

**ANDERSON-OCONEE-PICKENS  
MENTAL HEALTH CENTER  
PERFORMANCE ANALYSIS – 2023**

# AOPMHC Performance Analysis – July 2023

Report Period: July 2022 through June 2023

## OVERVIEW

Anderson-Oconee-Pickens Mental Health Center (AOP MHC) is one of sixteen community mental health centers that is part of the South Carolina Department of Mental Health. AOP is comprised of 4 centers across 3 counties that remain in full time operation.

AOP continues to have a supportive and active Board that understands the importance of advocacy as it relates to clients, their families and staff. Our priority is service to persons with serious and persistent mental illnesses and serious emotional disorders, including an array of mental health concerns. AOP is perceived as the public resource for mental health needs in the communities it serves.

The staff and board of AOP MHC are proud to serve the mental health needs in our communities.

*Vicki Redding*

Executive Director

Contact Us

Anderson Oconee Pickens Mental Health Center

200 McGee Road

Anderson, SC 29625

Phone: (864) 260-2220

Web: [www.aopmentalhealth.org](http://www.aopmentalhealth.org)

# AOPMHC Performance Analysis – July 2023

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## AOPMHC BOARD

### ANDERSON COUNTY

Sherry S. Hall  
Jane Jones  
Reverend Kurt L. Stutler  
Jennifer N. Caldwell  
Michael Callahan  
Casey Johnson  
Jane McMillan

### OCONEE COUNTY

Marie Dunnam  
Michelle Ready  
Dr. Charles W. Wilson

### PICKENS COUNTY

Ethel C. Pettigrew  
Mary Ann Hunter  
Amy Massingill  
Amelia Simmons  
Tamara Houston-Hamilton

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## OUR VALUES

As part of the South Carolina Department of Mental Health:

### **AOP MHC Mission**

- “In partnership with clients, families, and communities, the Center supports the recovery of persons with mental illness.”

### **Values**

- Treat each person who receives services with respect and dignity
- Honor the rights, wishes and needs of each individual
- Promote each individual’s quality of life
- Foster independence and recovery
- Demonstrate the value of family inclusion and strong social support
- Provide treatment environments that are safe, therapeutic, and accessible
- Provide work environments which inspire and promote innovation and creativity
- Provide services efficiently and effectively with the use of successful treatment interventions
- Support and encourage involvement in local community and natural supports
- Hire, train, support and retain staff who are culturally competent, committed to the recovery philosophy, and who value learning

### **AOP Priorities**

- To serve adults, children and their families who are affected by serious mental illness and significant emotional disorders
- To eliminate stigma and promote recovery
- To accomplish program goals in collaboration with Stakeholders
- To assure the highest quality of culturally competent services possible

Note: AOP recognizes that the Center can’t meet all of our communities mental health needs and as a result, several collaborations have been formed with other agencies in the community.

