



**Psychiatric Rehabilitation Program - Ridgway  
Quality Assurance Report  
5/1/22 - 3/1/23**

**Introduction**

This DCI S.T.E.P.S. Psych Rehab Program, nearing its thirteenth year of service to community members, has experienced several changes over the past year. We continue to successfully maneuver the continued pandemic and adjust to staffing and program changes and challenges while supporting our partner PR program(s) with staffing shortages. We have been exited to see the lessening of pandemic related restrictions and a gradual return to a more flexible and community connected program. Our Psychiatric Rehabilitation (PR) program continues to serve members from the Elk and Cameron County areas. Members partner with PR staff to determine what skills/strengths they currently have and the skills they feel they need in order to achieve their goal(s) within the living, working, learning and social environments. Staff also support skill building in overall health and wellness and self-maintenance. The program members assist and partner with staff in developing their personal goal plan as well as daily program plan. Groups and activities are designed to teach desired and needed skills and PR staff also provide individual sessions to assess progress or barriers to progress. Family, friends and other agencies may also be involved in this recovery process. The program operates primarily between the hours of 7:30 am and 3:30 pm Monday through Friday. We continue to provide Saturday services once/month to allow for recovery activities and opportunities for skill building with individuals. There are been a slight increase in mobile service as the pandemic lifts and community activities increase and expand. We were recently successful in adding the mobile component to our service provision and license which has allowed increased support and opportunities for members.

**Referrals**

Since May 1, 2022 we have received 25 referrals from several sources and agencies. Our consistent referrals are from DCI Blended Case Management, DCI Outpatient Services, Cen-Clear Behavioral Health, Penn Highlands Behavioral Health, and Cameron/Elk Counties Behavioral & Developmental Program. We are receiving more referrals from various other local entities and from existing members, and an increased number of self-referrals. The overall number of referrals is down for the second year in a row, and while the program remains vibrant and active, we continue to seek to increase our referrals in the coming year. Program interest and referrals have been impacted by the pandemic, illness overall, and worry of Covid infection while participating in group settings. Participation rates in on-site services have also decreased as telehealth and mobile services became more available. Our current population is also aging, which has affected their consistent participation in on-site services.

## **Admissions**

Since May 1, 2022 we have had 27 admissions. Our current enrollment as of 3/1/23 is 41 and average daily census was 13.12 over this time period. We are making more consistent efforts to increase and support consumer engagement and to improve our retention of members through personal contact, phone contact, letters, and communication with other natural and formal supports. We have worked to increase our outreach to members who have been struggling to attend and offered support and ideas/options when they were unable to get to the program. Member retention is an ongoing focus/challenge and we have been brainstorming to find creative ways to support individuals in their recovery process while connecting them to skills, services and supports, and resources that they express interest in. During COVID-19 flare-ups, some referrals and admissions continued and we focused on safely admitting and engaging services in on-site and telehealth services. Telehealth services have significantly decreased as other community resources and activities are available to members. This remains an opportunity for skill building in problem solving, self-care, and community awareness and involvement. We have experienced an increase in member retention and readiness in working on preferred domains, skills and personal goals. While 3 exceptions were necessary this year, we were able to complete the needed documentation so that individuals wanting services were able to participate. We remain in contact with the County MH Administrator to review and discuss service interests and need areas for these individuals. These contacts are scheduled for every 6 months and on an as-needed basis due to changes in life circumstances for individuals we serve.

## **Psychiatric Hospitalizations**

There were 7 psychiatric hospitalizations this past year, with 6 being voluntary hospitalizations, allowing members to self-direct their choice of location/agency and be a more active part in their care. All members of these voluntary admissions were able to return to program upon discharge. The individual involuntarily admitted chose not to return to psych rehab services and moved from the area. There were 6 medical hospitalizations for members. These experiences have prompted ongoing support and skills building for self-care skills and increased work on managing medical conditions and issues. One individual is now involved with Mobile Psych Rehab services in their home and reporting satisfaction with being able to choose how services are delivered with respect to their needs and interests. We continue to support, coach and teach members about advocacy and identifying relapse-related challenges. We promote partnerships with service providers and encourage relapse prevention, problem solving, decision making and personal safety skills within program activities and interventions.

