



NORTHWEST INDIAN TREATMENT CENTER

Quarter ending June 30, 2023

Dear Colleague,

The report for the Third quarter, FY2023 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.

Third quarter, FY2023, referents reported that 83% 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 84% of patients contacted were alcohol and drug free.

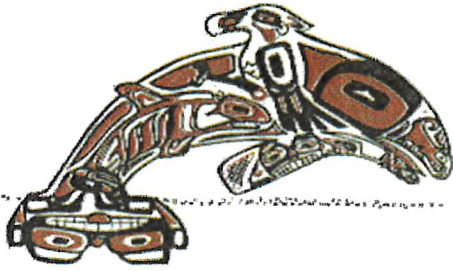
If you have any questions about our services or this report please call me.

Sincerely,

A handwritten signature in black ink, appearing to read 'Ofiialii Tovia'. The signature is fluid and cursive, with a long horizontal stroke extending to the right.

Ofiialii Tovia
Director

D3WX bi Pa lil



NORTHWEST INDIAN
TREATMENT CENTER

Residential Program Third Quarter ~ FY 2023



Statistics



Efficiency & Access Report



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

Ofiialii Tovia, Director



Northwest Indian Treatment Center

Statistics

FY 2023 - Third Quarter

Referents	No. Pts	Statistics by Discharge Date*			
Barth & Associates	2	Patient Days			
Cascade Behavioral Hospital	1	Total Patients		56	
Catholic Community Services	1	Total Days		1802	
Cedar Grove Counseling	1	Average Stay		32 days	
Colville A & D	3				
Cowlitz Indian Tribe	1				
Klallam Counseling Services	2				
Lummi Counseling	7				
Makah Recovery	2				
Marimn Health/ Benawah Medical	3				
Medicine Wheel Recovery	1				
Merit Resources	2				
NARA	1				
Nisqually SUD	2				
Nooksack Tribe Genesis II	1				
Olympic Peninsula Community Clinic	1				
Palouse River Counseling Center	1				
Pioneer Human Services	1				
Providence Drug & Alcohol	1				
Puyallup Tribal Health	1				
Quileute Counseling	1				
Quinault CD Program	4				
Quinault Indian Nation Wellness	1				
SeaMar	1				
Seattle Indian Health Board	1				
Spokane Addiction Recovery Center	2				
Squaxin Behavioral Health	1				
Suquamish Tribal Wellness Program	1				
Stages of Change	1				
Tulalip Family Services	3				
Vashon Youth & Family Services	1				
Yakama Nation Tiinawit Program	3				
Total Admissions		55			
Referent Type					
	Tribal	21			
	Other	11			
Total Referents		32			
		Gender			
		Male		36	
		Female		20	
		Total Patients		56	
		Completed Treatment			
		Left Against Staff Advice / Aborted	Disciplinary Discharge - Non-Compliance	Med. & Emer. Leave	Other
		Males - 20 (36% of all pts)	Males - 5 (9%)	Males - 0 (0%)	Males 1 (1%) Males 0 (0%)
		Females- 12 (21% of all pts)	Females - 2 (3%)	Females - 0 (0%)	Females 0 (0%) Females 1 (1%)
		Total - 32 Pts.	Total - 7 Pts.	Total - 0 Pts.	Total - 2 Pts.
		58% of all pts.	12%	0%	3%
		Third Party Payers			
		ABP		44	
		TANF		7	
		Tribal PO		2	
		Expansion		1	
		Benefit Bed		1	
		Total Third Party Payers		55	

Northwest Indian Treatment Center

PO Box 477, Elma, Washington 98541

Efficiency and Access Report FY2023 Third 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. Medical necessity for residential treatment at ASAM level 3.5 is determined by a review of the referral packet.

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 persons served 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 Medicaid, or have another payer, or, if available and meeting eligibility requirements, access the benefit bed. Out of State referrals must have a payer, including for medical care and medications. 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 to stay abreast of the current status of the referred individual. 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. This helps NWITC achieve a balanced budget by maximizing the revenue in relation to each admission. Having a payer other than only I.H.S. provides more easily accessible medical coverage for patients, which helps NWITC respond to health care needs.

