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# Yolo Community Care Continuum

## Harmony House Semi-Annual Report

July 1, 2020 – December 31, 2020

Submitted by Brandon Wautlet

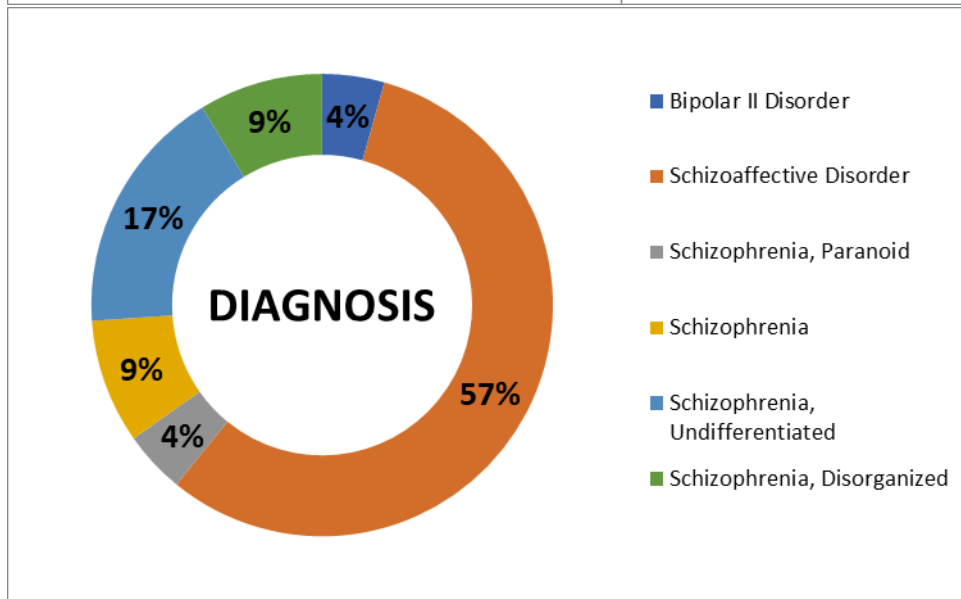
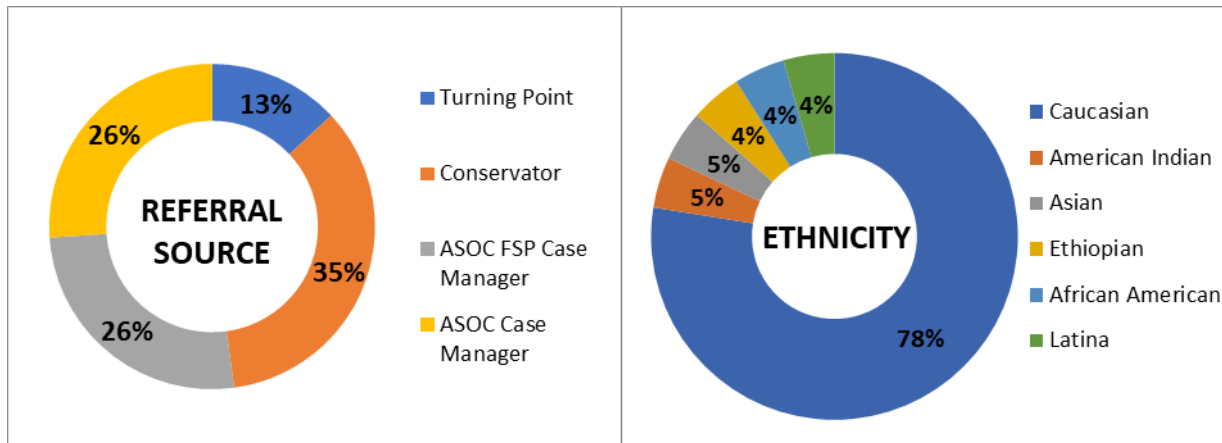
Harmony House Interim Program Director

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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 clients, and daily interactions with staff.

