



*Transitional
Services, Inc.*

Helping People with Mental Disabilities
to Achieve Quality Lives

Annual Management Report

Fiscal Year 7/1/06 to 6/30/07



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History of Transitional Services, Inc. (TSI)

In 1963, the United Mental Health Services conducted a study revealing a critical need for housing and supports for individuals with mental disabilities leaving state facilities. Out of this study, TSI emerged as a one of its kind demonstration project. In June 1966, in cooperation with the United Mental Health Services and Mayview State Hospital, TSI began to assist these individuals to transition into the community.

Initially funded through grants from organizations including the Maurice Falk Medical Fund and the Richard King Mellon Charitable Trust, TSI soon became incorporated as a non-profit organization. On April 7, 1969, grant funding was replaced with funding from the Offices of Mental Health and Mental Retardation, and additional funding followed in the 1980s from Housing and Urban Development (HUD).

While TSI initially began to serve individuals with mental health diagnoses, it quickly branched out to include meeting the needs of individuals with mental retardation. Proudly, TSI became nationally recognized as one of the first programs of its kind to serve an entire metropolitan area. Through the years, TSI has continued to evolve and intensify in its commitment to provide mental health and mental retardation services. In an effort to continue quality services and address an ever changing environment, TSI has established a Long Range Strategic Plan to promote its continued growth and development.

Mission Statement

Transitional Services, Inc. is an innovative human services organization transitioning people with mental health and mental retardation disabilities into the community. We are committed to fostering an environment that provides quality services for all of our customers. Through creativity, respect, and partnership we continue to assist individuals in need to gain the skills necessary to be as self-sufficient and independent as possible through the provision of residential and rehabilitative services.

Vision Statement

We will be recognized as a regional leader in service provision for people with mental health, mental retardation, and other related disabilities. We will provide

life changing opportunities for those we serve to grow individually as people, community participants, and to inspire others in their growth and recovery.

Core Values

INTEGRITY: Doing the right thing, at the right time for the right reason

TEAMWORK: Focusing on the goal over the role

COMMUNICATION: Interaction that fuels action and promotes growth

CUSTOMER SERVICE: Whatever it takes

Guiding Principles

Never Forget Why We Do What We Do

Be Willing to Take Risks

Admit Mistakes and Grow from Them

Enhance Teamwork Through Clear, Open, and Honest Communication

Be Servant-hearted in Attitude and Actions

Constantly Seek to Promote People's Rights

Honor, Value, and Respect Others

Lead by Example

Discover What Is Important to Our Customers

Keep All Promises

Transitional Services, Inc.
July 2007 Management Report
Summary Report
Fiscal Year 7/1/06 to 6/30/07

Introduction

The past fiscal year has been challenging for the agency in many areas. The agency and its employees have taken on more initiatives and agency development activities than ever before. Despite growing pains and challenges encountered TSI remained stable, solvent and focused on its mission. The 2006/07 fiscal year can best be summarized as a year the agency spent nurturing the seeds of growth it had planted during the previous year. The following summary offers a brief look at some of the work TSI has completed during the past year.

Much of the organization's focus has been directed toward the execution of the Permanent Supported Housing Project grant that was awarded near the end of 2005/06 fiscal year as part of the Housing as Home initiative. TSI and the Allegheny County Housing Authority (ACHA) were selected to put the housing plan into action. The goal of the plan is to make (220-240) units of permanent supportive housing available for "priority" individuals within two to three years. Since being awarded the grant, agency leadership and the housing team has worked diligently to establish the project's stability and begin assisting individuals with finding apartments in the community.

Staying focused on the agency's ever growing technology needs, it was decided that M2 Technologies would be contracted to handle all information technology service needs. This change enabled the agency to ensure that the highest quality of technological support would be available so programs increasingly becoming computer dependent could operate more efficiently. M2 Technologies developed a new, more user-friendly website enabling the agency to better connect with its stakeholders.

The agency continued to develop the Community Supports Program (CSP). The program responsible for offering educational and enrichment activities to persons actively receiving services expanded and enhanced its curriculum beyond some of the more familiar art and recovery-focused groups. The CSP offered additional educational and enrichment groups in response to individuals' expressed desires. Renter's School was developed to assist individuals with becoming knowledgeable and ready to rent an apartment. The Welcome to Wellness group was created to discuss important health and wellness topics ranging from nutrition to cancer prevention. Poetry and creative writing classes were also started to add further dimension to expressive enrichment opportunities offered.

TSI maintained its new, more active involvement in the provider community. During the past fiscal year the agency was asked to participate in several conferences and events. The Chief Executive Officer and Program Director presented at the annual Pennsylvania Association for

Rehabilitation Facilities conference on the topic of implementing permanent supportive housing for persons with severe mental illness. The CEO was also asked to participate on Community Care's Recovery Conference housing panel discussion with the Deputy Director of the Office of Behavioral Health, a representative of Allegheny County Health Choices Inc. and others to discuss the process of assisting individuals to find housing of their choice. Team members from the CSP program presented information about managing everyday wellness at the annual Day of Self Discovery. Four (4) key individuals responsible for implementing recovery practices were invited as special guests of Boston Center for Psychiatric Rehabilitation to attend an intimate workshop with Patricia Deegan, one of the leading authorities on recovery. And finally, the Healthy Living Project participated in a county-sponsored wellness expo geared at health and wellness education for people with intellectual disabilities.

During the fiscal year, the agency took additional steps to better involve all staff in the Long Range Strategic Planning (LRSP) process and agency development activities. Building from efforts made to incorporate all leadership into development teams, staff was invited to actively participate in the planning process. Interested staff were identified as program representatives and convened to discuss and evaluate TSI's efforts and progress in the nine (9) areas outlined in the LRSP. The results of the staff focus group were provided to the leadership team to better inform and balance the planning process.

Authoring a new page in TSI's history, the agency aggressively explored different strategies to increase its fundraising capabilities and abilities to raise money for operational expenses and growth. The agency, through a \$15,000 grant received through the Forbes Fund, contracted with the Bayer Center for Non-profit Management to evaluate and create a development plan for fundraising and social enterprise.

