

Beacon Light Behavioral Health Systems Corner Connections Psych Rehab Program Annual Quality & Compliance Report

Discharge and Programmatic Outcome Data - October 2022-September 2023

- Beacon Light PRS had 19 active members within the program at the end of September 2023.
- Within the year there were 26 total discharges:
 - o 1 gained the maximum benefit from the program
 - o 9 withdrew from treatment voluntarily
 - o 11 were lack of contact and non-responsive to engagement attempts
 - o 1 moved away
 - o 2 passed away
 - o 2 no longer met continued stay requirements
- The average Length of Stay in PRS for the 28 discharges was 1 yr. 6 mo.
- 15 of 26 or 58% stated that they improved from services; 14 of those had goals in the Socialization Domain, 1 had a goal in the Working Domain.
- Of those who did not identify progress in goals, 1 discharged by their own choice, 1 Participant was discharged without having established any goals due to lack of attendance, 8 participants discharged with no progress on goals due to lack of attendance following the creation of their initial goal, and 1 discharged due to moving out of state.
- The following quotes were included in discharges:

- o "I saw that I had a purpose and I can do it"
- o "I am reaching out more and talking to more people."
- o "Class has helped me to deal with emotions and different stressors."
- o "[I have learned to] control my anger better."
- o "[I have learned to better] cope with my feelings and how to use my 'I' statements."
- o One reports she is doing better with using positive coping skills and not isolating.

Individual Record Review

2-3 chart audits were completed monthly in order to review both active and discharged clients. 23 charts were audited between October 2022 and Aug 2023. These charts were pulled randomly from those consumers who had not had a chart audit completed in the last 9 months, and also from those who had closed in the past 6 months. The chart audit evaluated the timeliness, quality, and appropriateness of services for each individual.

Chart Audit Results								
Dates Audits Completed: 10/1/22-9/30/23								
Total Charts								
Audited	22							
Total Active Charts	20							
Total Discharged Charts	2							
Compliance Rates								
Referral/Admission Documentation	Total	86%	Several older charts do not have initial documentation uploaded in EMS.					
Assessment & Planning Documentation	Total	98.7%	Minor errors with two assessments					

			Two safety plans not uploaded.
Clinical Record			Several notes without corresponding
Documentation	Total	96.5%	encounter logs.
			One IRP with domain in which has no
Individual Recovery Plans	Total	99.8%	needs identified in Assessment.
Releases of Information	Total	100%	
Discharge Information	Total	100%	
Total Compliance Rate		96.99%	

Insights

The CC Psych Rehab Program was found to be 97% compliant with our program descriptions. The following issues were noted as being out of compliance with the program description:

- The most frequent infraction were notes which were found to have no corresponding entry on encounter logs, due in part to consumers forgetting to sign the encounter log at the beginning of classes.
- A number of consumers who were opened before the program moved to an electronic medical system did not yet have their initial paperwork uploaded and it was not able to be reviewed. BL's medical records department is working to upload the missing documentation for review.
- During chart reviews, 2 consumers were noted to no longer meet continued stay requirements and were graduated from the program.

Our plan to bring this to 100% includes working with the Journey Health medical records department to upload all missing documentation to consumers' EMS file. The PR program will also change the encounter log process to have encounter signed at time of daily note completion to ensure entries are no longer being missed. The PR Director will audit all Encounter logs at the close of each month and will return for correction any log that is missing entries.

Consumer Satisfaction Surveys

Consumer Satisfaction Surveys were complete March 2023 and September 2023. This survey was made available to all PR participants and were completed anonymously. The results of these surveys were shared with PR staff and Beacon Light's executive team. The results were also shared in the following QA meeting where they were made available to the public.

March 2023 Consumer Satisfaction Survey Results

Survey collection occurred throughout March 2023. All results were discussed with PRS Staff and peers in attendance at the next QA meeting.

Highlights

- 21 surveys completed of 32 active peers at time of data collection (65% response rate).
- 85% of responses reported that the "I have become more independent because of the things I am learning at Corner Connections."
- 100% of responses reported that they were "treated with respect and courtesy by the staff at Corner Connections."
- 81% of responses reported that they agreed or strongly agreed that "My overall wellness has improved since being a part of Corner Connections."
- 76% of responses reported that "My living situation has improved since being a part of Corner Connections."
- 100% of responses reported that "The classes offered at Corner Connections are relevant to my goals and objectives."
- 81% of responses reported seeing "noticeable progress in my recovery since being a part of Corner Connections"
- 100% of responses report "psych rehab staff are responsive to my feedback."
- Survey Comments:
 - o "I am thankful for the skills I have learned at Corner Connections."
 - o "To [the staff]: I want to say they do such a great job. Good listeners and I always feel that they really care about me."
 - o "It's just a place that gives me great motivation to do better and gives me hope that what I've been through is over and that it's ok to let it go. The staff is just amazing. Always go above and beyond to make sure you can reach your goals."

