ANDERSON-OCONEE-PICKENS MENTAL HEALTH CENTER PERFORMANCE ANALYSIS – 2024

Report Period: July 2023 through June 2024

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: <u>www.aopmentalhealth.org</u>

Report Period: July 2023 through June 2024

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 Amy Massingill Tamara Houston-Hamilton Erika Andrews Eunice Lehmacher

Report Period: July 2023 through June 2024

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 accessable
- 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.

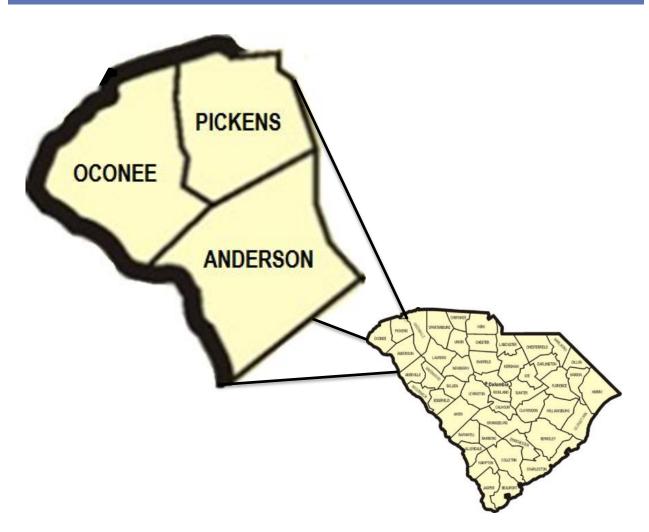
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CHALLENGES

- 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
- Opening new building in Anderson County to provide consolidated services for child, adolescent, family, and adult mental health needs

AOPMHC Performance Analysis – July 2024 Report Period: July 2023 through June 2024

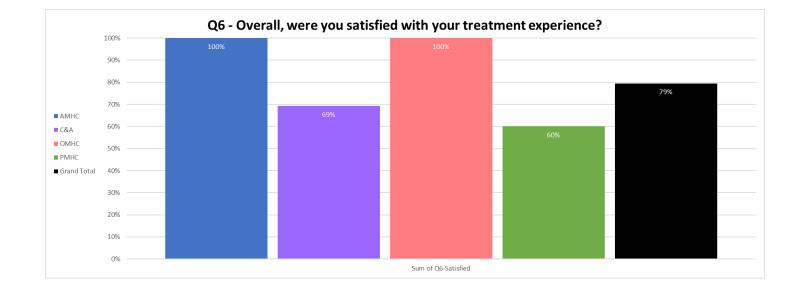
CATCHMENT AREA



| COUNTY | POPULATION | # SERVED |
|----------|------------|----------|
| ANDERSON | 213,076 | 3,177 |
| OCONEE | 81,221 | 904 |
| PICKENS | 135,495 | 1,725 |

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DISCHARGE PATIENT SATISFACTION



Report Period: July 2023 through June 2024

CURRENT PATIENT SATISFACTION

SURVEY RESULTS FOR ALL POPULATIONS: I (OR MY CHILD) RECEIVED HELPFUL SERVICES

| CENTER | NO | STRONGLY | AGREE | DISAGREE | STRONGLY | % AGREE OR |
|-----------|----------|----------|-------|----------|----------|----------------|
| | RESPONSE | AGREE | | | DISAGREE | STRONGLY AGREE |
| | | | | | | |
| | | | | | | |
| ANDERSON- | | | | | | |
| OCONEE- | 25 | 506 | 147 | 11 | 13 | 96.5% |
| PICKENS | | | | | | |

SURVEY RESULTS FOR ADULT PATIENTS: I RECEIVED HELPFUL SERVICES

| CENTER | NO RESPONSE | STRONGLY AGREE | AGREE | DISAGREE | STRONGLY DISAGREE | % AGREE OR STRONGLY AGREE |
|---------------------------------|----------------|-------------------|-------|----------|----------------------|------------------------------|
| ANDERSON- OCONEE- PICKENS | 18 | 370 | 100 | 5 | 6 | 97.7% |

