NORTHWEST INDIAN TREATMENT CENTER

February 1, 2018

Dear Colleague,

The report for the first Quarter, FY2018 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.

First quarter, FY2018, referents reported that 82% 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 94% of patients **contacted** were alcohol and drug free.

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

Sincerely,

June O'Brien
Director

Northwest Indian Treatment Center / P.O. Box 477 / 308 E. Young / Elma, WA 98541
Phone (360) 482-2674 / Fax (360) 482-1413

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NORTHWEST INDIAN TREATMENT CENTER

Residential Program
First Quarter ~ FY 2018

- Statistics
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- Patients' Input Report
- Patients' Self-Evaluating Progress Report
- Treatment Follow-Up Report
- Referring Agencies Report

PO Box 477 / 308 E. Young St.
Elma, Washington 98541
360-482-2674

June O'Brien, Director

Northwest Indian Treatment Center

Statistics
FY 2018 - First Quarter

Referents	No. Pts
A First Place	1
Benewah Medical Center	3
Camas Path	1
Chehalis BHP	1
Cowlitz Tribal Health Services	1
Downtown Emergency	1
Fairfax Hospital	1
Harborcrest	2
Health and Associates	1
Jamestown Sklallam	1
Kitsap Recovery Center	1
Klallam Counseling	3
Lummi Care	2
Makah Recovery	5
Muckleshoot BHP	2
Nisqually SAP	2
Northwest Resouces II	2
Port Gamble	2
Providence	1
Puyallup Tribal Health Authority	3
Quileute Counseling	1
Quinault CD Services	2
Seattle Indian Health Board	2
Shoalwater Bay	2
Shoshone Bannock 4 Directions	2
Skokomish Hope	1
Spokane Substance Abuse	2
Squaxin BHOP	3
Stillaguamish Tribe	2
Swinomish CD	1
Tulalip BH - Family Services	1
Volunteers of America	1
Western Montana Addiction	1
Total Admissions	**57**

Referent Type	
Tribal	23
Other	10
Total Referents	**33**

Statistics by Discharge Date*

Patient Days

Total Patients	57
Total Days	1987
Average Stay	**35 days**

Counselor	# Patients	Total Pt. Days	Average Stay
B.H.	10	292	29
B.P.	16	574	36
D.M.	6	240	40
L.G.	2	53	27
M.T.	5	129	26
S.V.	3	111	37
S. I.	15	588	39
TOTALS	**57**	**1987**	**32**

Gender

Male	33
Female	24
Total Patients	**57**

Completed Treatment	Left Against Staff Advice / Aborted	Disciplinary Discharge - Non-Compliance	Med. & Emer. Leave	Other / Special Circumstances
Males - 21 (36% of all pts)	Males - 6 (10%)	Males - 5 (8%)	Males 1 (2%)	Males 0 (0%)
Females- 16 (28% of all pts)	Females - 4 (7%)	Females - 4 (7%)	Females 0 (0%)	Females 0 (0%)
Total - 37 Pts.	Total - 10 Pts.	Total - 9 Pts.	Total - 1 Pts.	
64% of all pts.	17%	15%	2%	

Third Party Payers

ABP	41
TANF	4
SSI	3
TPO	5
Insurance	1
Benefit Bed	3
Total Third Party Payers	**57**

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

Efficiency and Access Report
FY2018 First 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 Apple Health / Medicaid, qualify for the State of Washington's treatment expansion program, have another payer, or if available and meet eligibility requirements 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.

October, November, December FY 2018
Efficiency: Here is the payer mix:

ABP	41
TANF	4
SSI	3
Tribal PO	5
Insurance	1
Benefit Bed	3

Fifty-seven patients were admitted during this quarter. The number of patients admitted each quarter is usually fifty plus. There more purchase order beds reimbursed by either tribes or I.H.S than last quarter.

Currently there is no contract with the state; a fee for service structure (FFS) has been implemented and seems to be working well. Staff, together with the Legal Department, is also monitoring the state budget and its potential impact on patient eligibility and provider contracts. Native Americans are currently carved out of the Behavioral Health Organizations (BHO) billing system for both chemical dependency and mental health services. We are not contracted with any BHO providers and therefore are accepting mostly Native clients. State chemical dependency treatment rates and mental health revenue, on which the quality of NWITC services substantially depends, need to be carefully monitored for changes. We will adjust expenses as needed and become more creative in diversifying markets.

