



Forensic Case Management



Annual Quality Review
July 1, 2022 – June 30, 2023

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Service Description

- Forensic Case Management (FCM) provides case management to individuals who have been diagnosed with a serious mental illness and co-occurring disorders that have entered into the criminal justice incarceration system. The focus of case management services is to engage individuals to seek recovery of their mental illness, provide a smooth transition from incarceration to community living by accessing recovery supports, benefits, and housing services promoting a safe re-entry into the community setting to reduce recidivism within the legal system.
- The purpose of Forensic Case Management is to evaluate and coordinate services and support for individuals involved in the justice systems that have a mental health and co-occurring disorders. Most individuals will require support upon re-entry or discharge from various inpatient, State or County facilities to ensure effective interaction, collaborative planning, and coordination of services.
- Forensic Case Management will serve adults who are 18 years and older who possess a mental health disorder and co-occurring disorder. Exceptions will be made for those who have not been diagnosed previously with a mental health disorder, however, are displaying symptoms congruent of a serious mental illness with approval from McKean County Administrators.

Overview

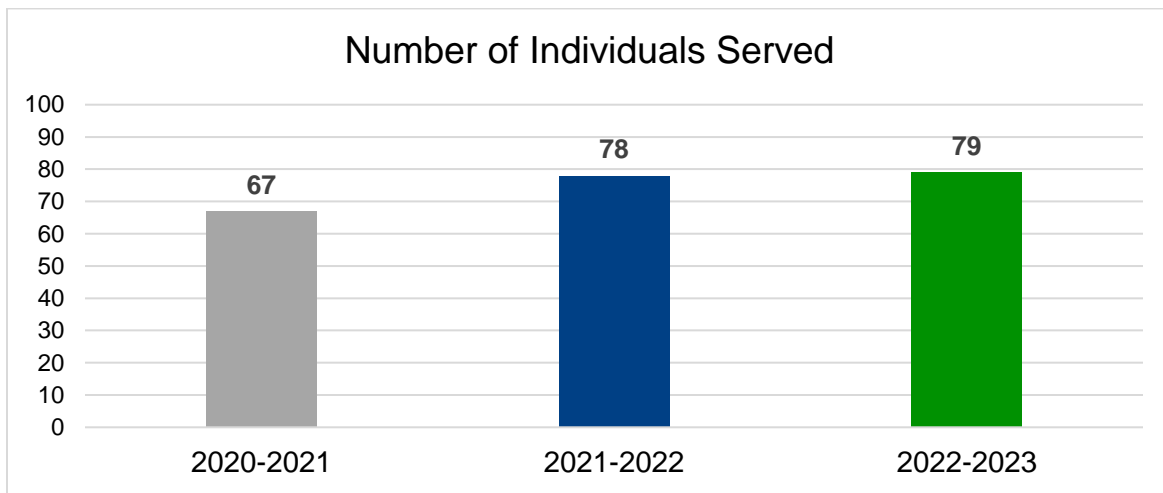
- The Guidance Center operates under the mission of developing and providing comprehensive, quality mental health and substance use treatment, intellectual disability services, education, prevention, and community outreach services, guided by principles of least restricted care, cost effectiveness, accessibility, and responsiveness to individuals, families and communities served.
- On May 11, 2023, the federal Public Health Emergency (PHE) declaration expired, however, it did not mean the virus no longer existed. The agency continued precaution measures when necessary while still providing optimal service delivery within the Forensic Case Management Program. During this period of review, all services were delivered face-to-face.
- Quality Improvement plans are made based upon internal compliance audit results and client feedback surveys to improve the quality of services. Client feedback survey results provide necessary data to ensure The Guidance Center is delivering optimal care in Forensic Case Management. Clients were offered feedback surveys. Data was extracted and analyzed based on quality performance by the Quality Director. Survey results are shared with the Program Director, Senior Management, Executive Director, and the Agency Board of Directors.
- Forensic Case Manager participates and engages in the following:
 - McKean County Reentry Committee
 - Forensic Boundary Spanner Coalition

- Jail Coordination
- Data for this Quality Report is from July 1, 2022, through June 30, 2023.

Demographics

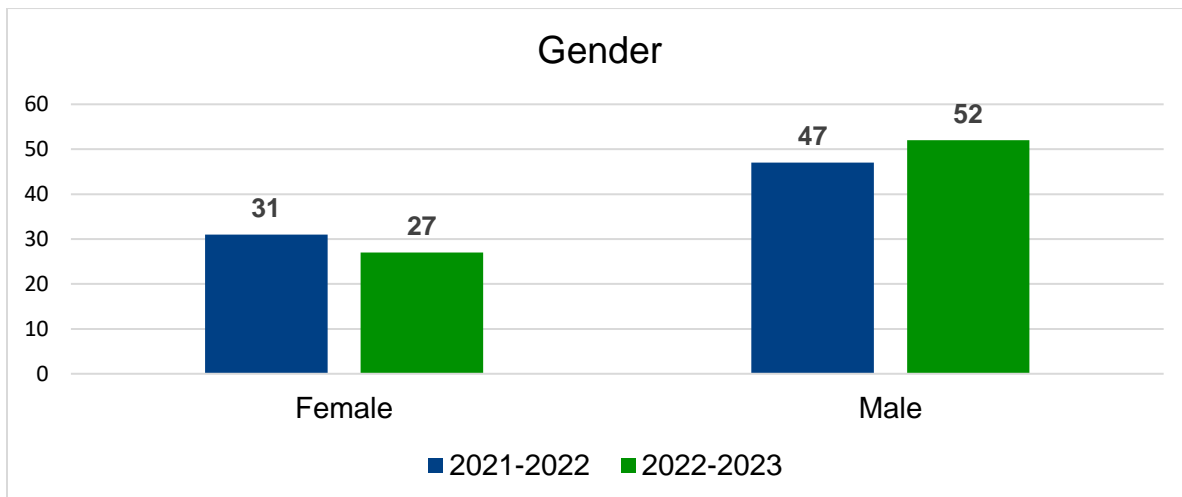
Number of Individuals Served

There was an increase of one individual served in the Forensic Case Management Program from the last review. During this review, there were 79 individuals receiving Forensic Case Management Services.



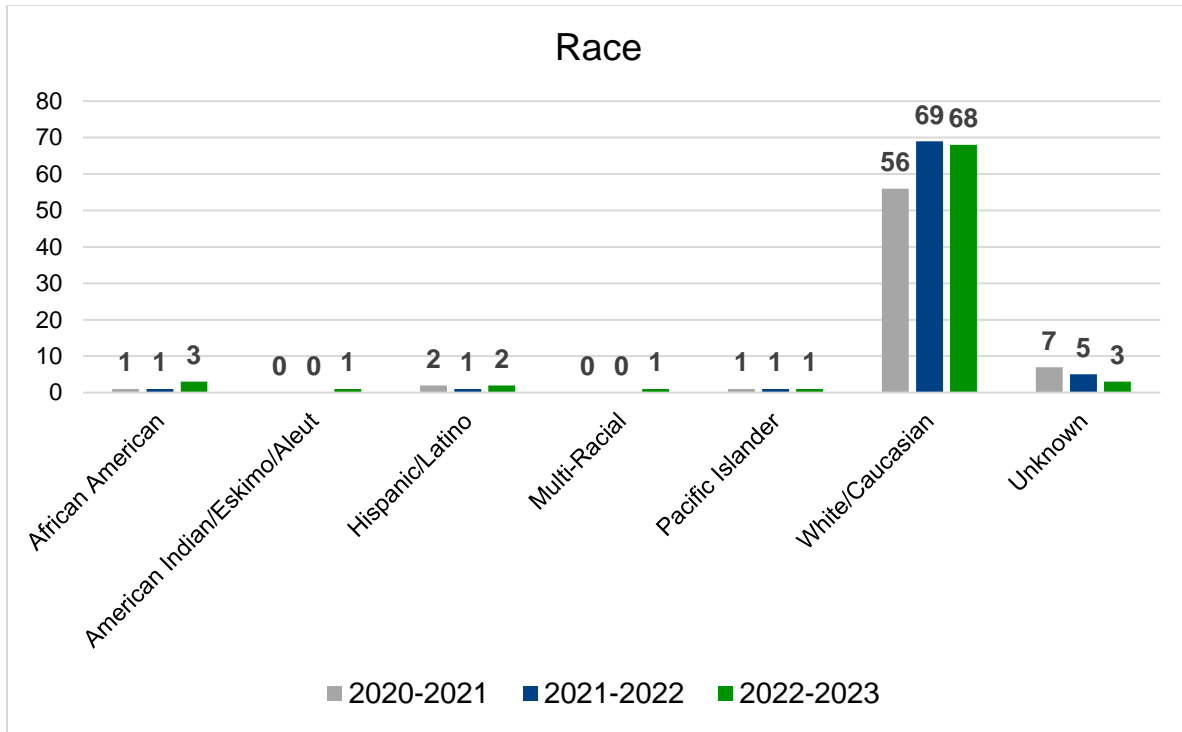
Gender

Consistent with the last review, a greater number of males have been served in FCM. There were 27 females and 52 males served during the period of review.



