

Central State Hospital Facility Recovery Plan

Progress Update

October 7, 2016

SENIOR LEADERSHIP

GOAL	STRATEGIES	MEASUREMENT	TARGET DATE	RESPONSIBLE PERSON	PROGRESS UPDATE
Ensure that all policies and procedures are recovery oriented	Update all policies with person-centered, recovery language. Update Ward Guidelines with person-centered, recovery language. Create a policy outlining the facility's commitment to a Recovery Oriented and Trauma Informed System of Care.	Review of policies, procedures, and ward guidelines by owners and/or approving committees.	Policies will be updated at the time of required renewal. Ward Guidelines across the facility will be updated by 01/01/17.	Policies will be updated by the owners. Ward Guidelines will be updated by the Director of Patient Relations & Recovery Initiatives.	CSH continues to update policies as they are renewed. Ward Guidelines for the civil programs were completed in August 2016. Maximum Security guidelines will be updated next. A policy was implemented in September 2016 outlining the facility's commitment to recovery and trauma-informed care.
Provide leadership for infusing recovery oriented care throughout the facility	Ensure the mission, vision and values are consistent with recovery oriented systems of care. Provide updates on recovery initiatives at Executive Board Updates.	Executive Board will revise the mission, vision and values. Quarterly Executive Board topics will include recovery updates.	Mission, Vision, and Values were updated in the spring of 2015. Executive Board Updates occur quarterly.	Executive Board	The mission, vision and values were updated in Spring of 2015 to reflect recovery oriented principles. The Executive Board Updates continue to provide information to staff regarding the facility's recovery initiatives.
Provide leadership for	Recovery Rounds will be	Recovery Rounds form	Monthly starting	Facility Director &	Staff have been

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progression of recovery oriented approaches to care	completed on each ward by leadership staff and an individual receiving services from each ward.	will be completed for each ward and data will be analyzed by the Quality Manager and Reviewed by the Recovery Committee and Quality Council. Percentage of recovery rounds completed on the units during a reporting period will be collected.	10/01/16	Assistant Director of Administration	informed of the purpose of Recovery Rounds, which are set to begin 10/01/16.
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WORKFORCE DEVELOPMENT

GOAL	STRATEGY	MEASUREMENT	TARGET DATE	RESPONSIBLE PERSON	PROGRESS UPDATE
Enhance staff's understanding and appreciation of recovery principles so that they may be implemented in daily activities	Implement a Recovery Ambassador Program throughout the facility. There will be required training for all staff, as well as the option to become a bronze, silver, gold or platinum ambassador.	Percentage of staff receiving Ambassadorship levels at each level, as well as patient perception of staff commitment to recovery as measured by the patient Satisfaction Survey.	02/01/17 for mandatory trainings. Ongoing for optional ambassador statuses.	Director of Staff Training & Development	In September 2016 staff were provided instructions for the Recovery Ambassador Program. Staff have already started to complete the mandatory training and many have already become a bronze or silver ambassador. Badges indicating status have already been provided, which further infuses the recovery

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					message throughout the facility.
Successfully integrate Peer Recovery Specialists	Hire two Peer Recovery Specialists. After hire begin educating staff of the role of Peer Recovery Specialists in the facility.	Date employment begins	10/15/15	Director of Patient Relations and Recovery Initiatives	Two Peer Recovery Specialists were hired in 2015 and since that time staff have received education on the role peers play in the recovery of the individuals receiving services. They also started facilitating training for new employees upon hire.

TREATMENT PLANNING & CLINICAL RECORD

GOAL	STRATEGY	MEASUREMENT	TARGET DATE	RESPONSIBLE PERSON	PROGRESS UPDATE
Ensure treatment plans reflect individuals' goals for treatment	Conduct treatment planning training for staff to provide education on how to incorporate the individuals' treatment goals	Collect data prior to the training, as well as after to measure for improvement. Target goal is 95% compliance.	01/01/17	Treatment Planning Committee	In May 2016 audits were completed and in June 2016 staff received treatment planning training. Post-Training audits have been completed and are currently being analyzed.
Ensure treatment planning forms support the implementation of recovery principles, to	Revise the Master Treatment Plan and Treatment Plan Review Form to highlight	Implementation date of revised forms	06/06/17	Clinical Leadership Committee and Treatment Planning Committee	Commitment to person-centered treatment planning was made a part of the facility's

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include personal choice and voice	strengths and personal goals toward recovery				strategic plan. After completion of all treatment planning training focused on quality, forms will be revised to assist team members with documenting personal goals and strengths
The treatment planning process will be guided by feedback received by individuals receiving services.	Individuals will complete a survey to identify areas in need of improvement with the treatment planning process. Adjustments will be made based upon feedback.	Surveys to be completed by Individuals both before and after interventions.	May 2016 May 2017	Clinical Director	Completed. Survey results were shared with treatment team members and incorporated into treatment planning training. Follow-up surveys will be provided and results analyzed for improvement.
The medical record will reflect personal choice and voice with crisis interventions.	Individualized Safety Plans and Trauma Assessments will be created and implemented	Staff and individual feedback; rates of seclusions and restraint	August 2016	Seclusion & Restraint Reduction Committee; Trauma-Informed Care Committee; Clinical Leadership Committee	A multi-disciplinary group developed the two assessments, which were implemented in August 2016. Data is currently being collected from individuals and staff to determine if revisions are necessary.

