

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

FROM: Diana McKinney, CEO, MBA, CPRP, CPSS
Melissa Gardner, COO, MBA, CPRP, CPSS
Katherine Mychajlowskyj-Ranko, Peer Services Director, CPRP, CPSS

RE: CONTINUOUS QUALITY IMPROVEMENT ANNUAL REVIEW REPORT
Certified Peer Specialist Program (CPS)
June 2022-2023

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 except for the question regarding "do I eat nutritious meals". That area scored the lowest out of all of the areas of satisfaction, which is common in all of AMI's services.

Individuals receiving CPS services completed the survey with an average satisfaction rating of 2.60, 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 for those who choose to.

The Peer Services Director worked with CFST to improve their ability to obtain satisfaction surveys for the CPS program. By coordinating together, AMI and CFST were able to obtain 16 surveys.

CONTINUOUS QUALITY IMPROVEMENT REPORT

Page 2 of 3

The most recent surveys completed by the CFST team with Peer Support Program participants indicated a satisfaction rate of 96.50%.

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. AMI peer staff often end up taking the person to meet with their doctor to obtain the LPHA signature.

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 most recent meeting. The next meeting is scheduled for May 1, 2023.

Service utilization and chart reviews are completed monthly by the Mental Health Professional or the CPS Supervisor. There are no 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.

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

One area of improvement identified this year was improving discharge planning with individuals. Many individuals served in AMI's peer support program remain in the program for several years. Although this is beneficial for their recovery, people often have a difficult time when we begin discussing discharge planning with them because they have established a meaningful relationship with the CPS. AMI CEO, COO, and Directors met with staff to discuss ways to improve discharge planning from the start with individuals entering CPS services. We also discussed ways that CPS staff can help individuals build a natural support system in the community to try and reduce the feeling of "loss" when the person discharges from CPS services. AMI, Inc. Supervisory staff will continue to work on discharge planning with CPS staff to build their confidence in working with individuals to have a successful discharge from the program.

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 Chief Executive Officer or Director of Compliance who can be reached at (878) 212-3927.

Diana McKinney CEO, MBA
Signature of CEO *CFRP, CPSS*

4-26-2023
Date

Christina Howard CHRM, MAT
Signature of Director of Compliance *CPJ*

4/26/2023
Date

Jennifer Scott
Signature-Washington County BHDS
Program Office

5/2/23
Date

QUALITY ASSURANCE PROGRAM REPORT: CPS

The Quality Assurance Program's Report is designed to permit staff, consumers, visitors, and volunteers an opportunity to participate in AMI, Inc.'s Quality Assurance Program. The purpose of the Quality Assurance is to review the quality, timeliness, and appropriateness of services. The Quality Assurance Program Report is designed to assure that the service provided to consumers is efficient, effective and delivered in a safe manner. Through regular monitoring and assessment of our service delivery system we can identify and resolve problems that impact on consumer service and outcomes. This survey is to be completed quarterly. Please respond with your concerns on the reverse side of this form.

INSTRUCTIONS

Description of any identified problem: A simple description of any identified problems is to be reported here. The types of problems that are relevant to the Quality Assurance Program are:

1. Problems that directly or indirectly affect the service to consumers.
2. Problems that adversely affect the operations of AMI Psychiatric Rehabilitation Program through needless waste of money and/or staff time.
3. Problems that pose serious safety hazards to consumers, staff, visitors or volunteers.

Problems that Quality Assurance will not consider are those that concern a staff member and his/her supervisor. These may include disagreements over work schedules, work assignments, etc. These types of problems should be resolved through other appropriate channels.

Where does the problem occur? Please be exact as to where this problem occurs. Does the problem exist in all areas or one area? Does the problem occur in an area which is not part of the building?

How long has the problem existed? This may be difficult to answer in terms of exact time; however, please estimate if you know the approximate time period.

Have attempts been made to correct the problem? Possibly there have never been any attempts to correct this problem. If there have been attempts, please explain what they were and the results.

What may be the cause(s) of the problem? If you know specifically what causes this problem, please explain.

How could this problem be corrected? If you have recommendations to make concerning the correction of this problem, please provide them.

Description of any identified assets of the program: A simple description of aspects of the program that you enjoy, or benefit from, and would like to be used more. This could be a facilitation technique, or activity that has benefited you.

Identification of the Reviewers: You may sign the Quality Assurance Program Report if you wish, your signature is not required.

Date: The date the Quality Assurance Program Report is completed.

Quality Assurance Program Reports should be placed in an envelope and forwarded to the Director of Quality Assurance, The Executive Director

QUALITY ASSURANCE PROGRAM REPORT: CPS

Description of any identified problem: Peers identified their frustrations in missing appointments with staff when holidays fall on weekdays. Peers shared that it often takes a week or two to get back on schedule with their staff and often feel "alone" around the holidays. Peers shared that they fear the coming holiday season as the agency is closed for several days.

