Harmony House is an augmented board-and-care serving clients diagnosed with chronic mental health disorders. While clients reside at Harmony House, they are given the opportunity to develop the life skills necessary for a less structured independent living situation by utilizing the Harmony House rehabilitative program, community support from other residents, and daily interactions with staff.

Demographics

<table>
<thead>
<tr>
<th>REFERRAL SOURCE</th>
<th>ETHNICITY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Turning Point Case Manager: 4%</td>
<td>Caucasian: 40%</td>
</tr>
<tr>
<td>ASOC Conservator: 32%</td>
<td>Native American: 20%</td>
</tr>
<tr>
<td>ASOC FSP Case Manager: 4%</td>
<td>African American: 20%</td>
</tr>
<tr>
<td>ASOC Case Manager: 32%</td>
<td>Hispanic: 20%</td>
</tr>
<tr>
<td>ASOC Discharge Planner: 40%</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DIAGNOSIS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bipolar Disorder: 12%</td>
</tr>
<tr>
<td>Schizoaffective Disorder: 12%</td>
</tr>
<tr>
<td>Schizophrenia, Paranoid: 16%</td>
</tr>
<tr>
<td>Major Depression: 4%</td>
</tr>
<tr>
<td>Schizophrenia, Undifferentiated: 8%</td>
</tr>
<tr>
<td>Schizophrenia, Disorganized: 48%</td>
</tr>
</tbody>
</table>

56% Incarceration history

60% Substance Abuse history

Served
72% 28%
Referral sources for new residents increased from the ASOC FSP Team from 23% the previous fiscal year to the current 40%.

The program’s high rate of Caucasian residents continues to accurately reflect the population of the surrounding area.

**Effectiveness**

Harmony House measures program effectiveness by increasing independent living skills, increasing mental health stability, and by providing an environment that supports the safety and well-being of residents.

1. Independent Living Skills

Effectiveness is measured by residents demonstrating an improvement in at least three of the following categories: medication management, symptom management, money management, shopping and cooking, personal care, and accessing community resources.

After receiving Harmony House services, residents demonstrated an improvement in all categories from their initial capacity at time of admission.

In the last twelve months, at least 50% of the residents were observed as continuing to demonstrate competency in all six areas.

As compared to the previous year, competency in the six areas remained relatively the same.
2. Mental Health Stability
Effectiveness is measured by a demonstrated use of coping skills resulting in lower reliance on psychiatric hospital admissions.

- Residents residing in the program for at least 12 months had a cumulative total of 24 psychiatric hospitalizations in the last 12 months prior to receiving Harmony House services.
- Residents residing in the program for at least 12 months had a cumulative total of 4 psychiatric hospitalizations in the 12 month period of this report.

3. Therapeutic Treatment Environment
Effectiveness is measured by residents regularly meeting with trained staff to discuss methods to achieve treatment goals. **Goal: 85% of residents will report having worked on at least one treatment goal during their monthly one on one meetings with staff.**

- This program offers consistent supervision by trained staff. Furthermore, the environment provides a supportive treatment team with staff available for one on ones, as requested by the residents and initiated by staff. All residents interacted with mental health workers at least once per week, and 92% of the residents initiated contact suggesting a continuation in self determination and efficacy.
Recommendations for Continuous Quality Improvement

I. Program Development
   1. Train all full-time staff in WRAP and designate one staff member to lead WRAP groups with residents on a monthly or quarterly basis dependent on residents needs.

   2. Aside from the daily morning meeting, increase program offered groups from 1 a day to an average of 1.5 a day to meet the varying needs and preferences of residents.

   3. Increase the number of groups offered in social activities to support residents in building social skills, relationships, and effective communication skills.

   4. Collaborate with the Placer County Animal Shelter to determine if staff and residents can volunteer 2-4 times a month. All volunteer visits would have staff present until residents have the skills and self-confidence to volunteer independently.

   5. Develop a chart review system in collaboration with the Clinical Director and Quality Improvement Director to ensure all charts are complete and updated annually.

   6. In collaboration with the Clinical Director comprise a treatment plan training module for staff to accurately reflect the program services.

   7. Comprise additional data collection points in collaboration with the Quality Improvement Director to accurately reflect program outcomes.

II. Fiscal
   1. Create a preset 21-day rotating meal service menu which will also automatically log all ingredients needed for any specified time frame. This will decrease staffing hours spent on creating weekly meal service menus and weekly shopping lists.

   2. Purchase all weekly groceries online to ensure all needed ingredients are purchased and decrease staffing hours spent at grocery stores.

   3. Determine if the budget allows for a standard vehicle to increase staff support to resident appointments and activities, especially residents with ambulatory impairments with difficulty utilizing the height of a 15 passenger vehicle.
Implementations of Last Period’s Recommendations

I. Program Development
   1. The Quality Improvement Director is coordinating training and implementation of ChartMeds to create an efficient medication management system which will enhance medication administration, reduce staffing hours, and provide greater clarity for staff and providers.

   2. The Pre-Interview referral form was modified to better ascertain individual’s appropriateness for placement and provide more relevant services to residents based on their specific history, symptomology, strengths, and goals.

   3. The Pre-Interview referral was modified to increase data collection to more accurately reflect program outcomes.

   4. No applicants were received from the Placer County Employment Services Business Advantage Network for employee hiring to reduce the time of vacant positions and reduce personnel costs as they assist with salary costs for the first 6 months.

   5. A mental health group library was created for staff to implement groups more readily and relevantly to residents needs and symptoms.

   6. We complete a quarterly assessment of residents’ satisfaction with Harmony House and treatment provider services to ensure all resident needs are met while assisting residents in increasing their skills in self-advocacy and communication.

II. Fiscal
   1. All monthly Costco, Smart & Final, and Target orders are placed via Google Express and all Wal-Mart orders are placed online. Shipping costs are free and the Program Director saves at least 4-5 hours a month to utilize time more effectively in other program areas.

   2. With the increase in resident census the program has not been able to visit the Placer County Food Bank twice a month to decrease monthly grocery costs. The program will work on implementing this within this new fiscal year.

   3. All facility maintenance orders are placed through Placer County Facility Services to decrease costs in using outside licensed tradesman.