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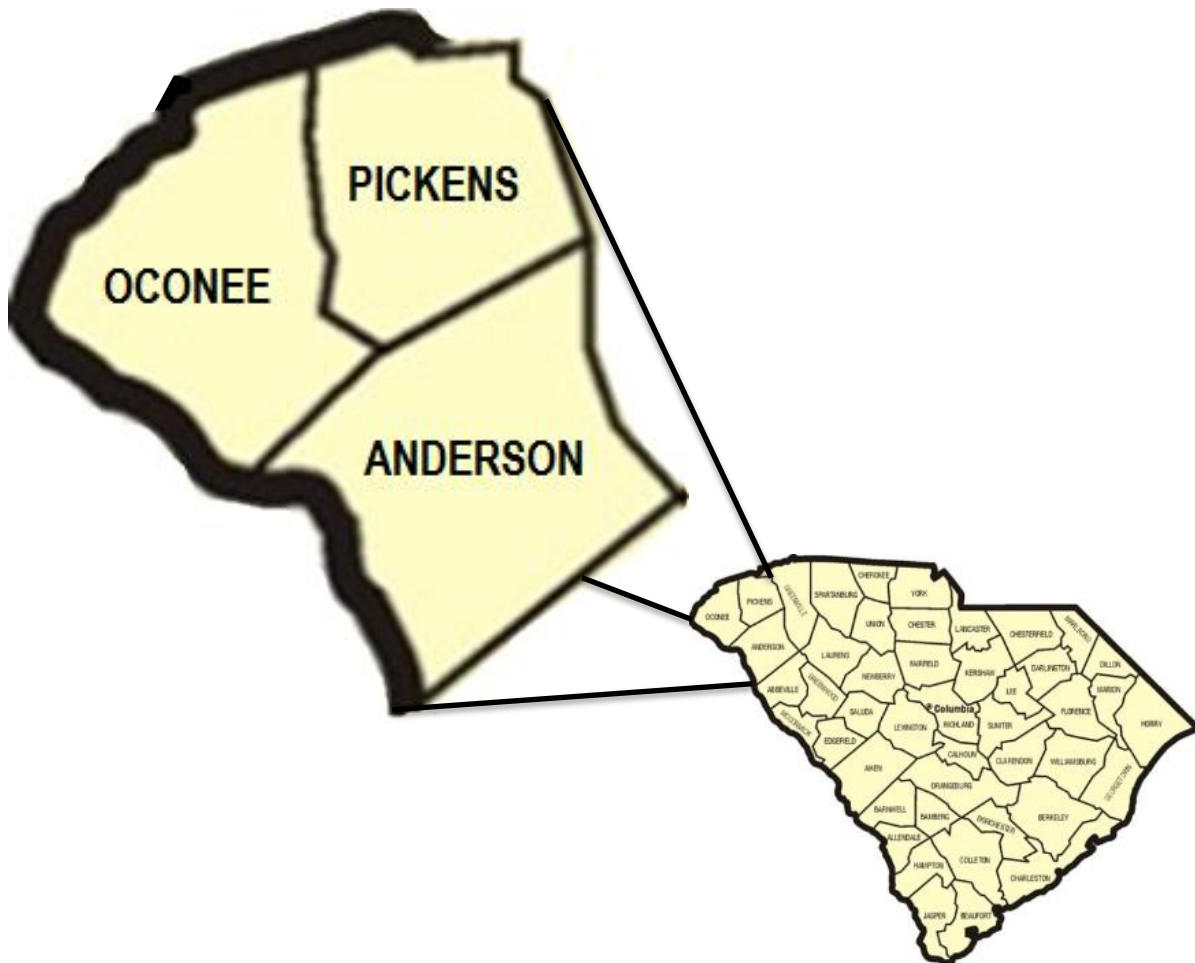
## **CHALLENGES**

- Recruitment of personnel
- Staffing support programs (IPS, PSS) in all counties
- Support and offer on the job training to all employees in new leadership positions
- Providing bi-lingual services
- Obtaining a building appropriate for all Anderson County services

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Report Period: July 2022 through June 2023

## CATCHMENT AREA



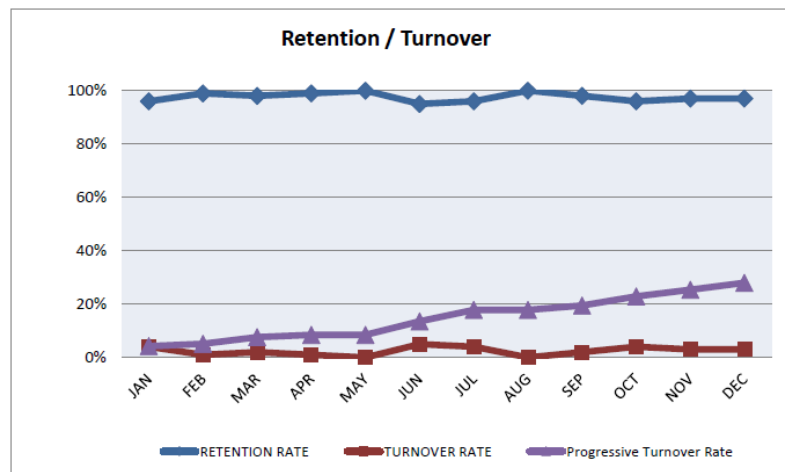
COUNTY	POPULATION	# SERVED
ANDERSON	209,581	3,090
OCONEE	80,180	777
PICKENS	133,462	1,609

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Report Period: July 2022 through June 2023