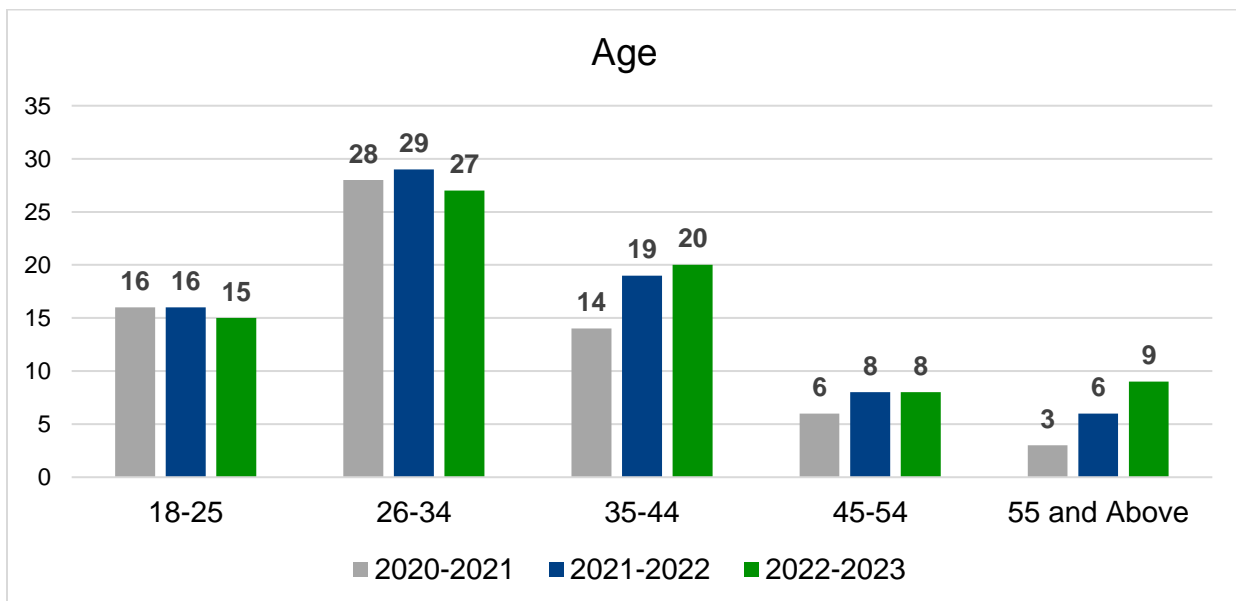
Race

Consistent with previous reviews, the majority of the individuals served in the program are White/Caucasian. The graph below indicates the number of individuals and their race.



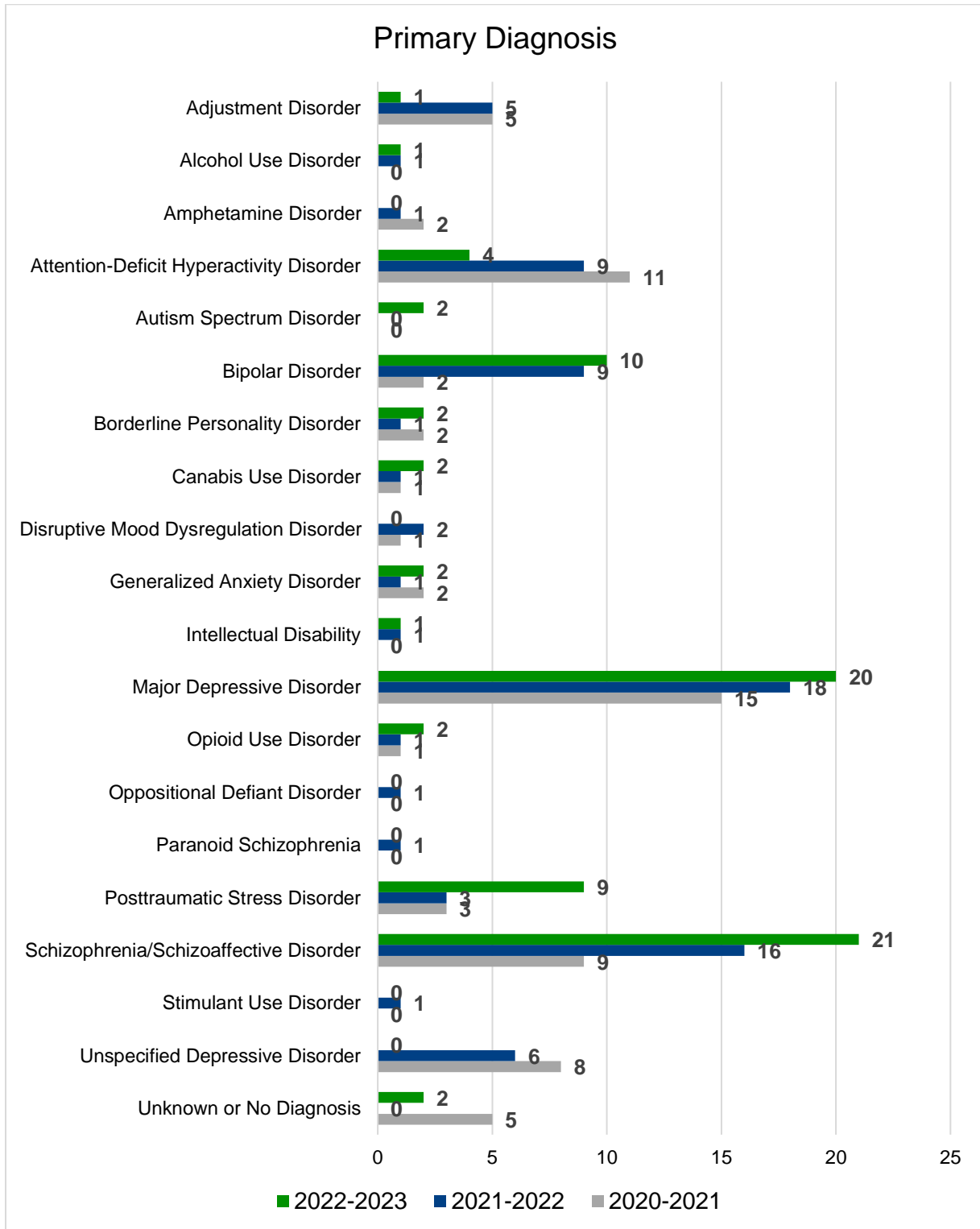
Age

Consistent with previous reviews, the majority of individuals served in the program are between the ages of 26 and 34. The following table indicates the age breakdown.



