COMMUNITY MENTAL HEALTH PROGRAM REAPPROVAL REVIEW

REGION VII: MENTAL HEALTH CENTER OF GREATER MANCHESTER

8/1/2019
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ACRONYMS AND DEFINITIONS

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<thead>
<tr>
<th>Acronyms</th>
<th>Definitions</th>
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<tbody>
<tr>
<td>BMHS</td>
<td>Bureau of Mental Health Services</td>
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<tr>
<td>BOD</td>
<td>Board of Directors</td>
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<tr>
<td>CEO</td>
<td>Chief Executive Officer</td>
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<tr>
<td>CFO</td>
<td>Chief Financial Officer</td>
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<tr>
<td>CMHP</td>
<td>Community Mental Health Program</td>
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<tr>
<td>DBH</td>
<td>Division for Behavioral Health</td>
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<td>DCYF</td>
<td>Division for Children, Youth and Families</td>
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<td>DHHS</td>
<td>Department of Health and Human Services</td>
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<td>ES</td>
<td>Emergency Service</td>
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<td>FSS</td>
<td>Functional Support Services</td>
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<td>IMR</td>
<td>Illness Management and Recovery</td>
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<td>ISP</td>
<td>Individual Service Plan</td>
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<tr>
<td>MOU</td>
<td>Memorandum of Understanding</td>
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<tr>
<td>NAMI-NH</td>
<td>National Alliance on Mental Illness – New Hampshire</td>
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<td>NHH</td>
<td>New Hampshire Hospital</td>
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<td>OQAI</td>
<td>Office of Quality Assurance and Improvement</td>
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<td>PSA</td>
<td>Peer Support Agency</td>
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<tr>
<td>QI</td>
<td>Quality Improvement</td>
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<td>QIP</td>
<td>Quality Improvement Plan</td>
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<td>QSR</td>
<td>Quality Service Review</td>
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<td>REAP</td>
<td>Referral, Education, Assistance and Prevention</td>
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<td>SFY</td>
<td>State Fiscal Year</td>
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<td>SE</td>
<td>Supported Employment</td>
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<td>MHCGM</td>
<td>Mental Health Center of Greater Manchester</td>
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I. EXECUTIVE SUMMARY

PURPOSE
In accordance with New Hampshire Administrative Rule He-M 403, Approvals and Reapprovals of Community Mental Health Programs (CMHP) occur every five years. The purpose of He-M 403 is to define the criteria and procedures for approval and operation of Community Mental Health Programs.

The Mental Health of Greater Manchester (MHCGM), headquartered in Manchester, New Hampshire, submitted an application for reapproval as a Community Mental Health Program on 9/14/2018. The Department of Health and Human Services (DHHS) conducted a full program review per He-M 403, attendance and engagement with the Board of Directors during the April meeting and a site visit on 5/8/2019. The team consisted of three DHHS members, Kerri Swenson, Administrator of Community Mental Health Services, Beth Nichols, MHBG State Planner and Ann Driscoll, Administrator III.

As a result of this review process, the Mental Health Center of Greater Manchester was found to be in compliance with He-M 403 meeting 259 of the 262 CMHP compliance standards. MHCGM has developed a corrective action plan to meet the 3 outstanding items and general observations. The plan has been approved by the DHHS and is included herein. Based on the findings of the reapproval review and the corrective action plan, the DHHS approves MHCGM as a CMHP for the period of 9/1/2019 through 8/31/2024. Per NH Rule He-M 403.10 (a), if at any time the Bureau finds that the health, safety, or welfare of individuals utilizing services at MHCGM is at risk or the public becomes endangered by the services provided at MHCGM, the Bureau reserves the right to immediately suspend this approval.

METHODOLOGY
The reapproval process included:

A review of electronically submitted materials:
- Letter of application
- Mission statement
- Written assurance of compliance with applicable federal and state laws and rules
- Identified critical unmet service needs within MHCGM’s region
- A description of all programs and services operated with locations
- Current organizational chart
- Current Strategic Plan
- All current Quality Improvement Plans
- Current Disaster Response Plan
- Current Board of Director list with terms of office and the towns represented
- Current Board of Director Subcommittees list with members
- Board of Director By-Laws
- Board of Director meeting minutes for the current and one previous State Fiscal Years
- Board of Director Fiscal Committee meeting minutes for the current and one previous State Fiscal Years
- Board of Director orientation materials
- Aged accounts receivable summary for the current and one previous State Fiscal Years
- Agency Executive Staff Meeting Minutes the current and one previous State Fiscal Years
- Agency policy manual (including Board policies)
• Agency fiscal manual
• Job descriptions for Chief Executive Officer, Medical Director, Children’s Coordinator, Adult Coordinator, and Case Manager
• A list of current Memoranda of Understanding or Interagency Agreements
• Agency brochures.