## **Discharges**

There were 30 discharges this past year. The average length of stay was 237.9 days, which is down from last year's average. One contributing factor is that several members who had participated over longer periods of time struggled with persistent symptoms. Several presented reasons for discharge included aging issues and the need for increased supports, obtaining work, members moving from the area, difficulty adjusting to the structure of the program, readiness and lack of interest, lack of communication with program, successful use of other services, transportation issues, and successful completion of recovery goals. We had an increase in members who were admitted, attended less than five times, and were not ready or interested in attending an on-site program. We remain dedicated to member engagement. We support and promote personal choice while encouraging members to overcome barriers related

to attendance. We seek to address discharge skills and preparedness in sessions and talk to members about the opportunities for their recovery as they move on from services.

### **Complaints/Grievances**

There were no grievances this past year. We continued to hold monthly member advisory meetings and worked through program suggestions, ideas, and input from members. This allowed for everyone's active involvement in sharing their thoughts and ideas on a regular basis. Members have worked together to resolve issues around chores, program planning, respect, and group involvement. They have been provided opportunities to build recovery skills around patience, supporting others, listening, and acceptance/tolerance. We hold monthly member/peer advisory meetings and members are active in addressing membership issues, concerns, newsletter planning, planning for program activities, and communicating about group successes and concerns.

### **Policy Changes**

There have been no program policy changes in 2022/2023. We continue to function as we have and are supporting members within the regulatory parameters and psych rehab principles and practices. We have adhered to all pandemic recommendations to protect staff and members and are committed to continue in this way for the duration of COVID-19. This is something we have been mindful of and continue to educate and inform members about.

### **Review of Adherence to Service Description**

Over the past year, we worked with OMHSAS and our payers to add mobile services to our license and service line. Our service description was updated to better reflect the mobile component and to add member homes/the community as locations for service provision when needed/wanted. The updated document was submitted and approved by OMHSAS in January 2023.

### **Satisfaction Surveys**

Members are invited to complete satisfaction surveys on a bi-annual basis. Results over the past year have been very positive. We always value member feedback and use it as a guide for responding to the needs and interests of the people we serve. Feedback from the surveys is used to evaluate service provision and adjust as needed or necessary. Satisfaction surveys currently average 4.66 out of a 5.0 scale. Member satisfaction surveys were completed at two times over the past year in May and again in December per our Annual Quality Plan. Staff distribute the satisfaction surveys and members help each other to complete them in order to protect the anonymity of the feedback. These results were shared with DCI administration, in PR staffing, and during member sessions. They are used in program planning and service provision as we seek to trouble-shoot and problem solve issues of dissatisfaction, suggestions for improvement, and gaps in services. We brought them to staffing and talked about options and opportunities to respond to member suggestions and feedback.

Member feedback allowed us to support a peer who wanted to read more during individual and session time, and to read and have the opportunity to practice their reading skills and grow in their confidence with reading. We have also increased the variety of session topics, and reviewed and obtained BU evidenced-based resources on communication and social skills at the request of members.

Psychiatric Rehabilitation Services (PRS) Outcome Checklists are also completed two times a year and upon discharge as able with members and with their collaboration. These show members reporting successes and progress across all domains, and are summarized under the outcomes section of this report.

### **Staffing Changes**

Several staffing changes occurred this past year. Rita Kraus, BS, CPRP continues as the Senior Director of Site-Based Psych Rehab Programs. She works primarily at the Ridgway office, is supporting and coaching Directors of the Coudersport and Bradford PR programs, and is assisting in training new staff. She continues to actively communicate with her supervisor and compliance officer in enhancing quality services and effective programming for the site-based PR Programs. She seeks to communicate with all stakeholders including OMHSAS to assist in review of regulations, and responding proactively to opportunities for growth and change. Rita remains active as an advisory board member for PAPRS. She has been active on the PAPRS board for over 9 years. She supports 302 delegate services and chairs the DCI Wellness Committee, now in its 15<sup>th</sup> year of support for employees.