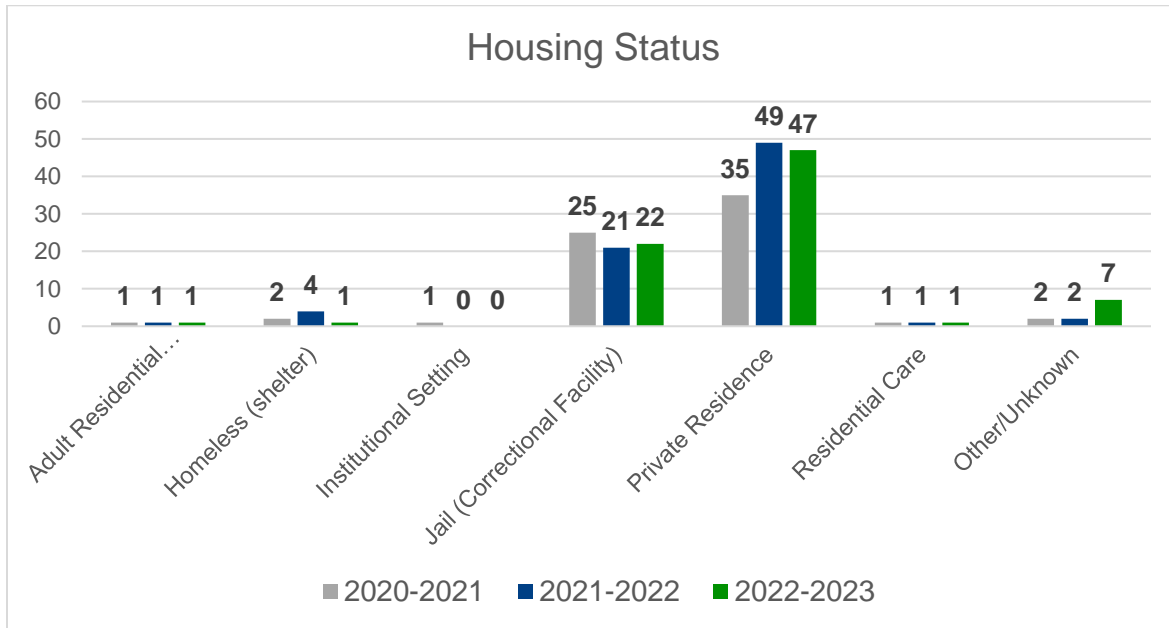
Primary Diagnosis

The majority of individuals served in the program primary diagnosis are schizophrenia/schizoaffective disorder and major depressive disorder. A complete breakdown of the primary diagnoses is found below.



Current Housing Status

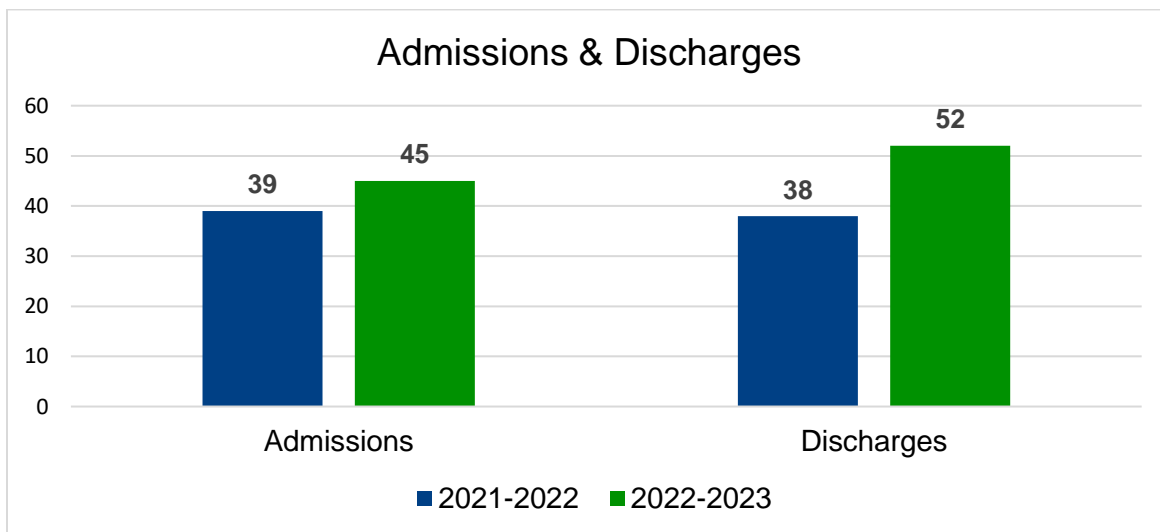
The majority of the individuals served in the program live in a private residence. It is also highlighted that the number of individuals residing in a correctional facility has only increased by one individual during this period of review.



Service Data

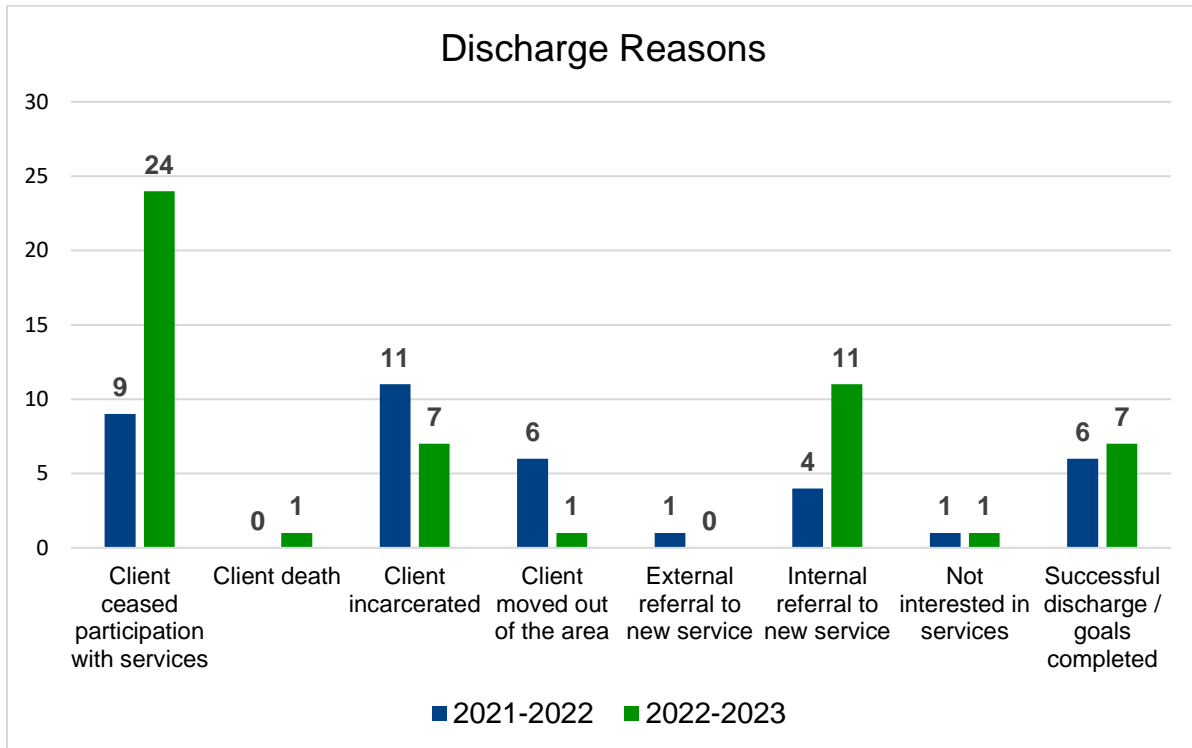
Admissions & Discharges

Both admissions and discharges have increased since the last review. There were 45 admissions and 52 discharges during this review.



Discharge Reasons

During this review, of the 52 discharges, most individuals were discharged due ceasing participation with services. However, we saw a decline in incarcerations, and we had seven individuals discharge from the program for meeting their goals. The graph below depicts all the discharge reasons.



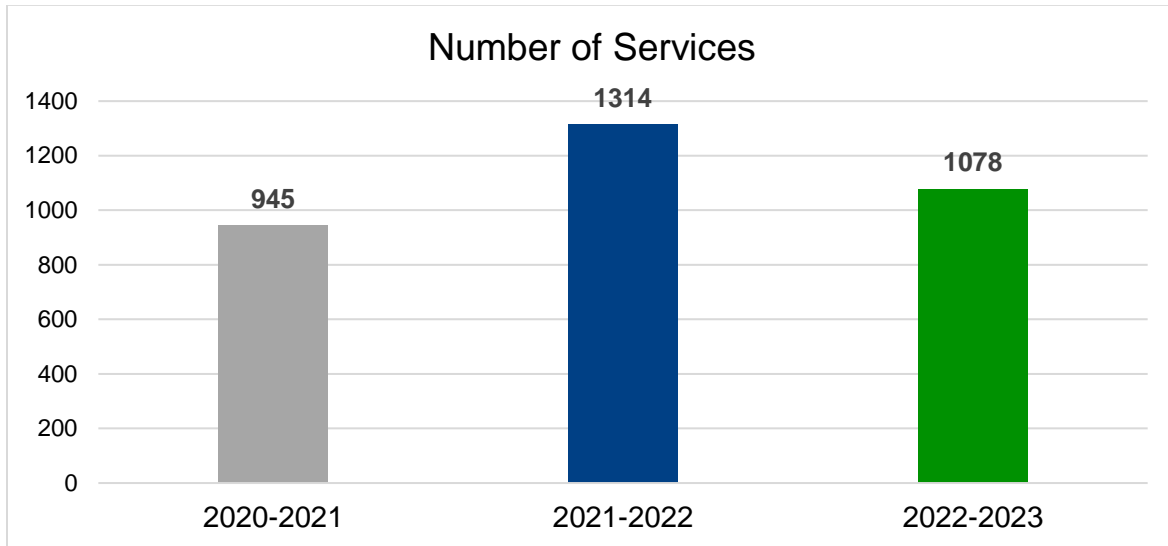
All individuals who discharged from the program had a completed discharge summary. Some of the information the discharge summary captures are discharge reasons, referrals made, community resources shared, goals attained, and individuals' strengths.