Where does the problem occur? During Federal Holiday Observances

How long has the problem existed? Continuous/Occurring Yearly

Have attempts been made to correct the problem? Yes

Explain: Reminders have been given and planning measures have been put in place to ensure peers are seen before or directly after a holiday if their CPS sessions fall on a weekday holiday observance. Holiday socialization events are planned every few months for on-site participants (this brought up another point that CPSs don't always get to participate in these if they do not attend on-site programming.

What may be the cause(s) of the problem? Unavoidable holiday observances occurring during the week, staff unable to schedule peers on other days due to other commitments, appointments, or tasks, lack of holiday-related stress and symptom conversations, or perhaps lack of self-awareness of how holidays might negatively impact someone's mental health (awareness by staff and peers alike).

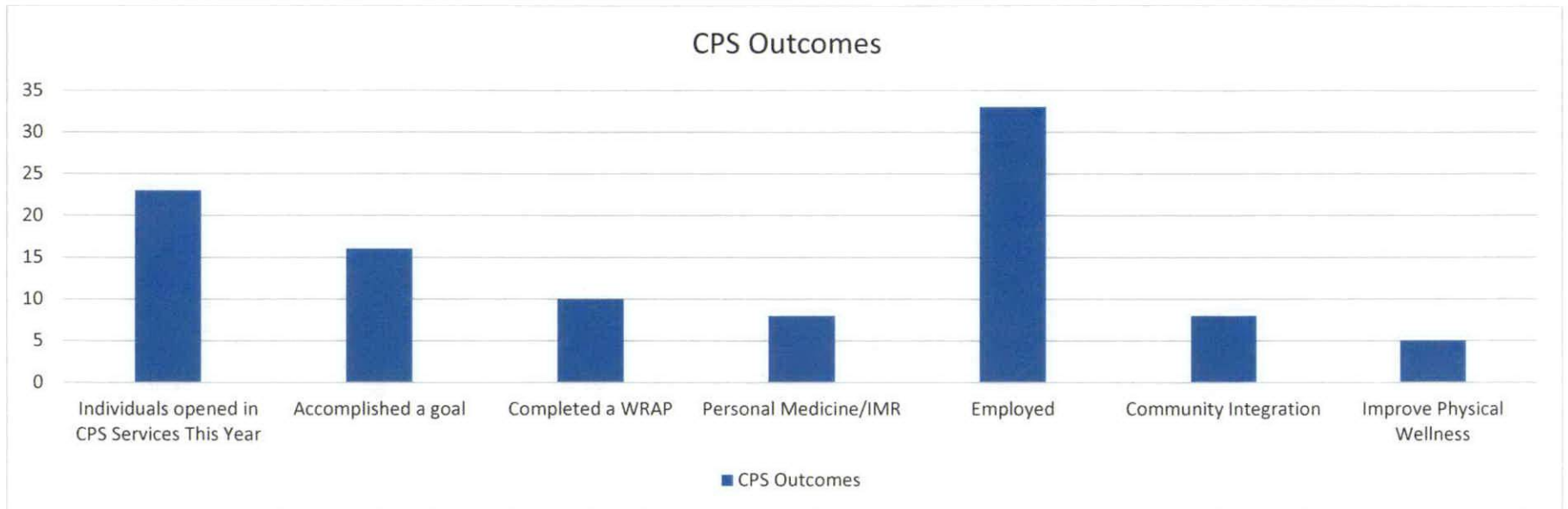
How could this problem be corrected? 1) Seasonal/Holiday specific interventions applied in sessions before and after holidays, CPS Holiday Socialization Events, and examination or creation of crisis or WRAP plans during this time of year.

Description of any identified assets of the program: "Malerie checks on me even if she cannot meet with me", "I have been lucky to be able to come to the on-site holiday events so that always lifts my spirits", "my CPS shares with me how they cope with the holidays and how they have no blood family, that makes me feel not so alone", "my old CPS turned his work phone on and checked on me last Christmas, that was pretty cool", "even though we miss appointments I know you will be there when we come back".

Identification of the reviewers: Jennifer C., Kevin D., Mary B., Mary P.

Date: 11/30/22 2:30pm, via conference call

Peer Support Services Outcomes 2022-2023



Outcomes of the CPS program include:

10 individuals completed a WRAP 8 individuals were introduced to personal medicine and/or IMR 33 individuals are employed
23 individuals opened in services 1 individual completed an advanced directive 8 individuals improved Community Integration
16 individuals accomplished a goal 5 individuals successfully discharged 5 individuals worked on improving their physical wellness

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

Connection to community resources, exploring triggers, improving self-advocacy, completing the Depression Workbook, enhancing budgeting skills, building self-confidence, improving motivation, managing mental health, learning daily living skills, and exploring, researching and attending community events.

Over this past year, our CPS program has also focused on helping peers work on self-advocacy and breaking stigma associated with mental health. We have also concentrated on helping program participants improve community integration and build natural supports. We have accomplished this through the following:

- Hosting the AMI Art Show to provide peers a platform to create and submit artwork for the community to see and enjoy
- Attending various community events which peers could use as a platform to vocalize their thoughts on mental health
 - ARC's self-advocacy events
 - Local and regional CSP meetings
- Hosting social gatherings with CPS's to network and build relationships