A review of supplemental sources of information:

• The most recent New Hampshire DHHS Community Mental Health Center Consumer Survey Report 2018
• BMHS Community Mental Health System Annual Report of Financial Condition for the previous State Fiscal Year, with Five Year Financial Trend Analysis
• MHCGM’s contract with BMHS
• The previous MHCGM reapproval report dated August 2014
• Review of the MHCGM’s website
• Most recent DHHS OQAI Quality Service Review (QSR) Reports dated August 17, 2018
• Eligible client records from the DHHS “Phoenix” client services data system.
• A Public Notice published in local newspapers soliciting feedback regarding the CMHP

A site visit to MHCGM:

• Interview with the Board of Directors
• Discussion with the Chief Financial Officer (CFO)
• Review of current financial documentation
• Reviewed materials with the Director Human Resources for review of personnel files
• Reviewed materials with the Quality Improvement Director
• Interview with the Program Management Team.

Prior to and subsequent to the site visit, e-mail and telephone contact took place with Jane Guilmette and Kristen Kraunelis for the purposes of answering specific follow-up questions, obtaining additional information, and clarifications regarding previously submitted materials.
II. AGENCY OVERVIEW

MHCGM is a nonprofit, community-based, mental health organization that has served the needs of individuals and families in New Hampshire's Hillsborough and Rockingham Counties for more than fifty years.

MHCGM is guided by the following mission, vision, and values;

**Mission Statement:** To empower individuals to achieve recovery and promote personal and community wellness through an accessible, comprehensive, integrated and evidence-based system of mental health care.

**Vision:** To promote prevention, recovery and wellness and strive to be a center of excellence and sought after partner in developing and delivering state-if-the-art mental health treatment, integrated within our community.

**Values and Principles:**
- We treat everyone with respect, compassion and dignity.
- We offer hope and recovery through individualized, quality mental health services.
- We provide evidence-based, culturally responsive and consumer/family focused care.
- We support skilled staff members who work together and strive for excellence.
- We pursue partnerships that promote wellness and create a healthy community.

MHCGM provides a comprehensive array of community-based recovery and resiliency oriented mental health services for children and adults. These include:

- Intake assessment
- Psychiatric diagnostic and medication services
- Psychiatric emergency services including mobile crisis
- Targeted case management
- Individual, group and family psychotherapy
- Evidence-based practices including: Assertive Community Treatment (ACT), Supported Employment (IPS), and Illness Management and Recovery (IMR)
- Services for persons with co-occurring mental illness and substance use disorders including Mental Health Court
- Functional Support Services
- Residential services and respite care
- Outreach services
- Integration of physical health and mental health with programs such as In SHAPE and ProHealth
- Consultation
- Education and support to families and community stakeholders

MHCGM’s website includes information on services, training opportunities, stigma and cultural awareness as well as information on partnership and upcoming events that are available to the public. The website can be located at [https://www.mhcgm.org/](https://www.mhcgm.org/)
The towns served by MHCGM include:

Auburn  Bedford  Candia  Goffstown
Hooksett  Londonderry  Manchester  New Boston
III. GENERAL OBSERVATIONS

The Mental Health Center of Greater Manchester employs a dynamic group of individuals who are passionate and committed to patient-centered recovery models of care for the individuals they serve. From the Board of Directors and Management Team to the review of client records, evidence was abundant in the adaption of the mission and vision in the daily functioning of the organization.

As noted, the Mental Health Center of Greater Manchester is committed to serving individuals in their community with high standards of care. Strengths are abundant in MHCGM as evidenced by chart reviews in which 100% of both adult and child records reviewed were written in recovery language with time specific interventions, measurable goals and evidence of consumer and/or guardian collaboration in the development of such plans. This corresponds to the Quality Service Review completed in June 2018 at which point, 86% of consumers interviewed indicated that they were “actively working with staff on treatment goals and 77% were “able to effectuate change to their treatment plans”. (Quality Service Review, 2018).

MHCGM should be commended for their dedication to quality and evaluation of community services by the development of a quarterly dashboard, ongoing steering committees, review of consumer satisfaction surveys, and ongoing reviews of complaints that may lead to process change by both the Senior Leadership Team and the Board of Directors. Adherence to high-quality standards is evidenced by continuous improvement to programming and response to Quality Service Reviews and Assertive Community Treatment/Supported Employment Fidelity Reviews and scores. MHCGM addressed the QSR needs of 64% and 69% indicator scores regarding employment assessment and individualized employment service delivery respectively by achieving scores of 4 and 5, with five being the highest in these areas during the Supportive Employment Fidelity Review in March 2019. Furthermore, in response to the New Hampshire Community Mental Health Center Consumer Satisfaction Survey Report, 2018 found, “compared to the state overall, Mental Health center of Greater Manchester had higher client satisfaction scores across all of the nine domains. Two domains-social connectedness and general satisfaction-were statistically significantly higher” (JSI Research & Training Institute, 2018).

