



**Psychiatric Rehabilitation Program – Potter  
R.I.S.E. (Reaching Independence, Staying Empowered)  
Quality Assurance Report  
6/1/2023 - 4/30/2024**

**Introduction**

As R.I.S.E. enters its fifteenth year of serving our community, we are thrilled to share the exciting changes and advancements we have made over the past year. In late summer of 2023, the members requested an update to the program name wanting to create their own unique identity in their community and a better understanding of Psychiatric Rehabilitation. The members took one month to brainstorm ideas and then voted on the name, choosing the one with the most votes. Members also opted to modify the daily activity schedule to better align with their needs and interests with the addition of a daily mindfulness practices group and weekly art therapy and interpersonal skills sessions. Members decided to enhance the physical spaces of the Psychiatric Rehabilitation (PR) program by creating a "Zen" area for breaks and transforming the second group room into a more functional space for wellness activities such as yoga and Tai Chi. Our PR program continues to serve members from the Potter and McKean County areas, operating Monday through Friday from 9:00 am to 3:00 pm. Despite staffing changes and challenges, staff have remained steadfast in providing members with quality, individualized programming to assist them with reaching their overall recovery goals. Members collaborate with PR staff to bring awareness to their current skills, strengths, abilities, and areas of need for skill building to obtain their desired role in living, employment, learning, and social environments. Family, friends, and other agencies may also be involved in this recovery process, as support is an integral component to success in recovery. PR staff has also been working to highlight the importance of overall wellness in mental health recovery. We have started offering more group sessions on wellness topics, aligned with SAMHSA's eight dimensions of wellness. All group sessions and activities are designed to teach essential skills and provide opportunities for members to practice and apply them. When available, members are offered opportunities to practice these skills in the community most recently through their participation in the annual Potter County Maple Festival. Members, independently, sold houseplants and herbs to fundraise for community outings of interest. Our program also continues to participate in the Potter County Community Garden where they are able to socialize with other gardeners and build lifelong gardening skills. PR staff also offer individualized support through one-on-one sessions with members to review their progress, identify barriers, and find solutions to overcome these obstacles. Together, we continue to strive for excellence in supporting our members' journeys toward recovery and well-being.

**Referrals**

Since June 1, 2023, we received eight referrals, which is down from last year. Referrals were primarily received from DCI Outpatient Services, UPMC Cole, and Potter County Human Services Blended Case Management, with new referrals coming from Laurel Health Center.

Staffing shortages in our program has limited the ability to seek and accept new referrals, as the census must remain at a level that is conducive to providing quality programming to existing members. With that said, PR staff continue to work with existing referral sources, notifying them when the program has opportunities to accept referrals.

## **Admissions**

Since June 1, 2023, the program has had four admissions, which is also down from last year. The current enrollment as of April 30, 2024, is 17 members with an average daily census of 6.75. Readiness appeared to be the greatest factor in successful admission with one individual delaying admission due to medical issues. PR staff continue to work with referral sources to assist with assessing an individual's readiness and willingness for services by offering tours of the program, distributing brochures, and providing opportunities to speak with PR staff about the program before beginning services. An additional barrier, as mentioned above continues to be staffing shortages as it relates to the ability to accept referrals. Current staff remain dedicated to resolving staffing issues by working closely with marketing and HR teams. Despite staffing challenges, PR staff have increased consumer engagement to promote retention of existing members in various ways such as obtaining a staff cellphone, which has added the ability for members and staff to engage via text, contacting members who have not engaged in programming for 1-2 weeks, sending letters, and collaborating with service providers more frequently. We have worked to increase our outreach to members who have been struggling to attend and offered support, ideas, and options when they were unable to get to the program. Member retention is an ongoing focus and challenge and we continue to develop creative ways to support individuals in their recovery journey while connecting them to skills, services supports, and resources that they find to be of interest. The program has experienced an increase in member retention and readiness to work on preferred domains, skills, and personal goals with a retention rate of approximately 82% from last year to the present. While five 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 CCBH and the County MH Administrator to review and discuss service interests and need areas for these individuals. Contact with the Potter County Mental Health Administrator is scheduled monthly and contact with CCBH is quarterly, as well as on an as-needed basis due to changes in life circumstances for the individuals we serve.