## FULL-TIME/PART-TIME/TEMPORARY EMPLOYEES

2022 Staff Totals for AOP Mental Health Center														
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTALS	MONTHLY AVG
<b>NEW HIRES</b>	5	1	3	0	4	4	1	3	2	5	1	1	30	
Anderson	2	1	3	0	0	3	1	2	1	1	1	0	15	
Oconee	2	0	0	0	1	1	0	0	0	2	0	0	6	
Pickens	1	0	0	0	3	0	0	1	1	2	0	1	9	
<b>SEPARATIONS</b>	5	1	3	1	0	6	5	0	2	4	3	3	33	
Anderson	5	0	1	1	0	2	3	0	2	2	1	2	19	
Oconee	0	1	1	0	0	3	0	0	0	0	2	0	7	
Pickens	0	0	1	0	0	1	2	0	0	2	0	1	7	
<b>INT TRANSFER</b>	0	0	0	0	0	0	0	0	0	0	1	0	1	
Anderson	0	0	0	0	0	0	0	0	0	0	0	0	0	
Oconee	0	0	0	0	0	0	0	0	0	0	1	0	1	
Pickens	0	0	0	0	0	0	0	0	0	0	-1	0	-1	
<b>ANDERSON</b>	76	77	79	78	78	79	77	79	78	77	78	76	78	78
<b>OCONEE</b>	16	15	14	14	15	13	13	13	13	15	14	14	14	14
<b>PICKENS</b>	26	26	25	25	28	27	25	26	27	27	26	26	26	26
<b>TOTAL STAFF</b>	118	118	118	117	121	119	115	118	118	119	118	116	118	118
<b>RETENTION RATE</b>	96%	99%	98%	99%	100%	95%	96%	100%	98%	96%	97%	97%	98%	98%
<b>TURNOVER RATE</b>	4%	1%	2%	1%	0%	5%	4%	0%	2%	4%	3%	3%	2%	2%
<b>Progressive Turnover Rate</b>	4%	5%	8%	8%	8%	14%	18%	18%	19%	23%	25%	28%		
<b>Net Gain/Loss</b>	0	0	0	-1	4	-2	-4	3	0	1	-2	-2		
<b>Progressive Gain/Loss %</b>	0%	0%	0%	-1%	3%	1%	-3%	0%	0%	1%	-1%	-3%		



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## INFORMATION TECHNOLOGY

### PROGRESS ON FY22 GOALS

- Assessment of new and changing technology needs - ongoing
- Will continue to implement wireless access points at the Anderson Center, Oconee Clinic, and Pickens Clinic
- Explore options for security door access at all locations with surveillance video backup
- Address any issues identified in the IT analysis - ongoing
- Fully staff the IT department by hiring one new staff member - accomplished
- Provide smart phones for all staff providing services in the community to enhance safety - accomplished

### GOALS FOR FY23

- Provide smart phones for all staff to enhance staff safety and accessibility
- Replace desk top computers with laptops and docking stations
- Obtain aircards to allow the provision of remote service delivery as needed
- Assessment of new and changing technology needs
- Address any issues identified in the IT analysis
- Continue to explore option to provide WIFI at all locations
- Replace 5 48 port switches at the Anderson and C&A centers
- Upgrade the APC-UPS at the Anderson and C&A centers