The intensive aftercare provided by the OVW and I.H.S. MSPI grants help sustain referrals and enhance quality of care. This team works with patients to identify aftercare needs, develop safety plans, arrange transportation and develop linkages with after care providers and housing resources. They are also in frequent contact with alumni to assess ongoing needs. Another activity of these positions is to work with tribes to assist in the building of a peer recovery support system in the home community. These services make NWITC a preferred provider for many tribes.

Access: Patients who were admitted waited an average of three days. This is less than last quarter. The wait period is under 20 days, which is within our target. The length of time varied from zero to 53 days. One person waited 53 days for admission, this was because the client did not check into treatment on scheduled bed dates.

Denied Access: No prospective Native American patients were denied access.

Summary: The revenue for this first quarter of FY 2018 appears to hold.

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

Northwest Indian Treatment Center
Self-evaluating Progress Report
FY 2018, First 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 first 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	20	-20	0	0	0	0	0	0	0	40
2	30	30	20	40	0	20	20	30	20	20
3	40	20	40	40	50	20	60	40	20	40
4	40	0	60	0	40	0	20	0	60	0
5	20	0	40	0	0	20	0	20	60	0
6	40	0	40	20	20	0	40	0	40	0
7	0	-20	0	-20	0	-40	0	0	0	0
8	20	20	80	20	20	20	60	0	40	20
9	20	20	40	20	-40	40	0	40	60	40
10	20	0	40	20	0	20	40	20	20	20
11	20	20	20	20	20	40	20	20	20	40
12	40	20	0	20	20	20	40	0	60	0
13	40	40	40	40	40	20	40	60	40	60
14	80	0	100	0	0	0	80	0	0	0
15	20	40	60	20	40	40	20	40	40	40
16	30	50	30	50	40	20	20	40	30	30
17	60	40	40	60	60	20	60	0	0	0
18	40	60	60	20	0	0	60	20	40	40
20	0	20	20	20	0	0	0	20	0	0
22	60	20	40	20	20	60	40	0	80	0
23	20	0	40	0	40	20	40	20	0	0
24	0	-20	40	20	40	0	40	20	40	0

25	50	10	20	20	40	20	40	0	40	0
26	20	0	0	0	0	60	0	0	0	40
27	60	20	40	20	60	0	40	20	100	0
29	0	0	0	0	0	0	0	0	0	0
30	80	20	80	20	60	40	60	40	60	40
31	-20	20	0	0	0	-100	20	0	20	-20
32	0	0	0	0	0	0	0	0	0	0
33	20	0	40	0	60	0	0	0	80	0
35	0	40	20	40	40	20	0	0	0	0
36	20	20	20	20	0	20	0	0	0	0
37	40	-20	40	20	0	0	0	0	40	0

- 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.)

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

Patients' Input Report
FY2018 - First Quarter

Patients are surveyed at mid-treatment and again at discharge. The following comparison represents eighty-nine percent of all first quarter patients completing treatment. The treatment survey questions are listed with responses in bold type.

1. Was your orientation at admission:

97% Easily understood **3%** Confusing

The percentage of patients finding the orientation to be easily understood is consistent with most quarters.

2. Do you feel that you are treated respectfully? If no, please explain.

97% **Yes** **3%** **No**

- **The staff were respectful, but the patients were not.**

The percentage of patients felt they were treated respectfully. This is consistent with most quarters.

3. In what ways are you satisfied with your treatment?

Pt. #	Mid-Treatment	Discharge
1	**Easy to follow.**	**I learned about myself and they understood about my relapse.**
2	**I'm still here.**	**I feel like I've been here for myself and that I'm more willing to stay clean.**
3	**I feel that all staff here work hard at what they teach and they give respect all of the time.**	**My counselor understood "me". Other counselors coached me when I needed but mostly NWITC helped me where I needed help the most.**
4	**I'm satisfied with the groups and how well they walk us through addiction. I'm also satisfied with the structure.**	**I'm satisfied with the structure and the groups. They're so helpful and the TA's are too.**
5	**I feel that I am getting to some core issues.**	**I like how I got deep into past issues.**
6	**Everyone here treats one another as family.**	**Everyone learned a lot and the stay was comfortable.**
7	**I feel as though this facility gets to the deep issues of your addictions while also providing spiritual guidance.**	**The cultural aspect I really liked and the way they deal with past trauma abuse.**
8	**I feel a lot better about myself and the way I'm dealing with unresolved emotions.**	**Worked through childhood abuse and learned how to deal with emotions in a healthy way.**
9	**Class.**	**Clean time and oxford acceptance.**
10	**So far the groups and lectures are good.**	**Focusing on one emotion per week.**

