



NORTHWEST INDIAN TREATMENT CENTER

May 31, 2015

Dear Colleague,

The report for the Second Quarter, FY2015 is attached. This report provides information identifying the referral source of patients admitted, how many patients were admitted, the percentage completing treatment, the gender mix and total days of treatment. There are summaries of satisfaction, effectiveness, access and efficiency for NWITC programs. Unmet needs are also included on all questionnaires.

Second quarter, FY2015, referents reported that 86% of patients were alcohol and drug free or consume less than before treatment. The Recovery Support Team continues to be successful in keeping contact with most alumni and reports that 98% of patients were alcohol and drug free.

If you have any questions about our services or this report please call me.

Sincerely,

Stephanie Tompkins, CDP
Director

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**NORTHWEST INDIAN
TREATMENT CENTER**

Residential Program Second Quarter ~ FY 2015



Statistics



Efficiency & Access Report



Patients' Input Report



Patients' Self-Evaluating Progress Report



Treatment Follow-Up Report



Referring Agencies Report

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Stephanie Tompkins, Director



Northwest Indian Treatment Center

Residential Program

Statistics

FY 2015 - Second Quarter

Statistics by Discharge Date*

Referents	No. Pts
American B. H. Systems	2
Behavioral Health Resource Shelton	1
Colville	1
Community Services NW	1
Cowlitz	5
Downtown Emergency Services	1
Fair Fax	1
GLL	1
Harborcrest	1
Klallam Counseling	4
Lakeside Milam	1
Lummi Care	3
Makah	6
Merit Resources	1
Muckleshoot	5
Nisqually Sub Abuse	1
Port Gamble	1
Puyallup Tribal Health Auth.	1
Quileute Counseling	1
Recovery Svcs of King County	1
Reflections	1
Seamar Comm. Health	1
Seattle Indian Health Board	2
Serenity Point	2
Sound Mental Health	1
Spokane	2
Squaxin BHOP	3
Tulalip	1
Yakama Nation CCAP	2
Total Admissions	54
Referent Type	
Tribal	17
Other	12
Total Referents	29

Patient Days

Total Patients	54
Total Days	2188
Average Stay	41 days

Counselor	# Patients	Total Pt. Days	Average Stay
B.P.	7	266	38
K.P.	11	422	38
M.S.	9	405	45
M.T.	5	168	34
S.V.	2	62	31
S.I.	12	517	43
S.D.	8	348	44
TOTALS	54	2188	38

Gender

Male	30
Female	24
Total Patients	54

Completed Treatment	Left Against Staff Advice / Aborted	Disciplinary Discharge - Non- Compliance	Med. & Emer. Leave	Other / Special Circumstances
Males - 26 (48% of all pts)	Males - 3 (6%)	Males - 0 (0%)	Males 1 (2%)	Males 0 (0%)
Females - 19 (35% of all pts)	Females - 5 (9%)	Females - 0 (0%)	Females 0 (0%)	Females 0 (0%)
Total - 45 Pts. 83% of all pts.	Total - 8 Pts. 15%	Total - 0 Pts. 0%	Total - 1 Pts. 2%	

Third Party Payers

ABP	40
TANF	6
SSI	6
TPO	1
Insurance	1
Total Third Party Payers	54

**Northwest Indian Treatment Center
PO Box 477, Elma, Washington 98541**

**Residential Program
Efficiency and Access Report
FY2015 Second Quarter**

Access to residential treatment is measured by the number of days patients must wait for admission to treatment. Efficiency is measured by the payer mix i.e. patients who have a funding source in addition to I.H.S. funds, and a stable number of bed days paid for by purchase orders at the full rate per day.

Access to the residential program is evaluated by the number of days between the date when all required pre-admission information is received by NWITC and the admission date, i.e. how long people are on the waiting list. The waiting list consists of those persons whose referral source has provided all required documentation and who are only awaiting admission. Persons who want admission but whose referral source has not yet supplied the required documentation are kept in pending status. Referrals from within Washington State must be on Alternative Benefit Plan (ABP), qualify for the State of Washington's treatment expansion program, have another payer, or if available use the benefit bed. Referrals that make contact but do not follow through in some way or who are denied admission are placed in closed status.

Factors that can result in long waits in pending status are loss of contact with the patient by the referring organization; loss of contact with the referring organization; or the need for additional health or mental health information.

The intake coordinator maintains contact with all organizations that have a person in pending status or are on the waiting list. Contact occurs frequently. When an individual is denied admission, the reasons are provided and a referral is suggested to the referring organization. The referral is documented.