The agency continued to demonstrate its commitment to the Psychiatric Rehabilitation Approach by looking beyond the service delivery application to agency-wide adoption. During the fiscal year, TSI continued to work with a consultant from Boston University's Center for Psychiatric Rehabilitation and endeavored to further establish itself as a recovery oriented organization by looking to amend some of its foundational elements. The agency developed a mission and set of values to guide its transformation. Steps were taken to rewrite job descriptions, appraisals and orientation curricula to support Psychiatric Rehabilitation. A number of procedures were also re-written to better reflect the agency's approach to delivering person-centered, recovery-oriented services.

I. Long Range Strategic Plan (LRSP) Objectives Update

A three part planning process was employed this year for the development of the LRSP. In order to be more inclusive of all the agency staff, a focus group was held with selected staff from various programs to obtain input regarding the different activities the agency has undertaken in the past year. Participants in the focus group were asked to evaluate past activities and identify new areas for development. The information gathered from

the staff focus groups was provided to the leadership team to better inform them during the planning meeting held in January. The leadership team during the January planning meeting established the specific tactics and strategies to promote the agency's growth. The proposed LRSP was presented to the Board of Directors in March of 2007 and approved with input and minor changes. The LRSP promotes growth in nine critical areas.

Below are some highlights of the goals and objectives that TSI has endeavored to complete during the past year. A copy of the entire Long Range Strategic Plan can be provided upon request. Items that have a (+/+) indicate that an objective was achieved. Items that have a (+) were partially completed during the fiscal year and will remain a focus during the next year. It should be noted that each of the areas identified contains multiple tactics required for the successful completion of the specified objective.

- A. HUMAN RESOURCES (EMPLOYMENT):** TSI will have successfully employed and retain diverse groups of people (+/+)
- Staff educated through diversity training focused on TSI needs and culture
 - Successfully hired several individuals with mental disabilities and trained workforce on recovery principles to create a more supportive environment
 - Informational resources on various issues distributed by the Diversity Committee
- B. DEVELOPMENT (ENVIROMENT):** TSI will have acquired funding sources to support consumer services (+/+)
- Several grants were received enabling the agency to purchase a vehicle and refurbish the fire escape at one building
 - Participated in the Pittsburgh Symphony Orchestra's Annual Benefit event for non-profits
 - Increased staff giving
- C. FINANCIAL (BUSINESS PLAN / SOLVENCY):** TSI will have defined the direction the organization needs to take to remain solvent (+/+)
- Completed the investigation of opportunities for social enterprises
 - Explored the fundraising needs of the organization with a consultant and created a development plan
 - Successfully complete the refinancing of the three HUD properties and consolidated them into one corporation; Three Rivers Common
- D. RELATIONSHIP BUILDING (ATTITUDINAL):** TSI will have developed relations with other entities to provide more resources and opportunities for the

consumers served while changing the attitude regarding housing services (+/+)

- Redesigned agency website to be a more effective marketing tool providing easier use and an additional website was developed to support the Permanent Supported Housing Project
- Press releases promoting the agency and its work were printed in several local newspapers
- Distribution of newsletter and annual report was increased

E. FACILITIES (ARCHITECTURAL): TSI will have maximized the use of its facilities and developed new housing opportunities for individuals with disabilities (+/+)

- TSI was awarded a \$4.2 million grant to be distributed over a period of three years to implement 200- 240 of additional Supportive Housing units
- Successfully achieved accessibility objectives
- Surveyed staff and persons served to determine accessibility needs

F. COMMUNITY INFLUENCE (DIVERSITY): TSI will have increased its influence with community groups for the purpose of establishing itself as a leader in the industry (+/+)

- Joined two additional task forces to influence system development
- TSI staff presented at several different conferences in the region and had an innovative idea printed on cards nationally distributed by the Forbes Fund
- Successfully solicited recognized experts in the field to contribute articles to the agency newsletter

G. COMMUNICATIONS (TECHNOLOGY): TSI will have increased its capacity to utilize a variety of communication tools and strategies (+)

- Developed a comprehensive technology plan
- Developed a technology training plan for staff
- Researched and identified needs in the areas of telephone communications and financial software

H. TRANSPORTATION: TSI will have assisted individuals served in better utilizing existing transportation services to better enable them to participate in the community (+/+)

- Developed transportation booklet to better enable persons served to access community resources to meet their basic needs
- Completed annual assessment of the vehicle fleet

I. PROGRAM: TSI will have enhanced the services it provides to support the clinical needs of consumers (+/+)

- Developed good tenancy curriculum and trained all staff on recovery concepts

- Community Support Program hired peer specialists and conducted additional recovery groups
- Select team members attained additional credentialing in the areas of addictions and recovery
- Electronic record keeping software received additional customizations to improve service planning efficiency

II. Program Updates and Information

TSI's programs remained stable during the 2006/07 fiscal year. As mentioned in the introduction of the report, the only significant developments occurred in the enhancement and expansion of the curricula and enrichment activities offered in the CSP.

HOUSING AND SUPPORT SERVICES FOR INDIVIDUALS WHO HAVE MENTAL HEALTH OR INTELLECTUAL DISABILITIES:

Group Homes: Group Homes provide a family-like environment, with individual bedrooms, shared living spaces and group meals. Through a caring and stable environment, individuals can learn daily living skills and receive support through 24-hour staffing.

Supervised Apartments: Supervised Apartments provide settings that offer more independence and privacy combined with the support of 24-hour staff availability. In the mental health programs, most individuals have their own apartments, while a small number have roommates. The same is true for programs serving persons with intellectual disabilities except for one residence that offers shared apartments.

Congregate Supported Living: Congregate Supported Living offers individuals private apartments within a single building. There is more staff and support available than in the Community Supported Living Programs, but less than in the Supervised Apartments. For those desiring to have a roommate, there are a few two bedroom apartments available.