Cheri Hofmann, BS, CTRS, CPRP continues as a PR Specialist and continues to grow into this program more successfully as time passes. She assists with program development and planning. She is expressing an overall increased comfort with her skills as a Certified Psychiatric Rehabilitation Specialist. She is actively pursuing training and experiences that support her growth in providing quality PR services.

Lindsey Benevich, BS, was working full-time and began to express interest in decreasing her hours while trying to manage a schedule that supports the program and her own needs. After several changes to her schedule, she is currently working 8 hours/week and supports our Saturday programming as well.

Chris Lawrie, MS Ed, has also explored hours that best support his own needs within program staffing needs. He has moved through several different schedules and is currently working 30 hours/week. He has recently signed up for the CPRP prep course through PAPRS. He is working toward his CPRP and is a creative member of our team.

Ana Arthurs, BS, Psych Rehab Worker, joined our team on 1/23/2023 as an added support to the PR team. She is moving smoothly through the 6-hour training on individual and group services, other PR training, review of regulations, and review of the psych rehab primer and our program manual. She is working on moving into caseload management, and is active in asking questions and relaying on supervisory guidance and support.

### **Chart Review/Audit**

35 charts were audited between 5/1/2022 and 3/1/2023. The majority are showing completion of all regulatory requirements. Occasional quality issues include printing forms from the incorrect format within the electronic health record, being inconsistent in following and documenting progress, and forgetting to include duration and frequency on plans. Chart audits are completed by several staff members in order to increase our team's awareness of documenting and tracking service provision effectively and efficiently. This has resulted in an increase in documentation compliance, mindfulness, and natural conversations about charting and overall quality of our documentation. Charting results included:

1. Encounter form signatures were procured within one week of service provision in five situations. In all others they were procured on the same day of service. Members who experience limited focus are coached and assisted with encounter signatures.
2. A functional assessment was completed 2 days late. Staff were coached on use of engagement when individuals are absent and inconsistent in communication. We supported ongoing use of telehealth in situations where it supports member engagement and needs.
3. Two functional assessments were completed via telehealth services when individuals were unable to attend in person due to illness. We have been able to decrease this from occurring by updating these earlier with members.
4. A brief training on document completion was provided in a staffing to discuss entering data into documents while doing them and avoiding leaving items unfinished for any length of time.
5. Chart audits are completed on all discharged charts to help support finalization of charts and services prior to being filed and ensuring a quality check on all closed charts.
6. It was noted that telehealth forms weren't being signed and this has been added to orientation and intake training for new staff.

Audit results are being discussed more consistently during supervision and during staff meetings. The chart audit form has been updated to more accurately capture each chart and service component. We are working to identify areas of improvement. There has been increased coaching on chart auditing, and for several months when our census was increased only the director was completing audits. Results were shared with staff as issues were noted. We continue to complete member surveys and outcome checklists twice a year to assist in reviewing member successes and progress throughout their program involvement. We are working with administrative support staff on filing, staffing issues in this program have impacted the consistency and at times the accuracy of filing documents and auditing has helped us to note and make correction where needed.

The PR Director continues to utilize administrative support staff for support with filing and chart review processes, with a recent increase in hours of support. We are looking forward to increased documentation consistency and a "tightening" of chart/documentation care and tracking.

Our Annual Quality plan outlines that we would complete 2 to 3 chart audits monthly, and we have easily averaged completion of 3.2 charts/month. We continue to train staff to complete the audits. The Program Director completes all audits when increased census and time constraints do not allow staff this opportunity. The overall audit process has been more consistently used as a teaching tool and one that supports recognition of service needs, which leads to creative discussions and more individual psych rehab service provision.

There were no violations during the program's annual licensing in April 2022. Recommendations clarified areas in identifying our training year to be from January 2022 to December 2022. We have also better identified how we address chart audit and quality check findings in our supervision, and staffing meetings and are growing in consistency with this. We also have increased outlining issues in our quality reporting. Supervision notes now include start and stop times and we are working to address ongoing areas for staff in supervision notes. We were successful in updating our license to include mobile services. We have included location of service provision on our individual recovery plans and have found licensing feedback helpful in growing the quality and comprehensiveness of our overall efforts. We included "I choose to continue with psych rehab" on our continued stay updates, reflecting member choice and

ongoing interest. We are including location to our rehabilitation plans and have been exploring and learning about moving into the community and member homes with the update to our program license. Training logs are now identifying PR core trainings from approved providers. We primarily have trainings from PAPRS/PRA, and recently from Drexel training site.

