

ANNUAL MANAGEMENT REPORT

FISCAL YEAR JULY 1, 2016 TO JUNE 30, 2017

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TABLE OF CONTENTS

EXECUTIVE SUMMARY	2
LONG RANGE STRATEGIC PLAN	3
PROGRAM DESCRIPTIONS	4
ADMISSION AND EXIT DATA	5
QUALITY ASSURANCE AND IMPROVEMENT	8
INCIDENT MONITORING AND TRENDS	9
OUTCOMES	11
APPENDIX A	12
APPENDIX B	16

MISSION

TO HELP PEOPLE WITH MENTAL DISABILITIES DISCOVER AND ACHIEVE THEIR HOPES AND DREAMS FOR A MEANINGFUL LIFE IN THE COMMUNITY.

<u>VISION</u>

TRANSFORMING COMMUNITIES THROUGH THE CONTRIBUTIONS OF THE PEOPLE WE SERVE.

Executive Summary

In the 2016/17 fiscal year, TSI continued to follow its mission of working with those who have psychiatric and intellectual disabilities attain their hopes and dreams and work towards having a meaningful life in the community. Teams and departments worked together to achieve great things and to ensure that the organization still provided high-quality services to its customers. Despite the open CEO position, the organization continues to execute its mission as the board works to find the new leader.

External Oversight Visits

BHSL licensing for both PD and ID programs were completed successfully with very few corrective actions.

Long Range Strategic Plan (LRSP)

Transitional Services, Inc. Strategic Plan 2016 - 2017

Fiscal Health Solvency – Transitional Services, Inc. will implement a targeted plan to strengthen its financial position.

- 1. Financial Stability
 - a. Cash Reserves will be monitored and maintained.
 - b. The corporation will operate with economies of scale.
- 2. Explore Type 80 Provider (Medicaid)
 - a. Steps will be explored and executed to become a Type 80 Provider.
- 3. Fund Raising
 - a. Investigation on low cost high return fundraising projects
 - b. SAMHSA Grants will be explored (federal money).
 - c. Other foundation grants will be searched.

Transparency – Transitional Services, Inc. will use various communication processes to share performance information about organization goals with stakeholders, promote the value of services and improve access for persons served. (Stakeholders are funders, employees, persons served (its own goal), Board, and community)

- 1. The TSI Website will be modernized.
- 2. Improvement of internal communication and customer service will continue for improved relationships and teamwork within the Organization.
 - a. Team Building exercises and training will be provided to employees.
 - b. Job sharing will be initiated.
 - c. Familiarization with the types of positions within the organization will be part of Orientation for new employees.
- 3. The CEO will provide communication concerning the organization both internally and externally.
 - a. The goals, strategy, and the direction of the organization will be reported.
 - b. Activities of the Board will be conveyed to the organization.

Build A Diversified Stakeholder Base – Transitional Services, Inc. will build diversified stakeholder base to address workforce needs and other opportunities to expand array of services.

- 1. New program opportunities will be investigated.
 - a. Explore programs for various services such as autism, elderly, home services, day programs (ID), drop-in, veterans, etc.
 - b. Explore opportunities with current funders and other funding sources.
- 2. Maintaining a stable workforce is an essential part of the operations of the organization.
 - a. Salaries, benefits, recognition, opportunities will be monitored to help maintain stability.
- 3. Increase opportunities to maintain or improve relationships with the organization's external stakeholders.
- 4. CEO will continue growth of Board of Directors.

- a. Recruitment is to include search for a known spokesperson in the community with connections to persons with mental disabilities and/or connections with foundations.
- b. Education about the services and activities of the organization will be reported to the Board.

Persons Served Expectations – Transitional Services, Inc. will plan for the future needs of persons served considering their expectations.

