**MID-YEAR REPORT FOR OUTCOME PROGRESS**

***Reporting for: July 1 – November 30 of the current year!***

**Agency Name: Eyerly Ball CMHS**

**Program Name: Medication Management**
Brief Description of Program: Medication Management services provide the vital follow-up for individuals prescribed medications for a psychiatric disorder. Medication Management services provide for the opportunity to assure medication efficacy and ongoing medical safety for those prescribed medications. Appropriate mental health services are intended to positively enhance the overall mental and emotional functioning of individuals receiving these services. During each medication management service a registered nurse is available to coordinate the service between the client and the medical provider.

1. **Program/ Service Outcome (Change/ Benefit to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on program/ service outcome from July 1 to date:**

 As also reported below, 357 unduplicated clients were served in this reporting period. Steve Stokes, ARNP, who provided part time services via telehealth technology retired on October 31st Veronica Halloway, began providing part time services with us in mid August as an “in person” (non-telehealth) provider.

1. **Measurement Used (How Often, Tools Used) – please refer back to the corresponding ABF 5(O) and provide an update on measurement used from July 1 to date:**

 Measurements of services include the number of clients served and client satisfaction surveys.

1. **Measurement Update (Please provide update on measurement data collected based on the ABF 5(O) from July 1 to date):**
A client satisfaction survey was recently completed though the responses have not yet been tabulated. 357 unduplicated clients were served in this reporting period.
2. **Outcomes Achieved (Result to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on the outcomes achieved from July 1 to date**:
There are no outcomes to report currently as the client satisfaction results are not yet tabulated. Other outcomes worth noting include the ability to sustain uninterrupted services despite a provider retirement in a time of provider shortage. Additionally securing a prescriber in person rather than telehealth is a positive change.
3. **Barriers Encountered (please refer back to the corresponding ABF 5(O) and provide an update on the barriers encountered from July 1 to date):**
As noted in the psychiatric services section, Provider shortages are the primary barrier to services. During this time our community lost a primary health care provider and prior to this another psychiatrist in the area moved out of state. The demand for services is increasing while there is an empty pool of applicants. The wait times for services for the psychiatric evaluation has increased to 2.5 months with 31 clients currently on the list for services. An added barrier is when the provider is not credentialed with various insurance companies then the service is not paid reimbursed through insurance.
4. **Clients Served (please refer back to the corresponding ABF 5 Service Statistics and provide an update on number of clients served from July 1 to date):** From July 1st, 2019 to present Eyerly Ball in Ames has served 357 unduplicated client for psychiatric services. These services include the medication management, nurse visits, and injections.

**Staff Use Only:**Change/ Benefits demonstrated for client/ community? Yes No
Quantifiable Outcome Measures? Yes No
Outcomes Reported? Yes No

1. **Have you had to turn any clients away that desire to participate in this program? If so, why? If so, how many? If so, when?**

Clients are not turned away for medication management. Same day appointments are available every day a provider is at the clinic.

1. **Comments:**

**MID-YEAR REPORT FOR OUTCOME PROGRESS**

***Reporting for: July 1 – November 30 of the current year!***

**Agency Name: Eyerly Ball CMHS**

**Program Name: Psychiatric Evaluation**
Brief Description of Program: Psychiatric evaluation services must be completed by a licensed medication prescriber for the purpose to assess mental health symptoms or conditions which results in a mental health diagnosis (or no diagnosis). This evaluation is required to determine course of treatment including appropriate type and dosage of medication(s) to address an individual's mental health symptom(s). The evaluation may also recommend additional services to positively enhance the overall mental and emotional functioning of individuals receiving teh services. During each psychiatric evluation a registered nurse is available to assist the client in the coordination of service provided by teh medicaiton prescriber.

1. **Program/ Service Outcome (Change/ Benefit to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on program/ service outcome from July 1 to date:**

38 psychiatric evaluations were provided during this report period. Services were provided via telehealth technology by Steve Stokes, ARNP during part of this reporting period, as he retired on October 31st.  Beginning in mid-August, Veronica Holloway began providing psychiatric services in person (not telehealth). Veronica is a part time provider, as was Steve Stokes, in the outpatient clinic.

