



**Annual Continuous Quality Improvement Review and Plan
Certified Peer Specialist Program
February 2025- February 2026**

CenClear Mission Statement

CenClear is committed to improving lives through high-quality early childhood and behavioral health services for all ages.

Type of Service

CenClear’s Certified Peer Support Program provides ongoing education and strengths-based support to consumers of mental health services by promoting self-determination, personal responsibility, and empowerment through peer support and self-directed recovery, as part of the Pennsylvania Mental Health Service System. The goal is to provide mutual support to those struggling with mental health challenges and transfer skills needed for successful maintenance of mental health symptoms and improved behavioral stability.

Service Description Compliance:

As of 2/18/2026, the CenClear Peer Support Service Description is in alignment with the most recent update of the OMHSAS Peer Support Bulletin and other existing regulations and performance standards. If changes to regulations or standards occur, the CenClear Peer Support Administrative Team will coordinate to draft needed updates to the description which will be sent to OMHSAS for review/acceptance.

Referrals:

Individuals meeting the eligibility criteria must be referred using the two-page CPS referral form. Page one of the referral can be completed by the peer, their support person, or an existing provider. Page two, the Written Recommendation for Services, must be signed by a Licensed Practitioner of the Healing Arts (LPHA).

There have been 127 service inquiries made to the program since 3/1/2025. These requests include those that did not lead to completed referrals.

Inquiries were made by people seeking support, outside agencies, internal request for change documentation or via the CenClear website.

If staffing is unavailable, peers will be given the option to be referred to another provider, or to join our wait list.

Admissions and Continued Stay:

Anyone diagnosed with a Serious Mental Illness (SMI) or, if under the age of 18, a history of Serious Emotional Disturbance (SED), and who is the recipient of Medical Assistance (MA) is eligible to receive Peer Support Services, as it is deemed medically necessary. Consumers without Medical Assistance (MA) coverage may be funded by county funds, if available.

There were 35 admissions between March 2024 and February 2025.

Discharge Criteria:

An individual may be discharged when PSS is no longer medically necessary, the individual no longer meets eligibility requirements or the individual has achieved the goals and sustained progress as identified in the ISP and services are not expected to provide additional benefit to the individual. An individual may request to withdraw from PSS. A decision to discharge should be a joint decision between the individual and the PSS agency. When a decision to discharge is not a joint decision, the PSS agency shall document the reason for discharge. When a decision to discharge is reached, a PSS agency shall offer the individual the opportunity to participate in future service. When an individual who was discharged from PSS has a subsequent need for PSS and meets admission criteria, the PSS agency shall consider the individual for readmission without regard to previous participation. When an individual voluntarily withdraws from the PSS program, a PSS agency shall plan and document next steps with the individual, including recommended service and referral. When it is necessary to discharge an individual from PSS due to the individual's disengagement, prior to discharge the PSS agency shall document: (a) Attempts to reengage the individual. (b) The circumstances and rationale for discharge. Upon discharge, a PSS agency shall complete a dated and signed discharge summary that includes a description of the following: (a) Services provided. (b) Outcomes and progress on goals. (c) Reason for discharge. (d) Referral or recommendation for future service. A PSS agency shall ensure that the discharge summary is: (a) Completed no more than 30 days after the date of discharge. (b) Reviewed and signed by a mental health professional.

There were 61 discharges between 3/1/2025 and February 2026.

Reasons for Discharge:

Goal Plan Completed: 5

Change in Level of Care: 2

Unable to Contact or Locate Consumer (Non-Engagement): 7

No Funding/Approval of Services: 0

Consumer Declined Further Services: 8

Consumer Moved: 5

Other: Administrative discharge (24), unable to staff (9), peer incarcerated (1).

Peer/Program Outcomes:

In the last licensing year, CCBH informed CenClear of the hospitalization of 5 CPS peers. One of these peers was continually re-hospitalized (6 times total) and their treatment team has been coordinating to prevent future hospitalizations. Several other peers were hospitalized for physical health reasons. In these cases, wellness coordination with the CenClear Wellness Nursing Department was encouraged.

