

Institute for Human Resources

Performance Report

Fiscal Year 2015

Agency Mission Statement

The mission of the Institute for Human Resources IHR is to provide a continuum of quality mental health and substance abuse services ranging from education and prevention through treatment and aftercare for residents of Livingston County.

In the last few years IHR has approached the delivery of services in different ways. IHR was able to treat over 2,600 clients in FY 15. We have developed opportunities to expand access to our services by embedding counselors in the primary care offices with the OSF Medical Group. IHR then moved forward with expanding counseling services to three separate school districts. The programs are funded through the local 708 Mental Health Board.

Clinical Department

IHR treated roughly 1,793 unduplicated clients within the Clinical Department in FY 15. The typical services for the Clinical Department consist of counseling for children and adults. The common treatment areas for the Clinical Department relate to anxiety, depression, phobias, marital difficulties, family conflicts, children and adolescent behavior problems, school related issues, child abuse and spousal abuse, juvenile delinquency, and grief issues.

The Clinical Department developed several groups to address a variety of issues such as an anger group, survive & thrive group, partner abuse group, sexual offender group, a women's group and a kid's group. The purpose is to serve more people with various treatment modalities. Each group uses a progress monitoring tool to measure its effectiveness.

The Clinical Department plans to use the tool Y-OQ as an outcome measure. The Y-OQ is a parent/self-report questionnaire designed to measure symptom distress in 6 areas thought to be factors that adolescents struggle with. The Y-OQ will be a way for IHR to monitor progress for children and adults. The counselors will be equipped with Surface Pro's to gather the data both at the agency and in our outreach settings.

Substance Abuse Department

The substance abuse program continues to treat around 400 unduplicated clients each year. IHR offers a wide range of substance abuse services, including remedial education classes, DUI assessments, as well as aftercare programs for clients who have completed a formal substance abuse treatment. IHR continues to offer intensive outpatient treatment, both during the daytime hours and evening hours. Our substance abuse programs are licensed through the Division of Alcoholism and Substance Abuse (DASA). In FY15 the department treated 377 individuals. IHR completed 41 DUI evaluations. There were 281 Substance Abuse Assessments in FY 15. There were 151 clients eligible for the intensive outpatient program. There were 45 clients treated in the DUI risk education. The SA Department treated 40 detainees through the jail group. The department completed 990 outreach/community interventions in FY 15. The three primary substances of choice continue to be alcohol, marijuana, and heroin.

SA Prevention

In FY15 the Prevention Program met with 984 unduplicated children in Livingston County. The children received some form of prevention education either through a State approved curriculum such as Project Alert, Botvin's Life Skills or special programming such as Operation Snowflurry or Operation Snowflake. The various schools within the prevention program include Pontiac Junior High School, Prairie Central Junior High School, Odell Grade School, and Flanagan Junior High School.

Operation Snowflurry, a half-day event designed for 4th and 5th grade students, was held at Dwight Grade School in Dwight on October 25th. The Snowflurry welcomed 40 students from area school districts. Operation Snowflake, a daylong event for 6th, 7th, and 8th grade students, was held at Dwight Grade School in Dwight on March 28th. The Snowflake welcomed over 157 students from area school districts.

Psych Rehab Department

The Psych Rehab Department (PSR) continues to treat roughly 45 to 50 clients each year. These clients suffer from a severe and persistent mental illness. The PSR Department offers case management services, psychosocial rehabilitation services, supportive residential services, community support services, and psychiatric consultation. The department also offers medication monitoring. The department has a designated liaison with area hospitals. IHR has recently worked towards increasing our efficiency and effectiveness for all clients who are hospitalized. It is IHR's plan to provide a consistent liaison from the hospital discharge to follow-up services at IHR. This has been an area of weakness for IHR in the past. IHR looks forward to making positive changes in this area. We plan to make every effort to formally cooperate with all hospitalizations in order to reduce recidivism and promote recovery based services upon their discharge.

IHR continues to have a respite apartment in the Prairie Horizons Apartment complex. This complex provides housing for nine PSR clients. The tenth apartment is often used as a respite apartment. Its primary focus is to help manage clients who are discharged from an extended hospital stay. The goal is to help clients reestablish within the community and continue on with their recovery process. The respite apartment is meant to be a short term option in order to bridge the gap from an extended hospitalization to the client living on their own again.