April, May, June FY 2023

Efficiency: Here is the payer mix:

ABP	44
TANF	7
Tribal PO	2
Expansion	1
Benefit Bed	1

Fifty-six patients were admitted during this quarter. The number of patients admitted this quarter have gone up by the increase of the patient census.

NWITC continues to be vigilant in ensuring safety for staff and patients. NWITC screens admissions for risk factors and each patient is tested prior to admission by the nurse. Patients presenting symptoms onsite are quarantined and tested for COVID-19, which may extend their treatment stay. This quarter the mask requirement is optional. We are carefully monitoring revenue, expenses and the needs of the organization.

The cost-based rate package sent by the State of Washington to CMS has been approved retroactive from September 12, 2020. Annual adjustments are determined based on a percentage change to the IHS inpatient hospital per diem rate published in the federal register. The cost-based rate supports all of the functions needed to provide patient care, recovery support services and cultural activities.

The intensive transition care provided by the OVW grants and the new IHS Substance Abuse Prevention Treatment and Aftercare (SAPTA) grant help sustain referrals and enhance quality of care. The recovery support team works with patients to identify aftercare needs, develop safety plans, arrange transportation and develop linkages with aftercare providers and housing resources. They help patients manage their legal problems, and assist with the requirements for the return of children from foster care. 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 extend treatment outside the walls and across several state areas.

This quarter there were two on-site Native Plant/DBT trainings held for staff members.

Access: Patients who were admitted waited an average of zero days. This is the same as last quarter. The wait period is within our target, which is under 20 days.

Denied Access: Thirteen patients were denied admission, six had mental health symptoms that were too acute; two were recommended to behavioral modification; four were too medically acute; one was inappropriate for this setting.

There is seldom dissatisfaction identified by referral sources and from patients as indicated on satisfaction questionnaires. Suggestions are usually integrated into practices. Referents inform the Recovery Support Team that they are very pleased with the rich resources available to patients after discharge.

Summary: The revenue for this third quarter of FY2023 appears to hold in lieu of the approved cost-based rate. Access to treatment is improved and satisfaction is still high.

Northwest Indian Treatment Center

Self-evaluating Progress Report

FY 2023, Third 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 ninety-two 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	20	0	20	0	60	0	20	0	0	0
2	40	60	60	80	20	20	60	80	20	20
3	40	40	40	40	40	40	40	40	60	60
4	0	40	0	20	0	0	0	0	0	40
5	60	40	40	40	40	80	0	0	0	0
6	20	80	40	80	20	80	40	80	20	40
7	20	80	60	20	20	20	20	60	60	0
8	40	60	20	60	40	60	80	80	20	20
9	0	20	20	20	0	0	20	0	20	20
10	60	80	20	80	0	0	60	80	60	0
11	60	0	60	80	40	20	40	60	40	0
12	20	60	40	60	0	0	40	20	0	0
13	0	0	20	40	40	40	0	0	20	40
14	80	0	80	20	20	60	60	20	20	40
15	40	20	40	0	40	20	20	0	20	0
16	60	20	20	40	20	40	20	40	0	0
17	100	0	100	40	20	40	40	20	60	100
18	20	40	20	40	40	40	0	40	40	40