Positive Observations:

- Management stressed, “the heart of our programs is community inclusion and integration with a focus on sustainability”.
- The board recruitment process focuses on diversity to “truly represent the community”.
- The board and leadership work together to provide community education activities to reduce stigma against those suffering from mental illness.
- Manchester city police are represented on the Board; this strengthens and improves the quality of community-based services. Additionally, Manchester Mobile Crisis Response Team and Manchester Police Department work collaboratively in addressing emergent mental health crises.
- Mental Health Center of Greater Manchester embraces mindful leadership with a focus on resiliency in staff members resulting in a 12% turnover rate as opposed to higher averages in other healthcare settings.
Finally, in response to the consumer satisfaction survey (2018) the Mental Health Center of Greater Manchester scored significantly higher in two domains compared to statewide satisfaction overall.

<table>
<thead>
<tr>
<th>Satisfaction Domains</th>
<th>Mental Health Center of Greater Manchester 2016-18</th>
<th>Statewide 2016-18</th>
<th>Difference</th>
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<tbody>
<tr>
<td></td>
<td>Total N</td>
<td>CMHC %</td>
<td>Total N</td>
</tr>
<tr>
<td>Access</td>
<td>476</td>
<td>76</td>
<td>2492</td>
</tr>
<tr>
<td>Participation in Treatment Planning</td>
<td>444</td>
<td>70</td>
<td>2366</td>
</tr>
<tr>
<td>Quality and Appropriateness</td>
<td>461</td>
<td>81</td>
<td>2423</td>
</tr>
<tr>
<td>Social Connectedness*</td>
<td>464</td>
<td>61</td>
<td>2443</td>
</tr>
<tr>
<td>Functioning</td>
<td>465</td>
<td>56</td>
<td>2448</td>
</tr>
<tr>
<td>Outcomes</td>
<td>452</td>
<td>52</td>
<td>2361</td>
</tr>
<tr>
<td>General Satisfaction*</td>
<td>470</td>
<td>82</td>
<td>2478</td>
</tr>
<tr>
<td>Health and Wellness (state added)</td>
<td>449</td>
<td>65</td>
<td>2340</td>
</tr>
<tr>
<td>Self-Determination (state added)</td>
<td>469</td>
<td>73</td>
<td>2475</td>
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Note: *p<0.05= statistically significant difference in scores between the center and statewide. A positive difference (in green) indicates the center scored significantly higher than statewide

IV. PROGRAM OPERATIONS AND GOVERNANCE

Included below are relevant findings from the reapproval review as they pertain to He-M 403, Approval and Operation of Community Mental Health Programs. Each finding is listed with a reference to the rule requirement, observations from the review, recommendations for corrective action, and space allotted for a corrective action response from the agency. **Corrective action responses and needed steps were taken to satisfy all of the findings and requirements.**

1. **REQUIREMENT:** He-M 403.05 (h) (3) requires: The Senior Executive Officer shall be evaluated annually by the CMHP Board of Directors/Advisory Board to ensure that services are provided in accordance with the performance expectations approved by the board, and the Department’s rules and contract provisions.

**OBSERVATION:** Annual evaluation of Executive Director did not address performance related to contract requirements with the Department of Health and Human Services.

**DUE DATE:** Requirement addressed and satisfied

2. **REQUIREMENT:** He-M 403.07 (c) requires: Each staff person employed by a CMHP shall have an annual performance review based upon that staff person’s job description and conducted by his or her supervisor, which shall include an individual staff development plan.

**OBSERVATION:** Three (3) of Five (5) personnel records did not have staff development plans within the performance review.

**RECOMMENDATION:** All staff including members of the management team should address staff
development on a yearly basis.

DUE DATE: Addressed and satisfied.

3. REQUIREMENT: He-M 403.07 (d) requires: A CMHP shall conduct and/or refer staff to training activities which address objectives for improving staff competencies. Each staff member shall participate in such training activities as specified in that person’s individual staff development plan and in addition shall receive ongoing training in protection of consumer rights.

OBSERVATION: As of 5/8/2019 four (4) out of five (5) personnel charts did not provide evidence of ongoing training in protection of consumer rights.

RECOMMENDATION: All staff regardless of position should be receive ongoing training in the protection of consumer rights.

DUE DATE: Addressed and satisfied.

V. FINANCIAL OPERATIONS

Please note that the format of this section differs from the above report. This is due in part to He-M 403 not including most financial areas addressed during the reapproval review. Some of the areas below are addressed in Bureau of Mental Health service contract and others are general comments and best business practices.

The Mental Health Center of Greater Manchester has complied with all of the Maintenance of Fiscal Integrity requirements including submission of timely financial reports and all of the required ratios included in the contract.

BMHS staff would like to thank the Board and all of the staff at the Mental Health Center of Greater Manchester for their time, support and patience during the reapproval process.

END OF REPORT