Community Supported Living: Community Supported Living Programs help individuals find housing in the community of their choice and provides in-home supports which assist individuals in keeping their chosen living environment while fostering recovery and independence.

Clinical Consultation and Education: Clinical Consultation and Education services are provided in conjunction with TSI's residential programs. The services offer education, training and support to staff and the persons served on a variety of clinical and recovery-oriented issues.

Community Supports Program: The Community Supports Program works in conjunction with TSI’s residential programs. It currently offers Peer Specialist services and activities that both support mental health recovery and provide life enrichment experiences.

TSI has programs in a variety of locations in and around the city of Pittsburgh and Allegheny County. Several of the areas are: Highland Park, McKeesport, McKees Rocks, Oakland, South Side, East Liberty, and East Pittsburgh.

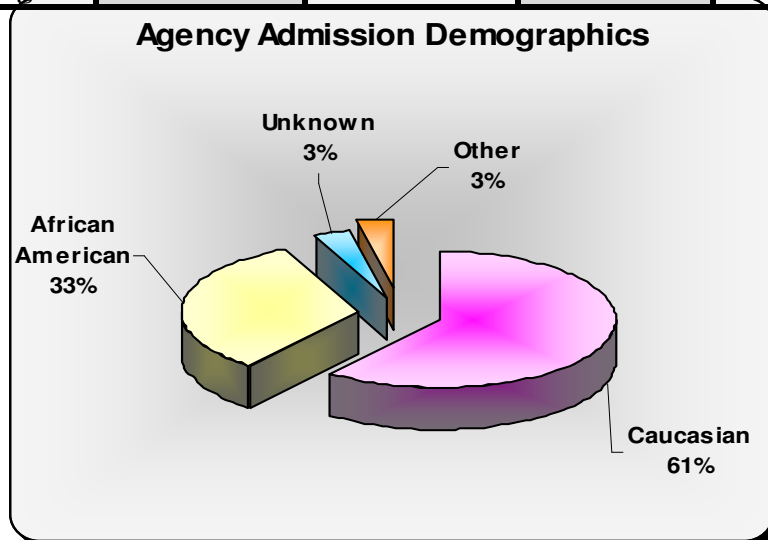
Admissions

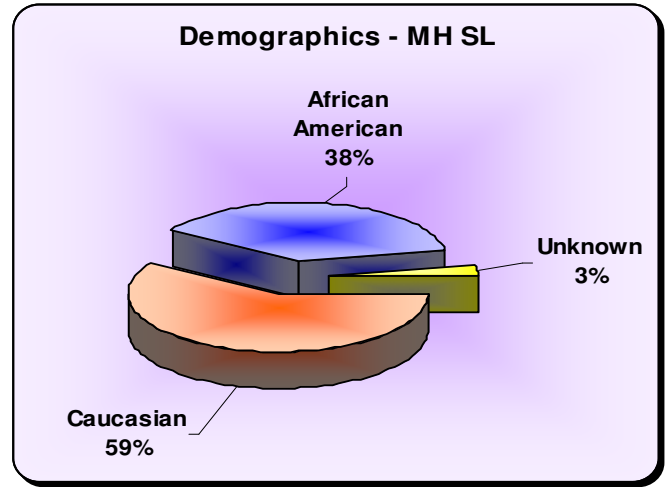
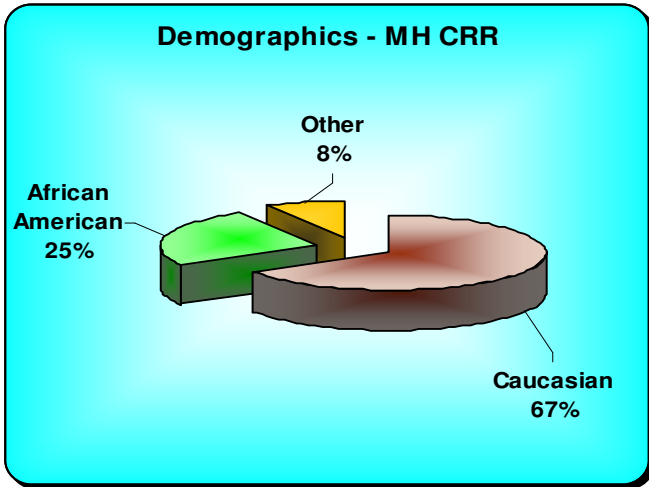
TSI’s MH CRR Programs exceeded the ninety-one (91) percent occupancy level finishing the year at ninety-three (93) percent. The MH SL Programs achieved an occupancy level of seventy-five (75) percent. This was a ten (10) percent decrease over the previous fiscal year. The occupancy level has remained lower in the MH SL Programs due to several factors. Two factors have primarily contributed to the lower occupancy levels. Firstly and most notably, the number of new admissions has been exceeded by the number of discharges that have occurred. The admission numbers for the past three years have steadily increased but the rate of discharges from the programs has surpassed them. Secondly, hiring and staff retention challenges have contributed to a reduced capacity at times. The fluctuating staff complement has impacted the number of admissions and overall level of occupancy attained by the MH SL Programs.

Programs overall experienced a thirty-three (33) percent increase in admissions compared to the previous fiscal year. MH CRR Programs experienced a nine (9) percent increase in admissions and MH SL Programs experienced a forty-two (42) percent increase. There were a total of three (3) new admissions to the MR Programs. This is an improvement over the previous fiscal year in which there were no new program admissions.

The following tables below provide additional information about admission demographics.

