

CENTRAL STATE HOSPITAL
RECOVERY TRANSFORMATION
2012 PLAN UPDATE

In 2012, Recovery transformation efforts will continue at Central State Hospital. In March of 2012, all individuals in both the Civil and Maximum Security Programs were given the opportunity to complete the Recovery Surveys. The following outlines the results of the completed surveys.

Resident choice section Overall we showed improvement in **5 out of the 9 questions** (improvement means movement towards the patient's feelings that "I shared or I decide") Questions 3, 4, 7, 8 & 9 showed improvement overall from last year. Question 5 & 6 stayed the same with slight decrease in the Civil Program balancing out the slight improvement in Maximum Security Programs. Minor slippage occurred in civil patient's responses to question 1 & 2; however it only made very minor changes in the overall hospital wide results for these questions. Areas that the patients gave the highest ratings and feel that they have the ability to decide is: what to wear, what classes I take at the treatment mall, where I will go when I leave the hospital and what time I go to sleep and wake up.

ROSI section Overall a slight improvement was demonstrated in 9 out of the 12 questions (Questions 3,4,6,9,11,12). Questions 5, 7 & 8 are questions that reflect negative behaviors so that rating should move toward disagree/ strongly disagree. In all three areas the overall rating show movement toward disagree/strongly disagree which results in a positive response. Questions 1 & 10 overall rating remained about the same with question 10 having improvement in the Civil Program responses with the same amount of decrease in the Maximum Security Programs responses resulting in the overall rating remaining unchanged. The opposite occurred in question 5 having the Maximum Security Programs responses indicating a slightly improvement and the Civil Program moved toward not improving, resulting in no change overall. Questions 2, (Most staff at this hospital see me as an equal partner in my treatment) overall demonstrated an overall decrease as a result of the decrease in both Civil and Maximum Security.

Opinion of Care In this section 4 out of the 8 questions demonstrated improvement in patient's responses, these questions included 1,2,4,5. Questions 6 overall remained the same with the decrease in the Civil Program balancing out the increase in Maximum Security. Questions 3, 7 & 8 showed a decrease in agreement from both sides as well as an overall decrease. These questions included: Have you and the Treatment team had a discussion about what it will take

for you to be able to leave the hospital, Do you feel the rules about your level are fair and fairly administered, do you feel safe at this hospital.

It should be noted that overall in the state that questions 2,4,5,6,7 & 8 were the ones that all facilities reported as problem areas from last year surveys. Of these areas CSH has demonstrated improvement in 3 of these areas 2, 4, and 5 and in area 6 has remained the same.

The 3 questions that we were tracking in our Recovery report questions 4, 5 & 6 shows improvement in questions 4 & 5 and questions 6 results remained the same.

CSH staff were given the opportunity to complete the Recovery Survey in April 2012 with a completion date of May 5, 2012. All CSH staff were encouraged to complete the survey and **382** were returned. The results indicated that 4 out of the 12 questions **staff responses indicated that they were in 100% agreement or strongly agreed with the recovery concept.** These were questions 1, 3, 4 and 9. However in Questions 11, People receiving psychiatric/substance abuse treatment are able to decide their own treatment and rehabilitation, received the most responses from staff that they disagree or strongly disagree with the statement. It should be noted however that approximately 60% or 225 out of the 382 staff responses indicated that they strongly agreed or agree with this statement while only approximately 100 responses disagreed and approximately 25 responses strongly disagreed with the statement. The remaining 7 questions had over 80% of the staff strongly agreeing/agreeing with the statements while less than 3 to 13% of the staff disagreed/strongly disagreed.

In addition to the Recovery Efforts measured by the surveys we also provide 3 scholarships for patients to complete WRAP trainer class as well as 1 scholarship for a patient to complete peer specialist training. Two of the patients have been discharged and are pursuing their goals in the community and the other two are pursuing their goals here at CSH.

As evident by the improvement in both the staff and patient’s survey results CSH has made steady progress towards it Recovery Transformation. We will continue to work on the following goals and monitor their progress through our yearly surveys.

	Goal	Strategy	Target Date	Responsible Staff
1	Hospital Leadership will maintain clear focus on	Recovery transformation with be discussed at least	Ongoing	Hospital CEO

	Recovery Transformation in all strategic planning efforts.	quarterly at leadership meeting.		
2	Members of the Leadership Team will be active participants and provide active support of all recovery efforts	Recovery transformation will be discussed at least quarterly at leadership meeting. Many of the Leadership Team Members participate in the Hospital Recovery Events	Ongoing	Hospital CEO
3	Hospital Staff and patients will be given the opportunities to give feedback regarding recovery efforts.	Employee Forum, Training programs, yearly surveys and newly developed Recovery Meetings will allow both staff and patients the opportunities to give feedback	Ongoing	Hospital CEO, Human Resource Director, Medical Director, Rehab Director
4	All CSH staff will have an awareness of recovery principles and efforts	Starting in Sept. 2012 Peer Support Specialist will be providing all new employees training on Recovery. Plans will be made to start training sessions provided by the peer support to all other CSH staff.	Ongoing	Patient Relation and Training Director, Rehab Director
5	Formal and informal peer support will be evident in the treatment process.	With the addition of the 2 peer specialists plans are being developed that include individual Recovery / home bound plans, continue with the WRAP training and classes and the development of new patient orientation session	Ongoing	Peer Specialist