

**Kitsap Mental Health Services
PRSN QRT Review
March 19-22, 2007**

BACKGROUND INFORMATION:

The QRT consulted with PRSN Staff and with Ombuds and reviewed the results of the 2006 Ancillary Provider Survey Summary and 2005 QRT On-Site Report. The team also reviewed the current organizational chart provided by KMHS to update the team on recent staff changes.

In addition to this, the team met with FRENZ and Community Voice members to hear experiences of consumers and family members at KMHS.

SITE VISIT – ANCILLARY PROVIDERS

March 20 the QRT interviewed representatives from the Kitsap County Youth Mental Health Court, Bremerton Police Department, Kitsap County Jail, DCFS, Aging and Long Term Care (Kitsap County), and Central Kitsap School District. The team usually interviews representatives from Harrison Medical Center, but they declined our invitation to meet and provide written feedback.

SITE VISIT – KITSAP MENTAL HEALTH SERVICES

March 21-22, the QRT interviewed staff from Older Adult Services, Crisis Response Team, Madrona Day Treatment, PACT, AOP: Counseling and Education Program, Medical Services, Child and Family Outpatient-Community Support, and Pathways.

SITE VISIT - CONSUMER VOICE:

On March 19th the QRT began this biennial review of KMHS with a visit to the FRENZ consumer organization where several members shared their success stories as well as a few concerns. We were told about a managerial change at the Petersville Apartments which also brought problems for residents getting repairs completed promptly.

The evening of March 20th the QRT attended the Community Voice Consumer/Family Member support group where the group quickly bipolarized as the consumers present engaged in a lively discussion about the need for support to stay in recovery after working so hard to find it followed by a depressing recital of woes from Family Members. Consumers reported wonderful changes in their lives thru services from KMHS while Family Members pointed out the need for more assistance in finding housing when being released from Burwell House and reiterated complaints similar to four years ago about the lack of information available about the process after a family member becomes ill and is committed. When this was addressed four years ago the local NAMI affiliate had informed the QRT they were in the process of creating such a booklet. The team was updated that the booklet project had been dropped, incomplete, due to changes in the circumstances of the volunteers who had been working on it.

FINDINGS

The QRT met with several members of the “Kitsap County Youth Mental Health Court, also known as the Integrated Treatment Court”. They shared with us wonderful news of the creation and implementation of this program aimed at holistic treatment for our Future, our children. We are proud to have our region at the forefront of such an innovative program – first of its kind in the State of Washington. The team shared with us they enjoy a true partnership with KMHS and have found the staff of KMHS have worked hard to learn the legal system as well as educating others about mental health issues. “KMHS staff has not just been valuable, but invaluable” to the building and success of this program.

Representatives from Kitsap County Adult Jail shared with us the addition of KMHS staff on-site (full time) has brought about a great deal of improvement and greater safety in the jail. “Even the jail supervisor has noted a reduction of problems and concerns since staff (of KMHS) came onboard.”

A representative of the Bremerton Police Department told us communication with KMHS has gotten a lot better. He expressed concern about people with a long history of self-injury being released so quickly that officers on all shifts are familiar with the consumer. He also asked for help in reversing a policy at Harrison Memorial Hospital which requires the officers to bring persons in for mental health evaluations and releasing restraints in the hospital’s triage area. The previous policy was to bring these persons in through the ambulance entrance directly to the secure area where the restraints were released. His feeling is the new policy is a huge safety concern for everyone who happens to be in the Triage/ER area.

DCFS told the team about a good working relationship with KMHS having staff attending KMHS Resource Management staffings. Communication and collaboration, participating in treatment planning and pulling the community together to meet individual needs are strengths of KMHS. This group, as well as nearly every other, pointed out a huge problem is the inability to access mental health services until “everything falls apart”. They would like to have documentation of denial of services for Adult Outpatient which they are required to have for court.

Aging and LTC county representatives shared they enjoy good working relationships with KMHS staff. KMHS staff are conscientious, open, responsive and clients appear to enjoy working with them. They would like to see depression screening expanded to include persons over the age of 62, in addition to the current screenings of 62 and under.