- 1. Solicit, evaluate, and act upon persons served feedback through various venues to meet their needs.
 - a. New service options will be identified at Peer Panel meetings, public forums, house meetings, surveys, etc.
 - b. Identify housing resources by supplying a resource guide.
 - c. Job search/training by implementing groups with all programs.
 - d. Establish more key groups such as the Men's Group.
 - e. Identify and research transportation issues affecting persons served.
 - f. Cultural competency will improve services provided by staff

Program Descriptions

- Group Homes: Group Homes provide a family-like environment with private 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 psychiatric disabilities programs, most individuals have their own apartments, while others have roommates. All apartments in the programs for people with intellectual disabilities are shared.
- Congregate Supported Living: Congregate Supported Living offers individual apartments within a HUD subsidized building. While staff availability varies by site, staff is on site for some portion of the day seven days per week in each of the buildings to provide support to persons as wanted and needed. For those wishing to have a roommate, TSI has a few two bedroom apartments available.
- Community Supported Living: Community Supported Living Programs help individuals find housing in the community of their choice and provide assistance in developing the supports and skills needed to function in chosen roles within the home and community.
- Clinical Consultation and Education: Clinical Consultation and Education services are provided in conjunction with TSI's residential programs and offer education, training and support to staff and individuals on a variety of clinical and recovery-oriented issues.

- Community Supports Program: Through Peer Specialists, the Community Supports Program works in conjunction with TSI's residential programs to provide education and activities that promote wellness and recovery. The program also provides life enrichment experiences and activities in the areas of expressive arts and community recreation.
- Behavior Support: Provided to individuals with intellectual disabilities or families in need of additional support who are served by any residential or community provider. Services offered can address a range of challenging behaviors and are individualized, collaborative, flexible and holistic.
- Permanent Supportive Housing (PSH) and Transition Age Youth (TAY) Programs: The PSH and TAY Programs are part of Allegheny County's "Housing as Home" strategic plan. The programs help eligible individuals with psychiatric disabilities to secure housing and maintain tenancy. The PSH and TAY Programs provide a housing subsidy and connect individuals to needed financial, advocacy and legal resources. The programs provide support and education to the service user, providers, and landlords on housing related matters.
- Fairweather Lodge: The Fairweather Lodge provides a living arrangement for individuals further along in their recovery seeking to live independently and become active members of the community. Individuals living in the home are employed in the community. Staff does not reside in the house but is available to provide support as needed or wanted.

TSI provides residential and community services to an array of areas throughout the city of Pittsburgh and Allegheny County. Some of these areas include McKees Rocks, Oakland, Shadyside, McKeesport, Moon Twp., Highland Park, Carrick, Brentwood, and many others.

Admissions

Below are tables that summarize the number of admissions and average ages from fiscal years 2016/17 and 2015/16.

FY 2016/17 Admissions											
Program	CRR PD SL PD ID CH ID Con				FWL	BS					
# of Admissions	36	25	2	0	0	0					
Average Age	37	45.4	49.5	0	0	0					

FY 2015/16 Admissions										
Program	CRR PD	SL PD	Base	Title XIX	FWL					
# of Admissions	37	15	0	0	1					
Average Age	42	42	0	0	59					

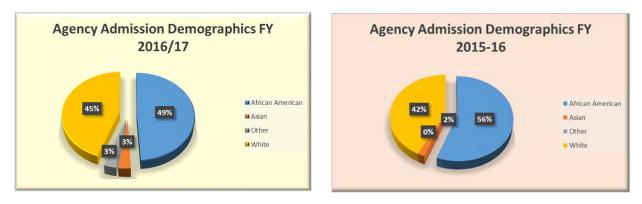
CRR PD - Community Rehabilitation Residences for Psychiatric Disabilities Programs

SL PD – Supported Living for Psychiatric Disabilities Programs

Base – Individuals whose services are funded by the county base funds and served by the Intellectual Disabilities programs **Title XIX** – Individuals whose services are funded through consolidated waiver and are served by the Intellectual Disabilities programs

FWL – Fairweather Lodge

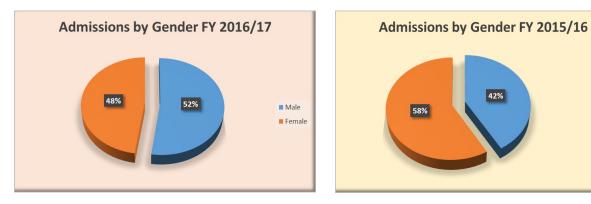
The following charts show a comparison of the admission demographics from both fiscal year 2016/17 and 2015/16.