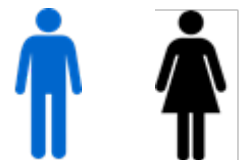
### Demographics



**57%**  
Incarceration history

**65%**  
Substance Abuse history

Served  
**61%** **39%**



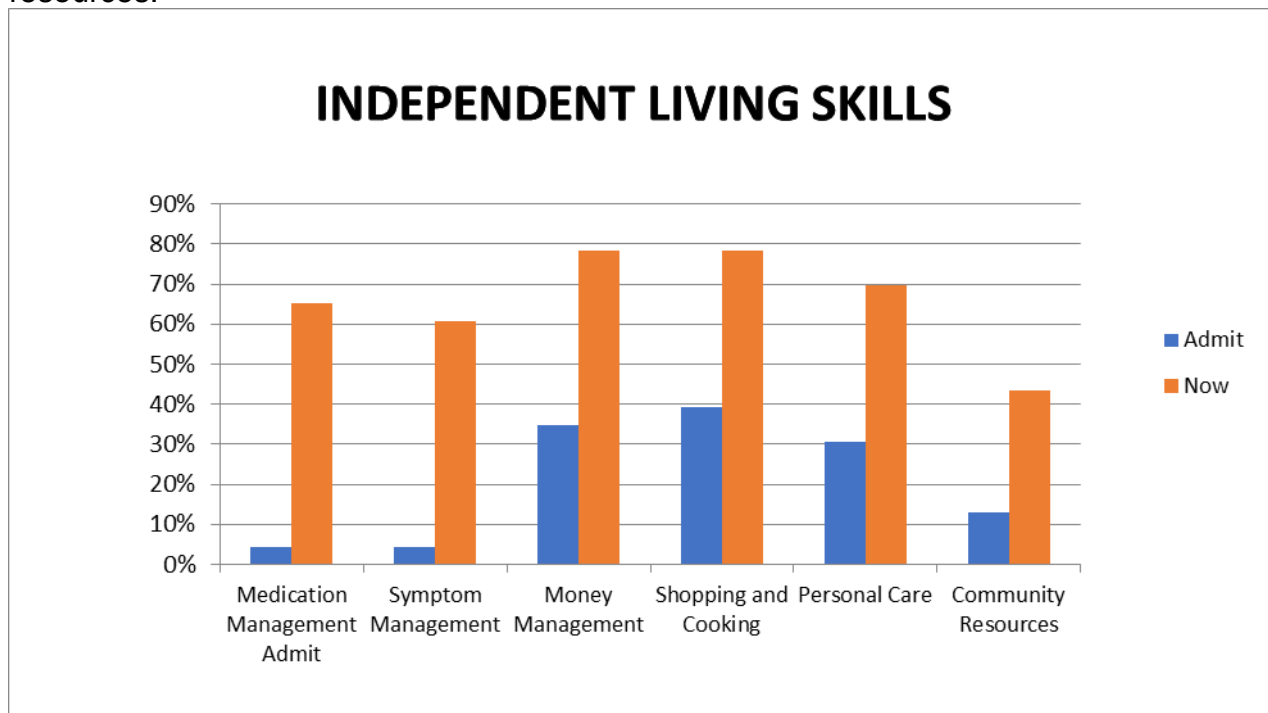
- Program saw a 7% increase in conservator referrals compared to the previous fiscal year.
- The program’s high rate of Caucasian clients continues to accurately reflect the population of the surrounding area.

### 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 clients.

#### 1. Independent Living Skills

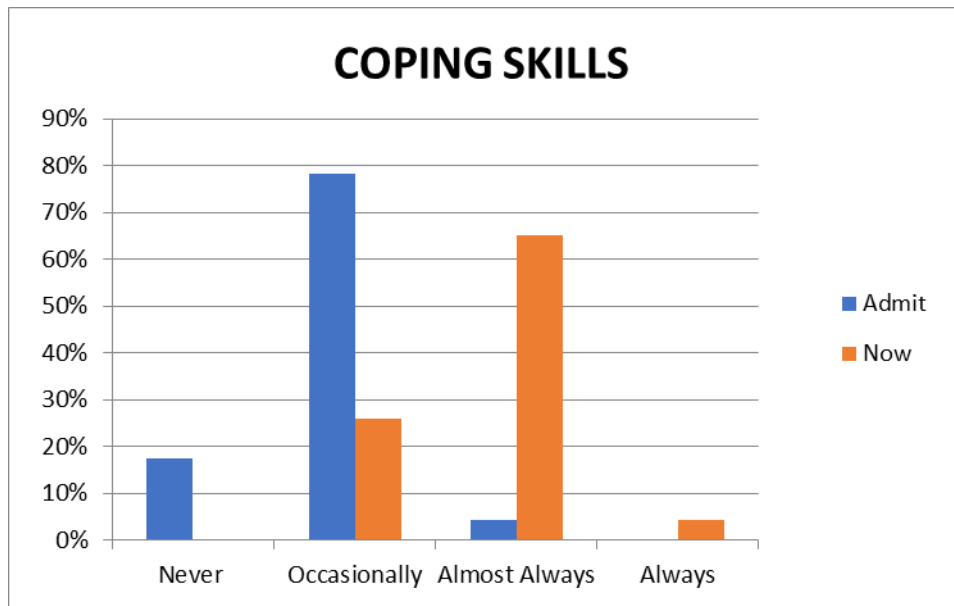
Effectiveness is measured by clients demonstrating an improvement in at least three of the following categories: medication management, symptom management, money management, shopping and cooking, personal care, and accessing community resources.



