

D3WX bi Pa lil



NORTHWEST INDIAN
TREATMENT CENTER

Residential Program First 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

PO Box 477, Elma, Washington 98541

Efficiency and Access Report

FY2023 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. 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.

October, November, December FY 2023

Efficiency: Here is the payer mix:

ABP	30
TANF	6
Tribal PO	3

Thirty-nine patients were admitted during this quarter. The number of patients admitted each quarter is usually fifty plus. Due to COVID-19 the census is lower to maintain social distancing between patients.

NWITC continues to be vigilant in ensuring safety for staff and patients. Since the COVID-19 pandemic additional safety procedures and safety equipment have been updated. 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. All staff and patients are required to wear masks. 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 after care 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. The COVID-19 grant awarded through OVW allows for support care packages and other supplies and services to be delivered to alumni who qualify under the DV grant.

Most in-person travel and training activities are still restricted due to COVID-19. This quarter there were no on-site trainings held.

Access: Patients who were admitted waited an average of zero day. This is the lower than last quarter. The wait period is within our target, which is under 20 days. One patient waited seven days due to bed availability.

Denied Access: 13 patients were denied admission due to inappropriateness in this setting. Each was referred to another setting.

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

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

Northwest Indian Treatment Center

PO Box 477, Elma, Washington 98541

Patients' Input Report FY2023 – First Quarter

Patients are surveyed at mid-treatment and again at discharge. The following comparison represents ninety-six 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:

93% Easily understood **7%** Confusing

All patients except two found the process easily understood.

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

100% Yes **0%** No

All patients felt they were treated respectfully.

3. Are you satisfied with your overall treatment stay?

100% Yes **0%** No

All patients were satisfied with their overall treatment stay.

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

<u>Pt. #</u>	<u>Mid-Treatment</u>	<u>Discharge</u>
2	Very welcoming.	I was made aware of some of the issues I carry.
3	The skills that they teach us.	With the skills: FAST, STOP, Dearman, opposite action, breaking cycles, inner child and relapse prevention.
4	All of the information taught is showing me what I need to work on and how-to live-in peace.	I understand why and how I was feeling all of these years. I now have tools to make positive changes.
5	The fact that this is a tribal treatment center and the counselors and TA's actually care for us.	The fact that I'm sober now and have a new outlook on life.

6	I really enjoyed the plant medicine lessons. I got a lot out of lectures and groups; the counselors really do care. I'm thankful for my time spent here. The cooks are always kind and smiling, happy food, happy people.	With everything: the groups, lectures, food, staff, crafts and garden.
7	I like the program and how they focus on trauma.	I like how the program focuses on trauma. I've had a lot of trauma in my life.
8	I love how it's based on native culture: sweats, drumming and singing.	The culture, the staff, I feel like my counselor actually cares. I learned about myself.
9	Understanding past trauma.	Native based.
10	Getting stabilization with grief and loss.	DBT skills, the STOP skill is most important to me.
11	I have never worked so hard on myself. I have learned more the last two weeks than I have the entire time I was at both previous treatments.	I have picked up that little girl stuck on that dirt road for so many years. I have forgiven my mother which I never thought would happen. I have learned so many DBT skills and tools for my entire life and recovery.
12	I am picking up skills I didn't have.	Learning new DBT skills and learning to recognize social and emotional skills.
13	Staff is friendly and answers any questions I may have. All staff at NWITC is respectful as well.	Above and beyond. This is my first go-round. I absolutely got the best of both worlds and had two of the best counselors, Brock and Sonja, all the other counselors were great as well. Recovery support was great coordinating resources for when I graduate.
14	I love one on ones with my counselor. I'm learning a lot about addiction and feeling great about being sober.	I learned a lot from the classes. The counselors are helpful. I can actually feel the change within me.
15	Feel welcomed and safe, learning a lot.	Great food, comfortable atmosphere, very good trauma-based recovery, great cultural experience.
16	I get great support from staff and peers.	I like the way staff treats us.
17	The guys here are awesome, easy to talk to. Staff are awesome folks too.	Learning about myself and how to love myself again. Also being able to appreciate native culture: making drums, medallions, cedar weaving.
18	Good structure, good staff, good variety of subjects, good native artwork classes.	Good counseling, a lot of good literature, good TA's, good schedule, respectful and helpful.
19	Learning good emotion skills.	I feel much more confident in my recovery.

20	I am learning new and different skills than other previous treatment settings and I am processing more deeply than before.	Learning some new skills applicable to my emotion regulation issues.
21	Sweat lodge.	I have more tools and skills for the outside world.
22	Everything.	I like the way the classes are taught, other treatments I was at were boring.
23	Pretty intense.	I'm more focused on my recovery.
24	Was greeted by staff with open hands. Work is hard but very meaningful and greatly needed.	Helping me understand my feelings and how to filter them.