Efficiency is measured by the number of persons admitted with a payer in addition to I.H.S. and the number of purchase order bed days or other funders paying more per day than state contracts. This helps NWITC achieve a balanced budget by maximizing the revenue in relation to each admission. If the patient is on Alternative Benefit Plan (ABP), they also receive a medical card which helps NWITC coordinate medical care.

January, February, March FY 2015

Efficiency: Here is the payer mix:

ABP	40
TANF	6
SSI	6
TPO	1
Insurance	1

Fifty-four patients were admitted during this quarter. The number of patients admitted each quarter is usually fifty plus. The payer mix is still solid. There were less purchase order beds reimbursed by either tribes or I.H.S than last quarter.

It is important to monitor the rate of use of state as well as other state funded beds against the contract. Staff, together with the Legal Department, is also monitoring the state budget and its potential impact on patient eligibility and provider contracts. Mental Health revenue has increased. Funding sources are currently unstable and uncertain. We will adjust expenses as needed and become more creative in diversifying markets.

The intensive aftercare provided by the SAMHSA, OVW and I.H.S. MSPI grants help sustain referrals. The recovery coach program implemented through the grants continues to be successful. This quarter one Recovery Coach Academy was presented, training several recovery coaches throughout different tribes. The next recovery coach academy will be held in May 2015.

Access: Patients who were admitted to the residential program waited an average of nineteen days. This is slightly more than last quarter. The length of time varied from zero to 108 days. One person waited 108 days for admission, this is because we had little contact with the client. The wait period is under 20 days, which is within our target.

Denied Access: No prospective patients were denied access.

Summary: The payer mix is good. The revenue for this second quarter of FY 2015 appears to hold.

Satisfaction is very high from referral sources and from patients as indicated on satisfaction questionnaires. Referents tell the Recovery Support Team (funded by the grants) that they are very pleased with the rich resources available to patients after discharge.

7	I'm satisfied with everything! I started learning about my addiction the very first day here and I'm still learning.	Understanding everything I was taught.
8	I appreciate all of the lectures and specialists. Sweats and traditional foods and medicine classes.	All the lectures and support is helpful. DBT skills are key in helping me move forward in recovery.
9	This is my first time in treatment and I feel really good about it and the teachings I am learning.	The teachings, the food, the walls, everything is great.
10	Culture and respect.	I learned about feelings I didn't know I had. I got to learn about the real me.
11	I really like Shirley's class.	TA's/Counselors are awesome. Shirley's class is good. The program covers everything that needs to be processed.
12	I'm learning tools and skills I never really was willing to learn. I'm really picking them up now and I can really feel the change already and I'm ready to learn more.	I'm 100% satisfied. I'm grateful for every bit of treatment. It taught me how to love myself and I know it saved my life. Thank you to all staff, you're forever in my heart.
13	The issues I had were so deep. I didn't think I had so many issues; I was confused by the pain that was involved. They are amazing there.	N/A
14	I am very grateful that I was allowed to include physical activities in treatment. I am ecstatic about the native ways of spirituality.	I am completely satisfied. I appreciate all that I have received.
15	I accomplished finding myself.	I accomplished everything I came for.
16	The lectures have been useful and cover a broad range of topics.	Abandonment/grief/loss work. It was a comfortable environment for the most part.
17	I've grown so much compared to when I first got here.	I've learned to deal.
20	A lot of support.	Every way possible. I have worked through quite a few things here and no matter what there will always be someone who could help.
21	Explanation of co-dependency and DBT skills.	I'm thankful for the classes and teachings of staff ☺
22	The food and being around other Native culture.	I feel they did a good job teaching me tools and brining my faith back to recovery.
23	Everything.	N/A

