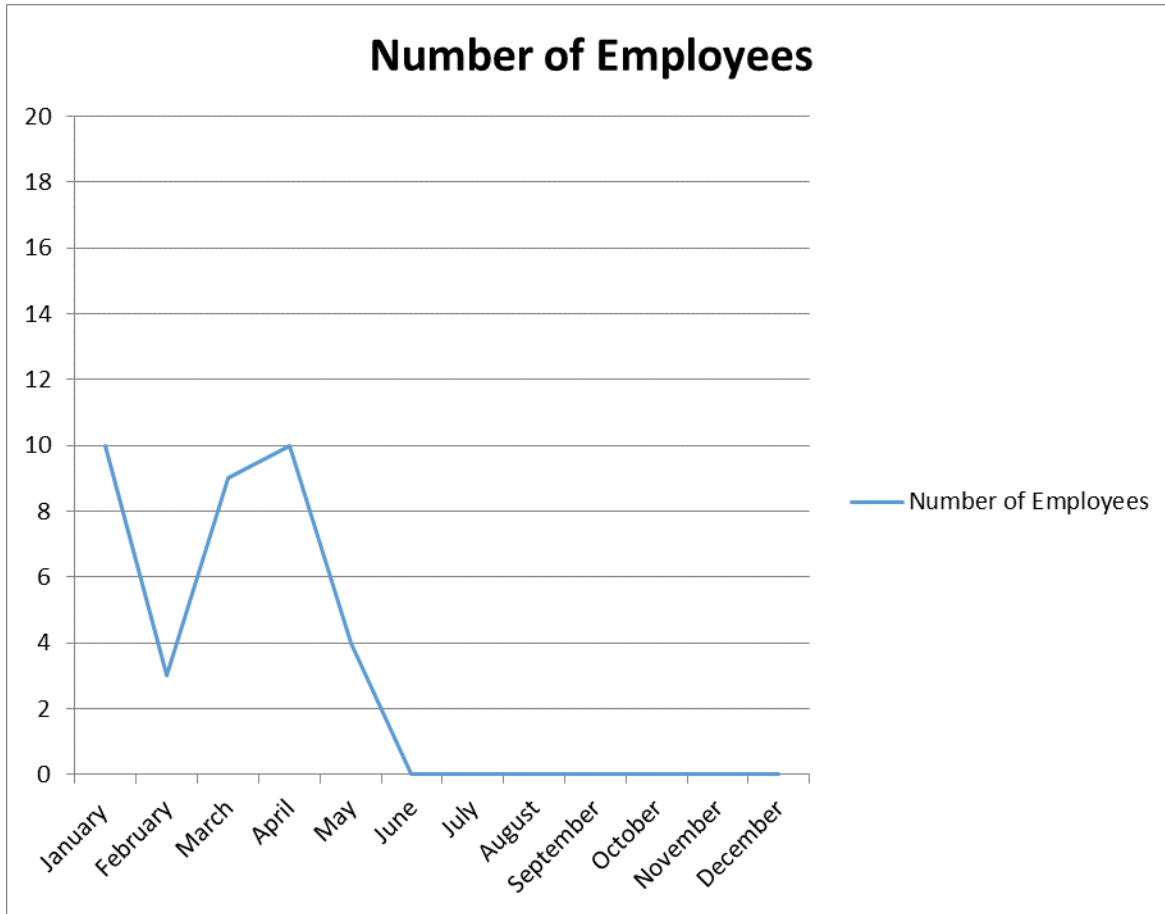
Success story

In October 2019 we started working with a young woman who had gone to Foothill for detox from heroin and Alprazolam. I will call her “Jane” for this story. Jane’s mother had recently gone to residential treatment in another county so Jane reached out to us for help starting at Foothill. It was cool to see Jane’s mother working towards her own recovery also motivated Jane to work on her. Jane came to us without any court order and has not got any new charges throughout her treatment with us. She told me she really liked her experience at Foothill and that the staff treated her well and with encouragement. Jane did very well and put in a lot of effort into her recovery during the Fall of 2019. Shortly before Christmas she ended up moving out of her friend’s home, and getting back with her ex-boyfriend and relapsing on heroin for about a month. She came back to us through Foothill again moved back in with her friend and this time she decided to try medication assisted treatment to help her with her cravings for heroin. She ended up finding a provide Suboxone provider and for a while was very sleepy, but she was not having heroin cravings anymore. She kept going back to her high school and kept working on earning more credits. Client continued to meet with Ken, did many groups with Maloa, and got support from her friend, her friend’s family, her mom, and her school officials, and adjusted to her medication. Client ended up completing about 27 school packets, mostly in the basement of her friend’s house, and was able to graduate high school. Last night we had a pizza party with Jane, both her parents came, a grandparent, and siblings and some close family friends. Jane’s parents, her grandmother, her friends, and her treatment team all had the opportunity to tell Jane how proud they were of her for successfully completing high school. Also it was good to see mom there sober, having now completed her own residential treatment and back out in the community. She has fought hard for her recovery and it is very valuable to her

Human Resources

Employee Turnover

In May 2020, we lost 4 employees, 1 of which was an MSW Intern. The average tenure was 112 months with WBH. One employee had 33.5 years with WBH and another had 2.67 years of service. The other two employees have under 10 months of service.