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>
2	People forget that we are "all" healing.	N/A
3	Not enough down time.	The rules can be pretty strict.
4	My family is a big part of my life so only getting 2 phone calls per week is not cool with me.	Not enough contact with family.
5	Just the COVID rules that affect visits, but it is what it is.	N/A
6	With the plastic chairs in the lecture room.	N/A
7	I don't like the fact that you don't take that much of a break on weekends after your program all week.	I don't like how you're not allowed to relax a little in your room. It's good to have a break longer than 20 minutes.
8	N/A	The way some of the staff talk to us sometimes.
10	Not being able to watch TV every night.	Not being able to watch TV every day after 8:00 pm.
11	The drama between the ladies is a distraction.	45 days isn't long enough, but treatment can only take us so far. This is literally like boot camp and the real work begins when we are finished with treatment.

14	The smart remarks, the attitudes from some people, the unprofessionalism of some staff, being treated like an inmate rather than a human.	Too many rules and not everyone on the same page about them. People being disruptive during class.
15	N/A	Not enough physical exercise.
16	Having to wear masks.	I don't like the masks.
17	I wish I could read my own books, but rules are rules.	Not being able to read our own books or interact with the ladies.
19	Not going to the Squaxin meeting.	Doing Shirley's class with zoom.
20	Some of the inconsistencies of information and explanations of orientation.	I feel that some of the counselors need further education and training on PTSD with SUD.
21	That the property is small and we can't even talk to the females.	That we can only have sweat once per week and the big drum is always asleep.
24	Too many classes, not enough phone time.	At times overwhelming with learning things but I fought through to make it better.

Dissatisfaction was centered around phone time, exercise equipment and temporarily discontinued activities due to COVID-19. Sweat lodge has resumed.

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

<u>Pt. #</u>	<u>Mid-Treatment</u>	<u>Discharge</u>
2	The amount of time we are here seems to short for the number of things we are learning.	More one on one time with counselor. The days are long and hard, have a half a day off to recharge.
3	More sweat lodge, more one on ones.	To add what makes people relapse the most and why they leave treatment.
4	More sweat lodge and to not get in trouble for saying "excuse me" to a female patient.	More phone calls.
5	To have the COVID rules changed and visits restored.	More native foods such as crab, salmon, elk and buffalo.
6	More time in the garden harvesting and gardening. Have cushions for chairs.	Updated items list.
7	Get a little more time on the weekends to recoup from long weekdays.	Buy cigarettes from the Tribe where they are cheaper instead of the gas station.
8	Bring back outside meetings.	I would love to have Levi come more to teach us songs.

10	Be able to watch TV every night after 8:00 pm.	Be able to watch TV every night after 8:00 pm.
11	More water pressure.	N/A
13	Parenting program, more physical activities, yoga, more hands-on activities with instructor present, GED program.	Parenting program, GED program, the 6 th week not be a repeat week. More in-person speakers, job search and resume building program. Hair/nail salon on-site.
14	Less free time, more hands-on group activities, more eating areas and updated educational videos.	More inspirational videos, more TA's need to be present. More one on one time with counselor.
15	More variety of food, be able to listen to regular music one day per week, bring the round drum back in.	Exercise equipment of some sort, bring back visitors and passes, more phone calls.
16	N/A	To not wear masks.
17	Get rid of the masks, extend the caffeinated coffee to noon. Perhaps two drop offs but having a wait period in between and books.	I would like to see a second drop off and the option to read our own books.
19	To have educational lectures with the men again.	Patients should get a sweatshirt or t-shirt.
20	Better technical instructions on arts and crafts projects and more coed classes.	More integrated cultural information. More time with Kia.
21	More interaction with the opposite sex.	Sweat more than once per week. Have a larger area to walk and a larger selection of food.
23	Family visits. More variety of food.	N/A
24	Native ceremonies, changing of seasons, more drumming.	More phone calls.

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

<u>Pt. #</u>	<u>Mid-Treatment</u>	<u>Discharge</u>
10	I have issues with waking up super early.	N/A
11	N/A	I feel like sometimes, especially on the weekends, the TA's are not on the same page as to what we are doing.

14	I wish the ladies would treat each other better, the girls have made my time unenjoyable.	The woman's Wellbriety book is missing a page, the men can get loud and disruptive during our classes.
17	I'm concerned about gaining weight.	N/A
20	More impressionable addressment for those coming in with higher PTSD and mental health.	Lack of dietary consideration for pregnant patients and complete unresponsiveness or action for filed grievances.
21	There should be awesome meals after sweat lodge.	N/A.