19	100	0	100	0	100	0	100	0	100	0	100	0
20	60	20	40	40	20	40	20	40	40	60	20	40
21	40	20	40	40	20	0	20	0	40	0	40	20
22	80	0	60	20	0	0	0	0	80	0	80	0
23	100	0	100	0	100	0	100	0	100	0	100	0
24	60	20	60	0	40	0	40	0	40	0	60	0
25	60	0	60	0	20	40	20	40	40	0	60	0
26	20	40	80	0	80	0	80	0	80	0	60	0
27	80	0	20	80	20	40	20	40	60	100	60	100
28	60	80	20	60	20	80	20	80	20	0	80	0
29	20	80	80	0	60	0	60	0	60	0	80	0
30	20	0	60	0	20	0	20	0	40	0	40	0
31	80	0	80	0	80	0	80	0	20	0	40	0
32	20	40	40	80	20	40	20	40	80	0	80	0
33	20	60	20	80	80	0	80	0	60	0	20	40
34	80	0	60	80	60	80	60	80	20	0	80	0
35	80	0	60	80	60	80	60	80	60	80	60	100
36	20	60	20	80	40	80	40	80	60	100	20	40
37	60	0	60	80	80	100	80	100	100	0	60	80

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.)

5	I was very comfortable and felt welcomed upon first getting here.	No Complaints.
6	They have helped me a lot with my trauma and addiction	Understanding trauma-based addiction.
7	I'm getting what I need and doing good step work.	I am satisfied with all the staff and how they all helped out in a certain way.
8	I'm satisfied with the work I've done here around setting boundaries and sticking to them.	I've learned skills to help me with my sobriety.
9	Dealing with my addiction and past trauma.	I learned the tools to heal from my trauma and the staff was a lot of help.
10	I am satisfied with everything and glad to get days of sobriety.	It was a long road getting here but I made it thankfully.
11	Everything.	I feel like I gained all the tools to keep moving forward in my recovery.
12	The food is good, good counselors and groups.	I am grateful that this center puts a lot of focus into the psychological aspect of addiction.
13	Everything.	Wrap around care and addressing my challenges made a significant change in my thought process.
14	The DBT skills I'm learning.	Counselors, staff, peers & recovery support.
15	I believe that I will stay sober and clean, because they made it easy for me to focus on my work and treatment.	The brothers here and I appreciate all the staff & counselors work hard.
16	Staff is very nice, respectful & easy to talk to.	Lectures and group.
17	The support & advice staff and TA's give to everyone.	Learning about my trauma.
18	I am learning and very much treated with the care I need to move forward.	The stuff they taught really helps.
19	Positivity.	Learning the tools so I don't relapse.
20	It is a breath of fresh air to come to a treatment center that puts forth a lot of effort on dealing with trauma.	Learning new skills for my long-term sobriety.
21	Everything.	That I am in a safe place, with counselor's that I know care about me.
22	I am grateful, the family atmosphere, safety of house & the in-depth approach to my treatment.	Good bros.
23	From the cooks, staff & TA's to counselors.	How the counselors meet you where you at, not made to feel less than.
24	The food is great and everyone who works here is nice.	The counselors and recovery support are really understanding.

25	Good healing process.	I got everything that was keeping me using off my chest. Thank you.
26	I came ready, working on my childhood trauma, loved my counselor & 98% of the staff are great.	Being able to leave my problems behind and I am a better dad, son, brother and uncle.
27	I am almost halfway, but I'm finally understanding why my drug addiction was such a difficulty.	Got to root of my issues so I could be whole again.
28	Lectures.	Appreciate how welcome I felt when I arrived.
29	Learning my culture.	Learned a lot about myself.
30	I have learned how to control my temper. I keep telling myself how would you like to be mean talk too and it's helping me.	I enjoyed getting back to my culture.
31	The cultural aspect is helping me out, the skills they teach really help too.	Love the cultural classes.
32	Working with my counselor and everyone made it very good.	Got to work on past traumas so I don't relapse.
33	The teachings.	Kia's class brought me back to my Indian.
34	I'm feeling great. I am treated with respect and I feel staff really do care.	Everyone was so helpful in me reaching my full potential.
35	It's only 45 days, a blink of an eye.	Staff was helpful & respectful.
36	Time to detox, time for independent study of AA literature.	Food was good.
37		

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

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

<u>Pt.#</u>	<u>Mid-Treatment</u>	<u>Discharge</u>
1	I'd like more one on one time.	Miscommunication sometimes.
2	When we have lecture on a subject for an hour and half then group piggy back on same subject you run out of things to talk about.	N/A.
3	Lack of set time for physical activity.	N/A.
4	High school drama with other ladies.	N/A.
5	N/A.	I'm not unsatisfied with my treatment, just a little bummed out at how I was treated by one staff member.