Discharge planning is an important component of the Forensic Case Management Program. Below are some areas the program assisted individuals with accomplishing:

- Transportation assistance
- Stable housing
- Utility assistance
- Enrollment in Mental Health Services
- Enrollment in Drug & Alcohol Treatment
- Enrollment in higher education
- Employment
- Completion of parole with no additional violations

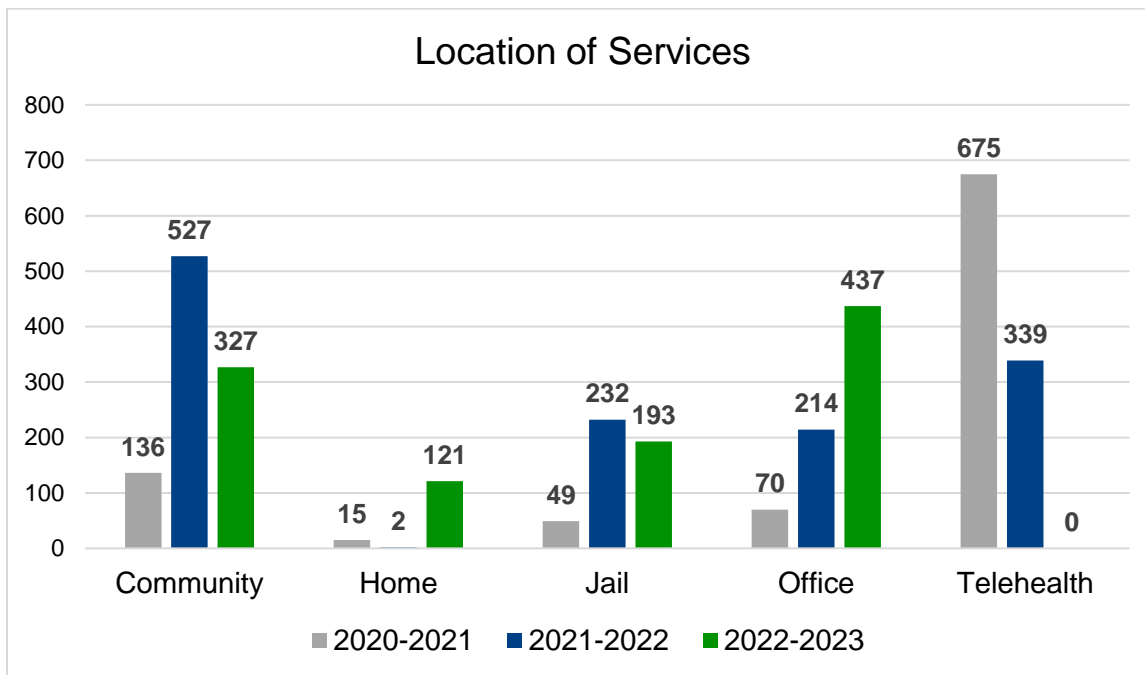
Number of Services

There were 1,078 services delivered during this review. A complete breakdown of number of services for the last three fiscal years is captured in the graph below.



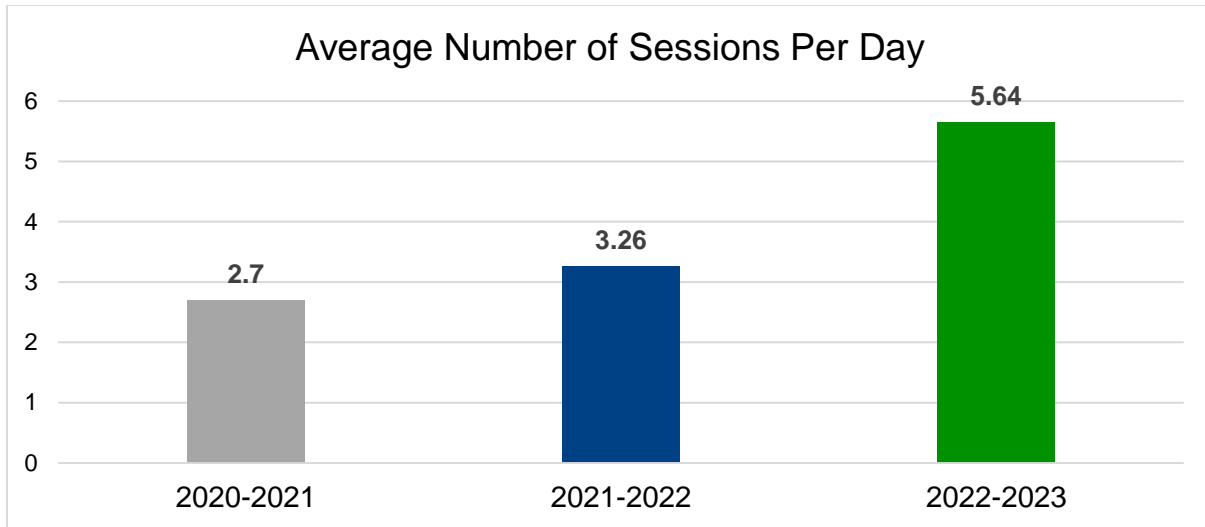
Location of Services

During the last review, some services were still being delivered via telehealth due to the pandemic. Since social distancing guidelines have been lifted, all services were delivered face to face. The chart below breaks down the service locations.



Sessions Per Day

The average number of sessions continues to increase. The graph below indicates the average number of services delivered per working day.

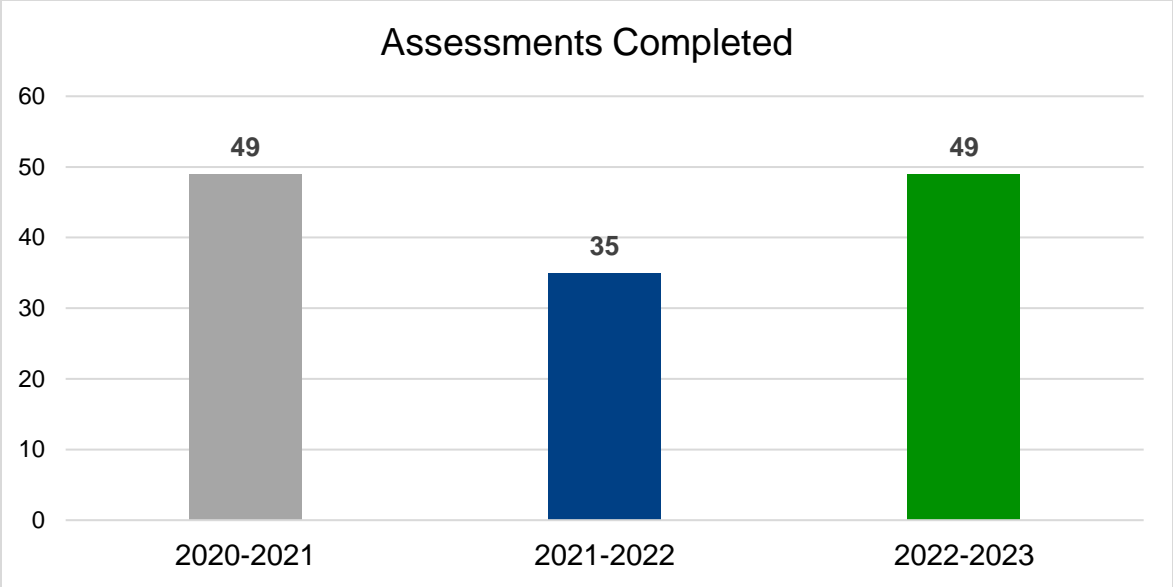


Assessments

Assessments are completed among all individuals enrolled in the program. Assessments encompass a wide variety of information including, but not limited to, the following:

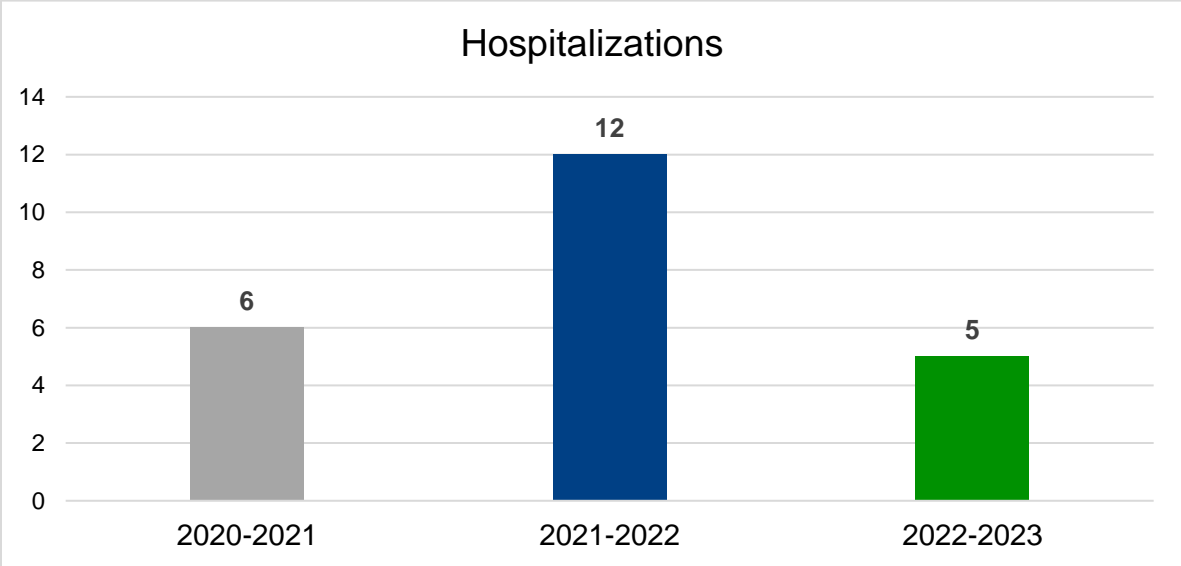
- Demographics
- Transportation
- Criminal history
- Medical information
- Substance use information
- Mental health information
- Employment
- Housing
- Supportive services
- Supporting documents
- Strengths and needs
- Status summary

There were 49 assessments completed during this time of review.



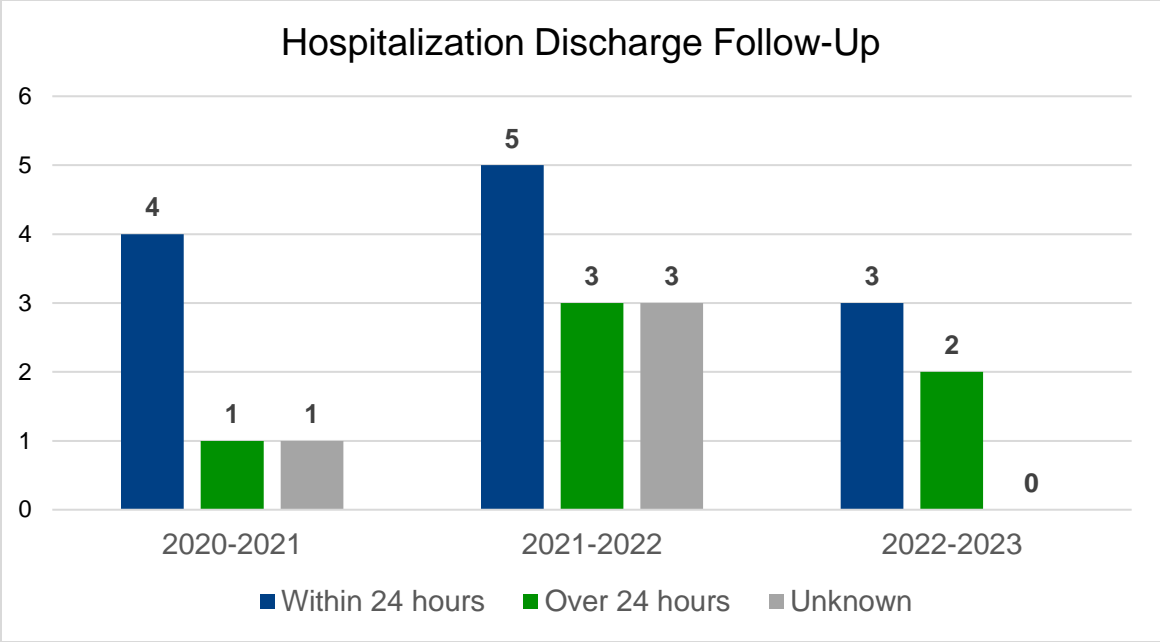
Hospitalizations

Individuals who were admitted into a psychiatric hospital while being enrolled in FCM have decreased since the last review.



Hospitalization Discharge Follow-Up

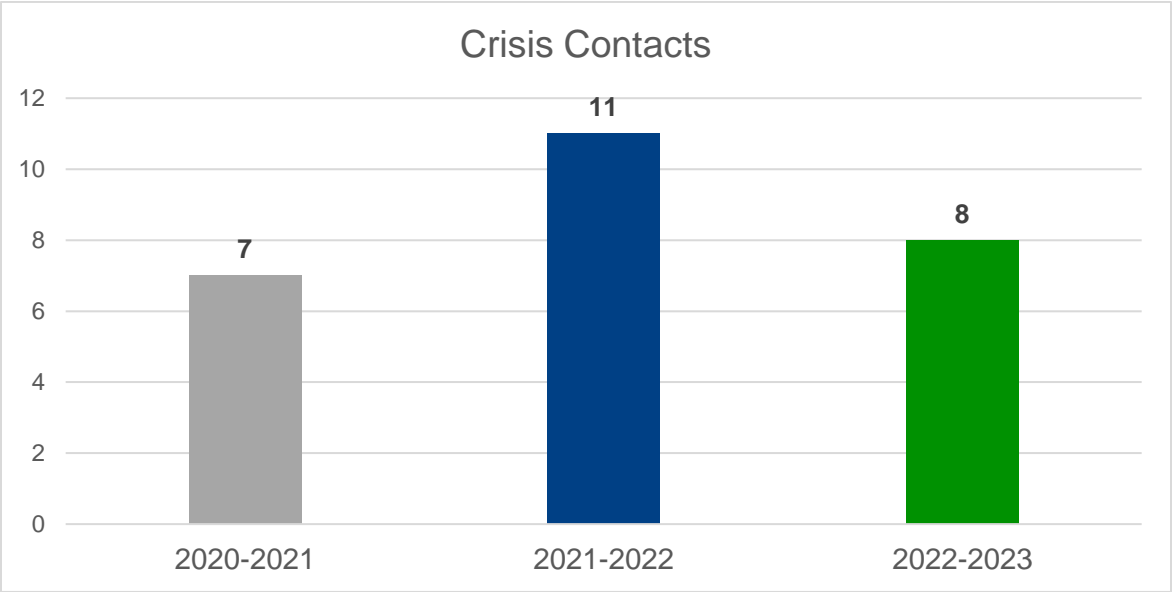
When clients are discharged from a hospital, it is encouraged to follow-up within 24 hours. During this review, more clients had follow-up within 24 hours.



Three of the five individuals received follow-up care within 24 hours of a hospital discharge.