TSI serves people who have been diagnosed with severe and persistent mental illness which can be generally grouped into the categories of mood disorders and psychotic disorders. TSI also serves people with intellectual disabilities and developmental delays as well.

Male

Female

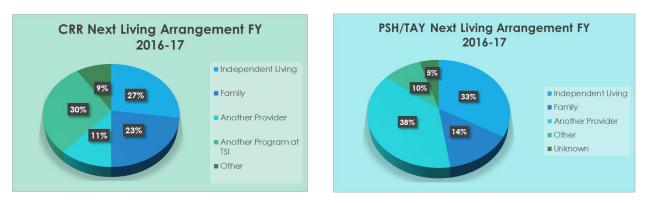


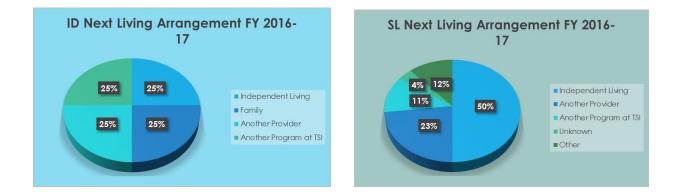
Exits

The table below shows a comparison of the number of exits, average age at the time of exit and the average length of stay for fiscal years 2016/17 and 2015/16.

Program	CRF	RPD	PD SL P		PD Title 2		ID C	ong.	NL	
	FY 16/17	FY 15/16	FY 16/17	FY 15/16	FY 16/17	FY 15/16	FY 16/17	FY 15/16	FY 16/17	FY 15/16
# of Exits	44	30	26	23	3	2	0	0	2	0
Average Age	37.3	39	43.8	46	43.6	42	n/a	n/a	53	n/a
Average										
Length of Stay										
(years)	0.9	1.3	2.8	2.4	2.3	8.5	n/a	n/a	1.7	n/a

The charts below show comparisons of the next living arrangement for people leaving the program in fiscal year 2016/17.





The charts below show comparisons of the status at exit for people leaving the program in fiscal year 2016/17.

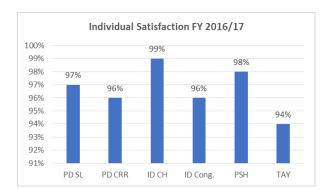


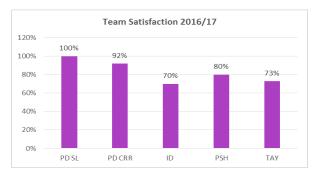
Quality Assurance and Improvement

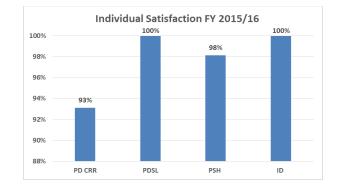
Service Planning

In July/August of 2017, all programs were evaluated utilizing individual and team member satisfaction surveys and service plan reviews/Psychiatric Rehabilitation Approach (PRA) audits. PRA audits look at whether all four components of the golden thread are present in each chart. A comparison of each program's audits for FY 2017/16 is located in Appendix A in the end of the report. A service plan comparison summary is also available for the ID programs in Appendix B.

Below are the charts that show the satisfaction of individuals and staff in each program.









Incident Monitoring and Trends

The tables below summarize and compare incidents that occurred for PD and ID programs during the 2016/17 fiscal year.