### **Current Issues, Concerns and/or Challenges**

Over the past year we worked through several staffing schedule changes which resulted in seeking a new psych rehab worker as Lindsey decreased her hours. Time was spent short-staffed and challenged the overall program schedule. We have adjusted office spaces to allow staff to have private space in order to increase each member's comfort and privacy when talking to staff. We also adjusted and explored schedules that best suit program needs, service provision, and for maximizing services for the needs of individuals we serve.

We have maintained adherence to all COVID 19 protocols and recommendations received from the PA Department of Health and DCI. We remain successful in providing both on-site and telehealth services to all members, with decreasing telehealth over time. We have sought and encouraged personal choice with members for their ratio of on-site to telehealth services. Our members have had an active role in choosing services that meet their needs. We remained vigilant in providing safe services, collaborated with members in following all established protocols, and continue to follow these with success. Members report feeling confident about their safety at our program. They have contributed to daily sanitizing of the program, monitoring of their own symptoms, and remaining home when sick to care for themselves and protect others from exposure.

We continue to provide personal protective equipment in the form of masks and gloves. We have supported, communicated with, and assisted in creating a schedule that allows individuals experiencing the impact of COVID 19 to maintain contact and experience successful involvement in Psych Rehab services. We continue to clean and sanitize of all program areas and surfaces on a daily basis.

Transportation remains an ongoing concern, as the Area Transportation Authority is the only public transportation available in the area. STEPS Psych Rehab members travel from throughout the Elk and Cameron county areas. This remains at the forefront of planning for members to successfully attend the program. We have struggled with ATA's ongoing schedule changes due to the pandemic's impact on their services. We work with Fitch Transportation as another significant transport for members. This has helped to decrease wait times and flexibility in participation. We are active in communicating with drivers in providing safe transport to and from services. In this our contacts with these services has increased to ensure effective communication and reliable transport for individuals. There has been an increase in members who drive themselves increasing flexibility and choice about the time spent at the program.

We are working to increase collaborative efforts with other service providers. We pursue collaboration with Cen-Clear Community MH Services and other agency services, finding that we are building connections with them that improve member outcomes and coordination of care. This has been reflected in the feedback members give to staff. We continue to meet with other service providers via zoom, and this has added to the convenience of communicating with

others across our area. We also have increased our face-to-face contact, depending on agency guidelines, availability, distance and health concerns.

Early in 2022 we worked to adjust to required changes within our electronic health record. Adjusting to the changes while ensuring PR documentation compliance was a challenge. We were able to find creative solutions and effectively communicate our needs to the IT department. We are now fully using these changes.

## **Program Outcomes**

Our members report the following successes over the past year:

- I got a part time job
- I met a new friend
- I got a dog for my apartment
- I am volunteering at the humane society
- I am helping to plan the newsletter
- I helped with planting spring flowers
- I went to the drop in center for the first time
- I got through probation and was offered house arrest in place of jail time
- I got engaged and am learning to communicate with my finance
- I got married and am moving to be with my husband who is in the military and got a job.
- I lost 10 pounds
- I am walking more
- I attended painting classes at my local library
- I am able to stay in my own home
- I moved into my own apartment and made it through on inspection without any problems
- I went to a pottery class for the first time

The Program Checklist outlines progress being made in all domains. Members self-report their successes and progress, this has increased a positive view of their recovery and promotes the belief that individuals can and do recover. The tally from these is included in our licensing binder for review.

We are waiting to implement an updated Functional Assessment Questionnaire. This has been updated by staff and recently entered into Avatar by IT. We hope to begin using it in the next quarter. We hope this will increase the comfort and completeness

Staff continue to seek and engage in psych rehab training and we are registered for this year's state PAPRS conference being held on April 13, 14, 20 and 21. Rita Kraus will be a presenter at this conference and all staff will be able to attend several sessions. Two staff participated in Benefits to Work training by CCBH and have begun to utilize these resources in monthly sessions. Online options for trainings has increased, which has helped us in offering more opportunities for training and education options for all staff.