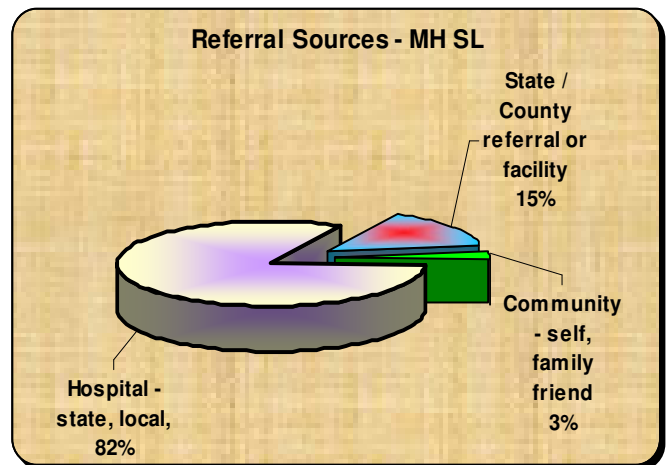
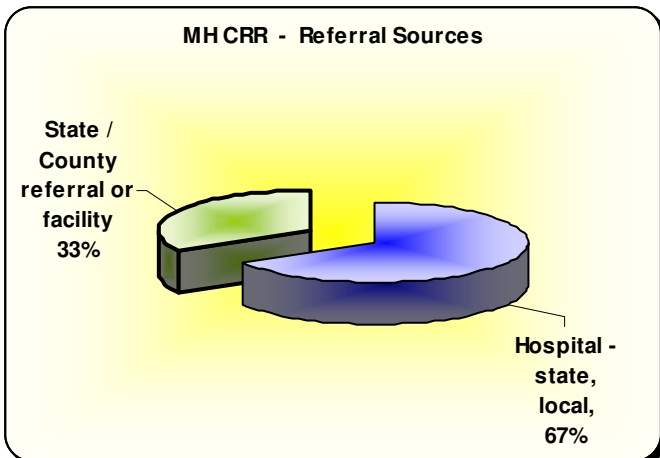
Program	MH CRR	MH SL	CHIMR	MR SL
# of Admissions	24	34	1	2
Average Age	37	40	49	46



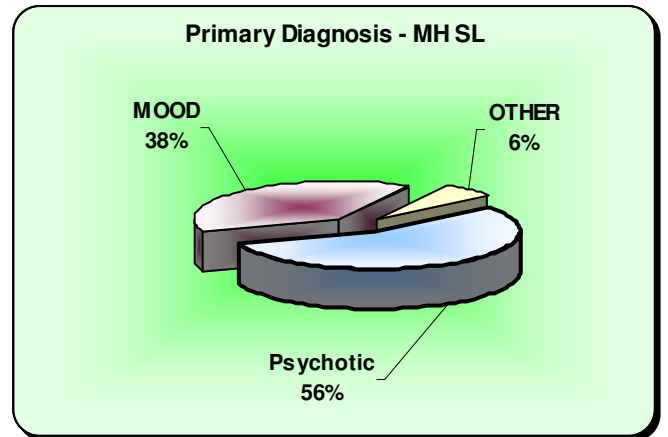
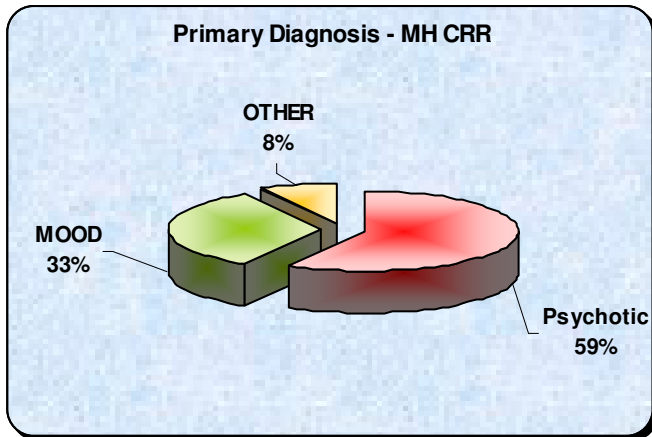


Two (2) persons admitted to MH Programs were of Hispanic descent, the same number as the previous year.

Referrals to TSI's MH Programs for services came from three (3) sources. The majority of individuals were referred from local hospitals and state/county facilities. There was a small number of persons who were referred by their families or made self-referrals. No referrals for services were declined during the 2006/07 fiscal year. This is an improvement over the previous year which saw two individuals declined. All MR Program referrals were orchestrated by the county.



* Females comprised 53% of all admissions



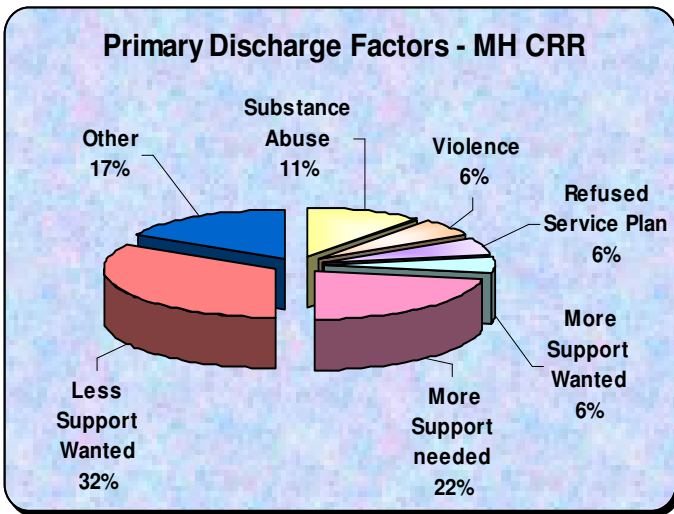
The identified primary diagnoses for individuals admitted to the MH Programs remained largely consistent with the previous fiscal year. This fiscal year presented a slight decrease in the number of individuals with both Mood and Psychotic Disorders. This resulted in an increase in the catchall category of ‘Other’. Some of the disorders contained in the category of ‘Other’ are: Anorexia Nervosa, Anxiety, Gender Identity and Attention Deficit Disorder.