25	Learning tools I didn't hear the first time I was here.	Doing the internal work and learning how to communicate the internal work.
26	I've began to let go & move forward. I've learned how to begin forgiving myself and others, and am more aware of my actions and feelings.	I'm completely satisfied with treatment. I worked & learned a lot about myself. I know what I need to do for myself & the areas I still need to work on once leaving.
27	N/A	Satisfied, I feel I got what I needed from this program.
28	I've gotten to learn how to take care of myself and inner child.	I am myself again. I learned to be grateful and respectful of others.
29	The counselors are good to answer questions and help me.	N/A
30	I love the culture.	The topics and the way we are treated.
31	I like the treatment so far with cultural components makes it worth.	N/A
32	That I'm not having my walls up. I share a lot and feel lighter not carrying around everyone else's baggage.	All ways.
33	N/A	In every way, especially in how I have been treated. You all have made me feel loved and respected.
34	Getting the spirituality, much needed.	Spirituality.
35	I think this program fits my needs better than a 12 step program because it seems more versatile. It made me take a more perceptive look at myself.	N/A
36	I'm working my program the best I can.	I am satisfied with my treatment here at NWITC because you all treated me with respect.
37	That if there is a situation where I am in need of immediate council, there is always someone available.	That I have my tool box with the tools I need to stay sober.
38	I feel that I am learning more skills and I have a much more positive attitude this time around.	I learned a lot about DBT skills and how to use them. I was able to get my spirit back – become more spiritually connected.
39	My counselor, all staff in general are always so loving, caring and respectful. Makes me comfortable.	The care and respect I get from every single staff member.

40	My counselor takes her time with me to make sure I understand what I am going through.	I have been able to see the behaviors that I need change, thanks to my counselor I have great progress.
41	I can understand myself better.	Confusing at the end.
42	N/A	New relationships, learned a lot of tools, gained confidence, good counselors.
44	All the classes and everything they taught me on staying on the red road.	They gave me the tools I need to stay on the red road.
45	The ways about issues from childhood is good.	Learning tools I didn't know before. Sweat and counselors are awesome.

In general, patients appreciated the staff, the new knowledge they had gained, and their personal progress. This is consistent with previous quarters.

4. In what ways are you dissatisfied with your treatment?

<u>Pt.#</u>	<u>Mid-Treatment</u>	<u>Discharge</u>
1	That I have to go home and that I cry sometimes.	I'm sad I have to go home.
2	N/A	N/A
3	I'm content with myself.	You never confuse me.
4	Variation between TA's and counselors on rules some say nothing, some jump you ASAP. Heat in rooms messes with sleep.	I feel a couple of females who lecture treat men different than women in a bad way, I'm not the only one that feels this way.
5	No complaints.	No ways.
6	Lectures are loud at times "residents" like the teacher needs more control.	N/A
7	I'm not.	Completely satisfied.
8	I would appreciate more one on one time with my counselor.	Satisfied with treatment so far.
9	6 am wake-up.	That our sheets did not get changed.
13	I didn't get what I wanted, when I wanted it. I thought I had power but I don't. I only have the power to change myself.	N/A
14	I am happy with my treatment, but I feel there is a lack of communication between TA's.	N/A
16	Music helps me to escape/meditate, so I think MP3 players should be allowed.	Lack of coordination for visits/passes through Counselors.

21	N/A	I was sad when we were in lock down, my counselor talked with me though.
25	Doing the best I can to communicate the problems I have to deal with. Takes time and patience for it to come out.	Should be more fishing trips. ☺
26	Feeling uncomfortable, unsafe and judged when I'm no longer judging myself for my past.	The fact that I'm leaving when I don't necessarily want to. I wish I could stay longer & keep working on what I need to.
29	Some of the paperwork is confusing and upsetting. Everything is going to fast in some aspects.	N/A
30	N/A	Maybe one more process group a week.
31	I haven't seen "Molly" yet?!	N/A
34	More work on co-dependency, anger.	Was working on body as well so when I got here I felt like I was lazy. I need more exercise.
35	It's so far from home.	N/A
37	Wish I had sugar and cocoa for my coffee.	N/A
39	I would like more time for one on ones with my counselor, there was a lot of staff trainings and stuff going on.	N/A
42	N/A	Wish I could have opened up more.

Only a few varied reasons for dissatisfaction noted.

5. What would you like to see added to or changed about the program?

<u>Pt. #</u>	<u>Mid-Treatment</u>	<u>Discharge</u>
1	Sign-up sheets for the washer and dryer.	Nothing, you all are great.
2	N/A	Upgrade your 25 year old movies.
3	I'm happy with the way you guys call me out.	You are awesome.
4	N/A	Petty stuff-better heat control room, hot lecture room and you can't open doors because other parts of building gets hot.
5	No complaints, this program and place are beyond the best I've ever been to. That's why I wanted to come back here rather than anywhere else.	Program is great!