A Central Kitsap School District representative shared with us the staff of KMHS is always willing to problem solve when asked. KMHS staff attend IEP meetings and educate school staff on mental health issues. They would like a memorandum of understanding (MOU) to define the roles of KMHS and the district in exceptional cases. The district would like to have a KMHS counselor on-site at the schools, if funding could be secured.

KMHS Staff Interviews

The entrance interview gave the team heads full of information on new, innovative programs KMHS has begun, starting with shifting the focus to whole person wellness and a new attitude in the agency toward meeting consumer needs as perceived by the consumer.

The QRT found from the Older Adults Services they contract with many resources to find the services and support to improve the quality of life while staff themselves gain knowledge from the wisdom of the Elders. "In Elders medical issues can quickly turn into mental health issues." QRT members found themselves in agreement with this team that we would like to see society have respect for Elders and disabled people.

The QRT members consumed lunch with Consumers at Oasis. The consumers shared with us they feel KMHS is moving the right direction. Most of the QRT members agree with the consumers that we would like a choice other than sandwiches for lunch at least a couple times a week. Consumers also expressed an interest in employment which is a major indicator of recovery.

The Adult Crisis Response team shared they are working to affect seamless transition from program to program, as well as increase staffing for crisis intervention to have a consumer seen sooner to avoid ITA. They would like to knock heads together in Olympia to bring about a realization about the important viable resource of mental health services in the community.

The QRT toured the Madrona Day Treatment Center and heard the wonders of this continuing program's excellence.

The QRT learned a great deal of information about the upcoming implementation of ½ PACT. We look forward to our next visit to see how the program is actually working.

We had a difficult time understanding how the attitude of the Adult Outpatient Counseling and Education team lines up with the recovery and consumer need centered attitude, we heard from the other teams at the agency.

The QRT members are still jumping with joy about the great redirection of the medical services team. So many exciting new ideas being planned and some already begun, we look forward to our next visit to see how well these changes are working for consumers.

Child and Family Outpatient community support team told us of several new programs that can have a great impact on the entire community. Such innovative programs, bringing early intervention, could alleviate the need for extensive services for individuals in the future.

The Pathway (COD) program gave us an overview of several developing programs and new support groups. The QRT likes the idea of drop-in groups.

RECOMMENDATIONS

- 1) Confer with the Bremerton Police Department about their concerns at Harrison Memorial Hospital and intervene, in an appropriate manner, to assist in ensuring the safety of people at the Triage/ER area.
- 2) Several staff teams we interviewed expressed their own concerns about the agency/union negotiations. The QRT feels this issue needs to be addressed quickly as it impacts consumer care.
- 3) QRT expects the entire agency to come in line with the Recovery and Resiliency based services from the consumer's viewpoint balanced with the passion that the agency is embracing EBPs.

SUGGESTIONS

The QRT noticed the kitchen at Oasis is amply equipped with appliances, with a stark contrasted to the menu of sandwiches. We were thinking out loud that it sure would be nice if there were a way to have someone help the consumers learn to prepare inexpensive, healthy, nutritious meals – especially using the items the consumers are able to obtain at food banks and such places. Obesity being a real challenge for many consumers it might even be appropriate to see if a dietitian might be able to volunteer a few hours to give a lesson in nutrition. Just an idea we would like to share with the agency.

The QRT is delighted with the innovative new programs both at the agency and in the community that KMHS has undertaken with such success. The team recognizes all the efforts in these projects – such as the Youth Mental Health Court – to bring these innovative, first of its kind in our State, programs that have noted success. We look forward to our next biennial visit with confidence that the Staff of KMHS will make the new programs coming on-line soon, and only just begun, as successful as programs KMHS has created in the past. Our hats are off to all employees of KMHS as we were told “Everyone that works here – even the janitors – wants the best for each and every consumer.” Show us what you can do with a ½ PACT – we know KMHS can create the best ½ PACT in the State of Washington!