Incidents by Category 16/17 fiscal year		* = no change in status			d = decrease		I = increase		
	10	20		20		40			
	1Q	2Q	% of	3Q	% of	4Q	% of		Incident
	7/1/16-	10/1/16-	change w/	1/1/17-	change w/	4/1/17-	change w/		percent of
PD Incidents (Residential)	9/30/16		last qtr	3/31/17	last qtr	6/30/17	last qtr	Year Totals 16/17	total
Death	0	0	*	0	*	0	*	0	0%
Suicide Attempt	1	0	d100%	0	*	0	*	1	3%
Significant Med. Error	0	0	*	0	*	0	*	0	0%
Law Enforcement	3	2	d33%	1	d50%	1	*	7	21%
Abuse	0	0	*	0	*	0	*	0	0%
Neglect	0	0	*	0	*	0	*	0	0%
Injury (beyond 1st aid)	2	0	d100%	1	i100%	1	*	4	12%
Illness	6	5	d17%	3	d40%	5	i67%	19	56%
Involuntary Hospitalization	0	0	*	0	*	0	*	0	0%
Missing Person	1	0	d100%	0	*	2	i200%	3	9%
Outbreak of Illness	0	0	*	0	*	0	*	0	0%
Other	0	0	*	0	*	0	*	0	0%
TOTAL	13	7	d46%	5	d29%	9	i80%	34	

	1Q	2Q		3Q		4Q			
			% of		% of		% of		Incident
	7/1/16-	10/1/16-	change w/	1/1/17-	change w/	4/1/17-	change w/		percent of
PD Incidents (Community)	9/30/16	12/31/16	last qtr	3/31/17	last qtr	6/30/17	last qtr	Year Totals 16/17	total
Death	1	0	d100%	0	*	2	i200%	3	20%
Suicide Attempt	0	0	*	0	*	1	i100%	1	7%
Significant Med. Error	1	0	d100%	0	*	0	*	1	7%
Law Enforcement	0	1	i100%	0	d100%	0	*	1	7%
Abuse	0	0	*	0	*	0	*	0	0%
Neglect	0	0	*	0	*	0	*	0	0%
Injury (beyond 1st aid)	0	1	i100%	0	d100%	0	*	1	7%
lliness	1	1	*	3	i200%	0	d100%	5	33%
Involuntary Hospitalization	0	0	*	0	*	0	*	0	0%
Missing Person	0	0	*	0	*	0	*	0	0%
Outbreak of Illness	0	0	*	0	*	0	*	0	0%
Other	1	1	*	0	d100%	1	i100%	3	20%
TOTAL	4	4	*	3	d25%	4	i33%	15	

	Year
	Totals
PD Incidents	15/16
Death	2
Suicide Attempt	0
Significant Med. Error	0
Law Enforcement	8
Abuse	0
Neglect	0
Injury (beyond 1st aid)	5
Illness	20
Involuntary Hospitalization	0
Missing Person	2
Outbreak of Illness	0
Other	0
TOTAL	37

	4Q	1Q		2Q		3Q		4Q				
ID Incidents	4/1/16- 6/30/16	7/1/16- 9/30/16	% of change w/ last qtr	10/1/16- 12/31/16	% of change w/ last qtr	1/1/17- 3/31/17	% of change w/ last qtr	4/1/17- 6/30/17	% of change w/ last qtr	Year Totals 16/17	Incident percent of total	Year Totals 15/16
Abuse	0	0	*	0	*	1	i100%	0	d100%	1	3%	1
Neglect	0	0	*	0	*	0	*	5	i500%	5	17%	0
Fire Safety	2	2	*	0	d100%	0	*	0	*	2	7%	3
Police Involvement	1	1	*	0	d100%	1	i100%	1	*	3	10%	1
Medication Error	0	0	*	0	*	0	*	0	*	0	0%	0
Death	0	0	*	0	*	0	*	0	*	0	0%	0
Injury (beyond 1st aid)	1	0	d100%	0	*	0	*	0	*	0	0%	3
Emergency Room Visit	1	3	i200%	5	i67%	3	d40%	0	d100%	11	38%	4
Hospitalization	4	1	d75%	0	d100%	1	i100%	2	d100%	4	14%	8
Psychiatric Hospitalization	0	1	i100%	0	d100%	0	*	0	*	1	3%	0
Suicide Attempt	0	0	*	0	*	0	*	0	*	0	0%	0
Missing Person	0	0	*	0	*	0	*	0	*	0	0%	0
Misuse of Funds	0	0	*	0	*	1	i100%	1	*	2	7%	4
Rights Violation	0	0	*	0	*	0	*	0	*	0	0%	0
Outbreak	0	0	*	0	*	0	*	0	*	0	0%	0
Emergency Closure	0	0	*	0	*	0	*	0	*	0	0%	0
Restraints	0	0	*	0	*	0	*	0	*	0	0%	0
Individual to Individual Abuse	0	0	*	0	*	0	*	0	*	0	0%	0
TOTAL	9	8	d11%	5	d38%	7	i40%	9	i29%	29		24