- After receiving Harmony House services, clients demonstrated an improvement in all the categories from their initial capacity at time of admission.
- In the last 6 months, at least 60% of the clients were observed as continuing to demonstrate competency in all six areas.

## 2. Mental Health Stability

Effectiveness is measured by a demonstrated use of coping skills resulting in lower reliance on psychiatric hospital admissions.



**87%**  
Decrease in  
Psychiatric  
Hospitalizations  
while at  
Harmony House

**82%**  
engaged in 1:1s  
with staff

- Clients residing in the program had a cumulative total of 30 psychiatric hospitalizations in the last 12 months prior to receiving Harmony House services.
- While receiving Harmony House services the same clients had a cumulative total of 4 psychiatric hospitalizations in the 6-month period of this report.
- While receiving Harmony House services there was 78% decrease in utilization of crisis residential services compared to 12 months prior to receiving our services.

## 3. Therapeutic Treatment Environment

Effectiveness is measured by clients regularly meeting with trained staff to discuss methods to achieve treatment goals. **Goal: 85% of clients 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 clients and initiated by staff as well. All clients interacted with mental health workers daily and 90% of the clients-initiated contact suggesting a continuation in self determination and efficacy.

## 4. Covid-19 protocols and mitigation

This program strives to provide a safe and healthy therapeutic environment.

- With Covid-19 cases rising Staff implemented a high level of protocols to ensure client safety.

- The Program closely reviews and follows the State mandated tier system and guidelines.
- Staff check temperatures of clients and staff daily. Staff and clients are sterilizing surfaces and door handles daily.
- The program has created a buffer zone by limiting outside personnel from entering the site as well as limiting client's community contact to essential appointments only.
- Clients can utilize online communication systems for appointments and to talk to family limiting the amount of in person contact.
- Implementation of these protocols has put the client Covid contraction rate at 0% in the last 6 months improving client safety.

### **Recommendations for Continuous Quality Improvement**

#### **I. Program Development**

1. Continue to utilize an incentive program to increase client participation. Client incentive will be achieved by meeting an 80% participation rate for morning meeting and chore completion.
2. Increase staff awareness of Therapeutic groups by encouraging to research and implement new group activities. Staff will utilize online resources to devise new group content and develop a group calendar to be approved by program director.
3. Find a new long-term pharmacy solution that will meet the needs of program. The program will utilize bubble packs to reduce incidence of med error.
4. Implement a client clean bedding calendar. Designate every other week as a time for clients to wash bedding during their normal laundry time.
5. Implement the Smoking Cessation grant to offer clients and staff the opportunities for improved health.

#### **II. Fiscal**

1. Find pharmacy that delivers to save staffing hours by eliminating the need to drive to pharmacy to fill med orders.
2. Implementation of bubble packs will improve efficiency of staff who currently count medication in vials; improving efficiency will better utilize staff hours.
3. Simplify meal recipes while also utilizing placer food bank for bulk protein orders will lower food cost.

## Implementations of Last Period's Recommendations

### **III. Program Development**

1. Clients have been doing stretches and exercises as part of the morning meeting routine. Some have shared that they really enjoy it and feel it is beneficial.
2. Having a program assistant was beneficial and may be something that we will look back on in the future. The program assistant position is currently vacant.
3. Program Director, Clinical Director, and Director of Quality Improvement reviewing all intake referrals has obvious benefits and should be continued. It has increased client case awareness across the board.
4. Submitting reports to Clinical and QI directors for approval is a good step to ensure that reports are being finished and filed per YCCC standards.
5. Client participation has increased due to the incentive and it continues to be a beneficial program.

### **IV. Fiscal**

1. Modifying the data collection to ascertain empty bed days while collaborating with providers improved the use of this program by the community and increased revenue.
2. Staff developed an account with Home Depot to submit donor letters but due to Covid-19 were not able to pursue the grant in the last 6 months. Staff will further develop a garden blueprint and itemized cost list to pursue this option in the future.
3. Utilizing the website Plan to Eat to streamline meal planning and grocery shopping to decreasing staff work hours and travel time. Use of Plan to Eat will continue moving forward.