## **Psychiatric Hospitalizations**

There were six hospitalizations in the last year, two psychiatric hospitalizations, three drug and alcohol hospitalizations, and one medical hospitalization. Only one hospitalization was completed under a 302 commitment and all others were voluntary giving the individual the choice in their treatment. Five members returned to PR after discharge to continue working on their stated goals and objectives and one individual chose to discontinue services; case management and mobile PR were recommended with case management obtained. Two of the three drug and alcohol hospitalizations were for the same individual, both admissions lasting approximately two weeks. The individual resumed PR services with limited engagement and did not follow up with discharge instructions regarding outpatient D&A services. PR staff collaborated with the individual to revise goals and objectives to work toward their chosen goal of alcohol reduction but ultimately the individual is not ready to make lasting changes. The other individual who chose drug and alcohol inpatient care, returned to PR with the intention of locating community based D&A services and obtain AA support, working with PR staff to revise objectives but did not follow through on plans and was later discharged from the program as they stopped attending. The individual was active with case management at the time who

assisted them with locating community based D&A services. 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 15 discharges this past year. The average length of stay was 463 days, an increase from last year. Contributing factors for discharge included positive outcomes such as a successful recovery and employment as well as challenges such as readiness and disengagement, alcohol/drug addiction, medical concerns, and transportation issues. Approximately four members discontinued PR before completing functional assessment either through disengagement or through reporting it was the right time to engage in the service. PR staff recommended services such as case management, outpatient D&A, and mobile PR to assist these individuals with their recovery. 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**

No complaints or grievances were filed this year by program members. Staff continue to facilitate Consumer Advisory Board Meetings monthly to discuss concerns, announcements, upcoming events, and general program updates. During these meetings, members have the opportunity to express their thoughts, opinions, and suggestions in a safe, collaborative environment. Members feel empowered to express their ideas for group session topics, fundraising opportunities and preparation, positive feedback/successes, and resolving concerns such as device use guidelines and PR task sign-up. These meetings provide ongoing opportunities for members to build and practice skills such as collaboration, critical thinking, delegation, conflict resolution, acceptance, active listening, and open-mindedness.

### **Policy Changes**

There have been no program policy changes from June 2023 - present. We continue to operate as we have providing support to the members within the regulatory parameters and psychiatric rehabilitation principles and practices. All COVID-19 procedures and policies are discontinued at this time. With that said, staff continue to stay apprised of changes from County, State, and/or Federal agencies that would require a change to procedure.

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

Over the past year, the Program Director and Senior Director have reviewed the program's service description and have ensured that all programming and services provided are in adherence with that document's guidelines. This process will continue, going forward, to ensure the program's adherence to professional and state expectations.

### **Satisfaction Surveys**

Members are invited to complete satisfaction surveys on a bi-annual basis. Results from the past year have remained positive, with members reporting beneficial outcomes from their

engagement in PR. We highly value member feedback and use it to guide our responses to the needs and interests of those we serve. The feedback is utilized to evaluate and adjust our service provision as necessary. The satisfaction surveys conducted in January 2024 showed that 100% of participants (13) agreed or strongly agreed with Question 9: "I would recommend this program to others." There was only one disagree response to Question 7: "Since working on my goals in Psych Rehab, my life has improved." Member satisfaction surveys were completed twice over the past year, in August 2023 and January 2024, as part of our Annual Quality Plan. Staff distribute the surveys, and members assist each other in completing them to ensure the anonymity of the feedback. These results, along with this Quality Report, are shared with DCI administration, PR staff, and members during sessions. They are integral to program planning and service provision, helping us address issues of dissatisfaction, consider suggestions for improvement, and identify gaps in services. We discuss these results during staff meetings and explore options to respond to member suggestions and feedback.

Most members chose not to provide additional written feedback in the survey. However, those who did offered valuable insights into what is working well and areas for improvement. One member mentioned that PR provided them with opportunities to make friends, build coping skills for worry and rumination, and increase independent living skills. Another individual highlighted the challenges they faced with recent changes. This feedback enabled staff to offer additional support to help individuals cope with staffing and programming changes, ensuring that all changes are fully reviewed and understood before implementation.

### **Staffing Changes**

This program has experienced changes and challenges with staffing this past year with Koriann Bollhorst, BS CPRP moving into the Program Director position in turn leaving a vacancy in the PR Specialist position. Robert Green, BA CPRP and Kaitlyn Wareham from the Bradford PR Program, and Rita Kraus, BS CPRP Senior Director from the Ridgway PR Program have been providing coverage and support while we work to fill the position.