11	All ways.	I like my personal treatment plan and how it was tailored for me.
12	That I'm the only one responsible for my own recovery.	I've learned how to treat myself and respect myself.
13	I'm satisfied with everything.	In every way.
14	Helped me refresh my memory and forever reminding me that yes I am in control.	I was homeless coming to treatment and I'm not anymore.
15	I'm satisfied with the healing and work I have been doing.	I am satisfied with the progress I have made here. I have learned a lot about myself.
16	Classes, counseling, assignments and groups.	Very informative, eye opening. Treatment plan was set up very well for my issues.
17	The amount of change I have made is amazing. Not only physically but mentally as well.	Gained a lot of insight, not just in life, but spiritually as well.
18	Counselors are outstandingly amazing. Kept busy, good structure.	All staff and patients make me feel at home.
20	I'm very satisfied with my treatment plan and just the overall treatment center.	I got to work on a lot of assignments that I put off last time I was here. The peer support here was great.
22	I have gained a lot of knowledge and tools that I'm going to use once I graduate.	All ways.
23	I have been treated with respect from the staff and my peers.	A very good program.
24	It's helping me understand and deal with my issues and build self-esteem.	I've gained a lot of tools and learned a lot about myself.
25	All around a great place. Everything.	Staff are really helpful.
26	I am learning what I was doing to myself and how it was effecting my surroundings and everything in my life.	I learned so much about myself and my addiction and have learned the tools to help me live sober.
27	The counselors' readiness and willingness. The confrontation and the family hood.	DBT.
29	I believe I've had a mutual respect with both staff and peers for the most part.	Gave me a break from the world. I tried to focus on the ways I need healing.
30	I have discovered myself again and worked through my grief and loss.	I've grown and feel my abilities for recovery are given to me in the tools I have learned here by staff and peers.
31	TA's are really helpful in every way.	In every way.
32	Learning new things about native history and medicines.	Finding the answers I have been looking for in life.
33	Spiritually.	The love I got from the staff.
35	Clear and thorough explanation of subjects, topics and issues are understood with opportunities to ask questions.	A thorough counseling of treatment issues and subjects was exhibited the whole time.
36	The structure, informed counselors.	I feel that I understand and I am satisfied with my treatment as a whole and I now feel complete.
37	Everything.	I like the inner child work and the spiritual aspects.

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?

Pt.#	Mid-Treatment	Discharge
2	I can't have spray can cheese for my crackers.	Nothing.
3	Group punishment when I first got here, but I understood and I was on blackout anyways.	Can't physically work out and I'm not a Tai-Bo person.
6	Some negative peers that come into the house.	N/A
7	Need more time on the phone or video calls for people who live far away and can't visit.	Sundays are hard for people who live hours away and only get 10 minute phone calls.
8	N/A	Took too long to see the ARNP.
9	Sleep / naps	N/A
10	I'd like to have more split groups. It would be nice to go to group and one by one share thoughts and not over share.	Nothing.
15	I am still not the greatest with my boundaries.	N/A
18	N/A	I thought 45 was too long but it went by fast.
23	I have had a hard time hearing everything.	N/A
31	When others don't take treatment seriously.	Lockdown: those who left was most of the problem, but today I do own up to my part.
32	The basketball court is too small for free time.	N/A
33	Not getting to see my kids because they are so far away.	N/A
35	Coming into treatment disciplinary action was in place, although I was discluded from the action I still had to suffer.	N/A
36	The beds.	The food is always the same from week to week.
37	N/A	I'm kind of bummed I'm still walking out of here with issues.

Only a few varied reasons for dissatisfaction noted.