1. **Measurement Used (How Often, Tools Used) – please refer back to the corresponding ABF 5(O) and provide an update on measurement used from July 1 to date:**

Each psychiatric evaluation includes a mental status exam and concludes with a diagnosis (or no diagnosis). Vitals are also taken as a part of every medical appointment. 38 psychiatric evaluations were completed during this period.

1. **Measurement Update (Please provide update on measurement data collected based on the ABF 5(O) from July 1 to date):**
There are no specific measurements to report on currently for the psychiatric evaluation other than the number completed in total.
2. **Outcomes Achieved (Result to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on the outcomes achieved from July 1 to date**:
While not identified specifically based on above measurements, an achievement of this time frame was the ability to secure a psychiatric prescriber without loss of service time to clients due to the retirement of Steve Stokes. An additional positive aspect is the prescriber being in person rather than telehealth.
3. **Barriers Encountered (please refer back to the corresponding ABF 5(O) and provide an update on the barriers encountered from July 1 to date):**
Provider shortages is the primary barrier to services. During this time our community lost a primary health care provider and prior to this another psychiatrist in the area moved out of state. The demand for services is increasing while there is an empty pool of applicants. The wait times for services for the psychiatric evaluation has increased to 2.5 months with 31 clients currently on the list for services. An added barrier is when the provider is not credentialed with various insurance companies then the service is not paid for.
4. **Clients Served (please refer back to the corresponding ABF 5 Service Statistics and provide an update on number of clients served from July 1 to date):** From July 1st, 2019 to present Eyerly Ball in Ames has served 38 unduplicated client for psychiatric services. These services include the initial psychiatric evaluation.

**Staff Use Only:**Change/ Benefits demonstrated for client/ community? Yes No
Quantifiable Outcome Measures? Yes No
Outcomes Reported? Yes No

1. **Have you had to turn any clients away that desire to participate in this program? If so, why? If so, how many? If so, when?**

31 clients are currently awaiting a psychiatric evaluation with a wait time of approximately 2.5 months.

1. **Comments:**

**MID-YEAR REPORT FOR OUTCOME PROGRESS**

***Reporting for: July 1 – November 30 of the current year!***

**Agency Name: Eyerly Ball CMHS**

**Program Name: Mental Health Evaluation**
Brief Description of Program: The Mental Health Evaluation provides the necessary social and mental health information a licensed therapist requires to determine an appropriate treatment plan and develop a course of treatment to efficaciously address an individual's mental health needs. Appropriate mental health services are intended to positively enhance the overall mental and emotional health functioning of individuals receiving these services.

1. **Program/ Service Outcome (Change/ Benefit to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on program/ service outcome from July 1 to date:**

Mental Health evaluation services are what occurs in the first meeting with a therapist. These are completed on a walk in basis. 107 walk in evaluations were completed in this reporting time with an additional 74 that were scheduled. Those that might get scheduled include crisis or individuals who came to the walk in but were unable to be seen that day.

1. **Measurement Used (How Often, Tools Used) – please refer back to the corresponding ABF 5(O) and provide an update on measurement used from July 1 to date:**

 As reported in the mental health therapy update, a client satisfaction survey was recently completed in this timeframe though results are not yet tabulated. At every evaluation a PHQ9 is completed which measures the severity of depression. Currently this tool is individually tracked by client and aggregate data is unable to be pulled.

 Efforts made to capture number of hospitalizations and re-hospitalizations are made but they data is not yet reliable as this information is currently gathered through incident reporting which can at times be missed. In May of 2020, an evidence based measurement tool will be trained on and implemented called the DLA 20. This will measure functionality changes and improve reporting for client outcomes.