6	Being treated badly by some TA's.	N/A.
7	N/A.	Sometimes the TA's would treat us like kids and yell at us when they could just come over and talk to us like adults.
8	N/A.	N/A.
9	No Complaints. I learned how to effectively deal with my past trauma & pain and to finally find forgiveness.	N/A.
10	N/A.	N/A.
11	N/A.	Sitting in group.
12	N/A.	Communication issues.
13	N/A.	Masks.
14	N/A.	N/A.
15	Just some the rules are dramatic.	Some of the females make me upset, but I focus on my recovery.
16	Slow transition back to normal from COVID.	My daily routines, exercising, affirmations.
17	Just some the rules are dramatic.	N/A.
18	Slow transition back to normal from COVID.	Need more native storytelling.
19	Would like more free time, able to watch movies.	I wish I could run more or go to the ocean.
20	Only when I get inside my own head due to family loss.	N/A.
21	It seemed longer than it should be.	N/A.
22	I am half through and I do not have a plan as to where I am going afterwards. I need help with this.	Seriously need a yoga class.
23	Levi not showing up for sweat.	Cold waffles, rooms are to hot, laundry facilities need updated.
24	Sometimes I get home sick for no good reason.	Sometimes when I ask a question they direct me to someone else then they direct me back.
25	N/A.	N/A.

26	Some of the nit picking.	Work out room.
27	N/A.	N/A.
28	N/A.	N/A.
29	N/A.	N/A.
30	N/A.	N/A.
31	We can't watch powwow dancing.	Not being able to listen to the radio.
32	Being treated as a kid sometimes.	N/A.
33	N/A.	N/A.
34	The masks suck & I miss visitation.	More zoom visits.
35	Should be more zoom visits.	Go to outside meetings.
36	I feel that some of the staff had unrealistic expectations my 1 st week here.	Exercise room.
37	I feel like I could have been worked with more.	Communication.

Dissatisfaction was centered around visitation, behaviors and temporarily discontinued activities due to COVID-19.

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

<u>Pt. #</u>	<u>Mid-Treatment</u>	<u>Discharge</u>
1	N/A.	N/A.
2	An exercise programs.	An indoor fitness option for free time. Earlier start time on movies since we can't watch tv during the week.
3	A time slotted for all patient's physical activity.	More beading time.
4	Overall pretty good so far.	Possible visits with family.
5	I don't like that we are able to conversate with everyone male & female. I also don't get why we can have caffeine in our coffee, but not are soda.	More hands-on activity.
6	More store & ATM runs.	More phone calls throughout the week.
7	Nothing.	A new microwave.
8	There should definitely be programs on the weekends, there would be a lot less drama.	Having a little longer break.

9	A locked suggestion boxes.	Recovery literature for the empty bookshelves.
10	I would like it if we could get off all the COVID restrictions.	That there is no space or equipment to workout.
11	Weight room.	To be able to stop at the store when we are on are walks.
12	Walks on weekends &	Suggestion box.
13	N/A	Parenting classes for people trying to get their kids back.
14	Free cigarettes.	Walks on the weekends.
15	Add a weight room, more activities we do as a group.	More cultural influences such as historic trauma and how to do a family tree.
16	N/A.	N/A.
17	Movies every night, a gym to workout in & be able to listen to any radio stations while working.	Another orange juice during the day.
18	N/A.	Better chores.
19	Nothing, it is your program.	Naps on the weekend.
20	It would be nice if we could all be at someone's graduation male or female. The separation of the sexes does not seem natural.	Maybe split sweat day to men & women on Sundays.
21	Visits.	More outing's, job source, stuff to help further in people's recovery.
22	The masks.	A warm up & stretch exercise.
23	The program is excellent.	N/A.
24	I can't really think of anything.	N/A.
25	So far pretty good program.	Nothing honestly.
26	Work outs, yoga, more walks.	More medicine & tea making.
27	The face masks.	Earn TV time during the week.
28	Go fishing.	Native movies or teach dance class.
29	Have people write a timeline or bio paper.	Field trips.
30	I love everything you learn here, don't want to see any change.	Everything good.