Crisis Contacts

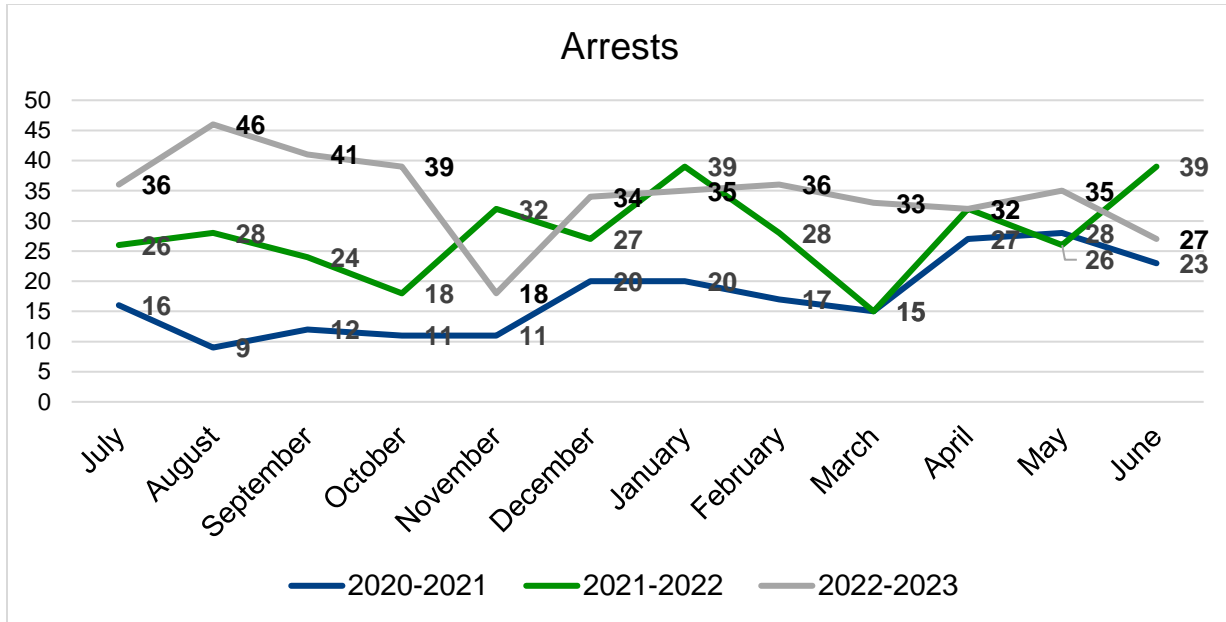
During this review, crisis contacts decreased from 11 to 8 individuals.



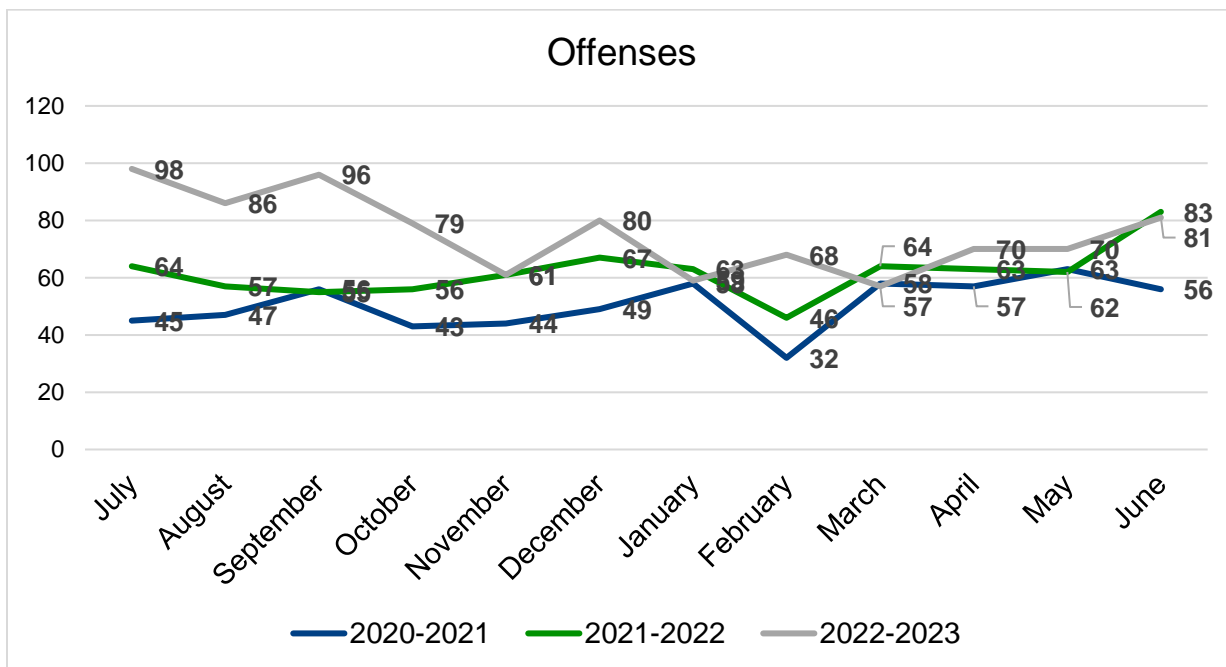
Arrests & Offenses

Arrests

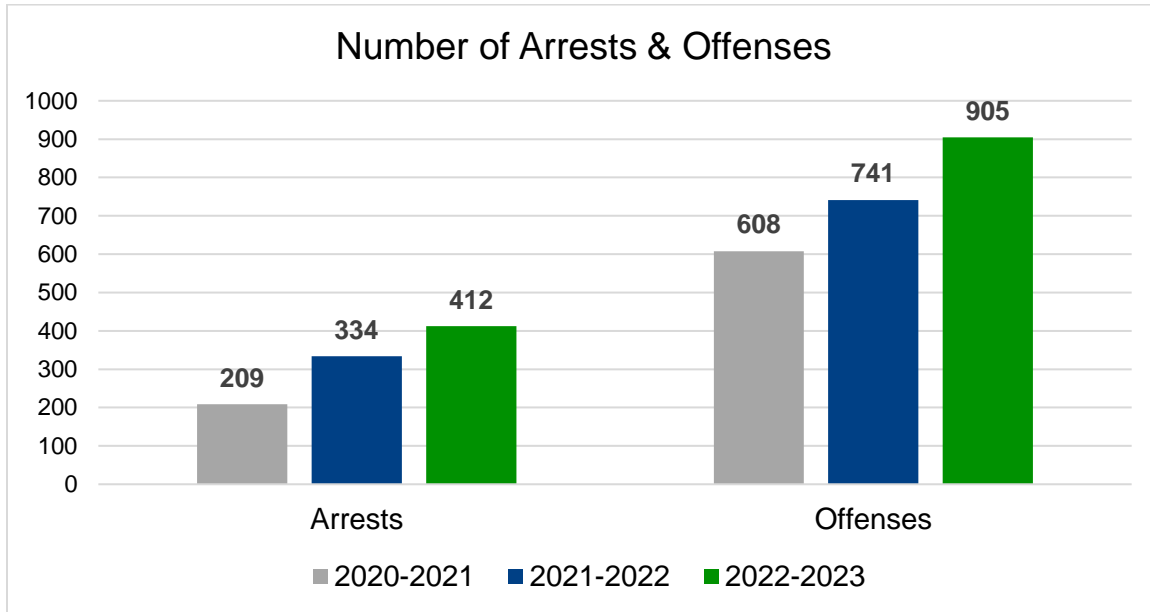
According to the Pennsylvania Uniform Crime Reporting System, McKean County arrests & offenses continue to climb since 2020. Below are two graphs for arrests & offenses that depict the increase in crime in McKean County over the past three years.