6	Counselors and staff to be held accountable. On-time, honesty, and confidentiality.	Taking whoever wants to go to the creek to bathe.
7	Not a thing. You guys are great!	N/A
8	Nothing at this time. Or possibly more songs/drumming.	More songs and drumming.
9	More outdoor programs.	More outside activities.
10	N/A	The program is great the way it is.
11	N/A	More sweats possibly during church time. Earlier graduation time on Wednesdays.
13	The men/women should have a big brother/big sister program. Tribal council should find the similarities between the 24 tribes of the state.	N/A
14	Better communication with staff.	I believe the center caters too much with the med line. Patients need to learn patience (IE: Suboxone patients should be able to take meds and people need to accept it.) That's just my opinion.
16	MP3 players should be allowed and access to the internet.	Better routes of communication with immediate family.
21	N/A	This program is so good, maybe allow hats in the house.
22	More physical equipment.	Just ease up a little bit. No music in the van is pretty dumb.
25	Following through when you say you're going to do something.	N/A
30	Separate sweats for men and women so we can get 4 rounds.	Maybe one more process group a week.
32	Men/Women should change smoking sides.	Guys and girls should switch smoking areas & night-time volleyball.
34	More than 2 rounds in the sweat lodge, maybe men go in one day and women the next.	Just something to work out with.
37	N/A	Ice cream on Sundays.
38	Upgrade some of the video's ie: The Red Road to Sobriety, sorry but this one is more torture to watch than anything I've ever seen.	More updated movies.

Northwest Indian Treatment Center Self-evaluating Progress Report FY 2015, Second Quarter

Patients were asked to evaluate their progress in the areas shown below. The percentages represent the degrees of improvement from admission to mid-treatment and additional improvement from mid-treatment to discharge. This report represents eighty-nine percent of all second quarter graduates. The patient numbers correspond to those used in the Patients' Input Report.

Patient Number	Setting Clear Boundaries		Positive Self Esteem		Anger Management		Taking Responsibility		Cultural Orientation	
	% Improved from Admission to Mid-Treatment	% Improved from Mid-Treatment to Discharge	% Improved from Admission to Mid-Treatment	% Improved from Mid-Treatment to Discharge	% Improved from Admission to Mid-Treatment	% Improved from Mid-Treatment to Discharge	% Improved from Admission to Mid-Treatment	% Improved from Mid-Treatment to Discharge	% Improved from Admission to Mid-Treatment	% Improved from Mid-Treatment to Discharge
1	60	20	60	20	60	0	80	0	60	20
2	0	0	60	0	40	20	0	0	0	0
3	20	20	0	20	0	0	0	0	0	0
4	20	0	20	20	20	20	40	20	20	20
5	60	20	40	20	0	20	40	20	60	0
6	20	40	40	40	20	40	20	40	60	20
7	60	40	80	20	60	0	40	0	40	40
8	20	0	20	20	0	-20	20	0	20	0
9	20	20	-20	60	-20	20	0	-20	-20	40
10	20	-20	20	20	20	0	20	0	0	0
11	100	0	80	20	60	20	100	0	60	0
12	80	0	100	0	80	20	60	0	60	0
14	60	0	40	20	20	0	20	0	60	0
15	80	0	40	20	20	0	80	0	80	0
16	40	20	20	20	40	20	20	20	0	0
17	40	20	20	40	0	20	20	20	60	20
20	20	40	20	60	20	40	40	20	60	40
21	20	-20	40	-20	20	0	20	0	40	20
22	20	0	40	20	20	20	0	20	20	20
23	20	20	0	0	0	0	0	0	0	0
25	40	20	60	20	60	20	40	0	40	0
26	40	0	60	0	20	20	20	20	20	20

27	40	40	40	60	40	20	20	20	80	20	20
28	20	0	20	20	20	0	20	20	40	-20	20
29	20	0	40	-20	40	0	20	20	0	20	20
30	0	0	20	20	20	0	0	0	0	20	20
31	40	0	20	20	0	40	0	0	20	0	0
32	20	0	40	40	-20	60	0	0	0	0	0
33	20	40	40	60	0	40	20	20	20	0	20
34	20	0	20	20	0	20	0	0	0	20	0
35	20	0	40	40	0	60	0	0	0	60	0
36	20	20	20	0	40	-20	80	20	20	0	20
37	0	0	0	0	0	0	0	0	0	0	-20
38	20	0	60	60	20	40	0	20	40	20	0
39	20	40	20	20	20	0	0	20	0	20	20
40	20	40	60	60	20	40	20	40	60	20	20
41	-20	-20	20	20	-20	20	-20	20	20	40	-20
42	20	0	20	20	20	-20	0	20	0	40	0
44	20	20	20	20	20	0	-20	20	20	0	0
45	80	0	40	40	20	40	20	0	0	20	20

• Substantial improvement occurred in nearly all areas for most patients. The most improvement generally occurred in the first half of treatment. (Zero may indicate that no new skill level was attained and/or it may indicate that the skill level was already high.)