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

Pt. #	Mid-Treatment	Discharge
3	Sunday should be a free day from 6am - 11am.	Maybe some more outside AA/NA meetings. Bigger variety of yogurts, more fry bread.
5	Option to buy beads.	A new drum, the green one is flat in the morning.
7	Heat lamps in smoking areas.	People who live far away should have the same rights as people who live close as far as access to visiting family.
8	I would like to see more drum practice time.	More drum practice time.
9	Entertainment options.	N/A

10	Intervention videos would be good to watch. It would be nice if females were allowed to play horseshoes.	Intervention videos.
11	More off grounds activities.	More outside activities and a motivational quote chosen by the clients each day at meditation.
12	That our stories should / could be talked about with the opposite gender. The only people with similar stories to me are of the opposite gender.	N/A
16	More cultural classes.	More classes in regards to our Native heritage and culture.
17	Pool table.	Bigger basketball court.
18	More walks.	Walks even on blackout.
20	I wish we could sweat every week and I wish we still went on outings to the forest with the river.	More outings and some new movies.
24	Have a female run female sweats.	I think we need three female groups and a female to run sweats. This is a great place though.
25	N/A	Improved basketball hoop.
27	N/A	More encyclopedias.
29	Higher levels of exercise such as bicycles or dumbbells. Salad is a good option for dinner.	That meditation is about meditation.
30	Better beds, more bathrooms, showers and trips to the store.	Everything set in place is exactly what works for here.
31	Women talk during lecture, I think we should have straight tables.	The bed frames should be painted black, red, yellow and white like the medicine wheel so they don't look like prison beds.
32	A workout room.	A hand-game or stick-game.
33	Use the MRT (Moral Recognition Therapy) it's very effective.	Add MRT, take out journaling every day.
35	N/A	A brighter print on handouts.
36	New ice machine, additional washer and dryer.	I'd like to see yoga.

Many varied suggestions offered with no particular common theme.

6. Do you have an area of concern you want to share?

Pt. #	Mid-Treatment	Discharge
3	I feel like this treatment center does everything to the best of their knowledge and works with us patients to truly help us.	N/A
4	I think whoever is supposed to show you around the treatment center should be more specific and actually show you where the fire exits are, etc.	N/A
8	The girls smoking area leaks and has huge nasty spiders.	The women's smoking area leaks and has nasty spiders.

16	N/A	Respect of elders and people in general by our younger patients.
23	N/A	I need some clothes.
31	I just really like how the program is run.	This place is amazing in all areas. The TA's, staff, and cooks are number one. In every class I took notes for me and my recovery.
36	I don't think it's fair that you've taken the creamer away for coffee and the soda when you allow smoking; it just doesn't make sense.	My bedroom walls are funky and dirty.

7. Are you an active part of developing your treatment plan with your counselor?

100% Yes **0%** No **0%** No response

All patients indicated the affirmative. This is consistent with most recent quarters.

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

Treatment Follow-up Report
FY2018 - First Quarter

The following report represents the results of the telephone interviews with seventy-eight percent of the total participants during the first quarter. Survey results are printed in bold type.

1. Are you still clean and sober?

94% Yes **6%** No

The number of alumni reporting they are maintaining sobriety is lower than recent quarters.

2. Have you seen your aftercare provider? If not, why not?

66% Yes **34%** No **0%** No Response

- **Relapsed, but sober now.**
- **No appointment.**
- **Appointment today.**
- **Doesn't want to.**
- **No ride.**
- **Incarcerated.**
- **Attending meetings only.**
- **Moving.**
- **Rescheduled appointment.**
- **Missed appointment and relapsed.**

The number of alumni reporting that they have already seen their aftercare provider is lower than recent quarters.

3. Does your sobriety seem stable? If not, what services do you need?

89% Yes **11%** No

- **Kicked out of housing.**

The percentage of alumni who felt their sobriety to be stable is lower than recent quarters.

4. Are you receiving the services you need? If not, what are your unmet needs?

80% Yes **20%** No

- **Needs IOP and Housing.**
- **Needs medication.**
- **Not sure.**
- **Hard to receive services while incarcerated.**
- **Wants IOP appointment sooner but no openings.**

The percentage of alumni receiving the services they need is lower than recent quarters.

5. Was your treatment with us satisfactory?

95% Yes **5%** No

The percentage of alumni who were satisfied with their treatment experience is slightly lower than last quarter.

