



Annual Quality Improvement Review and Plan

Mobile Psychiatric Rehabilitation

April 2024-April 2025

CenClear Mission Statement

CenClear is an organization dedicated to leading our community with superior quality and innovative services to all consumers by providing physical, social, emotional, educational and leadership development.

Type of Service

Mobile Psychiatric Rehabilitation Services was developed by CenClear's mental health division to provide rehabilitative supports and assistance to adults with a mental health diagnosis who are seeking living independently. These individuals often have a limited support system, and most have not completed a high school education; many are unemployed. They are often unable to access community supports and services without assistance and may lack basic living skills which confound and impede the recovery process.

Service Description:

Psychiatric rehabilitation is a therapeutic rehabilitative service for individuals with mental illness that may decrease the need for or shorten lengths of stay in inpatient, partial hospitalization and day treatment settings. It is designed to assist individuals to increase competence in normal life activities and gain the skills necessary to pursue life goals with the greatest amount of independence. Psychiatric rehabilitation helps individuals to achieve valued roles in the community in living, learning, working and social environments. Services include identifying strategies and treatment options to minimize negative effects of mental illness; developing and implementing individual skills to restore stability; supporting functional gains; and adapting to community living. Services must be recommended by a physician or other licensed practitioner of the healing arts acting within the scope of practice under State law.

Referrals:

Individuals meeting the eligibility criteria will be referred using the MPRS referral form. Referrals are to be signed by a Licensed Practitioner of the Healing Arts (LPHA). Alternatively, referrals may be made by phone and the referral form will be completed by CenClear office staff. Upon receipt of referral, staff will schedule an intake for the individual.

There have been 30 referrals since April 2024.

Admissions and Continued Stay:

The program accepts referrals from any source including self. (1) To be eligible for services, an individual shall meet the following: (a) be 18 years of age and older, (b) have the presence of or a history of a serious mental illness (SMI). This includes one of the following diagnoses: schizophrenia, major mood disorder, psychotic disorder, schizoaffective disorder, borderline personality disorder, (c) have a written recommendation for services from a Licensed Practitioner of the Healing Arts (LPHA), who is acting within the scope of professional practice. (d) as a result of the mental illness, have a moderate to severe functional impairment that interferes with or limits performance in at least one of the following domains: living, learning, working, socializing. (2) Are enrolled with Medical Assistance Program (consumers without Medical Assistance (MA) coverage would be funded by county funds if available, (3) chooses to receive service (4) Exception: individuals who do not meet the SMI requirement above may receive services when the following conditions are met: written recommendation by the LPHA includes diagnosis of mental illness identified by DSM V, written recommendation by the LPHA includes a description of the functional impairment resulting from the mental illness as required by 1 (d) above.

There were 26 admissions between April 2024 and April 2025.

For continued stay, the individual continues to meet the eligibility/admission criteria. A continued need for services is based upon one or both of the following: (1) there is ongoing functional impairment or skill deficit that is identified in the individual recovery plan, (2) withdrawal from services could result in loss of rehabilitation gain or goal attained by the individual, (3) the individual continues to voluntarily agree to the program.

Discharge Criteria:

The criteria for discharge of an individual consists of the following: (1) the individual has accomplished/achieved the goals identified in the individualized service plan and there is reasonable expectation that withdrawal of services will not result in loss of gains or goal attainment and that services are not expected to provide additional benefit to the individual (2) the individual agrees to discontinue services (3) non-compliance or non-engagement.

There were 32 discharges between April 2024 and April 2025.

Reasons for Discharge:

Goal Plan Completed: 9

Change in Level of Care: 1

Unable to Contact or Locate Consumer: 4

No Funding/Approval of Services: 0

Consumer Declined Further Services: 10

Non-Engagement of Services: 2

Consumer Moved: 5

Deceased: 1

Program Accomplishments/Activities/Events over the past year: This year, the program participated in Recovery in the Stix to promote mental wellness and community inclusion, and to educate the participants of the Mobile Psych Rehab Program. Director attended NatCon '24.

Current Program Census: 22

Number of Staff: 1 Director, 1 Full time

Licensing Status: As a result of a licensing inspection on April 8, 2024, three citations were given to the program for general staffing requirements that were rectified on the Licensing Inspection Summary. License for PRS for '24-'25 was granted.

Participant Surveys: Consumer satisfaction surveys are to be completed twice a year by staff members and director of services. Surveys are obtained to check the status of satisfaction within the program services. PRS survey for 2025 has been reviewed, minimized for importance, and made easier to complete by having QR code. Surveys can now be conducted and viewed online via Microsoft Forms.

Individual Records Review: State regulations require 25% of all open files to be reviewed monthly for quality assurance. There is a monthly review conducted by the director of the program, which is documented and reviewed by the Quality Assurance department. Results and deficiencies of monthly chart audits are reviewed and discussed during monthly group supervision between director, staff, and quality assurance. This is to ensure charts are up to date with state regulatory documentation.

Training: Staff providing services upon hire are to complete a 12-hour psychiatric rehabilitation orientation course no more than 1 year after hire. Staff actively providing Psych Rehab services shall complete 18 hours of training per calendar year, 12 of which focus specifically on psychiatric rehabilitation or recovery practices. Staff completes yearly fraud, waste and abuse training as well as mandated reporter training every five years. Staff is trained on HIPAA and the Sanctuary Model. New hire staff are required 6 hours of training specific to the psychiatric rehabilitation model prior to working independently within the first year of hire. New staff require 6 hours of face-to-face training prior to delivering services independently provided by a psychiatric rehabilitation director or certified psychiatric rehabilitation practitioner within the first year of hire. A record of training hours is kept by psychiatric rehabilitation director.

Staff completed 93 hours of training between April 2024 and April 2025.

Supervision: The PRS director will supervise staff. They will meet with staff individually, face-to-face, no less than two times per calendar month. They will also provide group supervision of PRS delivery, staff meetings, and case discussions. Annual job appraisals will be completed by the director.

Grievances Filed: There were no grievances filed between April 2024 and April 2025.

Reviewing the Quality Improvement Plans: Each individual was given the opportunity to review the Quality Improvement Plan during a session and have any questions answered by staff. This was documented in their progress note for the day.

Upcoming Year's Quality Improvement Plan: Goals of this plan will be shared with consumers and documented as to who would review or not review via Individual Service Note. The Director will analyze Consumer Satisfaction responses given two times per year to determine possible areas of improvement. Director and staff will analyze goals, objectives, and action steps in IRP to ensure regular progress of goals every 90 days and as needed. Director and staff will update IRP to reflect goal/objective completion every 90 days and as needed. The Director will provide training resources for staff to complete the yearly regulation requirement of 18 hours, 12 of which are program specific. The Director will continue to develop programmatic goals for success. (ie % of successful discharges per year). The director will identify goals that fall below the identified benchmark and implement a quality improvement plan to address the deficiency. The director and staff will continue to promote CenClear as a provider choice for community referral sources. Director and staff will monitor IRP goals every 90- day update to evaluate progress/update when necessary.