SURVEY RESULTS FOR YOUTH PATIENTS: I (OR MY CHILD) RECEIVED HELPFUL SERVICES

| CENTER | NO RESPONSE | STRONGLY AGREE | AGREE | DISAGREE | STRONGLY DISAGREE | % AGREE OR STRONGLY AGREE |
|---------------------------------|----------------|-------------------|-------|----------|----------------------|------------------------------|
| ANDERSON- OCONEE- PICKENS | 7 | 136 | 47 | 6 | 7 | 93.4% |

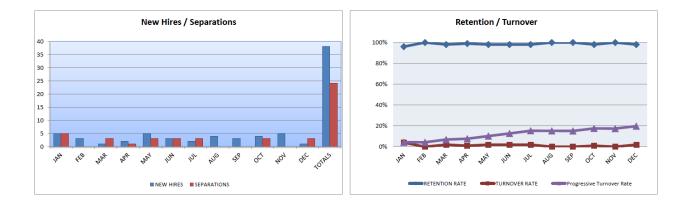
SURVEY RESULTS FOR SMH PATIENTS: I (OR MY CHILD) RECEIVED HELPFUL SERVICES

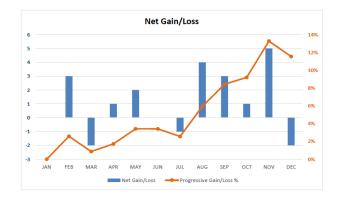
| CENTER | NO RESPONSE | STRONGLY AGREE | AGREE | DISAGREE | STRONGLY DISAGREE | % AGREE OR STRONGLY AGREE |
|---------------------------------|----------------|-------------------|-------|----------|----------------------|------------------------------|
| ANDERSON- OCONEE- PICKENS | 4 | 82 | 20 | 4 | 2 | 94.4% |

Report Period: July 2023 through June 2024

FULL-TIME/PART-TIME/TEMPORARY EMPLOYEES

| | 2023 Staff Totals for AOP Mental Health Center | | | | | | | | | | | | | |
|---------------------------|--|------|-----|-----|-----|-----|-----|------|------|-----|------|-----|--------|-------------|
| | JAN | FEB | MAR | APR | MAY | JUN | JUL | AUG | SEP | ост | NOV | DEC | TOTALS | MONTHLY AVG |
| NEW HIRES | 5 | 3 | 1 | 2 | 5 | 3 | 2 | 4 | 3 | 4 | 5 | 1 | 38 | |
| Anderson | 3 | 2 | 1 | 1 | 4 | 2 | 2 | 2 | 0 | 4 | 5 | 1 | 27 | |
| Oconee | 1 | 1 | 0 | 1 | 0 | 1 | 0 | 0 | 2 | 0 | 0 | 0 | 6 | |
| Pickens | 1 | 0 | 0 | 0 | 1 | 0 | 0 | 2 | 1 | 0 | 0 | 0 | 5 | |
| SEPARATIONS | 5 | 0 | 3 | 1 | 3 | 3 | 3 | 0 | 0 | 3 | 0 | 3 | 24 | |
| Anderson | 5 | 0 | 3 | 0 | 2 | 1 | 1 | 0 | 0 | 2 | 0 | 3 | 17 | |
| Oconee | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 0 | 0 | 1 | 0 | 0 | 4 | |
| Pickens | 0 | 0 | 0 | 1 | 0 | 1 | 1 | 0 | 0 | 0 | 0 | 0 | 3 | |
| INT TRANSFER | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 2 | |
| Anderson | 0 | 0 | 0 | 0 | -1 | 0 | 0 | 0 | 0 | 0 | 0 | -1 | -2 | |
| Oconee | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 2 | |
| Pickens | 0 | 0 | 0 | 0 | 0 | 0 | 0 | -1 | 0 | 0 | 0 | 1 | 0 | |
| ANDERSON | 73 | 75 | 73 | 74 | 75 | 76 | 77 | 79 | 79 | 81 | 86 | 83 | | 78 |
| OCONEE | 15 | 16 | 16 | 17 | 17 | 17 | 16 | 17 | 19 | 18 | 18 | 18 | | 17 |
| PICKENS | 27 | 27 | 27 | 26 | 27 | 26 | 25 | 26 | 27 | 27 | 27 | 28 | | 27 |
| TOTAL STAFF | 115 | 118 | 116 | 117 | 119 | 119 | 118 | 122 | 125 | 126 | 131 | 129 | | 121 |
| RETENTION RATE | 96% | 100% | 98% | 99% | 98% | 98% | 98% | 100% | 100% | 98% | 100% | 98% | | 99% |
| TURNOVER RATE | 4% | 0% | 2% | 1% | 2% | 2% | 2% | 0% | 0% | 1% | 0% | 2% | | 1% |
| Progressive Turnover Rate | 4% | 4% | 7% | 8% | 10% | 13% | 15% | 15% | 15% | 18% | 17% | 20% | | |
| Net Gain/Loss | 0 | 3 | -2 | 1 | 2 | 0 | -1 | 4 | 3 | 1 | 5 | -2 | | |
| Progressive Gain/Loss % | 0% | 3% | 1% | 2% | 3% | 3% | 3% | 6% | 8% | 9% | 13% | 12% | | |