Koriann moved into the Program Director position in October of 2023 after obtaining a BS in Psychology and CPRP credential. She continues to learn and grow in this position, actively communicating with her supervisor and other members of the leadership team to gain proficiency in new responsibilities while also striving to ensure the quality of services and effectiveness of programming for the PR program. She seeks to communicate with all stakeholders, including OMHSAS, to assist in review of regulations and responding proactively to opportunities for growth and change. Koriann is an active member of both PRA and PAPRS, attending the annual PAPRS Conference in April. It is important to Koriann to stay current with evidence-based best practices for service delivery and recovery and seeks opportunities for training and enrichment. Koriann is also a Master Gardener Apprentice through her local Penn State Extension, which has offered her the opportunity to assist members who are interested in developing gardening skills for coping and personal sustainability.

Rita Kraus, BS, CPRP remains in the role of Senior Director of all 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 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 16th year of support for employees. She is traveling more due to staff shortages and supporting McKean and Potter County PR programs.

Robert Green, BA CPRP remains in his role as Program Director at the Bradford PR. Robert has been assisting the Potter PR Program one day per week with facilitating group sessions and updating member documentation as necessary.

Kaitlyn Wareham joined DCI in December 2023 as a Psych Rehab Specialist at the Bradford PR Program. She is currently working under a waiver that was approved in late April of 2024. Kaitlyn joined PRA and PAPRS, and is working to acquire required trainings to be eligible to sit for CPRP exam. Kaitlyn currently provides group coverage and documentation support two days per week in the Potter PR Program.

### **Chart Review/Audit**

Between 6/1/2023 and 4/30/2024, 21 charts were audited. The majority are showing completion of all regulatory requirements. Occasional quality issues include reporting the use of member outcome checklists and thorough completion of member progress notes (circling am/pm, writing corresponding number to goal next to each group). 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 the overall quality of our documentation. Charting results included:

1. Making auditing part of the discharge procedure allows for a thorough review of closed charts.
2. There has been a marked improvement in ensuring functional assessment domains match IRP domains, with only one error where a domain was not selected in the functional assessment but selected on the IRP, which was corrected as soon as it was discovered.
3. One IRP update was completed via telehealth services when an individual was unable to attend in person due to illness. We have been able to decrease this from occurring by updating earlier and improving communication when updates are due, helping individual accountability for regular attendance.
4. One initial Functional Assessment was completed on the 36<sup>th</sup> day of attendance, best practice is 30 days after intake.
5. One Quarterly Note was missing the member's goals, this was corrected and has not occurred since. Staff route documentation to their director or Sr. director for review to ensure accuracy and quality.

Audit results are being discussed more consistently during supervision and staff meetings. The chart audit form has been updated to more accurately capture each chart and service component. We are working to identify areas for improvement. There has been increased coaching on chart auditing, and for several months only the director was completing audits. Results were shared with staff as issues were noted. We continue to conduct member surveys to assist with reviewing member successes and progress throughout their program involvement.

We are working with administrative support staff on filing and form structure, as well as the correct completion of intake forms, signatures, and progress notes. Accuracy in filing documents and auditing has helped us to identify and make corrections where needed. The PR Director

continues to utilize administrative support staff for filing and chart review processes. We are looking forward to increased documentation consistency and an improvement in 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 2.5 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 individualized psych rehab service provision.

There were no violations during the program's annual licensing in June 2023. Our training year is recognized to be from June 1, 2022 to May 31, 2023. 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 continue to incorporate feedback from licensing into our daily practice. Training logs are now identifying PR core training from approved providers. We primarily have training from PAPRS/PRA, and recently from the Drexel University Division of Behavioral and Healthcare Education training site.

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

The greatest challenge over the past year has been the changes in staffing. With the resignation of the former director and Koriann moving into the Director position, a vacancy for a PR Specialist has remained since August 2023. To assist with the workload, staff from the Bradford and Ridgway PR programs have been providing ongoing support and coverage to ensure the quality of programming does not suffer. The director continues to collaborate with the marketing and human resources departments to brainstorm ideas for promoting the position. In addition, regular meetings have been established to keep everyone updated on the progress and challenges of filling the vacancy. Despite these challenges, the dedication and flexibility of the team have been instrumental in maintaining our program standards.

Transportation remains an ongoing concern and barrier, as there is currently no public transportation available in this area for individuals to attend this program. We contract with a private transportation business to provide transportation needs for our program. Psych Rehab members reside throughout the Potter and McKean county areas. This remains at the forefront of planning for members to successfully attend the program. We have struggled with severe weather events and road conditions this past winter, as well as scheduling limitations due to the vast area of this rural county, which restricts the number of days some individuals may attend program. We are active in communicating with the Driver Coordinator and drivers in providing safe transport to and from services. Our contact with this service remains consistent and ongoing, even outside of program hours to ensure effective communication and reliable transport for members. Our members are also encouraged to communicate with transportation to support their own recovery and responsibility for attending PR.