Incident trends were discussed by the Quality Assurance Team at the time of review. The team noted that number of incidents from FY 2015-16 to FY 2016-17 remained about the same, with the exception of an increase in the 1st Quarter for PD programs and a significant increase in the 3rd quarter for ID programs.

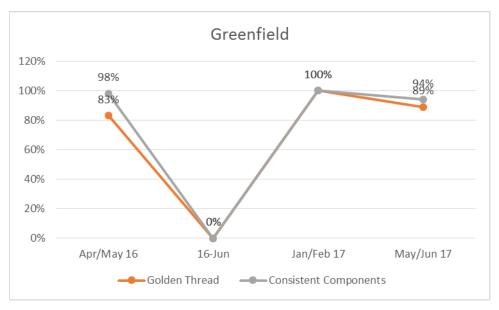
FY 2016/17 Program Outcomes

Indicator	Goal Description	Target	1Q	2Q	3Q	4Q
PSH Non-Eviction	Individuals living in community apartments do not					
Rate	experience eviction.	100%	100%	100%	100%	100%
TAY Non-Eviction	Individuals living in community apartments do not					
Rate	experience eviction.	100%	**	95%	87%	100%
PSH/TAY Landlord						
Satisfaction	Landlords are satisfied with the PSH program overall.	100%	**	**	**	100%
PDSL Access	Clients admitted to Supported Living will begin receiving services within 7 business days or less from date of referral.	100%	100%	100%	100%	100%
Outreach	The peer mentor group will hold 10 outreach activities during					
Engagament	the year to engage people in recovery.	100%	**	60%	80%	100%
Individual	Individuals served by PD Supported Living will report					
Satisfaction PD SL	satisfaction with their services.	90%	100%	**	**	97%
Individual Satisfaction PD CRR	Individuals served by PD CRR will report satisfaction with their services.	90%	93%	**	**	96%
Individual						
Satisfaction	Individuals served by ID Community Homes will report					
ID CH	satisfaction with their services.	90%	100%	**	**	99%
Individual						
Satisfaction	Individuals served by ID Congregate will report satisfaction					
ID Cong.	with their services.	90%	100%	**	**	96%
Individual	Individuals served by Permanent Supportive Housing will					
Satisfaction PSH	report satisfaction with their services.	90%	98%	**	**	98%
Individual	Individuals served by Transition Age Youth will report					
Satisfaction TAY	satisfaction with their services.	90%	**	**	**	**
Family Satisfaction	Family members/friends are satisfied with the services					
ID	individuals receive	95%	**	**	78%	78%
Family Satisfaction	Family members/friends are satisfied with the services					
PD	individuals receive	95%	**	**	96%	96%
Medication						
Accuracy	Medications are taken by individuals as prescribed and staff					
CRR	are providing support.	100%	94.43%	92.93%	93.63%	92.45%
Medication						
Accuracy	Medications are taken by individuals as prescribed and staff					
ID CH	are providing support.	100%	99.69%	**	99.78%	99.65%