Psychiatric Department

Psychiatric services continue to expand at IHR. At this time we have two psychiatrists, one APN, and two nurses. During the last year, this department consulted with 201 new referrals up from 151 clients last year. A total of 475 clients were treated in the program.

There were 116 children (80 males and 36 females) treated by our child psychiatrist. IHR continues to improve its collaboration with the general practitioner for ongoing treatment. IHR will need to move toward a consultation with a formal discharge and referral back to the general practitioner. In the last year we were able to average 28 hours of psychiatric consultation time per month. One area we are looking to improve is the efficiency of appropriate referrals, and most importantly, collaboration back to the general practitioner for ongoing treatment. It is our goal to use the Psychiatric Program as a consultation and referral back to the general practitioner. This action will allow new referrals to take place with greater efficiency. IHR will provide a detailed discharge summary in conjunction with formal case coordination collaboration with the primary care. A Psychiatric Case Coordinator may be needed to reach this goal.

Crisis Program

The crisis team consulted with approximately 349 unduplicated clients in FY 15. The program completed 652 treatment hours for the year. IHR's crisis program consists of three full-time staff members who respond to all emergencies during the day, evenings, and weekends. The majority of the calls for this program help address clients that are experiencing a mental health or substance abuse emergency such as a rapid decrease in functioning within a two week period, increased symptoms, and/or a danger to themselves or others. The interventions provided in a crisis situation consist of an assessment, brief supportive therapy, and a referral/linkage to appropriate services. The objective for each crisis intervention is to focus on stabilization, decreasing the client's symptoms, and avoiding harm to self or others.

A goal for IHR over the next year is to confirm a client's disposition upon a crisis assessment discharge. We will attempt to address clients who have a high recidivism rate. IHR will focus on decreasing the recidivism of clients showing up again and again at the Emergency Room for the same issues.

In FY 15 the crisis team treated 166 unduplicated offenders at the County Jail. There were 132 males and 34 females. This service has been a great asset for the jail as it provides a consistent format which allows each offender to be properly screened for mental health issues. It is IHR's objective to solidify a proper disposition once the offender is released from jail. This action allows offenders to follow up with our services for mental health and/or substance abuse services.

IHR continues to reach out to local law enforcement agencies to provide training. The purpose of the training is to help officers effectively manage crisis calls with individuals experiencing an increase in symptoms and/or a danger to themselves or others.

IHR staff assisted in 68 individual psychiatric hospitalizations in FY 15. There were 31 child/adolescent psychiatric hospitalizations and 37 adult psychiatric hospitalizations last year. (20 adult males & 17 adult females and 16 male children & 15 female children) IHR used 12 different psychiatric hospitals in FY 15.

IHR completed a total of 89 individual SASS Screens in FY 15. SASS is defined as screening assessment support services and is designed to screen children who are at risk of harming themselves or others. In FY 15 there were 31 children hospitalized within the SASS Program. There were 58 children deflected from hospitalization and provided further intensive services up to 90 days. The Family Resource Developer continues to work with families in the SASS Program in a variety of areas including the Individual Care Grant.

Survey Results

IHR recently completed a client satisfaction survey. There were with 124 respondents. This marks IHR's highest response to a survey. The following information demonstrates the results from our survey. The survey will be added to this report as an addendum.

The top three treatment concerns for clients seeking treatment at IHR remains depression, anxiety, and substance abuse. The survey identified 67 male respondents and 57 female respondents. Most of the respondents were between the ages of 18 to 35. The ethnicities for the respondents were mostly classified as white. The survey indicated that a majority of the respondents reported being in treatment for 11 or more sessions. The survey produced 18 statements from the respondents from the question of "what could make their experience more positive?" The survey also produced 9 general comments.

The questions from the survey are listed with the highest percentage rate reported from each question.