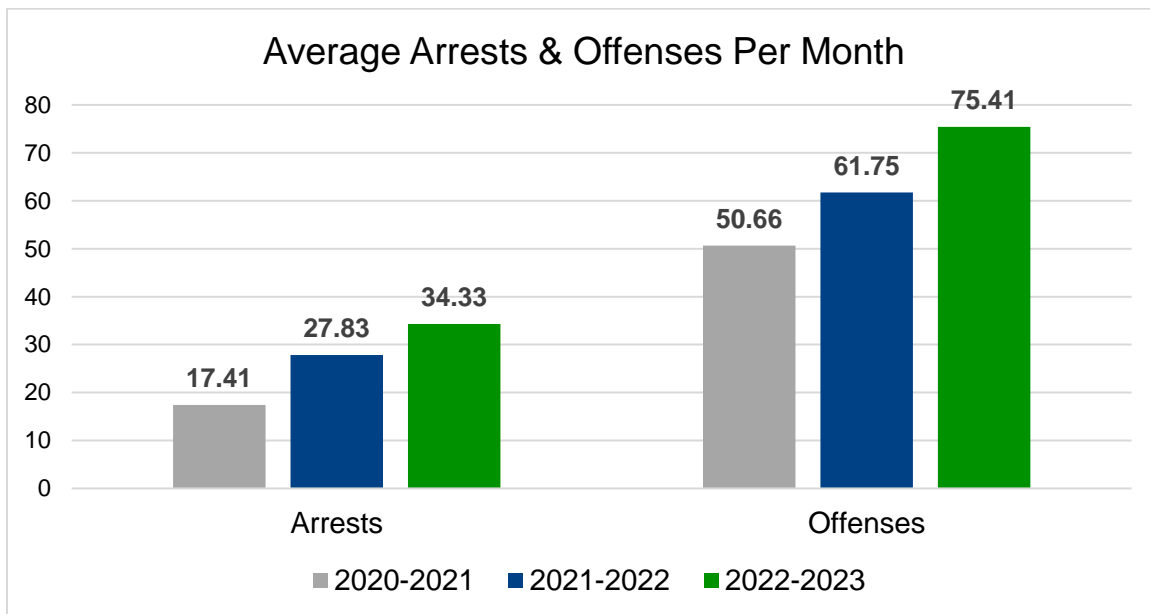
Offenses



Crime continuously increases in McKean County. Arrests increased from 334 to 412 and offenses increased from 741 to 905 during this review. The following graph depicts the number of arrests and offenses by month broken down by each fiscal year.



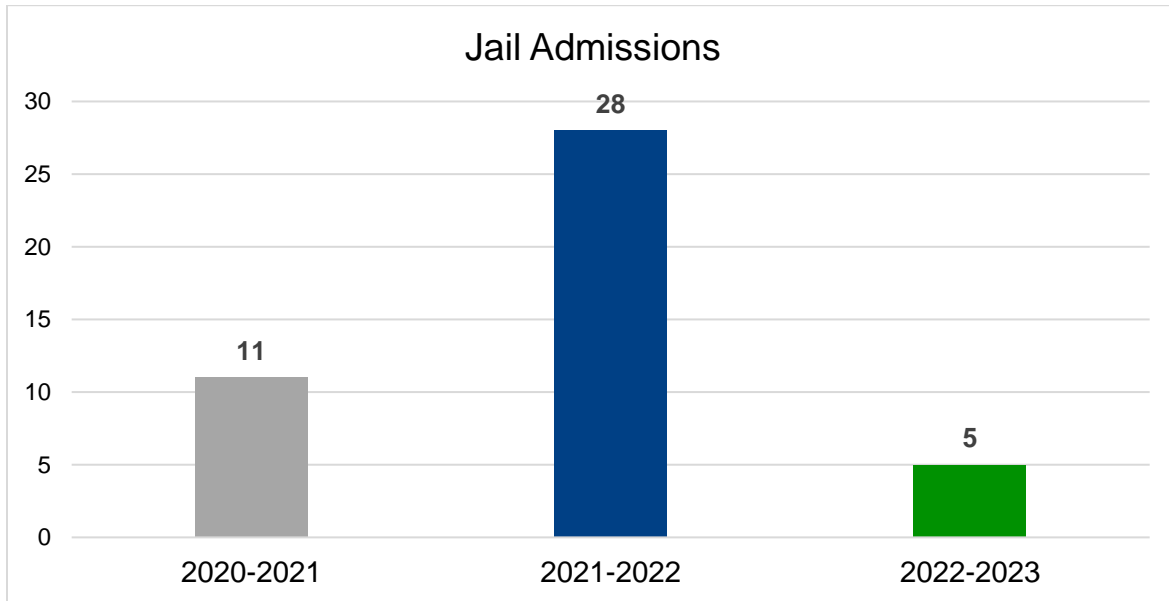
The following graph depicts the average number of arrests and offenses in a month for each fiscal year.



Jail Admissions

Jail admissions increased drastically during the 2021-2022 fiscal year. Jail admissions increasing during this time could be contributed to multiple variables. The court systems were backed up with trials and there was an influx of individuals being sentenced for crimes that occurred during and prior to the pandemic.

During this review, 5 individuals were admitted to jail or a correctional facility, which is a drastic decrease from the last review. Additionally, there were one individual discharged from a correctional facility during this period of review.



Program Adherence

To ensure that FCM is adhering to the service description, regular internal audits are performed by the Compliance Coordinator and a quality review is conducted by the Quality Director. Program goals are determined when quality improvement areas are identified during an internal audit or a quality review.

Audits

Compliance Coordinator audits FCM charts on a biannual basis. Compliance Coordinator conducts internal audits in all programs at the agency.

Methodology

Client charts are selected by a random sample to be audited internally. In addition, the Program Director reviews charts on a regular basis.

Audit Results

The results from the two internal audits during this period of review are below.

Internal Quality Review			
Program	FCM	Date of Audit	07/19/22
Number of Charts Reviewed	20 Charts	Audit Schedule	Biannually – Q1
Total Number of Indicators	3 Quality Indicators		

Category	Score	Goal
1. Service Agreement Completed and Signed	100%	80%
2. Treatment Goals Identified	100%	80%
3. Assessment Completed	94%	80%
Indicators that fell below 80%:		

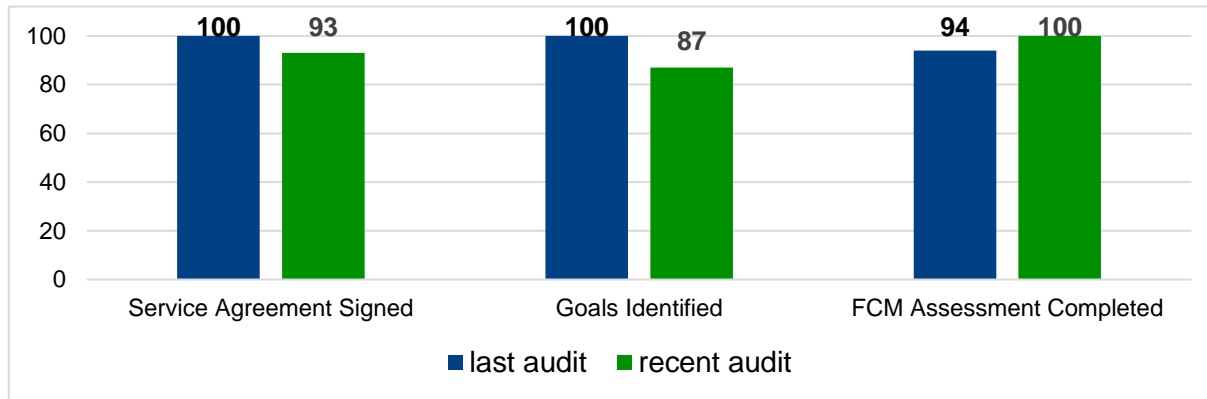
Internal Quality Review			
Program	FCM	Date of Audit	3/15/2023
Number of Charts Reviewed	15 Charts	Audit Schedule	Biannually – Q3
Total Number of Indicators	13 Quality Indicators		

Category	Score	Goal
1. Intake & Assessment	98%	80%
2. Treatment Planning	90%	80%
3. Care Coordination	93%	80%
4. Crisis Planning (new category, not counted this audit)	N/A	80%
Indicators that fell below 80%:		

Indicator 5: Service Plan is completed within 30 calendar days of initial service: **77%**

Comparison of Last Internal Audit Indicators:

Due to new indicators selected in March 2023, comparison shows only last audit's indicators. Next internal audit will have a full comparison of all indicators.