We are working to increase collaborative efforts with other service providers. We pursue collaboration with PCHS, UPMC-Cole, The Guidance Center, Cen-Clear Community MH Services, as well as other agency services. We are building connections with these organizations, resulting in improved member outcomes and coordination of care. We continue to coordinate and participate in a monthly mutual consumer meeting, bringing member successes, needs and progress for consideration.

## Program Outcomes

Our members report the following successes over the past year:

- I have a place I can go everyday to get the help I need.
- I'm more independent.
- I now have people in my life I can count on.  
I am learning different coping skills to help with my mental illness.
- I have a better understanding of my diagnosis.
- I started volunteering in my community.
- I feel like I'm understood by the staff and peers at RISE.
- I'm able to manage my symptoms effectively.

The member Recovery Checklist outlines progress being made toward their stated goals. It allows members to review and assess their objectives and goals each attendance day. Members have been more engaged with their checklists over the past year, self-reporting their successes and progress, which has fostered a more positive view of their recovery and reinforced the belief that individuals can and do recover. There is ongoing learning in using this tool, and staff provide close guidance and assistance as needed. Completed checklists are filed in the recovery section of member charts.

Staff continue to seek and engage in psych rehab training and we attended the annual PAPRS conference held on April 11, 12, 18, and 19. Koriann Bollhorst completed the *Psychiatric Rehabilitation for Autistic Adults* training provided through collaboration with CCBH. The tools and strategies provided to staff during this training increased the quality of programming for our members diagnosed with autism. Online options for training has increased, which has helped us in offering more opportunities for training and education options for all staff.

Members engaged in two fundraisers this past year (September and May) 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. Recently, they organized, planned for, and participated in a two-day Maple Festival, the annual local event held in the courthouse square. This was a big success for selling houseplants they propagated themselves and speaking about the PR program in an effort to challenge stigma associated with mental illness. In September, they participated in the Flower Power Fundraiser for the first time, selling spring flower bulbs. The members enjoyed this new opportunity and plan to do it again this coming fall. Members are also excited to participate, for the third year, in the Potter County Community Garden, an annual event sponsored by the Penn State Extension Office, UPMC, and the Potter County Commissioners. Members are provided the opportunity to learn about nutritional value, planting and maintaining a vegetable garden, and soil health, and are developing a sense of accomplishment by growing their own food to use for group lunches.

Members are entering their second year of publishing a monthly newsletter with limited staff assistance. Each month a member volunteers to write the featured article on a recovery topic of their choice, often offering coping strategies. The newsletter also highlights activities the members engaged in from the previous month such as celebrating member birthdays, recovery activities, and community engagement. In April 1 member was highlighted for her participation in the PAPRS Conference R.E.S.P.E.C.T. poster contest with the article also being shared on the DCI Facebook page. The RISE newsletter continues to be distributed to all members and throughout the agency.

Program members have increased the level of community support they utilize such as local food pantries, paper goods donation through a local church, natural supports, and those who are eligible, the Veteran Food Share program. Staff collaborate with members in locating community resources per their interests or needs including AA meetings, community events, and the newly established soup kitchen that operates one Saturday per month.

### **Future Projections/Action**

As staffing levels improve for the PR program, we are gradually moving toward full capacity. We will continue to prioritize safe involvement and participation for all members and staff. Our commitment to increasing staff connections includes monthly meetings with all site-based psych rehab programs of DCI. We are focused on building internal connections, fostering collaboration, and strengthening team dynamics. We are also dedicated to enhancing collaborations with external resources, agencies, and programs that support our members and community.

Efforts to onboard new staff are ongoing, and we support staff members pursuing their CPRP certification when they are ready. Attendance at the PAPRS conference in April and ongoing training for existing staff are key components of our strategy to build psych rehab skills and competencies. While adjusting to challenges with staffing and service provision, we aim to grow referrals as our staffing improves. We remain dedicated to supporting members' personal goals and plans, and to promoting personal choice, hope, and empowerment.

We plan to expand our mobile and community service offerings once we have adequate staffing levels. This initiative is part of our ongoing efforts to maintain comprehensive service approaches in compliance with regulations. We are excited about the potential of this expansion to advance our mission of promoting recovery through psychiatric rehabilitation and personal empowerment within our agency and the community.

Our focus for the coming year is onboarding new staff by leveraging internal and external connections, which will greatly enhance all areas of our programming. This will enable our staff to grow the program, offer more individualized sessions, and create opportunities for increased community involvement for our members. We are excited about the positive impact these efforts will have on our program and the community we serve.

Respectfully submitted,

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