

TO: Washington County BHDS Program Office
CPS Services, Program Participants
Family Members of Participants in the CPS Program
CPS Staff members

FROM: Diana McKinney, MBA, CPRP, CPSS, Ex. Director
Melissa Gardner, MBA, CPRP, CPSS, Director of Compliance
Katherine Mychajlowskyj-Ranko, CPRP, CPSS, Program Director

RE: CONTINUOUS QUALITY IMPROVEMENT ANNUAL REVIEW REPORT
Certified Peer Specialist Program (CPS)
June 2021-2022

Certified Peer Specialist services (Peer Support Services) are provided to individuals with mental health challenges or emotional disorders, who live in Washington County who have a desire to develop the skills and supports they need to be successful and satisfied in the places they choose to live, learn, work and/or socialize as well as the support to increase knowledge of coping skills for mental health challenges.

AMI has Peer Support Staff trained in specific areas including Youth and Young Adults, Older Adults, Forensic and Crisis.

Analysis of Annual Review: As part of continuous quality improvement, the Certified Peer Specialist program participants are asked, twice a year, to complete a satisfaction survey which is designed to measure the participant's belief about the improvement they have made since beginning services, as well as the individual's satisfaction with the services that they receive. This survey is an adapted version of the MHRM. All survey results are examined by the Program Director and CPS Supervisors and concerns are addressed with staff during supervision and staff meetings.

An average satisfaction rating of 2.5 or above indicates satisfaction with the Agency and the services provided. All ratings are within excellent range for the program.

Below are the results of the survey for the Certified Peer Specialist program for the first half of fiscal year 2021-2022. Individuals receiving CPS services completed the survey with an average satisfaction rating of 2.72, which indicated overall satisfaction with services. Areas that influenced the results negatively were people feeling as though their lives were not normal, they do not have enough money to participate in activities that they enjoy, as well as they do not eat nutritious meals each day and they do not go out and participate in enjoyable activities every week.

Actions to Address Annual Review Findings: The Mental Health Professional and CPS Supervisors will assist Peer Support staff to develop interventions for individuals to address concerns in the above-mentioned areas and work with members to improve these areas in their lives.

The Program Director worked with CFST to improve their ability to obtain satisfaction surveys for the CPS program since COVID 19 made it more challenging for CFST to complete surveys. By coordinating together, AMI and CFST were able to obtain 10

surveys. The most recent surveys completed by the CFST team with Peer Support Program participants indicated a satisfaction rate of 98.85%. There were no areas that scored below a 90% satisfaction rate.

One area identified by a member as a negative was that services were not started quickly upon request. This is an ongoing issue identified by AMI, and participants. The reason that it takes so long to get people open is usually that AMI is waiting for a completed and accurate referral to include an LPHA signature. AMI has met on multiple occasions with referring agencies to collaborate and problem solve this issue. The BSU that does most of the AMI referrals does not have an LPHA on staff and has frequently indicated that they have a difficult time obtaining an LPHA signature for referrals.

Some of the comments that program participants stated on the CFST survey included "It gets me out of the house and socializing", " we have been through a lot together", and "she is helping me to get volunteer work".

ADDITIONAL INFORMATION:

At least twice per fiscal year, AMI, Inc. completes a Continuous Quality Improvement meeting for program participants and family members to provide feedback to the agency on how to improve services. These meetings are typically held via conference call due to the nature of CPS services being provided in the community.

Please see the document attached for a detailed report on the meetings.

Service utilization and chart reviews are completed monthly by the Mental Health Professional or the CPS Supervisor. In addition, each year, the CPS staff are given the opportunity to work in collaboration with each other to provide peer to peer chart reviews and feedback.

This year, 10 charts were reviewed for accuracy and timeliness. Due to AMI, implementing a new Electronic medical records system, after review of these charts, it was identified that there was an error with billing codes for COVID 19 related Telehealth visits. Since the issue was detected, a corrective action plan was created and shared with Beacon Health Options. Further, we audited all CPS encounters to ensure the correct codes were being used for billing. The Electronic medical records system has been updated to meet the billing requirements and all claims have been rebilled to reflect the appropriate billing code.

There are no additional issues or concerns that have been identified regarding service utilization this year.

TRAINING/STAFFING:

All Peer Support Services meet the necessary guidelines for staffing including having completed criminal background checks.

All staff in the Peer Support Services program have completed or exceeded the required number of training hours (18) to maintain certification.

CONTINUOUS QUALITY IMPROVEMENT REPORT

At this time, there is representation of CPS participants and/or family members of participants on the AMI Board of Directors.

AMI Executive Director and Director of Compliance have reviewed the Annual Quality Improvement Report and have determined that the report reflects with 97% accuracy the AMI Service Description for Peer Support Services.