6. Any follow-up or referral requested during interview today?

- Oxford Houses.
- Housing, outpatient.

7. What referrals were made during the interview today?

- Oxford House phone numbers.
- Housing, outpatient information.

Comments:

- Client reports this is an awesome program.
- Client reports, I'm just amazed at NWITC's program, thank you.
- Client reports, I am in a lot of pain, but my recovery is good.
- Client reports, its hard work, but I'm doing it. Thanks for your support.
- Client reports, things are great so far.
- Client reports, loving life.
- Client reports, feeling overwhelmed, but happy.
- Client reports, going to meetings daily.
- Client reports, I love it here, I love my house.
- Client reports no longer wanting follow up services.
- Client reports, relapsed and now living on the streets.
- Client reports, has a mental health appointment set up.
- Client reports, will access services with referent.
- Client reports, doing IOP.
- Client reports, doing great, appreciate everyone and the teachings.

**Northwest Indian Treatment Center
PO Box 477, Elma, Washington 98541**

**Residential Program
Referring Agencies Report
FY2015, Second Quarter**

This report represents the perspective of the agencies that refer patients to Northwest Indian Treatment Center. Responses were received from referring agencies for ninety-four percent of second quarter patients. Survey results are printed in bold type.

1. Was the admission and referral process: **(Mark all that apply)**

A. Easily understood	98%	B. Easy to comply with	31%
C. Confusing	2%	D. Too demanding	6%

Most referents considered the process to be easily understood.

2. Do you feel that you and your patient were treated respectfully?

Yes	100%	No	0%
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All responses are positive, which is consistent with most quarters.

3. In what ways were you satisfied?

- *Got in really quickly.*
- *Patient still clean & Sober, I'm always satisfied with NWITC.*
- *Communication was good with Chrystal.*
- *Completely satisfied with all services.*
- *All ways.*
- *Patient got the help they needed.*
- *We always work well together.*
- *Got patient in really quickly, patient was satisfied with treatment.*
- *Communication, call backs in a timely manner.*
- *Got patient into treatment quickly.*
- *It was all good.*
- *Always like NWITC and the people working there.*
- *Application process was easy.*
- *If I had any questions all I had to do was call and I always got help.*
- *The admission process was easy and NWITC got the patient in quickly.*
- *Communication with counselors, weekly progress reports, willingness to work with patients that have mental health behavioral issues, admission was easy.*
- *All ways.*
- *Always satisfied, communication is great, I like the aspects of the Native cultural community you have.*
- *All ways, communication, culture, Native community.*
- *Everything was clear cut as far as paperwork.*
- *Calls were returned in a timely manner.*
- *Behaviors the patients came back with and the training they learned there.*
- *NWITC puts in extra effort if a patient is in high need of treatment.*
- *Good referral process, Chrystal does a good job getting people in.*
- *All ways, good communication.*
- *Return calls, easy admission.*
- *Always a great experience working with NWITC.*

All referents were satisfied in general and especially with the intake staff and treatment components.

4. What changes has your patient made in his/her drug and/or alcohol use?

Drug and alcohol free	84 %	Consumes less than before treatment	2 %
No change in use	4 %	Unsure	10 %

Referents and/or the Recovery Support Team reported having contact with or knowledge of 86% of this quarter's post discharge patients that remained drug and alcohol free or consumed less than before treatment.

5. To your knowledge, was the patient's confidentiality protected?

Yes	100%	No	0%
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All referents responded positively, which is consistent with most quarters.

6. What would you like to see added or changed to the NWITC program?

- No complaints, everyone I've sent there loves it.
- Family groups.
- If there are problems going on, please communicate right away with referring provider.
- Nothing, if it's not broke don't fix it.
- More female beds.
- Make the physical and lab work easier to do.
- More mental health classes.
- Open another facility, expand.
- Expand.
- Recovery house, somewhere to continue recovery for more than 45 days.
- Shorter wait times, although I know there's not much that can be done about that.

7. Do you have any questions you'd like addressed?

- What is the process to re-admit a former patient?

Answer:

Call the intake coordinator she will walk you through the process, generally we will ask the patient to write a letter to NWITC to re-affirm their commitment to the treatment process.