Outcomes for STEPS PR from 2022 to 2023 are noteworthy in that they continue to participate safely in site-based psych rehab services despite the threat of flare ups of COVID. We were able to help a member maintain his work status when symptoms increased and aided a member in seeking and obtaining part time work at ELCAM in St. Marys, PA. We continue to provide extra masks for members and their family members and hand sanitizer to members to give to

family and friends. As precautions and guidelines change we maintain ongoing conversations around following through with safely engaging in services.

Members are still choosing to use fundraising monies to provide protective sheets and coverings for beds and pillow cases for members residing in a local high rise when there was a bed bug infestation. They continue to provide them as needed when members move into apartment complexes. They also recently used the monies to send a few peers to a local pottery class.

Members have engaged in 2 fundraisers to build skills in community outreach and connections, and report increased confidence in being able to approach others and interact with a wider variety of people. Members continued to create a quarterly newsletter and helped to create a program flier that uses their statements of satisfaction. They also created a new program logo of recovery. This logo (included at end of this report) is being used to create a program tee-shirt that will be provided to all members. They created several designs and submitted these to the program members for a vote. They chose a tree with the logo “recovery grows” to reflect the growing recovery skills and journey they are on and work toward. Several of these shirts will be offered at a local Recovery in the Stix workshop in May during Mental Health Awareness month.

Program members are returning to community activities as COVID restrictions lift. They are sharing updates on community events and activities and supporting each other is safely engaging in these opportunities. This has led to an increase in natural community supports and activities. Members report a decrease of feeling isolated as they are moving out into their communities and encourage each other in doing so.

Several members also volunteered to help with planning “Recovery in the Stix” which was virtual in 2022. Members are signing up and we are working with other area agencies in providing transportation, organizing and planning activities and presenters.

Staff have supported the Coudersport and Bradford Psych Rehab programs when they have been short staffed by travelling off-site and providing sessions and support. Staff have participated on the PAPRS board, executive team and attended board meetings, and state-wide psych rehab meetings. We have submitted our thoughts on regulations and support psych rehab becoming an in-plan service.

## **Future Projections**

We are gradually moving toward full capacity as COVID 19 recedes in our area. We plan to remain vigilant about safe involvement and participation for all members and staff. We are moving to increase our staff connections in meeting monthly with all site-based psych rehab programs of DCI. We are working to build our internal connections, collaborations and team building. We are working toward increased collaborations and connections to external resources, agencies and programs that support members and our community. We are continuing to onboard newer staff, and work to support staff seeking their CPRP once they are ready. We are attending our state PRS conference in April and continue to train existing staff in building psych rehab skills and competencies. The program is adjusting to growing staff and service provision. We are seeking to grow referrals. We remain dedicated to supporting member’s personal goals and plans and promoting personal choice, hope and empowerment.



We are also working to smoothly transition a mobile PR staff person into our existing program. The staff person has been operating under a mobile PR license, mobile program standards, and a separate PR Director. This transition has required the collaboration of the current Mobile PR Director with the Sr. Director of Site-Based Psych Rehab, allowing us to glean strengths from both program approaches. The new staff, who is currently the only PR staff within the mobile program, will have the benefit of having a team for day-to-day and professional support. Expansion of the mobile/community service provision is an area we are exploring in efforts to continue all service approaches with adherence to regulations. We are excited to see how this promotes and grows the mission of recovery through psych rehab, and personal empowerment in our agency and community.

We are looking into a Lead PR Specialist to enhance program changes and maintain quality service provision within these services. This will better support staff needs and training and consistent programming for our site. We are also working to be more consistent in reviewing chart audits and quality checks beyond timeliness and accuracy. We are delving more into the *quality* of documentation and more accurately reflecting the ongoing work and service provision that is occurring with our program members.

Respectfully submitted,

Rita Kraus BS, CPRP  
Dickinson Center, Inc.  
Sr. Site Based Psych Rehab Program Director  
Ridgway Psychiatric Rehabilitation Program

**Figure 1 – Program Tee – Shirt Design**