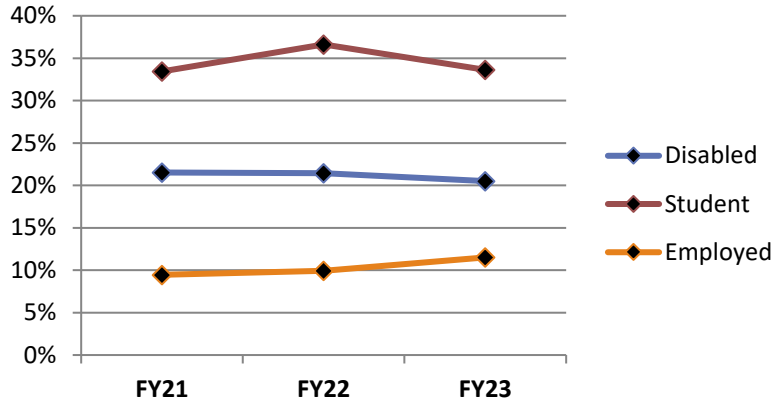


# AOPMHC Performance Analysis – July 2023

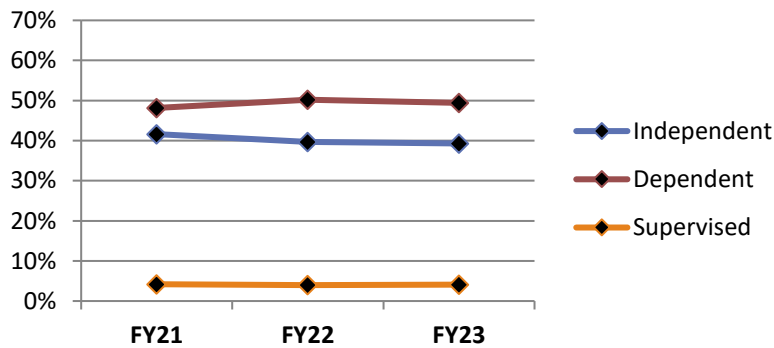
Report Period: July 2022 through June 2023

## AOP EFFECTIVENESS

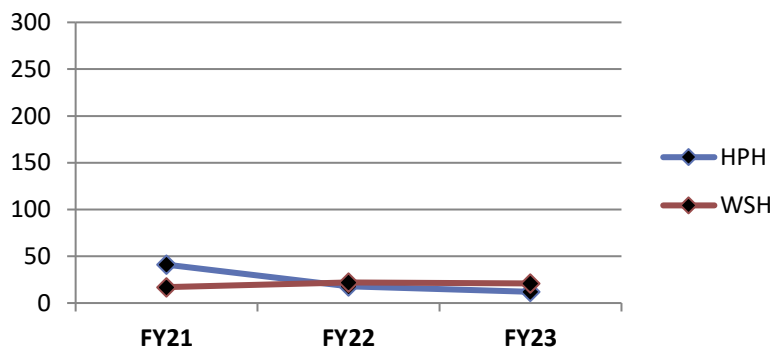
### Employment: FY21-FY23



### Living Arrangements: FY21-FY23



### Inpatient Admissions: FY21-FY23



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Report Period: July 2022 through June 2023

## CHARACTERISTICS OF PERSONS SERVED

### GENDER

▪ Male	1306
▪ Female	1839

### AGE

▪ Under 18	1033
▪ 18 and Older	2112

### RACE/ETHNICITY

▪ African American	612
▪ American Indian	9
▪ Asian American	9
▪ Hispanic	83
▪ More than One Race	72
▪ Native Hawaiian	1
▪ Other	149
▪ Spanish American	4
▪ Unknown	34
▪ White	2172

### DIAGNOSIS

▪ ATTENTION DEFICIT	46
▪ CONDUCT	162
▪ MENTAL RETARDATION, AUTISM, & SPECIFIC DEV	13
▪ OTHER CHILDHOOD DISORDERS	1
▪ SCHIZOPHRENIA	686
▪ OTHER PSYCHOTIC DISORDERS	120
▪ DEPRESSIVE & OTHER MOOD DISORDERS	1327
▪ DEMNTIA, DELIRIUM & ORD DUE TO GMC	17
▪ SUBSTANCE ABUSE	17
▪ ANXIETY	446
▪ PERSONALITY DISORDER	24
▪ OTHER MH DIAGNOSES	231

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Report Period: July 2022 through June 2023

## FINANCIAL PERFORMANCE

### Collections

Fiscal Year	Total	Avg/Month
FY20	6,529,939	<b>544,162</b>
FY21	5,129,888	<b>512,989</b>
FY22	6,377,610	<b>531,467</b>
FY23	5,159,521	<b>429,960</b>

### Charges

Fiscal Year	Total	Avg/Month
FY20	9,048,594	<b>754,050</b>
FY21	7,729,342	<b>772,934</b>
FY22	9,954,741	<b>829,561</b>
FY23	8,542,285	<b>711,857</b>