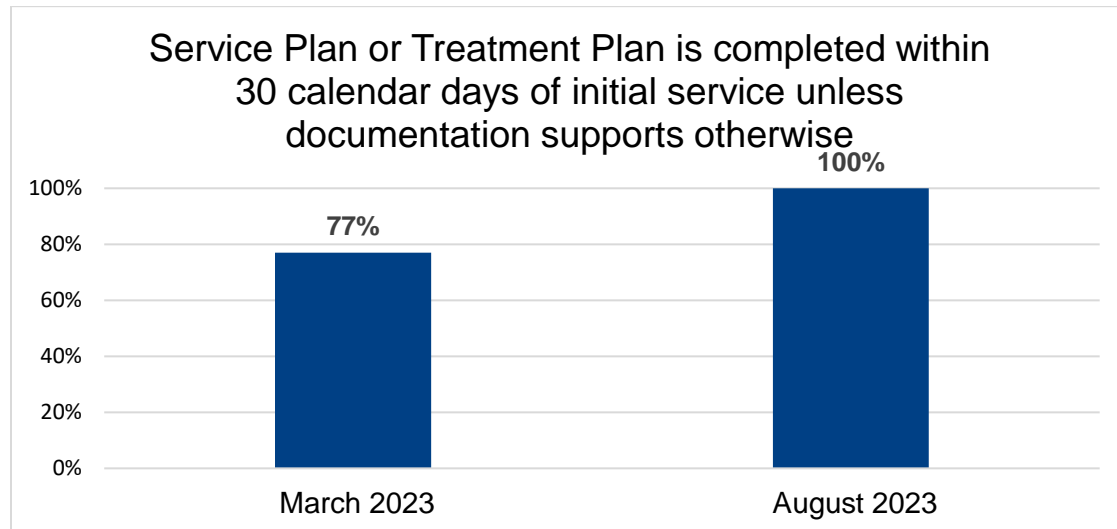


Program Goals

One goal has been identified in FCM from the internal compliance audits

1. Service plans are completed within 30 days of initial service unless documentation supports otherwise.

This area was developed into a corrective action plan using the Plan Do Check Act (PDCA) Model. We reviewed this PDCA with staff and developed a plan to improve upon. In the August 2023 internal compliance audit, this indicator reached 100% and was considered retired.



Supervision

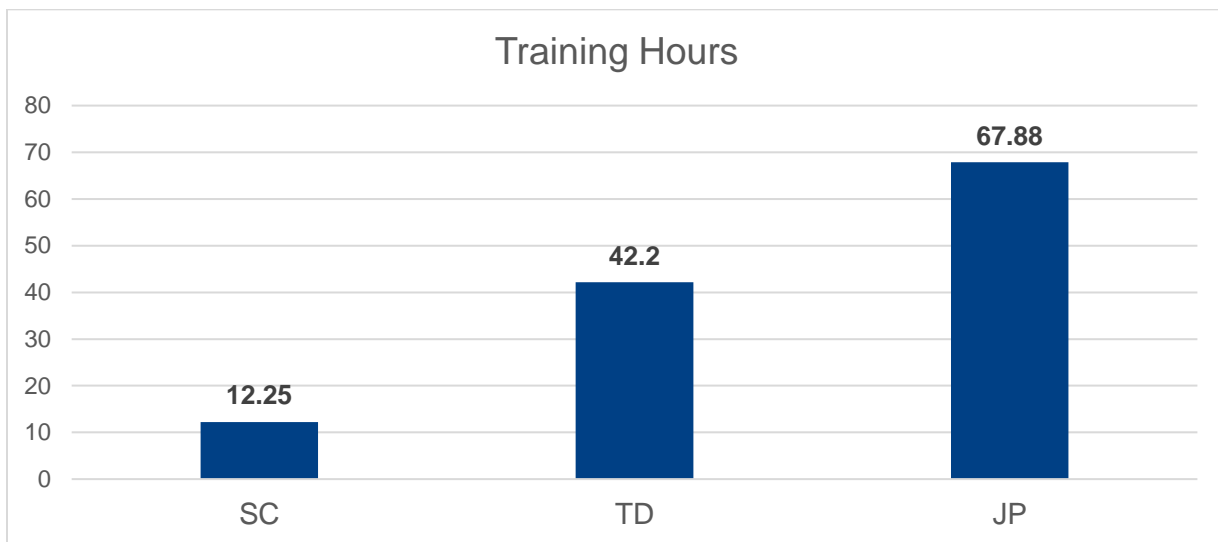
Weekly individual supervision occurs in addition to group supervision as needed with the Forensic Case Management Program.

Supervision logs are maintained by the Program Director.

Staff Training

Training hours are indicated in the following graph. The program consists of two staff members:

1. Stephanie Crozier (SC), Previous Forensic Case Manager
2. Tanner Danielson (TD), Current Forensic Case Manager
3. Jayne Peterson (JP), Senior Director Recovery & Support Services



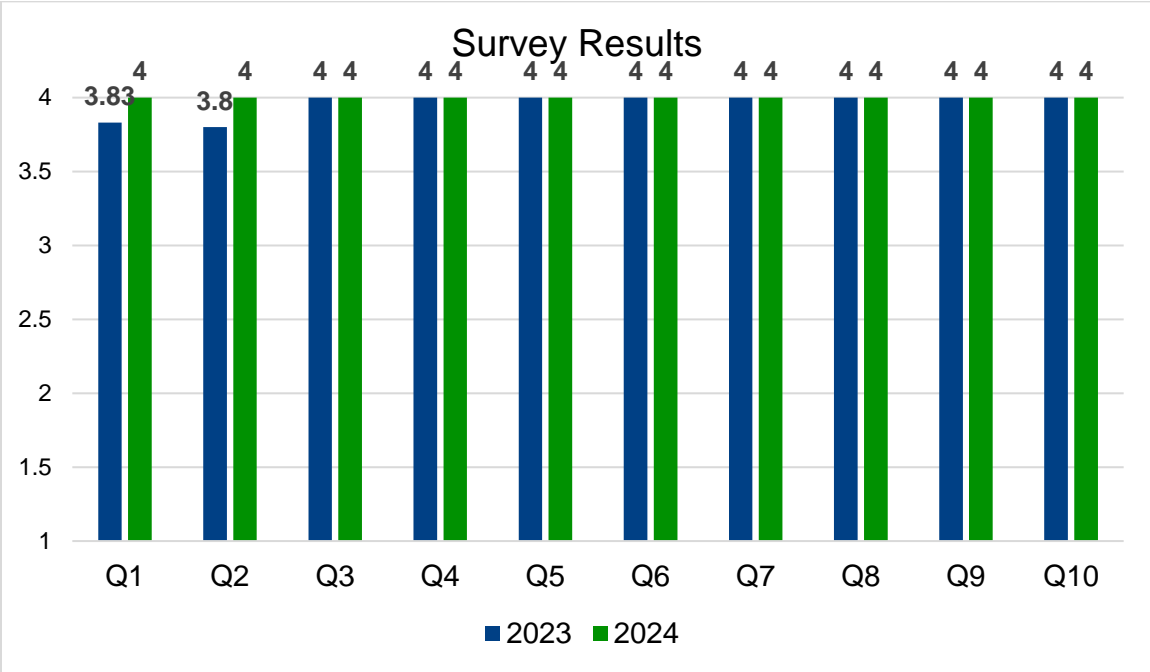
SC is a former employee who no longer worked for the agency during this fiscal year. A complete list of training hours for both staff members is maintained by the Senior Director of Recovery & Support Services and the Agency Training Coordinator.

Survey Results

Surveys were completed with individuals enrolled in Forensic Case Management in February 2024. Fourteen surveys were completed. Individuals were asked how satisfied they were in the categories listed below. The answers ranged on a scale from 1 to 4. One represents not satisfied and 4 represents very satisfied. The numbers have been averaged and results of the surveys are as follows:

Survey Results	
Timeliness of our response to your initial request for this service	4
The setting where services are provided	4
The courtesy and respect shown by our clerical staff	4
The courtesy and respect shown by the treatment provider	4
The level of confidentiality	4
Your participation in the development of a treatment plan that meets your needs	4
Your provider's ability to help you and your family	4
Your ability to handle your situation as a result of receiving services	4
The frequency and convenience of contacts	4
Your service provider addressing your specific cultural background in a respectful manner	4

All client feedback survey results responded with a 4 for each question. The graph below indicates the average of the scores from the last fiscal year to now.



All individuals served in the program indicated they are very satisfied with services.

Additionally, individuals were asked what the most helpful thing about has been receiving services and were given a space to provide additional feedback. Below is a word cloud of some of their responses.