8. 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.

**N/A represents patients who did not have a comment on that question.*

Additional Comments:

- I love my counselor.
- All staff and kitchen are so awesome.
- This is a very organized, culturally-based treatment center that covers a lot of readings, teachings and group therapy. The counselors are awesome.
- NWITC was great, I highly recommend to anyone needing treatment and guidance on their recovery.

Northwest Indian Treatment Center

Self-evaluating Progress Report

FY 2023, 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 ninety-two 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
2	20	0	20	0	0	0	0	20	20	20
3	40	40	20	40	40	0	40	0	20	0
4	40	0	60	0	60	-40	40	0	0	0
5	40	0	0	0	0	0	0	0	0	0
6	20	40	40	20	0	60	0	40	20	20
7	0	20	0	0	-20	40	20	0	0	20
8	40	0	60	20	20	20	20	0	40	0
9	20	0	20	20	0	0	0	0	20	0
10	40	20	20	60	0	100	0	0	0	0
11	40	20	40	20	20	20	20	30	20	20
12	40	40	0	20	40	20	40	40	0	40
13	40	20	20	20	20	20	20	20	20	20
14	40	40	60	40	20	40	80	0	40	20
15	40	20	60	20	20	0	0	20	40	20
16	0	20	0	20	20	0	0	20	0	20
17	60	0	20	20	20	20	20	20	0	0
18	20	20	20	20	20	20	0	40	20	20
19	20	20	20	0	20	20	20	20	40	0

20	0	20	40	20	40	20	0	0	40	40
21	0	20	0	0	0	0	0	0	0	0
23	0	0	0	0	0	100	0	0	0	0
24	40	0	20	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

Treatment Follow-up Report

FY2023 - First Quarter

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

1. Are you still clean and sober?

90% Yes **10%** No

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

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

68% Yes	32% No
<ul style="list-style-type: none">• Trying to schedule a new appointment.• Went to another treatment center.• Moved.• Busy with family and court.	<ul style="list-style-type: none">• Going to do jail time.• Working.• Taking care of medical issues.• Doesn't want to.

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

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

87% Yes **13%** No

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?

94% Yes **6%** No

The percentage of alumni receiving the services they need is about the same as recent quarters.

5. Was your treatment with us satisfactory?

100% Yes **0%** No

Alumni were satisfied with their treatment.

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

- There were no follow-up or referrals requested this quarter.

7. What referrals were made during the interview today?

- There were no referrals made this quarter.

Comments from clients:

- Several patients report doing well.
- Client reports they loved NWITC.
- Client reports, thank you NWITC staff for everything.
- Client report, I am so grateful for everyone at NWITC.
- Client reports, I didn't complete treatment but I am still clean and sober.
- Client reports, thank you NWITC for always being there for me.
- Client reports, still clean and sober, thank you NWITC.
- Client reports, still clean and doing great.

Northwest Indian Treatment Center

PO Box 477, Elma, Washington 98541

Referring Agencies Report FY2023, 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-two percent of first quarter patients.

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

A. Easily understood	100%	B. Easy to comply with	11%
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. Were you satisfied Yes **100%** No **0%**

In what ways were you satisfied?

- *Several referents responded they were satisfied in all ways.*
- *Love working with NWITC for my clients.*
- *Let the client come back after being kicked out for behaviors.*
- *Always willing to work with me.*
- *Brandy did really well with her.*
- *One on one care.*
- *Easy intake process.*
- *With the service of care.*
- *Continuous contact from counselors.*
- *Good experience with staff, and the client was able to come back.*
- *Chrystol was very welcoming. This was my first referral.*
- *Your facility goes above and beyond for the clients.*
- *Weekly counselor contact.*
- *Intake worked well with the client to get him in.*
- *Good communication with staff.*
- *Always love working with you guys, love the program.*
- *Client spoke well of your program and the structure.*
- *Weekly check-ins, quick intake process.*
- *Chrystol is a miracle worker.*

- Love your program.
- Good communication with the counselor, got the client in quickly.
- Quick intake.
- Staff did well addressing client issues.
- Chrystol was very helpful with the process.
- Great staff, and you let the client come back.
- Love working with NWITC.
- Intake is very helpful with the admission process.
- Communication with staff.

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	92%	Consumes less than before treatment	4%
No change in use	0%	Unsure	4%

Referents and/or the Recovery Support Team reported having contact with or knowledge of 96% 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?

There were no changes requested this quarter.

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

There were no questions this quarter.