

West End Outreach Services

QRT REPORT

February 22—24, 2010

BACKGROUND INFORMATION

The Peninsula Regional Support Network Quality Review Team conducted its two year qualitative review of West End Outreach Services February 22—24, 2010. The QRT members were briefed by PRSN staff regarding WEOS agency trends over the past two years.

SITE VISIT—ANCILLARY PROVIDERS

February 22nd, the QRT interviewed representatives of the Forks Hospital ER Department, Clallam County Sheriff's Department, Clallam County Housing Authority and Washington State Department of Child and Family Services.

SITE VISIT—CONSUMERS

February 23rd, the QRT was served a delicious Mexican fajita lunch at the "Tree House" day treatment center. Unfortunately only four or five consumers were present because the others were eating lunch at a local church which has a weekly feeding program. However, we were lucky to have one consumer who serenaded us with his banjo while we ate. After lunch the QRT was taken on a tour of the new day treatment facility that is under construction and is due to open in April, 2010. It is a much larger facility than the old "Tree House".

SITE VISIT—WEST END OUTREACH SERVICES

FEBRUARY 23RD and 24th, the QRT met with managerial staff of the agency in the entrance interview. That was followed by meetings with representatives from Adult Outpatient Services, Crisis and Emergency Services, PATH and Housing Department, Child and Family Services, Co-Occurring Disorders Program, Medical and Nursing Services, and Minority Services. On the last day, these meetings were followed by a very brief exit interview with most of the participating staff in attendance.

FINDINGS

ANCILLARY PROVIDERS

In the QRT's meeting with the representative of the Forks Hospital ER department, it was learned that WEOS Crisis and Emergency staff intervene promptly with patients seen by the Hospital ER for either psychiatric or COD reasons. Hospital staff is concerned with the lack of available psychiatric beds in the region and state. Ambulance transportation out of Western Washington is extremely expensive and very difficult to arrange. It was estimated that "75% of psychiatric patients (that the hospital sees) are dual diagnosis".

The Clallam County Sheriff's Department representative likewise indicated frustration with the lack of psychiatric beds available to residents of the west end of Clallam County. The

department feels the WEOS staff “is very quick to respond, passionate, and patient”. “They are doing the best they can with what they have to work with.” The deputy said that a triage center in Port Angeles would be a great benefit to all.

A Clallam County Housing Authority representative said of WEOS, “the housing department—they’re wonderful.” The QRT learned of the joint efforts of WEOS and CCHA in procuring the new housing in Forks for the mentally ill. While overall communication between the agencies is good, there are some “strong” communicators and there are also a few “weak” communicators at WEOS. “In general, WEOS is responsive, a good agency—we need them.”

Washington State Department of Child and Family Services staff identified some concerns with WEOS staff regarding communication, roles and responsibilities. DCFS shared that a meeting is scheduled for next month to begin to address these concerns and remains hopeful that a cooperative resolution can be achieved. PRSN Children’s Care Coordinator Toby Bingham to participate in the meeting.

The Quileute Tribe representative did not show for the scheduled appointment due to a technical difficulty, but provided feedback via phone interview. Identified concerns that clinical needs of shared client were not being met. Another example was given where children with trauma history being assigned a case manager as opposed to a Licensed Mental Health Counselor. Clinical perspective that more expertise is needed to adequately treat these children and that mere case management was insufficient as offered.

Quillayute Valley School District-Despite numerous efforts including phone calls, emails and written letters no representative arrived for interview. Follow up contact occurred requesting phone interview or response via email/general mail, yet again no reply was ever obtained despite plea to Superintendent directly. The QRT remains concerned and will continue to attempt to gather information.

WEOS STAFF INTERVIEWS

At the entrance interview there was much excitement regarding the new fifteen unit apartment project which is to be completed by mid-April of 2010. The new day treatment/“club house” should also be completed sometime in April. The Co-Occurring Disorder program continues to gain momentum from what it was at its inception two years ago. WEOS remains a part of the community disaster response team. In the event of an emergency, the agency could get medications from the hospital and would attempt to deliver them to clients in the community, as necessary. As is usual for rural agencies, attracting new staff remains difficult. WEOS now has video conferencing capabilities with a psychiatrist at the University of Washington Department of Psychiatry and Behavioral Sciences.

Adult Out-Patient Program staff shared that case managers were taking more “other” responsibilities in the agency. This has required consumers to take on volunteer jobs at the “Tree House”, which means a movement toward more of a “club house” model. The AOP program will be moving to their new building in April. The consumers are having a “name the building” contest.

Crisis and Emergency Services staff shocked the QRT by reporting that “Profiler works well.” This is the first such report to be encountered by the Quality Review Team. Staff likes the ability that Profiler allows to obtain critical information on clients they encounter who are from other parts of the PRSN. Staff indicated that they enjoyed their work because “a crisis is an opportunity for change” and they enjoy coming up with the “resolution of a problem”.

Path and Affordable Housing staff have expanded by one recently. Other staff describes this person as excellent with clients and adeptly handles “high end” case management. The team provides education for clients “between” housing. Staff helps clients connect with DVR. The group enjoys “fulfilling unmet (housing and other) needs”.

The Child and Family Services Department utilizes a Trauma Focus Cognitive Behavioral Therapy model in its Sexual Assault Group. POSSE continues to be a successful school based day treatment program. The department also facilitates a parent support group. One department member stated, “The environment and team are the best”.

Co-Occurring Disorder program staff makes use of an “acceptance and commitment” therapy model. Meditation has been a useful tool in lowering client stress level. Staff members experience a continuing struggle in trying to meet both DASA and MH reporting requirements which leads to a doubling of paper work due to the different reporting standards. Staff enjoys working with COD clients and the latitude of being able to try different methods to achieve successful outcomes.

The Medical and Nursing Staff consists of one ARNP who spends part of one day a week at the agency. She spends another day staffing the COD program at Oak Street Center in Port Angeles. The QRT wants to acknowledge her willingness to prescribe atypical anti-psychotic medications which often have fewer adverse side effects. To augment medical services, the agency has at its disposal an in-house video conferencing capability with a psychiatrist at the University of Washington Department of Psychiatry and Behavioral Sciences in Seattle.

Two of the Minority Services program staff “specializes” with either the Hispanic population or the Native American population. However, this does not preclude the overlap of responsibilities such as occur when interracial couples from these two populations get together. During our interview the QRT members were treated to homemade guacamole and chips provided by one of the staff—umm umm good.

RECOMMENDATIONS

- 1) The QRT urges that WEOS continue to seek a dialogue with DCFS that would allow both agencies to work together instead of “competing” with each other.
- 2) Continue to work with Peninsula Community Mental Health Center, in Port Angeles, to develop a crisis triage center on the North Olympic Peninsula in order to help address the problem of a shortage of psychiatric beds for Peninsula residents and long ambulance rides off the Peninsula to other inpatient facilities miles away.

- 3) Make sure that consumers have the opportunity to name the new Recovery Resource Center building so that they feel a sense of ownership in the new facility.

CONCLUSION

The QRT would like to thank the staff of WEOS for their cooperation in the planning and implementation of this review.

One thing was particularly evident during the review: high staff morale. The people that work for WEOS like who they work for and like what they do. This was captured in the remarks QRT heard, such as “Life is good,” “a strong team effort,” “Steve lets us work outside the box,” “I like working with my co-workers,” and “I like this team atmosphere”.