Discharges

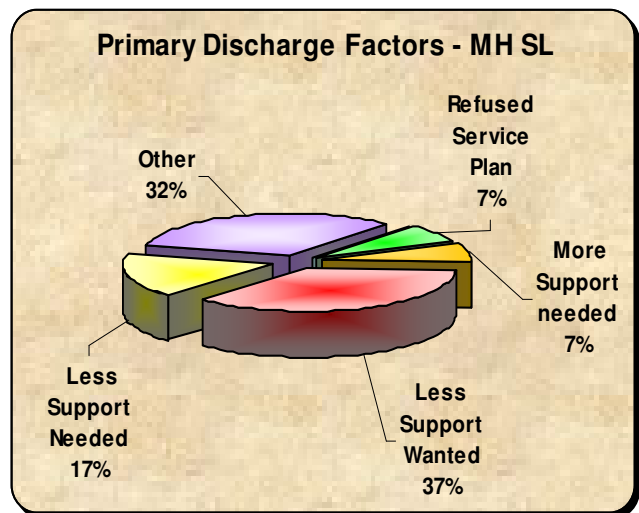
There was a total of sixty-one (61) discharges that occurred in the 2006/07 fiscal year. This is a five (5) percent decrease from the previous fiscal year. This decrease appears to be a trend when looking across the past three (3) fiscal years and identifying a minute but consistent decline. It is speculated that the reduction in the number of admissions to the MH SL Programs has contributed to this effect.

Program	MH CRR	MH SL	CHIMR	MR SL
# of Discharges	18	42	0	1
Average Age	40	45	n/a	29
Average Length of Stay (years)	2	1.4	n/a	7.5

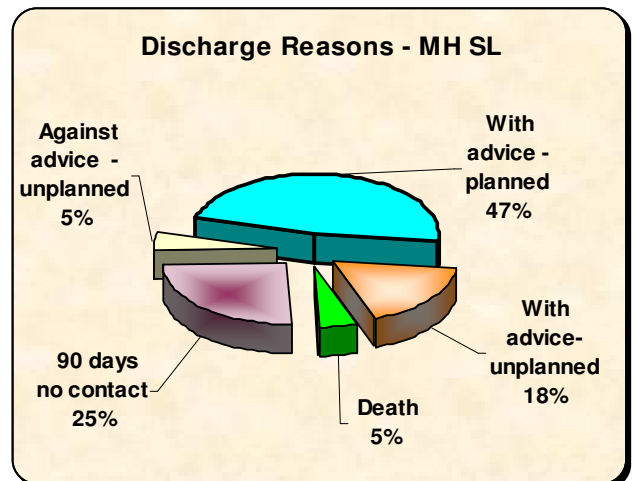
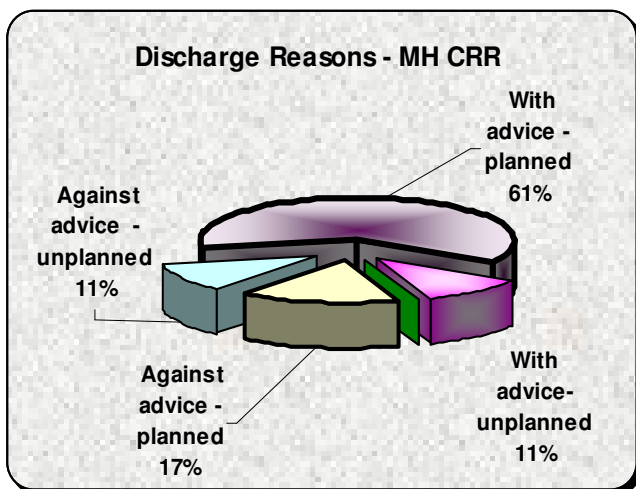
The MH CRR Programs experienced a twenty-eight (28) percent decrease in the number of discharges. Individuals' length of stay in the CRR Programs remained consistent with the findings from the previous year. The MH SL Programs witnessed a thirty-six (36) percent increase in discharges compared to the previous year. There was a significant decrease in the length of time individuals' spent in the MH SL Programs, about 2.6 years. There was a change in the average age of individuals discharging from the MR SL Program. However, because this change is based on data for only one person it is not possible to determine its significance.



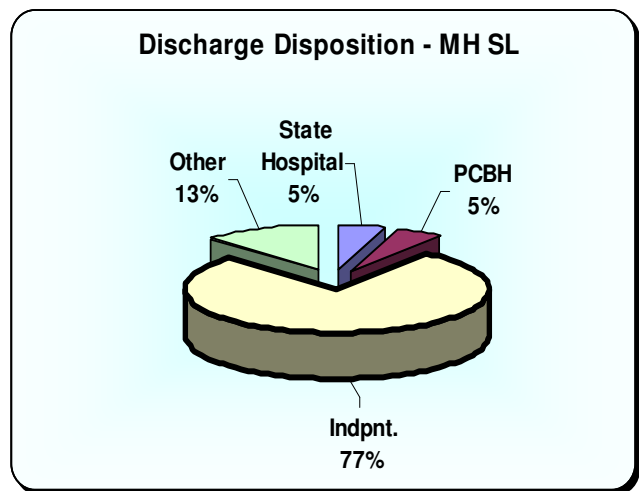
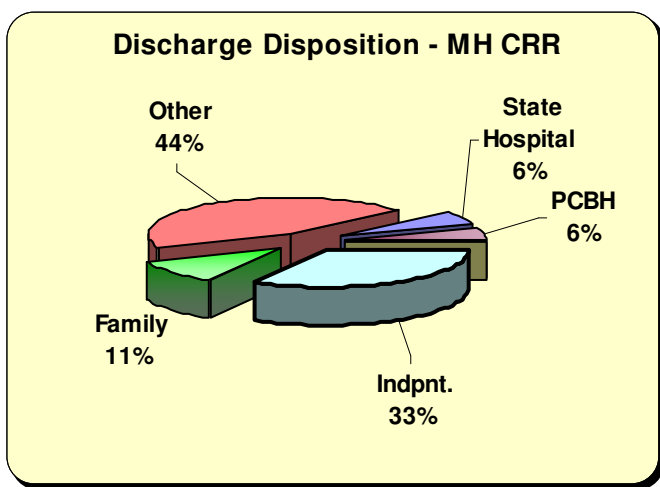
Individuals discharging from MH Programs, left primarily to receive less support. Remaining consistent with the previous fiscal year, one person left MH CRR Programs to seek more enhanced supports. No individuals discharged from MH SL Programs to receive increased support. Examples of factors



included in the category of 'Other' include: non-payment of rent, hospitalization, refusal of contact and specialized medical needs. Similar to the previous fiscal year, sixty (60) percent of the MH Program discharges were planned. It should be noted that seventy-eight (78) percent of the CRR Program discharges were planned which is a fourteen (14) percent increase over the previous year. The main reasons for unplanned discharges remained refusal of services or abrupt decisions to withdraw participation in the program. Despite these reasons, discharge meetings were held for all individuals leaving TSI's programs.