1. I feel comfortable in the waiting room at IHR. **48% agree**
2. IHR's office personnel are courteous and helpful. **62 % strongly agree**
3. My confidentiality is protected at IHR. **56% agree**
4. IHR's business hours work well with my schedule. **52% agree**
5. The fees assessed for services are reasonable and affordable. **44% agree**
6. I feel comfortable with my counselor. **56% strongly agree**
7. My counselor is a good listener. **56% strongly agree**
8. My counselor understands me. **49% strongly agree**
9. If I had concerns about my treatment, I could discuss them with my counselor. **54% strongly agree**
10. I am definitely getting what I want out of counseling. **38% strongly agree**
11. I feel better since coming to counseling. **38% strongly agree**
12. Overall, I am satisfied with my counseling experience. **44% strongly agree**

Overall Agency Operations

Business Improvement Outcomes:

Financial:

As an agency we continue to look for various funding opportunities. The ongoing decrease from State funding has caused us to depend on other funding streams. We have returned to full staff status in each department. IHR continues to use the CIS system (custom information system) which helps us complete a service note for each billable activity. The program will eventually include mental health assessments and treatment plans. This addition will make IHR a completely paperless system. A new DSM-V and ICD-10 codes will also be implemented this fall.

Health and Safety:

IHR has an excellent safety committee that continues to meet quarterly to address health and safety issues within the agency. IHR recognizes that it is important to provide a safe and healthy environment, which benefits both staff and clients. The Executive Director is ultimately responsible for providing this environment for all persons who enter IHR. To accomplish this, two mechanisms are utilized: 1) inspections by persons or organizations external to the agency; and 2) internally generated culture of safety awareness, supported by training and inspections. The IHR staff is required to report unsafe conditions which occur in our facility, or which clients may have brought to their attention.

Services:

IHR provides a great deal of client centered services to the community. We have expanded our outreach to the community. Our services at the Livingston County Jail have certainly increased over the last several years. We continue to screen, assess, and coordinate follow-up services with the offenders. IHR will continue to develop outcome measures to help determine the effectiveness of our treatment. We plan to monitor recidivism rates with specific programs. The gathering of this data will help us show our program's effectiveness. IHR will work toward increasing the community and stakeholders awareness of our services through increased marketing efforts. The use of our data will remain a key factor in articulating our outcomes to the community.

Facilities:

IHR's overall structure has remained the same over the last few years. We were able to make changes to increase our overall efficiency such as moving the Nurse Practitioner closer to the waiting room.

Administration:

IHR's Board of Directors continues to consist of eight members.

The members represent various communities within Livingston County such as, Pontiac, Odell, Fairbury, and Long Point. The current IHR Board has a diverse background which helps IHR stay current in a variety of areas. The Board's backgrounds consist of the legal field, law-enforcement, the education sector, industrial, medical, and farming backgrounds.

Risk Management:

IHR has a risk management plan designed to protect the health, safety, and security of clients, staff members, visitors, and volunteers while promoting our mission of safeguarding its assets. The risk management activities during the year include regular test of the emergency drills and discussion of all safety issues. The agency bylaws and the personal policies are reviewed by the Board annually. The Executive Staff participate in an annual legal seminar held by IHR's legal consultant Barbara Weiner. The purpose of this annual training is to help reduce or eliminate any potential lawsuits and keep the agency current with all legal issues within the field. The Counseling Staff recently completed a proper documentation presentation provided by Barbara Weiner.

Staff Turnover:

IHR continues to work hard to retain qualified staff, address employee issues, and minimize staff turnover which can be disruptive to the agency's overall operation. In the last few years the staff turnover at IHR has significantly decreased. IHR's intern program remains solid as we maintain a close working relationship with Illinois State University. We currently have two interns from the University. IHR is open to other internships if deemed appropriate to our needs.

Conclusions and Recommendation

The Strategic Plan and Performance Report have identified IHR's strengths and weaknesses in each program. It has certainly given us a sense of direction for the next 3 years. Our surveys show that clients are generally satisfied with our services. We will continue to strive for client centered and recovery based care throughout each of our programs. It has been IHR's goal over the last few years to drastically increase our collaboration both with referral sources and the medical field. Case coordination in all areas including crisis, psych rehab, and outpatient for the clinical department and substance abuse department remains a high priority for IHR. IHR remains well-positioned to continue on with services to meet the needs of the community that we serve. IHR will continue to work closely with Court Services and the Judiciary System to develop treatment options for clients involved in the judicial system. We will identify and implement outcome measures for each of our programs. The outcome measures will allow us to report our efficiency and effectiveness regarding our services at IHR. We will continue with our outreach program with OSF Medical Group and local school districts. IHR will continue the process of using social media to communicate our overall services and their value to the community.