6. Any follow-up or referral requested during interview today?
    - Oxford information.
    - Aftercare and D.S.H.S

7. What referrals were made during the interview today?

    - Outpatient and housing services set up through Tribe.
    - Oxford house resources.
    - Resources were given for D.S.H.S. and aftercare.
    - Oxford house resources.

Comments:

- Client comments "I'm grateful for NWITC".
- Client reports, doing great.
- Client comments, "I love everyone at NWITC".
- Client reports, having no intention in going to IOP after treatment, stating "I will be busy".
- Client currently in the hospital for leg injury.
- Client reports, doing great.
- Client reports, working and doing well.
- Client reports two overdoses since leaving treatment and continues to use.
- Client comments, "I apologize how I left things and wish I could've finished out the last week of treatment".
- Client reports, to have seen an aftercare provider but waiting on discharge papers and evaluation in order to received services.
- Client reports, after being discharged by staff from NWITC they are looking for another treatment program to attend.
- Recovery support reports, client left treatment before an aftercare appointment was scheduled and the referent has not seen or heard from the client.
- Recovery support team member reports client is still receiving services from housing.
- Client comments, "I appreciate NWITC".
- Client reports, relapsed a week ago, but has one day clean and has an appointment scheduled with outpatient.
- Client reports, doing well, set up aftercare appointment.

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

Referring Agencies Report
FY2018, First Quarter

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

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

A. Easily understood	**100%**	B. Easy to comply with	**50%**
C. Confusing	**0%**	D. Too demanding	**0%**

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%**

All responses are positive, which is consistent with most quarters.

3. In what ways were you satisfied?
   - *The client wouldn't have gotten treatment without this facility.*
   - *Great communication.*
   - *Feedback from admission and regular updates.*
   - *Communication, outreach, follow-up.*
   - *Wonderful staff, great communication.*
   - *Professionalism.*
   - *The care that is given.*
   - *Referral process, updates from counselor.*
   - *Quick bed date, weekly updates.*
   - *Personable intake, very caring.*
   - *Communication with counselor.*
   - *Quick intake process.*
   - *Quick bed date with being a returner.*
   - *Overall process.*
   - *Understanding, encouraging and compassionate with the clients.*
   - *The way the counselor handled the client.*
   - *Quick intake, the work that was done.*
   - *The work that was done, client completed treatment.*
   - *Quick intake.*
   - *Detailed case management, follow up.*
   - *Contact from counselor.*
   - *The way Chrystal handled the intake with all the complications there were.*
   - *Once the client completed the bloodwork the intake process was quick and efficient.*
   - *Everything from the program to the staff, this is my go-to facility.*
   - *Appreciated working with Chrystal. Easy transition, weekly updates.*
   - *Was kept up to date by counselor on a weekly basis.*
   - *All ways.*
   - *Updates from counselor.*
   - *The way the entire process was handled.*

- *All the clients' needs were met.*
- *Weekly updates, great communication.*
- *Chrystal walked me through the intake process, regular updates from the counselor was great.*
- *Timely manner for admissions, compliance reports.*
- *Straight forward process, communication with admission staff.*
- *Worked with and held clients bed.*
- *Great communication through the whole intake process, weekly updates.*
- *Easy intake process, great communication.*
- *The work that is done in the program.*
- *Smooth intake process.*
- *Communication with counselor, professionalism.*
- *Allowed client to return, weekly updates.*
- *Great communication, great program.*
- *Weekly updates.*
- *Contact with counselor, the intense work that is done.*
- *The compassion and care from all the staff.*
- *Kept in contact regularly with updates on progress.*

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	**74%**	Consumes less than before treatment	**8%**
No change in use	**10%**	Unsure	**8%**

Referents and/or the Recovery Support Team reported having contact with or knowledge of 82% 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%**

All referents responded positively, which is consistent with most quarters.

6. What would you like to see added or changed to the NWITC program?
   - *Several referents would like to see more beds.*
   - *Medical and bloodwork requirements for admission.*
   - *No, nothing but positive feedback from clients.*
   - *If you had an open house, I would come. NWITC is the program I like the most.*
   - *To make appointments for aftercare when client doesn't enroll in recovery support services.*

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

   Question: *Why do you require certain lab work?*

   Answer: *Certain liver and kidney functions show up in the lab work which allows us to know better how to address the health needs of the patient.*