Individuals leaving the MH Programs went to live in a variety of environments. The majority of persons leaving went to live independently in the community in a residence of their choice, sixty-two (62) percent. This is a twenty-two (22) percent increase from the previous year. The percentage of persons discharging from MH CRR Programs to become independent increased thirteen (13) percent over the previous fiscal year. A number of individuals also left to live in different supported housing programs, local hospitals or nursing homes as indicated by the category of 'Other' in the Discharge Disposition charts located below. The category of 'Other' demonstrated a sixteen (16) percent increase as a result. There was a twenty-one (21) percent increase in the number of individuals leaving the MH SL Programs to live independently compared to the 2005/06 fiscal year.



During the 2006/07 fiscal year individuals residing in TSI's programs transferred or moved internally from their current program to a new TSI program to receive more appropriate or desired levels of services and supports. Ninety-one (91) percent of the individuals in the MH CRR Programs transferred to programs offering greater independence and responsibility. Forty-eight (48) percent of those individuals transferred from a CRR Program to an SL Program. Forty-six (46) percent of the persons residing in MH SL Programs transferred to MH CRR Programs to receive an increased level of support.

Quality Improvement and Assurance

Program and Service Planning Evaluation:

The Program Review Team reviewed all thirteen (13) of the agency's residential programs; six (6) MH Community Residential Rehabilitation programs of which three (3) deliver Community Supported Living services, two (2) Community Homes for Individuals with Mental Retardation, two (2) MH Congregate Supported Living Programs and three (3) MR Supported Living

Programs over the past year. The team continued its practices of interviewing persons receiving services, evaluating service plans and reviewing planning recommendations. All program staff was provided a formal opportunity to give feedback about their program and the agency.

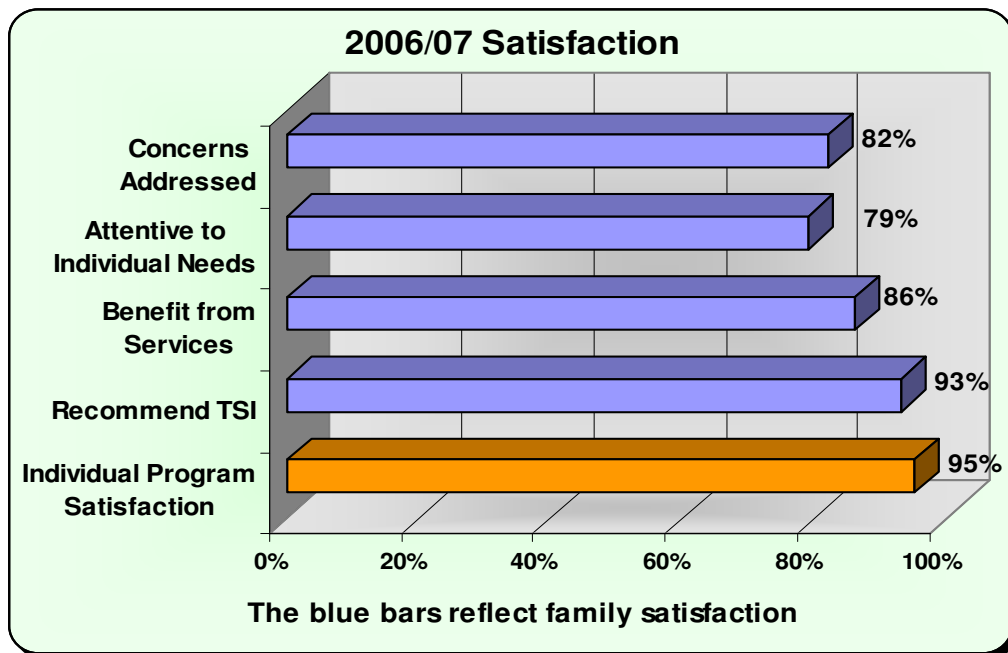
During the 2006/07 fiscal year, there was a nine (9) percent increase in the number of program staff participating in the survey process. Eighty-three (83) percent of the staff completed team member surveys. Fifty-three (53) percent of all program staff participated on agency teams or committees, one (1) percent above the previous year's participation rates. Overall, staff surveyed appeared to be satisfied with their particular programs and the agency as a whole. Eighty-seven (87) percent of the survey responses indicated satisfaction with how the agency recognizes staff for their contributions. Staff identified a solid level of satisfaction with the customer service provided by others in the agency, ninety-three (93) percent. Teamwork also remained highly rated with ninety-three (93) percent of the staff indicating satisfaction. These satisfaction levels are largely consistent with the ones achieved in the previous fiscal year. However, there were slight declines with recognition, down eleven (11) percent and teamwork down five (5) percent. It is speculated that these declines may be related to the increased demands of the work environment due to the many initiatives and objectives the agency is currently working to achieve.

A random sample of thirty-nine (39) percent of all the charts for individuals receiving services was reviewed during the 2006/07 fiscal year. This is a sixteen (16) percent increase over the number of charts that were reviewed during the previous fiscal year. All of the service plans reviewed were found to address the presenting needs of the individual as determined by the assessment as well as the personal goals each identified to achieve. Approximately ten (10) percent of the charts reviewed were found to be missing some minor supporting information for the assessment or the assessments were not current at the time of the review. Ten (10) percent of the charts were also determined to need updated objectives. Input from persons receiving services was clearly evident and was even less of a concern because of the manner in which service planning is required to be completed. The entire service planning process is driven by individuals' participation and input. The plan and objectives are developed from the individual's perspective and then documented using words that have meaning to the person.