Five program participants discharged from the program due to the successful completion of their recovery goals documented on the peer support service plan. We continue to provide ongoing training on the development of SMART goals to assist our staff with educating their peers about creating goals that are more measurable so that even the smallest amount of progress can be documented as having been achieved. Goals achieved included: 3 environmental goals, 1 financial goal, and 1 social goal.

Since our transition to a new EHR system, we have lost some of our established outcome measurement tools- namely, easy access to goals that have been achieved (including job and housing obtainment.) Moving forward, we will continue coordination with the EHR Superuser Cohort to determine if the Life Events function of the EHR system will allow for tracking outcomes measures.

Individual outcome measures for each peer are documented on the CPS Progress Measure, which is monitored by a CPS department assistant and entered into the CCBH ePortal.

Program Accomplishments/Activities/Events over the past year: CenClear CPS staff continued to develop professionally throughout the year. This year's trainings helped staff grow their expertise in Collaborative Documentation, the Social Determinants of Health, Motivational Interviewing, Ethics for Peer Based Professionals, Battling Burnout, Peer Engagement, Suicide Prevention, and Recovery, Resiliency and Person-First Language, among other topics. Several staff attended training to become Rainbow Peer Professionals, while others became trained to work with Youth and Young Adults. A group of staff in the DuBois area also had the opportunity to participate in the in-person Simulation of Hearing Distressing Voices: An Exercise in Empathy. Many of these training options were provided in coordination with PMHCA and PAPSC.

This year, CenClear was proud to employ Pennsylvania's Peer of the Year, Chris Kumm. Chris and several colleagues attended the annual peer support conference hosted by PAPSC and the annual banquet where Chris was presented with his award. CenClear plans to increase our involvement by providing a training session during the 2026 Peer Support Conference. This effort is being spearheaded by CPS/CRS Program Supervisor, Jody Kulakowski.

CenClear continued to partner with Community Connections to sponsor the CSP Ambassador position which is now staffed by CPS/CRS, Shane Ellis. In this position, Shane has worked to increase his presence at the local drop-in centers and has been brainstorming opportunities for relationship building and community engagement.

This year Shane has been instrumental in planning the Kick the Stigma event, as well as the yearly Summer Picnic, and a Winter Wellness event that saw over 100 participants. Plans for the coming year include growing the Kick the Stigma event, and hosting free dentist check-ups at the drop-in centers by partnering with a community organization.

Again, hiring continues to be difficult for our program. The cost of the training continues to increase, and training is rarely offered outside of the Pittsburgh and Philadelphia/Harrisburg regions. The addition of the requirement to be certified before being able to provide peer support also adds an additional challenge. Recent hires have taken between 4-6 months from point of interview to working with peers independently. This has increased our challenges to staff referrals as they come in and we find that sometimes other providers do not have staff available, either, which leaves people on waiting lists.

We continued to spend a lot of time this licensing year learning new processes and developing new procedures. Our focus continues to be on maintaining and supporting the staff in our department, while taking as little time as possible away from staff being able to provide peer support services to their peers. These transitions are still impacting our department, and our organization as a whole, which has led to a change in leadership at CenClear with the hiring of Acting CEO, Dr. Mary Tatum. Dr. Tatum has shared that her focus will be on supporting overall staff wellness and ensuring that staff are well-prepared to support their peers. Staff persevered and continue to support one another- these challenges continue to bring our department closer together.

In the 2025 licensing year, we have continued to fine tune our New Hire Training Checklist to ensure that it captures the needs of newly hired CPS staff. Our EHR workflows continue to be updated and we have been offered the ability to attend trainings provided by the EHR company to learn ways to best use these systems. Documentation 'cheat sheets' are being tailored and we have begun to use video recordings to provide another learning option for the visual learners within our department. We have begun to learn about ways that we can use artificial intelligence engines to support our work. For example, ChatGPT was utilized to ensure that our comprehensive resource guides for all of our services areas are up-to-date. We continue to collaborate with the CenClear IT department to make it so that all of these resources are accessible to staff in Microsoft Teams, on the CenClear website, within the HR system, etc.