1. **Measurement Update (Please provide update on measurement data collected based on the ABF 5(O) from July 1 to date):**
The client satisfaction surveys are not yet tabulated. PHQ9 and GAD 7 is collected on each client though not currently able to pull aggregate data. The DLA will be the best measure and set to launch in May 2020.
2. **Outcomes Achieved (Result to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on the outcomes achieved from July 1 to date**:
There are no outcomes to report currently as the client satisfaction results are not yet tabulated. Other outcomes of note include the ability to sustain the number of evaluations as provided in years past in spite of provider changes and reduced hours of providers.
3. **Barriers Encountered (please refer back to the corresponding ABF 5(O) and provide an update on the barriers encountered from July 1 to date):**
As with the mental health therapy services, barriers continue to be a lack of providers. While Eyerly Ball just hired a part time therapist in June, this therapist will be leaving due to unforeseen family obligations. Eyerly Ball has been contacted by other Ames providers who are seeking to contract Eyerly Ball therapists while they also seek to hire providers. Eyerly Ball has been unable to assist due to shortages. The severity of provider shortages appears to be increasing for both therapist and prescribers and is impacting the community for the most vulnerable populations.

An additional barrier is the need to have LISW credentialed therapists in order to bill Medicare and other insurances. Without assistance from CICS, clients with these insurances would otherwise not be seen.

1. **Clients Served (please refer back to the corresponding ABF 5 Service Statistics and provide an update on number of clients served from July 1 to date):** From July 1st, 2019 to present Eyerly Ball in Ames has served 181 unduplicated client for mental health services. These services include the initial evaluation for therapy services.

**Staff Use Only:**Change/ Benefits demonstrated for client/ community? Yes No
Quantifiable Outcome Measures? Yes No
Outcomes Reported? Yes No

**Have you had to turn any clients away that desire to participate in this program? If so, why? If so, how many? If so, when?**Eyerly Ball provides the therapy evaluation services initially on a walk in basis for the first appointment. The demand for services is higher than the ability to provider them. In the month of November, 19 evaluations were provided and an additional 19 clients who were seeking services in the same month were not able to be served on the day they arrived to be seen.

1. **Comments:**

**MID-YEAR REPORT FOR OUTCOME PROGRESS**

***Reporting for: July 1 – November 30 of the current year!***

**Agency Name: Eyerly Ball CMHS**

**Program Name: Mental Health Therapy**
Brief Description of Program: Mental Health Therapy provides regular, ongoing psychotherapy treatment for individuals suffering from a mental health disorder. The number and frequency of sessions is based on the chronicity of the individual's mental health disorder, and their course of treatment as determined by the Mental Health Evaluation, and the therapy practitioner. Appropriate mental health services are intended to positively enhance the overall mental and emotional functioning of individuals receiving these services.

1. **Program/ Service Outcome (Change/ Benefit to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on program/ service outcome from July 1 to date:**

 159 unduplicated mental health services were provided during this timeframe. In March the only full time therapist left her position and this was replaced by a part time therapist in June. It is the desire to hire more therapists at this location as the demand for services is present though providers are difficult to find.

1. **Measurement Used (How Often, Tools Used) – please refer back to the corresponding ABF 5(O) and provide an update on measurement used from July 1 to date:**

 A client satisfaction survey was recently completed in this timeframe though results are not yet completed. Efforts made to capture number of hospitalizations and re-hospitalizations are made but they data is not yet reliable as this information is currently gathered through incident reporting which can at times be missed. PHQ9 and GAD 7 scores are also captured individually however there is currently no mechanism in place to compound aggregate data for this. In May of 2020, an evidence based measurement tool will be trained on and implemented called the DLA 20. This will measure functionality changes and improve reporting for client outcomes.

1. **Measurement Update (Please provide update on measurement data collected based on the ABF 5(O) from July 1 to date):**
The client satisfaction surveys are not yet tabulated. PHQ9 and GAD 7 is collected on each client though not currently able to pull aggregate data. The DLA will be the best measure and set to launch in May 2020.
2. **Outcomes Achieved (Result to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on the outcomes achieved from July 1 to date**:

An outcome achieved was the hiring of a new provider who began just prior to this reporting period. Another outcome to come is adding 10 more hours of a therapists from Des Moines to increase hours in the Ames clinic to better meet the demand for services.
3. **Barriers Encountered (please refer back to the corresponding ABF 5(O) and provide an update on the barriers encountered from July 1 to date):**
Barriers continue to be a lack of providers. While Eyerly Ball just hired a part time therapist in June, this therapist will be leaving due to unforeseen family obligations. Eyerly Ball has been contacted by other Ames providers who are seeking to contract Eyerly Ball therapists while they also seek to hire providers. The severity of provider shortages appears to be increasing for both therapist and prescribers.