Overall, programs experienced some decline in the quality of their service planning during this review period, specifically in the area of the development and documentation of objective plans. An approximate evaluation of an overall compliance rating for objective plan development is eighty-three (83) percent. This is a seven (7) percent decline from the previous fiscal year's rating of ninety (90) percent. Only seven (7) of the thirteen (13) MH and MR programs achieved a minimum eighty-five (85) percent compliance rate. One possible explanation for this decline may be the assessors' increased level of understanding and skill. Reviewers are now more carefully and strictly evaluating documentation because they have a better familiarity with the concepts and practices. The slight decline may also be somewhat attributable to the increased number charts reviewed when compared to the previous fiscal year. Individual programs have been informed of areas of need and are all currently endeavoring to make improvements through additional training, mentoring and monitoring efforts.

Stakeholder Feedback:

TSI is committed to obtaining feedback and information from all of the persons impacted by its services. To that end, during the 2006/07 fiscal year, TSI surveyed providers, family members and individuals receiving services. Fifty-eight (58) percent of the individuals receiving services participated in the program satisfaction surveys. Ninety-five percent of the responses from persons served in MH Programs demonstrated satisfaction. This is nearly the same percentage as the previous fiscal year's satisfaction rating of ninety-six percent. Individuals in MR Programs were satisfied with services indicating (100%) satisfaction, which was the same level achieved for the previous fiscal year. Family members and significant others shared their impressions of TSI's services with nearly thirty (30) percent responding to the surveys. Family members had relatively the same level of satisfaction with the areas indicated by the blue bars depicted in the chart below. There were some minor fluctuations, not more than ten (10) percent in each of the areas except for the area regarding Concerns Addressed which experienced an eleven (11) percent improvement compared to the previous fiscal year.



Family Members have commented:

“Staff has been exceptionally kind to our son addressing his needs from a variety of approaches to find which benefits him best. They have been so patient, caring and supportive. He has made significant progress.”

“My son had a very stressful 2006. Without TSI I feel he would have had a complete breakdown. He is very pleased with his apartment and environment. My brother is working with his support team and is learning to socialize with the help of TSI.”

“TSI has done a good job in transitioning our family member from the state hospital into TSI.”

“Would like to see more help with finding a job, getting more education, etc.”

“Only comment is in the revolving staff and staff picking up where they left off at.”

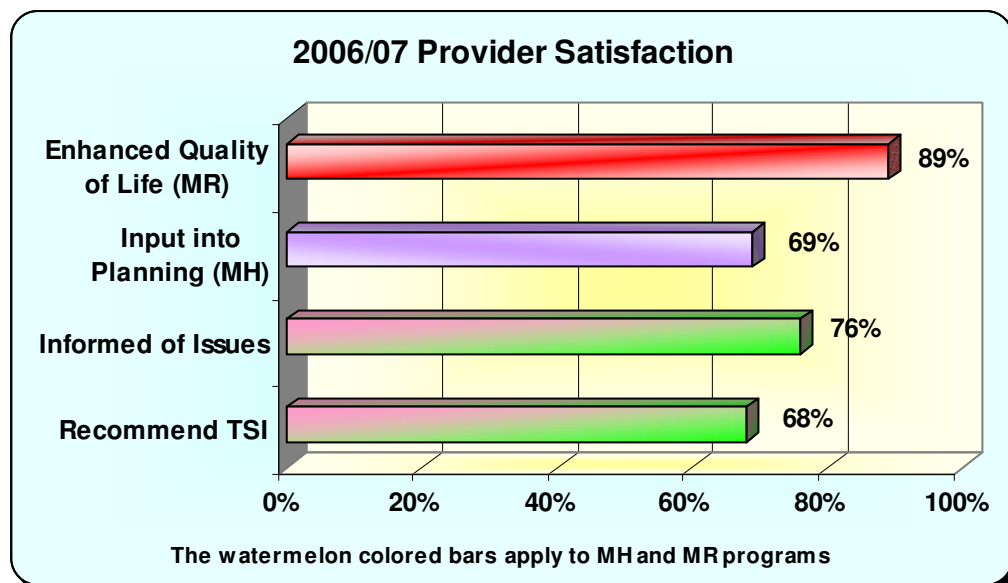
Persons receiving services have said:

"I am very pleased with the counselor I have. We get along great together."

"I would strongly recommend this program to other people. They have helped me a lot."

"I am extremely grateful for the experience I've had at TSI...I have a great apartment. in a very nice well kept secure building. The staff here have made my experience a very healthy part of my recovery."

Eighteen (18) percent of the surveys mailed to MH Providers were returned. This was a slight increase of three (3) percent over the previous year's response rate. MR Providers also responded to the service satisfaction surveys this year. Thirty-nine (39) percent of the surveys were returned which is a significant improvement over the previous year when none were returned. This fiscal year's provider results indicated that there was some dissatisfaction experienced. There was a twenty-two (22) percent decline in providers indicating they would recommend TSI for services. Exploring the decrease further, it appeared that the issues contributing to the decline were attributable to two (2) or three (3) providers. Items providers cited for improvement had to do with the physical appearance of individuals' residences and the duration of time needed for MH Program referrals to be processed. In response to the referral concerns raised, TSI's clinical team responsible for processing referrals made improvements to simplify and expedite the process based on the specific provider feedback.



Providers have stated:

"Supervisor and staff are caring well trained people who know the individuals well."

"Staff is supportive and listens to individuals."

“Well organized with experienced supervisory staff. It (your agency) has withstood the test of time and many systemic changes.”

“Greater staff support is necessary as residents age and face mental and physical decline.”

“They have made great strides to incorporate the recovery model into their services.”

“Address inconsistencies with the intake process.”

“Better sharing of service responsibilities with case managers.”