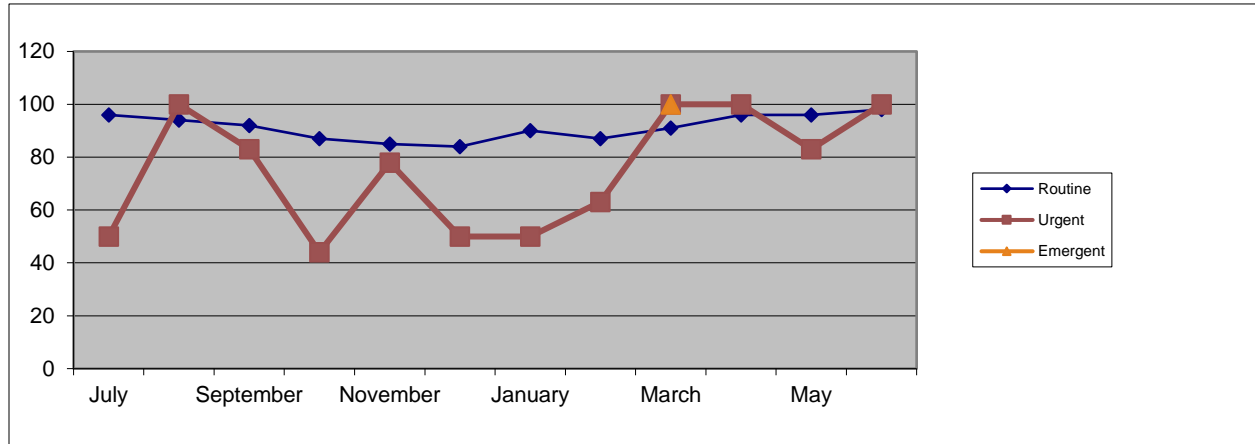
### Percentage Collected

Fiscal Year	Total
FY20	72%
FY21	66%
FY22	64%
FY23	60%

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## ACCESS TO CARE



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## FINAL ANALYSIS

AOP continues to have a supportive and active Board that understands the importance of advocacy as it relates to clients, their families and staff. Our priority is service to persons with an array of serious and persistent mental illnesses and serious emotional disorders.

FY23 showed continued improvement in both employment and disability status. Despite these positive trends, independent living continues to slightly decline falling short of the 50% target outcome. The data for both adult and child hospital admissions remains significantly less than FY20 with the most significant decrease in adult admissions. This continued trend that meets our target outcome is likely the result of the Intensive Community Treatment program and other specialized services.

Access to Care numbers for routine appointments have improved in the last quarter only 2% short of the target outcome. However, data regarding urgent appointments continues to be problematic. This may be a combination of staff shortages and data entry errors on tracking forms.

In addition to our overall high retention rate, our progressive turn over rate has decreased from the previous year. AOP has made strides to update staff classification, provide LPC Supervision and offer evidence-based trainings to continue to improve our staff retention rates. AOP and DMH have made significant progress in aligning staff compensation with the private sector.

Follow-up data on discharged patients indicated we did not meet our target of 80% positive response rate to overall satisfaction with services. This decline has been presented to Leadership Team for further examination. Active patients indicated a much higher level of satisfaction exceeding the target outcome of 90% by 7% which shows continued improvement from the previous year.

AOP was able to meet our target objective by balancing the FY23 budget with a surplus that resulted from vacant positions within the center and the use of State and Federal Grant funds to assist in salary increases for current staff. AOP continues to operate in the black, at budget or with a surplus, while maintaining a high standard of client services. Data analyzed from our Summary Report of Collections and Charges indicated that AOP collected 60% of charges in FY23. This continues to fall short of our 70% target outcome. AOP has not only experienced decreased charges but also the amount collected.

Overall, the year-end data indicate that AOP's dedication to staff development and patient programs is evident. The sub-standard areas identified this year will remain the focus as we strive to improve patient satisfaction and budgetary concerns. The analysis of the data will

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guide necessary changes to the performance measurement and management plan and target outcomes as appropriate. AOP's future strategic planning will also be driven by the outcome data. This information is presented verbally, visually, and in written formats. The documents are annually communicated to patients, personnel, and stakeholders through the use of the AOP public website, AOP intranet site, Board presentations, and Central Office legislative reports.