CenClear continues to run the employee spotlight program and has recently expanded to sharing stories of success from people receiving services, with the appropriate permissions. CPS Program Supervisor Chelsey McElwee is nearing the end stages of obtaining her Master's degree in Clinical Psychology, and is she is able to utilize these skills within the CenClear MHOP department. Several of the staff within our department continue to maintain employment and volunteer positions outside of CenClear that benefit our local communities, such as being an EMT, owning a gym, and running a support group for victims of domestic violence.

Our department continues to grow and develop with assistance from our administrative supports and our organizational supports have grown as we've supported one another through organizational changes.

Current Program Census: 131

Number of Staff: 1 Program Director, 1 Program Manager, 3.66 Program Supervisors, 13 Full-Time CPS Staff, 12 Part-Time CPS Staff, 2 Departmental Assistants

Licensing Status: As a result of a licensing inspection on February 26, 2025, the program was found to have zero deficiencies with no plan of action required. We were commended on the contents of our supervision notes, the thoroughness of our training program, our quality assurance plans, and for following the 'golden thread' from assessment to ISP.

Participant Surveys (Individual Satisfaction): Consumer satisfaction surveys were sent out via Microsoft Forms in July 2025 and January 2026. There were 47 respondents in July, and 23 respondents in January. The number of responses continued to decrease this licensing year, so we will continue to find ways to increase peer participation.

Notable information from the July 2025 survey included: 9 respondents identifying that they have unmet needs outside of their peer support services (1 Jefferson County, 5 Clearfield County, 1 Blair County, 1 Elk County, 1 Huntingdon County) and 1 negative response which stated that the respondent did not feel they are making progress on their identified goals.

The January 2026 survey showed: 7 respondents identifying that they have unmet needs (1 Elk County, 3 Jefferson County, 3 Clearfield County) and 1 negative response which stated that the respondent did not feel they are making progress on their identified goals.

When asked about a typical session with their CPS, these words were commonly found in responses: body doubling, listening, community engagement, support, trauma-informed, accountability partner, non-judgemental, collaborative, physical wellness integration, positivity, strength-based, laughter, small steps, encouraging, and validating.

Individual Records Review: The CPS Program Supervisor who oversees Quality Assurance completes monthly chart audits. Results and deficiencies of monthly chart audits are immediately shared with staff via email and are followed up on in Weekly CPS Admin meetings and individual supervision. Trending concerns are acknowledged immediately via email to all CPS staff and are also reviewed at the beginning of our monthly training meetings. This is to ensure charts are up to date with state regulatory documentation and associated standards. The goal of the CPS department is to review at least one record documented by each existing CPS each month, as well as all records for all peers that have been discharged throughout the month. Typically, this accounts for about 20% of our peer census, or 30-40 charts.

Trending issues that we continue to work on as a department are attaching peer signatures to sessions at point of signature receipt, ensuring that locations are correct in our ISNs, continuing to acclimate to our new EHR system and continuing to tailor the system to meet our departmental needs, and ensuring that goals are in SMART format- specifically that they are specific and measurable.

There are plans in place to remedy these trends, including: continuing to advocate for a simpler process for attaching signatures in the EHR and utilizing verbal consent (when appropriate), working with the CenClear billing department to update the location list to ensure all needed options are available and easily identifiable by staff, and providing ongoing training to staff regarding documenting SMART goals in the new EHR system. The EHR company has also begun to offer trainings on updated workflows and these trainings are being attended by EHR Super Users who can bring back and disseminate information.

Any records found to not be in accordance with regulation and standards were updated and payment was adjusted in collaboration with appropriate funding streams.

Training: CPS staff are required to participate in a 75-hour orientation course offered by one of the PCB-approved vendors before they can see any peers. In addition, all new CPS staff attend CenClear orientation, complete new hire trainings in Relias, participate in wellness coaching and tobacco cessation counseling training, and engage in departmental training. 6 hours of field training is provided in the field by supervisors before a new CPS can begin providing services- which is documented in a supervision note. After successfully passing the CPS certification exam, CPS' must maintain their certification by attending 36 hours of training for every certification period (2 years). 24 of the training hours must be specific to peer support and/or recovery practices, 3 hours in ethics, and the remaining 9 hours are chosen by the professional and may be in any topic. In addition to these trainings, staff completes yearly fraud, waste and abuse training as well as mandated reporter training every five years. Staff is also trained on the Sanctuary Model, as CenClear is a Sanctuary organization. A record of training hours is maintained by the Vairkko system, and a back-up of these records is held within the CPS department for auditing purposes.