** no data available at this time

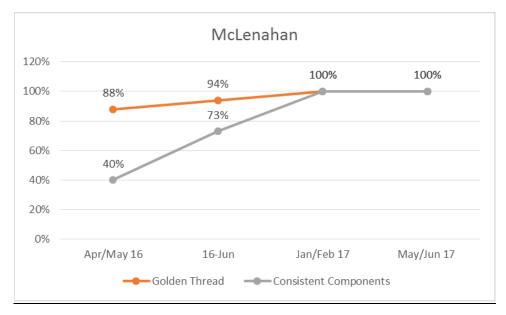
Appendix A

PRA Audit Comparison

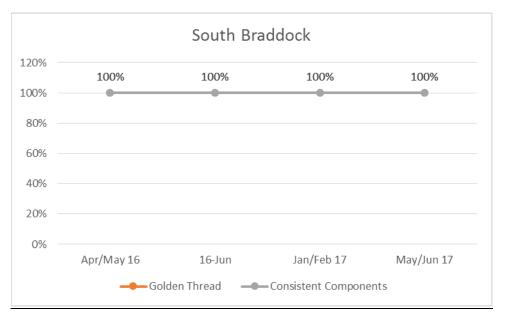


<u>Greenfield</u>

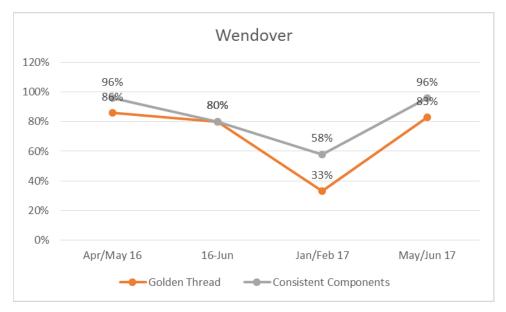
<u>McLenahan</u>



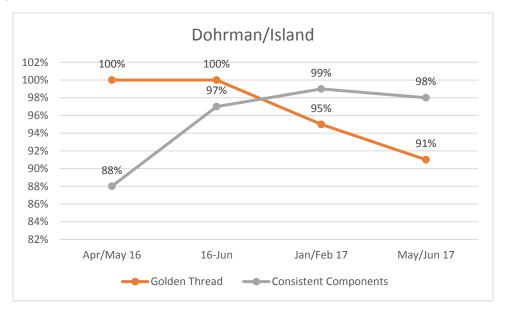
South Braddock



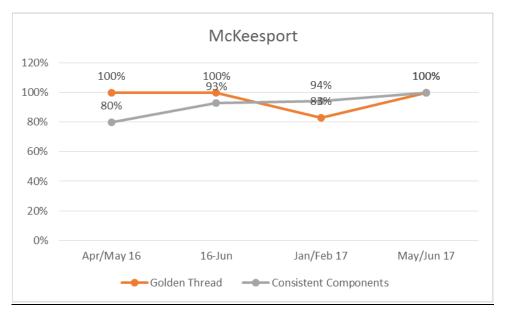
<u>Wendover</u>



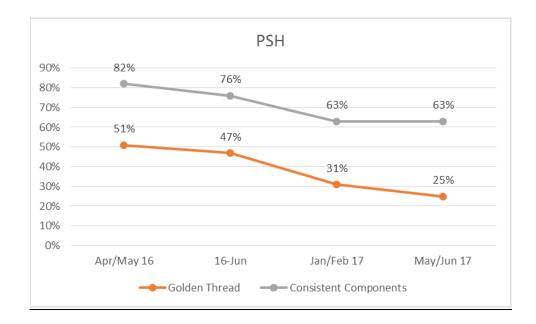
Dohrman/Island



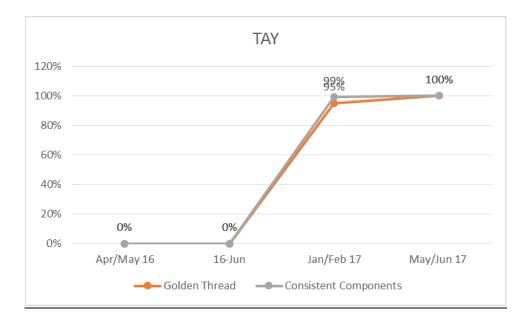
McKeesport



<u>PSH</u>



<u>TAY</u>



Appendix B

ID Service Plan Reviews