Regulatory Inspections and Monitoring:

All licensed programs underwent regulatory inspections conducted by the state and or county monitoring teams. All of the programs received satisfactory evaluations with no citations presented. The MR Programs had their most successful licensing inspection to date. This was the first time inspectors did not identify any non-compliance areas among the more than 200 individual items on the comprehensive licensing tool or make any recommendations for improvement. Overall inspectors stated the records were well maintained with good attention to medical needs and appointment tracking. The Healthy Living Project and Education Packets were identified as great training aids and resources for both staff and the individuals served. The programs were also commended for their efforts in the areas of anti-victimization and stranger danger for several individuals needing special assistance in this area.

The agency successfully achieved its fourth consecutive three (3) year accreditation from CARF (Commission on Accreditation of Rehabilitation Facilities) in February of 2007. During the survey TSI was evaluated in respect to its commitment to the satisfaction of the individuals served, stakeholder satisfaction and efforts to enhance the quality of programs and services delivered. The CARF surveyors commented that they were impressed with the overall quality of programs and services the organization has continued to maintain.

TSI's Quality Analysis Team (QA) continued to monitor quality assurance practices for the agency. A sampling of areas monitored is: policy and procedure, training and development, records, and incident management among others. A brief summary of some of the monitoring efforts and results is provided below.

The QA team reviewed the agency's policies and procedures and made recommendations for amendments as needed. The incident management procedures underwent a significant change in order to address the new incident reporting practices required by the state. The QA team reviewed the agency's training plan and identified minor improvements to make it easier to understand and apply.

The QA team continued to conduct careful examinations of all incidents reported. The 2006/07 fiscal year demonstrated a five (5) percent increase in the overall number of incidents for the agency when compared to the previous fiscal year. The MH Programs were responsible for this slight increase as the MR Programs demonstrated a twenty-four (24) percent decrease in the

number of incidents experienced. The overwhelming majority of the incidents reported in both program divisions were for medically-related issues.

The MH programs reported forty-nine (49) total incidents for the 2006/07 fiscal year. Medically related incidents, for example those where individuals complained of chest pains, feeling ill or experiencing accidentally injury, comprised fifty-five (55) percent of the incidents reported. After careful analysis, there were no specific trends identified or recommendations made to address the medical incidents. There was one suicide attempt reported. The individual involved was not harmed and received the appropriate supports to address the event. There was one incident of abuse and one incident of neglect reported during the fiscal year. Both incidents were investigated according to regulation and agency protocol. The allegation of psychological abuse was determined to be inconclusive and the allegation of neglect was founded. The agency appropriately addressed the incident and attended to the needs of the individual involved. Missing persons and fire safety incidents remained at relatively the same level as the previous fiscal year, demonstrating no significant changes in totals and accounting for less than seventeen (17) percent of the reported incidents. There were no actual fires or property damage at any of TSI's sites during this fiscal year.

The MR Programs continued to experience a significant decrease in the number of incidents reported when compared to the last ten (10) years. There were only nineteen (19) incidents reported during the 2006/07 fiscal year. The twenty-four (24) percent decrease in the number of incidents can be mostly attributed to the reduction in the number of incidents involving law enforcement. There were no incidents of abuse or neglect reported.

Program Outcomes

The following are some selected outcomes or performance measures TSI monitors to evaluate program operations. The outcome measures reflect evaluations of satisfaction, efficiency and effectiveness. To obtain a more complete accounting of all TSI's performance measures, contact the Quality Department.

Satisfaction:

The satisfaction of all people and groups TSI serves is important. It is expected that nine out of ten people will be approving of our services and recommend us. Ninety-five (95) percent of individuals' responses indicated satisfaction with their program and services. Ninety-three percent of the family member responses indicated they would recommend TSI's services. Providers indicated less satisfaction this fiscal year. Overall there was a twenty-one (21) percent decline. The stakeholder satisfaction objectives were only met for the persons served and family members. Efforts are currently underway to address providers' satisfaction issues.

Efficiency:

A stable staffing complement is necessary for trusting relationships to be formed with individuals served. TSI evaluated efficiency in this area by gathering and examining data

regarding staff retention rates. TSI monitors all of the staffing patterns of its employees and pays particular attention to retention rates in the MR Programs. TSI set a goal of retaining eighty-five (85) percent of its employees and was able to exceed that by twelve (12) percent during the 2006/07 fiscal year which only saw one (1) person depart.

Effectiveness:

TSI desires to understand the impact its services and specific interventions are having on the individuals served. To that end, TSI gathers data in several areas: successful management of illness, quality of life and perceived degree of empowerment.

Individuals receiving services through the supportive environment of TSI's programs should experience fewer hospitalizations. TSI has set eighty-five (85) percent as a target. During the 2006/07 fiscal year, individuals in both the MH CRR and SL Programs exceeded the goal of eighty-five (85) percent of the individuals served experiencing a decrease in hospitalizations. Combined, ninety-six (96) percent of the individuals served experienced a decreased number of hospitalizations.

Helping individuals to feel better about themselves and their overall quality of life is an important aspect of recovery. TSI identified a target of sixty-five (65) percent of the persons served in MH Programs will indicate an improved quality of life. TSI met this goal with seventy-one (71) percent of the individuals in the MH CRR Programs served indicating an improved quality of life. MH SL Programs narrowly missed the goal with sixty-three (63) percent indicating improvement. These results are consistent with the national averages.

Empowerment, feeling that an individual has control over life and decisions made is another important component of recovery that TSI measures in its MH Programs. TSI's staff partner with individuals to assist them with learning how to take control of their lives and be their own advocate. TSI set the target for increased levels of empowerment at sixty-five (65) percent. During the 2006/07 fiscal year, ninety-two (92) percent of the persons in the MH CRR programs and seventy-four (74) percent in the MH SL programs indicated increased levels of choice and control over their lives. These are nearly the same results as the previous year except for a fourteen (14) percent decrease in the levels achieved in the MH SL Programs.

The final pages of this management report summary contain tables that provide more information about the performance measures TSI gathers to assure quality program operations.