March 2023 Results	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Unsure
1. I believe I am treated with respect and dignity by the staff at Corner Connections.	18	3	0	0	0	0
2. Corner Connections gives me ownership over my goals and objectives.	13	7	1	0	0	0
3. I have become more independent because of the things I am learning at Corner Connections.	10	8	3	0	0	0
4. My living situation has improved since being a part of Corner Connections.	8	8	4	0	1	0
5. My overall wellness has improved since being a part of Corner Connections.	7	10	4	0	0	0
6. I continue to practice the skills I'm learning at Corner Connections outside of the classroom.	8	13	0	0	0	0

7. The staff at Corner Connections make contact with me weekly.	15	6	0	0	0	0
8. The classes offered at Corner Connections are relevant to my goals and objectives.	14	7	0	0	0	0
9. Corner Connections staff are responsive to my feedback.	13	8	0	0	0	0
10. I have seen noticeable progress in my recovery since being a part of Corner Connections	10	7	4	0	0	0
11. Overall, I am satisfied with the Corner Connections program.	15	6	0	0	0	0

September 2023 Consumer Satisfaction Survey Results

Survey collection occurred throughout September 2023. All results will be discussed with PRS Staff and peers in attendance at the next QA meeting on December 13, 2023.

Highlights

- 16 surveys completed of 19 active peers at time of data collection (84% response rate).
- 100% of responses reported that they agreed or strongly agreed that they are treated with respect and dignity by the staff at Corner Connections.
- 100% of responses reported that they agreed or strongly agreed that Corner Connections gives them ownership over their goals and objectives.
- 94% of responses reported that they agreed or strongly agreed that they have become more independent because of the things they are learning at Corner Connections.
- 94% of responses reported that agree or strongly agree that their overall wellness has improved since being a part of Corner Connections.
- 87% of responses reported that agree or strongly agree that they have seen noticeable progress in their recovery since being a part of Corner Connections
- 94% of responses reported that agree or strongly agree that their living situation has improved since being a part of Corner Connections. Only 5% (1 out of 21) disagrees or strongly disagrees that their living situation has improved.
- 100% of responses reported that they agree or strongly agree that, overall, they are satisfied with the Corner Connections program.
- Survey Comments:
 - o "I enjoy coming every week"
 - o "I am very grateful for the program"

- o "I feel the workers do a great job"
- o "It is a great place to be"

September 2023	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Unsure
1. I believe I am treated with respect and dignity by the staff at Corner Connections.	13	3	0	0	0	0
2. Corner Connections gives me ownership over my goals and objectives.	10	6	0	0	0	0
3. I have become more independent because of the things I am learning at Corner Connections.	10	5	1	0	0	0
4. My living situation has improved since being a part of Corner Connections.	9	5	2	0	0	0
5. My overall wellness has improved since being a part of Corner Connections.	9	6	1	0	0	0
6. I continue to practice the skills I'm learning at Corner Connections outside of the classroom.	8	7	1	0	0	0
7. The staff at Corner Connections make contact with me weekly.	12	3	1	0	0	0
8. The classes offered at Corner Connections are relevant to my goals and objectives.	12	4	0	0	0	0
9. Corner Connections staff are responsive to my feedback.	13	3	0	0	0	0
10. I have seen noticeable progress in my recovery since being a part of Corner Connections	10	5	1	0	0	0
11. Overall, I am satisfied with the Corner Connections program.	14	2	0	0	0	0

Exceptions to Admission and Continued Stay Requirements

Beacon Light's PRS Program did not request any exceptions for admission or for continued stay requirements between October 2022 and September 2023.

Annual Review of Agency Program Description

The PR Director and the Quality Assurance Officer completed a review of the agency Program Service Description and the Policy & Procedure Manual for the PR program on 7/17/23. The program was found to be in 100% compliance with the agency service description. Updates were made to the Program Service Description to reflect a change in the program's schedule hours of operation. These changes were sent by the Quality Assurance Officer to OMHSAS for approval.

Actions to Address Insufficiencies

- The PR Director will work with medical records to upload 100 % of all missing documentation to consumers' EMS file.
- The PR program will review all encounter logs at the end of each month to identify and correct discrepancies between the encounter log and the daily entry forms.
- The PR director will also work with the quality and compliance team to explore merging the daily entry note and the encounter form into a single document to simplify the documentation process and reduce the opportunity for errors.
- Additional training will be provided to staff around Goal Development to improve the continuity between the individual's IRP
 and their daily skill development to increase the number of successful goals at discharge and to increase participation in
 discharge planning.