

ADHS Provider Response to SAMHSA Fidelity Review

Complete the following form in response to the SAMHSA fidelity review process conducted by ADHS behavioral health staff.

Date: January 2, 2015

Name and contact information of provider:

S.T.A.R. – Stand Together And Recover Centers, Inc. Suzanne Legander CEO
 2502 E Washington Street
 Phoenix, AZ 85034

Type of evidence-based practice provider (select one):

	Permanent Supportive Housing
	Supported Employment
XX	Consumer Operated Services
	Assertive Community Treatment

What was your experience with the fidelity review conducted at your agency?

The reviewers were friendly and spent as much time as desired by each group that they interviewed at STAR Central. My staff and I did not know what to expect during the interview so this was a good learning experience. We were not able to meet at the initially-scheduled times, which was frustrating to some members who had really wanted to participate in the review but had obligations that prevented them from staying for the full day. In the future we will ensure that people know to plan on remaining at the center for the full day if they wish to participate in the reviews.

What was most helpful about the fidelity review process for your agency?

Georgia and Karen (reviewers) were very friendly and made everyone feel comfortable throughout the process. It was great to see what a person from the outside can learn and observe about our Center in one day.

What suggestions would improve the review process?

I think it would be helpful to receive a written list of the questions that the reviewers would be asking. I had expected that the questions would be quoted directly from the SAMPHSA review tool, which they were not. This created some confusion and had some people eager to share something related to the review tool, but failing to do so since they were never asked about it. We also felt that there should have been an opportunity at the end of each interview for the participants to note anything that they wanted to share beyond what they had been specifically asked about.

I also think that the reviewers should have a recorder to help compile all of the verbal information that was shared. I felt that several details about our program did not end up in the final report. If the reviewers had a recording of the conversations, more of these details might have been added to the final report.

Comments from your agency regarding the findings of the review and/or the fidelity report:

S.T.A.R. is a peer run psychiatric recovery center and does not function as a “drop in center” or a clubhouse”, which the SAMHSA tool is best at measuring. This, and some areas where staff and members accidentally misrepresented what we do here, has slightly decreased our scores on the fidelity review. S.T.A.R. has worked for several years to consistently gather data on outcomes for our members and to ensure that members are getting the services they desire, as well as ensuring that S.T.A.R. is a responsible recipient of our tax payer and donors’ dollars. We regularly make changes to the program based on our member’s comments. S.T.A.R. requests all members to actively work on their recovery while at the center. Our members also request that people not just use S.T.A.R. as a soup kitchen and that they are given respect by being able to earn various benefits and donations through participation and good role modeling of recovery to each other.

Our outcomes data, gathered and analyzed by ASU Center for Applied Behavioral Health, shows “significant improvements of self-reported physical health ratings and mental health ratings, after participating in S.T.A.R. services at first follow-up. At the same time, there were significant reductions in behavioral health hospitalizations, problematic symptoms, and reports of using too much alcohol or drugs. S.T.A.R. members report high satisfaction across the following services: coping skills and symptom management, social and communication skills, health, wellness and physical activities, living skills, budgeting and meal planning” (pg. 19). Members have an overall 73% decrease in inpatient psychiatric hospitalization from intake to first follow up.

We are in support of many of the findings. It should be noted that this location just opened at the end of April and the interview occurred on October 6th. At the old location we could only serve a maximum of 18 people, with the average daily attendance of about 15 due to the small size of that facility. Since we moved to this beautiful new facility we have been growing significantly with new members. We were averaging in the mid-thirties each day when the review occurred. As a result of so many new members from such a small initial group we do not have as many peer leaders as one would expect with the size of the current location. However, we have many emerging peer leaders that are beginning to step up and provide guidance and support to their peers at the center. We have an active Member Council which is made up of elected representatives by the membership. Many changes and requests for special services and Center rules come from individuals to this council and are discussed and voted on, as needed, with all members at the monthly member meeting.

Some areas of correction:

Our Board of Directors has 6 peers, 1 family member and two community professionals (Attorney and Psychiatrist). This is less than 90% of persons with lived experience (pg. 2).

We have 72 employees and all but 3 are people with lived experience peers. The other two are family members (pg. 2).

Our Young Adult Program for 18-25 year olds is a very strong program with most of the members living independently or with family; only some come from the foster care system. We hope to serve more of the foster care transitioned youth as time goes on (pg. 3).

We first reach out by phone, and sometimes by card, to the member who has moved from attending on a consistent basis to no longer showing up. If we do not reach the missing member we ask other members if they have seen the person recently. Then we reach out to the clinical team to see if they have any information. It has been from these outreaches that we have discovered some people are now working, or are in the hospital, have moved, or on a few occasions sadly discovered the person has passed away. We do not do this in any punitive way, but rather to engage with the member who might be isolating at home and to coordinate with the clinical team - which is an expectation of our contract with the RBHA and certification with DBHS (pg. 4).

Our members regularly support each other and share ideas of what has worked for them in the past with each other. We will continue to work to build this more visibly within the center and to help empower our membership to offer assistance to each other (pg. 19).

Some areas of agreement

S.T.A.R. was already working on some classes to help members learn to tell or write their recovery stories. We also have the Job Skills Center opening in 2015, which will help with many of the employment skills and job readiness desires of our membership. We are also adding pictures of our staff with a recovery quote from them, as well as the Center peer leaders who help assist new members to feel comfortable at the Center and learn the day to day routines. S.T.A.R. will continue to develop more written curriculum and encourage staff and members to share their recovery stories.

S.T.A.R. is in the process of extending business hours into the evenings, based on the center having the additional staff hired and trained. We were not delaying the change for any reason. It is a resource and expense issue that took some time to make happen.

We bring members to meetings with the RBHA, state and to meet with legislators a few times a year so members can advocate for themselves. We will continue to grow these opportunities based on the desire of our membership. We are also working on changing signs to be more welcoming and encouraging of respecting of each other’s space.

In Conclusion

We at S.T.A.R. are very appreciative of the feedback we have received about S.T.A.R. Central and it has helped us to make some improvements. We look forward to a stronger review next year. We will make changes that support successful outcomes and focus on enhancing us as a peer recovery center while protecting the rights and confidentiality of our membership.