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RESIDENT ACTIVITIES AND OPPORTUNITIES

GOAL	STRATEGY	MEASUREMENT	TARGET DATE	RESPONSIBLE PERSON	PROGRESS UPDATE
Provide opportunities for individuals receiving services to contribute and grow from peers' paths toward recovery	Recovery Presentations will be provided by people in the community who are in recovery. Recovery Stories will be bound and made available in the dayrooms. Recovery Murals will be designed and created by individuals across the facility.	Recovery Presentations will occur at least quarterly. The Recovery Committee will review implementation on a monthly basis.	Started in September 2016 and ongoing	Recovery Committee	The first recovery presentation will occur in November 2016. Individuals have already submitted their Recovery Stories and the books are being bound. Individuals participated in a mural contest with winners already announced. Work is set to begin on putting up the murals.
Provide opportunities for individuals to have voice and choice in their recovery	Implement consistent community meetings across the facility that promote individual's choice and voice. Create Patient Advisory Councils.	Implementation date of community meetings and Patient Advisory Councils. Quality monitoring of community meetings via direct observation audits.	01/01/17	Clinical Leadership Committee	A Patient Advisory Council for the civil individuals was started in 2015, and Maximum Security's Council will begin next. Starting in September 2016 every ward offered at least weekly community meetings. In October 2016 staff will be provided with community meeting

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					outlines to begin working on quality.
Create active treatment opportunities that reflect individuals' preferences, and that is consistent with evidenced based care, in order to facilitate rapid and successful discharges	Develop an Employment Program	Monitor length of stay for individuals in the Employment Program, comparing them to average length of stay other individuals. Monitor re-hospitalization rate for individuals in the Employment Program and compare to re-hospitalization rate of individuals not in the program	Ongoing	Department of Patient Relations and Recovery Initiatives	The Employment Program was started in September 2015, with 25 individuals currently participating. Data is currently being analyzed to determine effectiveness on length of stay and re-hospitalization rate. Running programs were created in civil and maximum security to promote health and wellness.

RELATIONSHIP TO THE COMMUNITY

GOAL	STRATEGY	MEASUREMENT	TARGET DATE	RESPONSIBLE PERSON	PROGRESS UPDATE
Develop strong relationships with community partners to further facilitate the recovery of individuals receiving services	Identify and make connections with community partners that are willing to volunteer at the facility. Identify and make connections with community partners who will offer volunteer opportunities for	Increase the number of community partners to at least 20	06/01/17 and ongoing	Director of Patient Relations and Recovery Initiatives; Volunteer Coordinator	Over the past year we partnered with 11 organizations and received donations such as baseball tickets, gym memberships, symphony tickets, and Christmas gifts. Lucky Foot donated over 150 pairs of running shoes

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	<p>individuals. Identify and make connections with community partners who would be willing to support the individuals via donations.</p>				<p>to support the running program. In 2016, agriculture students from Virginia State University helped the individuals plant, maintain and harvest a garden. A partnership with local NA members was developed and they now offer weekly NA meetings on site. In August 2016 NAMI provided In Our Own Voice. Efforts are underway to develop volunteer opportunities for individuals in the community.</p>
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OTHER RELEVANT AREAS

GOAL	STRATEGY	MEASUREMENT	TARGET DATE	RESPONSIBLE PERSON	PROGRESS UPDATE
<p>The environment of care will support the facility's commitment to providing recovery oriented services</p>	<p>Revise signs so they are person centered and reflect recovery principles. Create calming rooms.</p>	<p>For environment of care, initial rounds will identify areas in need of improvement. Follow-up rounds will be completed to ensure interventions were successful. For calming</p>	<p>06/01/17</p>	<p>Trauma-Informed Care Committee and Recovery Committee</p>	<p>In 2015 the Trauma-Informed Care Committee completed environmental rounds and met with staff on recommended changes. Once changes are complete the</p>

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		rooms, frequency and quality of use will be measured by surveys individuals will be offered to complete at the end of every use.			committee will conduct follow-up rounds. Calming Room preparation started in February 2016 with individuals assisting in the process. Rooms have been identified and furniture and supplies ordered.
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