Recruiting Data

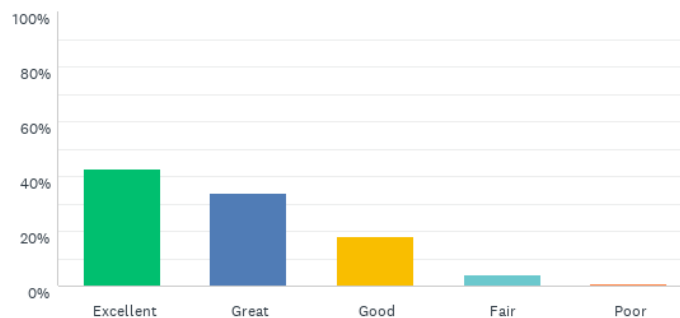
The average rank for our May New Hires was a 1. The average pay scale step for May reflects an average of step 3. We should anticipate a variance in this number from month to month since some months we will hire more entry level positions while in others we may hire more professional level positions.

	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						
July						
August						
September						
October						
November						
December						
Average	11.2	1.636	4.452	38.584	39.756	39.106

Exit Survey Update

Of 220 respondents, over 76% of separated employees stated that their overall experience at WBH was either “great” or “excellent.” Another 18% have stated that the experience was “good” and only 5% state “fair” or “poor.” We feel very positive about these numbers. We believe that it proves that WBH is a positive and good place to work. We have had many challenges this year and I believe that we continue to improve services and most employees are engaged and want to do a good job when they work in a good environment. We believe WBH provides that environment.

Q10 How would you rate your overall employment experience at WMH?

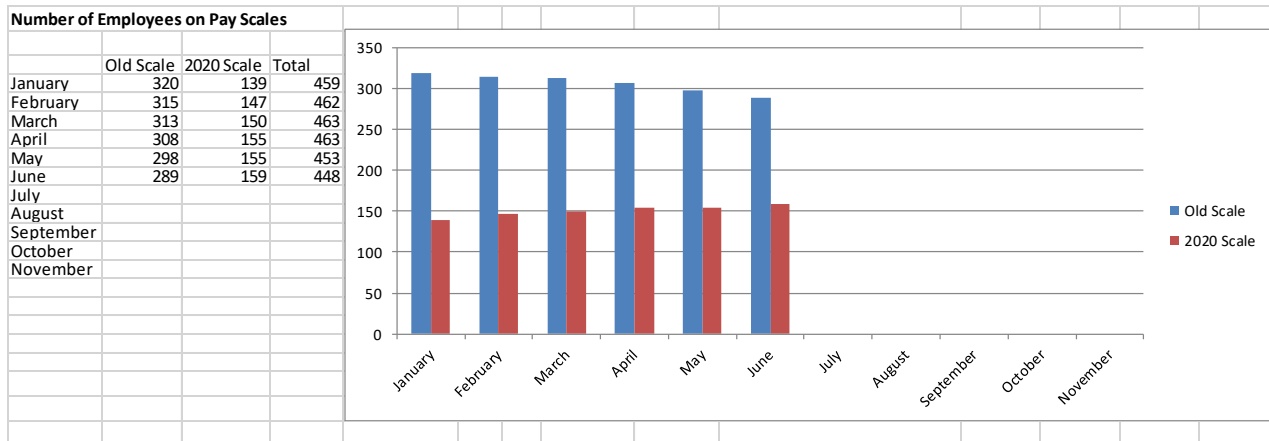


System Updates

Beginning the end of April, the HR team took on a huge project of updating the hierarchy in both the Relias training system and the PEP evaluation program. This was a major undertaking since we had many supervisory promotions and changes that were not captured since the major shift in departments reporting to Division Directors a year or so ago. We also had a major shift in our organizational structure at the beginning of this year that were not captured. By soliciting the help of the Program Managers, we were able to straighten out these two systems. This should make our office more efficient by reducing the number of individual change requests.

Forms & Workflow Management Solution Software

We have been working diligently looking at several workflow management and document management systems to replace BMI. We had a meeting last Friday with Boyd Mortensen (BMI). He was willing to do whatever we needed to transition documents stored in BMI to whichever vendor we chose as well as wanted to “throw his hat in the ring” and provide us a quote. We have sent him the same sample forms and workflow information as well as licensing requirements that I sent to the other vendors so we could obtain a quote from him. We are a little hesitant to continue the relationship with BMI, however, since it is a very clunky and archaic system and difficult to access documents currently stored there. We will continue the search and keep you posted on what I discover. I am excited about the opportunity to transition many of our processes (not only HR, but other departments as well), so we can streamline and be more efficient.



Accounting Department

Payroll - We have been meeting with IT and Junction programmers to explore a way to automate the payroll data entry process. We have gone through a couple of phases, and we are now ready to test the automatic entries in GP for the most current payroll.

Covid-19 schedule - the majority of the month of May we worked under the COVID-19 restrictions and had some employees working from home. We were able to change some processes to reduce our paperwork and improve the remote work efficiency. We found that many of our processes can be done remotely, which helped us to continue to work during a normal work schedule.

Billing Department Report

Continued efforts are being made to improve collections for the Medicaid expansion population from the four ACOs. Some progress is being made, more work is needed.

IT Department

Towards the end of May, Veracity set up data/phone lines at Health and Justice building, Foothill and Promise North.

Set up Citrix accounts for aDDAPT users with limited access to Wasatch's network so they can practice accessing Citrix and navigating. Full access will be granted on June 21 for the merger.

Francis, Julie and Mel started watching Credible training videos to prepare to support two EHRs.

Prepped and submitted data (follow up after hospitalization) in anticipation of June HSAG audit.

Completed monthly submissions of encounter and state data.