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

Treatment Follow-up Report FY2023 - Third Quarter

The following report represents the results of the telephone interviews with fifty-four percent of the total patients admitted during the second quarter. Survey results are printed in bold type.

1. Are you still clean and sober?

84% Yes **16%** No

The number of alumni reporting they are maintaining sobriety is slightly lower than last quarter.

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

75% Yes **25%** No

- **Going to meetings instead.**
- **Found aftercare in Portland.**
- **Three alumni did not attend aftercare due to working.**
- **Relapsed.**
- **Going to another treatment.**

The number of alumni reporting that they have already seen their aftercare provider is a little higher than last quarter.

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

84% Yes **16%**

- **Detox**
- **To come back**

The percentage of alumni who felt their sobriety to be stable is lower than last quarter.

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

84% Yes **16%** No

- **Housing and treatment center information.**

The percentage of alumni receiving the services they need is a little less than quarter.

5. Was your treatment with us satisfactory?

96% Yes **4%** No

Alumni were satisfied with their treatment with the exception of one who was discharged from treatment early.

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

- **Need help to find good meetings.**
- **Oxford and treatment information in a different state.**

7. What referrals were made during the interview today?
- **NA/AA meetings in the area were given.**
 - **Oxford housing and contact information given.**

Comments from clients:

- **Client reports living in oxford.**
- **Thank you NWITC for all the support.**
- **Client reports doing amazing.**
- **Client reports moving into their own apartment.**
- **Client reports still clean and doing well.**
- **Thanks for relocating me.**
- **Back in Jail.**

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Referring Agencies Report FY2023, Third 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 percent of second quarter patients.

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

A. Easily understood	96%	B. Easy to comply with	4%
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%
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All responses are positive, which is consistent with most quarters.

3. Were you satisfied Yes 100% No 0%

In what ways were you satisfied?

- *Paperwork for admissions is pretty self-explanatory which makes the process simpler.*
- *Client said his recovery support person went above and beyond for him.*
- *Chrystal was really helpful with the process.*
- *The professionalism of the staff.*
- *Everyone at NWITC is a joy to work with.*
- *Self-explanative intake forms.*
- *I love how she came back a different person. I love your program.*
- *First time ever sending someone to your facility. It was a breath of fresh air.*
- *The client was able to come back.*
- *Chrystal was super helpful.*
- *I love working with all the NWITC staff.*
- *The way you worked with him over the loss of his son.*
- *He was able to come back to finish treatment.*
- *It was nice to see the patient come home with all the tools she learned.*
- *Chrystal is a gem to work with.*
- *Friendly and responsive.*
- *The counselor did a good job with the client.*
- *That the client was able to come straight from jail.*
- *The intake process was smooth.*
- *Quick intake, you got her in fast but she just wasn't ready.*

- The attention she received from you after medical discharge coordinating with the hospital and getting his belongings for him.
- Chrystal is always on top of things.
- Good contact with the counselor.
- The client was able to come back.
- Intake process was really smooth.
- Staff is easy to work with.
- Chrystal is always so helpful with the intake process.
- Good communication with the counselor.
- Great staff.
- Intake was easy.
- I love working with you guys.
- Easy intake process, Chrystal is so helpful.
- Chrystal is awesome.
- I have been working with NWITC for twenty years. It's my first choice to send my people. I have nothing but good things to say.

All referents were satisfied in general and especially with the intake staff, communication 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	16%
No change in use	0%	Unsure	0%

Referents and/or the Recovery Support Team reported having contact with or knowledge of 84% 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?

There were no changes requested this quarter.

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

There were no questions addressed this quarter.