All staff received the needed training hours and are on target to meet the hours needed for their individual certifications.

Over the last year, CenClear partnered with the PA Peer Support Coalition and PMHCA to bring some of their training offerings to CenClear exclusively. The partnership with PMHCA will continue into the next licensing year and these trainings will be opened to other peer support agencies. By utilizing these resources we are able to offer our staff more cost-effective options for expanding their knowledge base and their ability to support a diverse group of peers.

Supervision: Supervision is maintained by Program Supervisors and the Program Manager. Each staff person receives at least 1 hour of supervision each week with a CPS Supervisor. Additional supervision is provided based upon need, and if required during corrective action planning. If a supervision cannot be maintained, a 'filler' note is uploaded to explain the reasoning. Supervisions are now being housed in the HR system. Learning how to use this system involved a learning curve and staff are now acclimating to using the new system as we look toward a new licensing year.

Grievances Filed: There were no formal grievances filed during this reporting period.

Reviewing the Quality Improvement Plans:

Review of Last Years QIP and Actions to Address Remaining Goals: (below)

Our quality improvement plan for the last year involved improving our discharge process and ensuring continuity of care at the point of, and after, discharge from the program to increase the number of discharges due to “service goals met”. To do this we intended to continue to train staff on the regulations surrounding discharge and how the discharge process would look in our new EHR system, SmartCare. A related goal was for most of our discharges to be completed face-to-face with a peer. Secondly, we wished for all of the staff within our department to feel confident documenting within the new EHR system. Thirdly, our hope was to see 90% of staff within the department hitting their productivity goals. A fourth goal was to hire staff to cover the Altoona and St. Marys areas. Lastly, our hope was that employee satisfaction would increase over the year.

Implementation of the new EHR system continued to throw roadblocks ahead of focusing on additional goals as educating and supporting staff through ongoing change continued to be a priority in order to help staff maintain work life balance and to retain current staff. The number of discharges completed face-to-face with peers initially increased to then go down drastically during the last quarter of the fiscal year, leaving this an ongoing goal. Confidence with documenting in the new EHR system was at an all-time high, based upon observational data and employee interviews during supervision. However, the EHR continues to experience bugs and processing issues that sometimes complicate known processes. The EHR is also one that is continually being improved, so we are now at a point where we will begin reevaluating our initial workflows to look for opportunities to simplify work for staff and peers, alike.

Over time, putting focus on administrative tasks led to a decrease in staff reaching their productivity goals. We were given ways to report this within the EHR, so the team will continue to monitor this with the goal of working toward being able to provide additional financial compensation to staff within the department. Staff were hired in the Altoona and St. Marys areas and these staff are both performing excellently. Staff satisfaction has continued to increase.

Upcoming Year's Quality Improvement Plan:

This years Quality Improvement Plan includes: continuing to work toward 40% of discharges being completed face-to-face with peers, having 80% of CPS Progress Measures completed on-time with a 75% response rate to our twice yearly satisfaction surveys, continuing to work to have 90% of the department reaching their productivity goals, hiring staff in Clearfield and HMJ area, with the possibility of adding a staff in the State College area, and continuing to focus on increasing staff satisfaction.

This annual quality review will be posted on the CPS portion of the CenClear website. Existing peers, families, and other community stakeholders will be encouraged to view the plan and a copy can be provided, if requested. The annual plan will be reviewed with administrative staff and shared with the entire CPS team. Peers are encouraged to participate in the development of the next year's quality improvement plan, if they wish, by providing additional information, or requesting a call back on their satisfaction surveys.

Completed by: Kaitlyn Bloom, BS, CPRP, CPSS- CPS Program Manager (February 2026)