An additional barrier is the need to have LISW credentialed therapists in order to bill Medicare and other insurances. Without assistance from CICS, clients with these insurances would otherwise note be seen.

1. **Clients Served (please refer back to the corresponding ABF 5 Service Statistics and provide an update on number of clients served from July 1 to date):** From July 1st, 2019 to present Eyerly Ball in Ames has served 159 unduplicated client for mental health services. These services include ongoing mental health therapy.
2. **Have you had to turn any clients away that desire to participate in this program? If so, why? If so, how many? If so, when?**

The caseload of the therapy staff are quite full which can results in an inability to be seen timely for some. However, clients who are in services are not turned away from services though they may not be able to be seen at the frequency they desire. Additionally, crisis spots are available with support from CICS.

1. **Comments:**

**MID-YEAR REPORT FOR OUTCOME PROGRESS**

***Reporting for: July 1 – November 30 of the current year!***

**Agency Name: Eyerly Ball CMHS**

**Program Name: Mental Health Group Therapy**
Brief Description of Program: The above data related to group treatment stems from 1 group that was provided in this reporting period and ended in May of 2018. This group was established to assist with the attendance policy of that time in which individuals who missed treatment would be required to attend. The group assisted in exploring barriers to receiving treatment and the expectations and benefits of receiving treatment. While the group has benefit when applied according to the national model, it was not feasible to offer this group accordingly (5-6 times per week) and resulted in a barrier to accessing services, an unintended outcome. The attendance model changed in May of 2018 and therefore the group ended.

1. **Program/ Service Outcome (Change/ Benefit to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on program/ service outcome from July 1 to date:**

 The groups for which the ABF references were not provided in this reporting period. These groups were provided to assist clients in removing barriers to attend treatment as part of the attendance policy. The attendance policy had since changed (in May 2018). However, the most recent policy on attendance is not feasible to continue as it demands more staff availability than what is available. It is anticipated these groups will be re-started in January 2020 as a way to increase engagement in treatment.

1. **Measurement Used (How Often, Tools Used) – please refer back to the corresponding ABF 5(O) and provide an update on measurement used from July 1 to date:**

 No data or measurement to report as the group(s) did not occur during this report timeframe.

1. **Measurement Update (Please provide update on measurement data collected based on the ABF 5(O) from July 1 to date):**

No data or measurement to report as the group(s) did not occur during this report timeframe.

1. **Outcomes Achieved (Result to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on the outcomes achieved from July 1 to date**:
No data or measurement to report as the group(s) did not occur during this report timeframe.
2. **Barriers Encountered (please refer back to the corresponding ABF 5(O) and provide an update on the barriers encountered from July 1 to date):**
Attendance in treatment is a barrier in itself for many clients. There are numerous reasons for this which can be attributed to the vulneratiblies of the population served who experience many psychosocial complexities. Engaging individuals in services in spite of these barriers has been a top priority of Eyerly Ball. Eyerly Ball receives consultation on these practices as recommended by the National Council for Behavioral Health in setting these standards of engagement and attendance practices though many variations in factors impact the level of success. The primary reason for lack of success in some engagement of clients to treatment is directly related to lack of providers. This group modality for engagement was once utilized and then changed to an individual practice. However the individual engagement has not been successful due to not enough provider time to accommodate the need for those with attendance difficulty. Therefore the group model is being revisited.
3. **Clients Served (please refer back to the corresponding ABF 5 Service Statistics and provide an update on number of clients served from July 1 to date):** From July 1st, 2019 to present Eyerly Ball in Ames has served 0 unduplicated client for mental health services. These services include ongoing mental health group therapy.
4. **Have you had to turn any clients away that desire to participate in this program? If so, why? If so, how many? If so, when?**No group was offered, therefore there was no service to turn clients away from.
5. **Comments:**