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INFORMATION TECHNOLOGY

PROGRESS ON FY24 GOALS

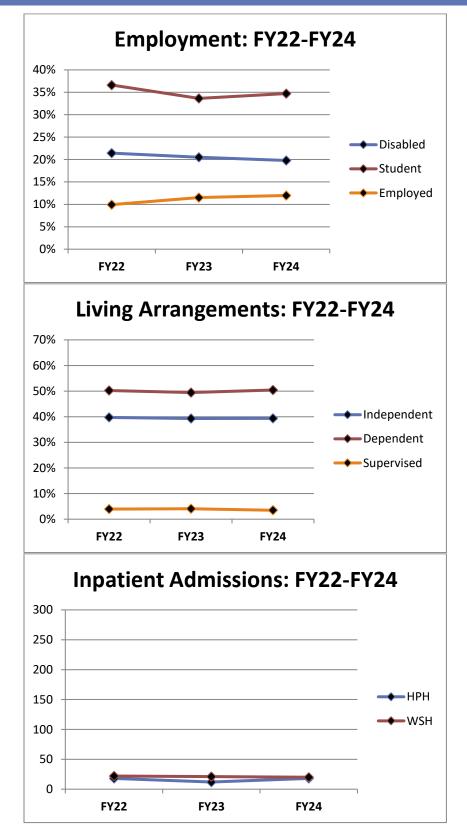
- Provide smart phones for all staff to enhance staff safety and accessibility completed
- Replace desk top computers with laptops and docking stations completed
- Obtain aircards to allow the provision of remote service delivery as needed completed
- Assessment of new and changing technology needs ongoing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

GOALS FOR FY25

- To provide WiFi at the new location which will accommodate the main center staff and C&A staff. Plans are pending for the Easley and Oconee locations.
- To provide ID badge security for each staff, that will be used to access entrance to the new DMH location. Plans are pending for the Easley and Oconee Clinics.
- To provide camera surveillance at the new location in order to monitor daily activities inside and around the premises. Request to purchase has been implemented and approved. No estimated time when this will be installed.
- To provide Telepsychiatry using iPads that will be connected via WiFi at each location. Current network connection will be discontinued once the iPads are in place.
- Provide smart phones for certain staff to enhance staff safety and accessibility.

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AOP EFFECTIVENESS



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CHARACTERISTICS OF PERSONS SERVED

| GENDER | | |
|--|-------|--|
| Male | 1,358 | |
| Female | 1,807 | |
| AGE | | |
| Under 18 | 1,080 | |
| 18 and Older | 2,085 | |
| RACE/ETHNICITY | | |
| African American | 634 | |
| American Indian | 11 | |
| Asian American | 7 | |
| Hispanic | 81 | |
| More than One Race | 94 | |
| Native Hawaiian | 1 | |
| Other | 99 | |
| Spanish American | 5 | |
| Unknown | 34 | |
| White | 2,199 | |