One area of improvement identified this year was improving the timeliness of individuals being opened after receiving a referral. It has been an ongoing issue for many years to get individuals referred and opened quickly due to the requirement of an LPHA signature. AMI Directors met with Base Service Unit staff and supervisors to try to find solutions to this issue. One solution identified was that the Administrative Case Manager can ask a Blended Case Manager to get the signature if the person is open in BCM. AMI did also look internally to ensure that people were contacted quickly after being referred to the agency. AMI has increased the duties of the Intake Coordinator in an effort to streamline the process for contacting individuals with 7 days of the referral being received.

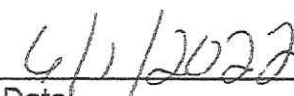
Please see attachment for Outcomes chart.

AMI, Inc. recently updated our agency website and the Quality Improvement Report for AMI, Inc. Peer Support Services is located on the website: www.hope4wellness.org. A copy of the report is also available upon request.

Any questions or comments to this report may be directed to the Executive Director or Director of Compliance who can be reached at (878) 212-3927.



Signature of Executive Director




Date



Signature of Director of Compliance



Date



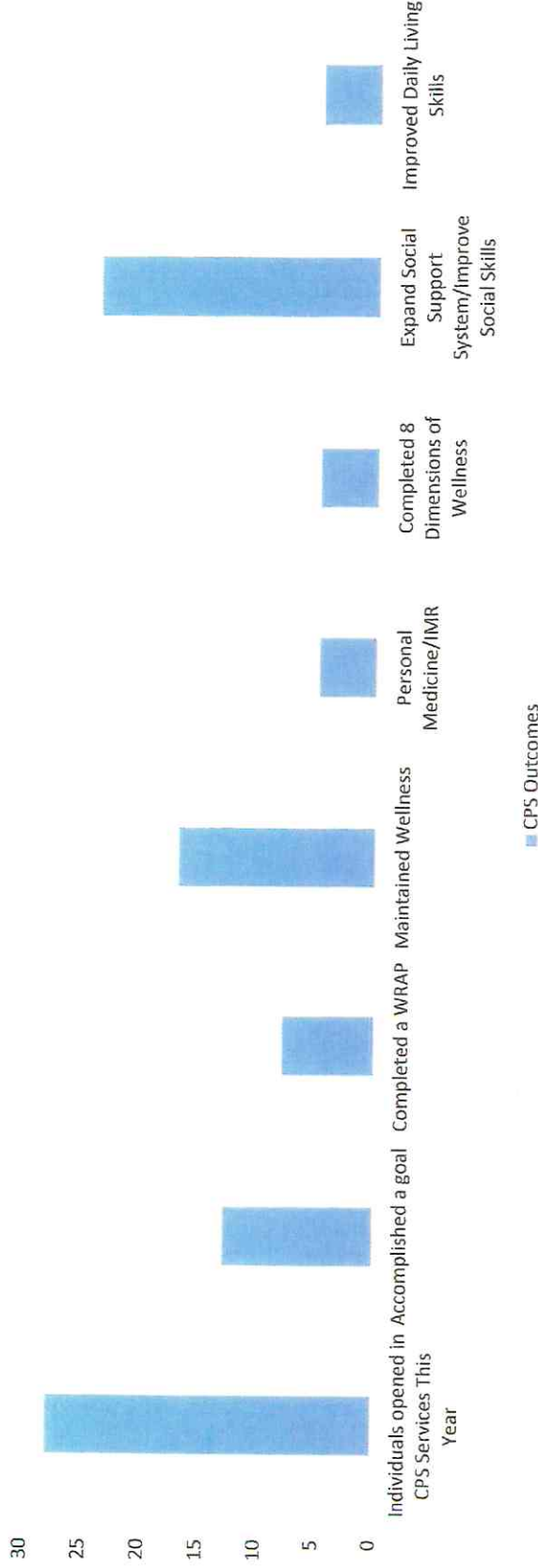
Signature-Washington County BHDS
Program Office



Date

Peer Support Services Outcomes

CPS Outcomes



Outcomes of the CPS program include:

- 8 individuals completed a WRAP
- 5 individuals were introduced to personal medicine and/or IMR
- 29 individuals opened in services
- 1 individual completed an advanced directive
- 17 individuals maintained wellness
- 13 individuals accomplished a goal
- 13 individuals successfully discharged
- 24 individuals are employed
- 2 individuals improved their use of technology

Other outcomes include individuals learning about and improving their skills in the following categories:

Connection to community resources, exploring triggers, improving self-advocacy, exploring the Depression Workbook, learning about and implementing SMART goals into their daily lives, prioritizing and organizing, improving self-efficacy, exploring ways to build independence, implementing physical wellness activities, enhancing self-confidence, using positive affirmations, building on problem solving skills, better financial responsibility, and exploring hobbies and interests in the community.