DIAGNOSIS

| • | ATTENTION DEFICIT | 29 |
|---|--|-------|
| • | CONDUCT | 175 |
| • | MENTAL RETARDATION, AUTISM, & SPECIFIC DEV | 9 |
| • | OTHER CHILDHOOD DISORDERS | 1 |
| • | SCHIZOPHRENIA | 671 |
| • | OTHER PSYCHOTIC DISORDERS | 136 |
| • | DEPRESSIVE & OTHER MOOD DISORDERS | 1,287 |
| • | DEMNTIA, DELIRIUM & ORD DUE TO GMC | 25 |
| • | SUBSTANCE ABUSE | 15 |
| • | ANXIETY | 489 |
| • | PERSONALITY DISORDER | 21 |
| • | OTHER MH DIAGNOSES | 268 |

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FINANCIAL PERFORMANCE

Collections

| Fiscal Year | Total | Avg/Month |
|-------------|-----------|-----------|
| FY20 | 6,529,939 | 544,162 |
| FY21 | 5,129,888 | 512,989 |
| FY22 | 6,377,610 | 531,467 |
| FY23 | 5,159,521 | 429,960 |
| FY24 | 6,616,691 | 551,390 |

Charges

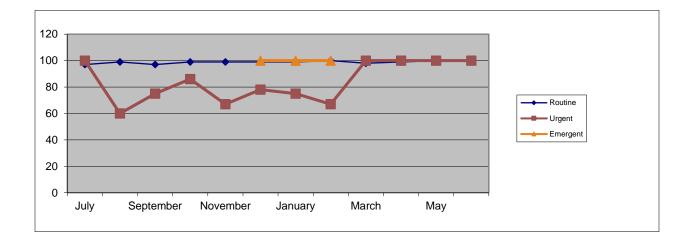
| Fiscal Year | Total | Avg/Month |
|-------------|------------|-----------|
| FY20 | 9,048,594 | 754,050 |
| FY21 | 7,729,342 | 772,934 |
| FY22 | 9,954,741 | 829,561 |
| FY23 | 8,542,285 | 711,857 |
| FY24 | 10,077,726 | 839,811 |

Percentage Collected

| Fiscal Year | Total |
|-------------|-------|
| FY20 | 72% |
| FY21 | 66% |
| FY22 | 64% |
| FY23 | 60% |
| FY24 | 67% |

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ACCESS TO CARE



Report Period: July 2023 through June 2024

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, regardless of extentuating or influencing factors that may arise such as the pandemic.

FY24 showed continued improvement in employment rates with AOP surpassing our target of 10% for the second consecutive year. Despite this positive trend, independent living continues to remain short of the 50% target outcome. Independent living rates will be the focus of review in the coming fiscal year. The data for both adult and child hospital admissions remains statistically low in relation to patient census data. This continued trend that meets our target outcome is likely the result of the expansion of the Mobile Crisis program and other specialized services.

Access to Care numbers for all appointments have improved over the last Fiscal Year. While urgent appointments continue to be a concern, they have significantly improved in the last quarter meeting our target of 100%. In addition, direct service hours continues to be a focus for all AOP programs as we fell slightly short of our FY24 goal of 803 annualized average hours. This data indicates the need to hold staff accountable to these two standards.

Follow-up data on discharged patients indicated that despite a 10% improvement, we did not meet our target of 80% positive response rate to overall satisfaction with services. This overall progress represents AOP's focus on patient care. Active patients indicated a much higher level of satisfaction, exceeding the target outcome of 90% by 6.5%. A review of school administrators shows that AOP school mental health staff engage with our schools as well as, or better than, the other DMH school mental health programs. These satisfaction results indicate that AOP's patient centered care approach is positively impacting both the patients themselves as well as the stakeholders collaborating with our staff.

AOP was able to meet our target objective by balancing the FY24 budget. AOP finished FY24 with a surplus that resulted from Federal Grant funds to offset the majority of the salary and fringe expense for our Mobile Crisis and Jail Liaison staff members. AOP, as in previous years, continues to operate 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 67% of charges in FY24. Although this continues to fall short of our 70% target outcome, it has significantly improved. As compared to the previous Fiscal Year, AOP has experienced increased charges as well as the amount collected. This is a result of an increase in patient services being provided by our Counselors and our Billing Department able to address any issue and/or concerns regarding insurance and payment assistance.

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In addition to our overall high retention rate, our progressive turn over rate has continued to decrease from previous years. 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. These improvements have led to higher staff satisfaction and retention allowing AOP to provide more effective and efficient operations for the persons served.

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 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 outcome data to improve the quality of programs and services. 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.