

**CONSUMER OPERATED SERVICES (COS)  
FIDELITY REPORT**

Date: July 31, 2015

To: Kristina Sabetta, Chief Executive Officer

From: T.J. Eggsware, BSW, MA, LAC  
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ADHS Fidelity Reviewers

**Method**

On July 6, 2015, T.J. Eggsware and Jeni Serrano completed a review of Center for Health Empowerment Education Employment Recovery Services (CHEEERS) - a Consumer Operated Services Program (COSP). This review is intended to provide specific feedback in the development of your agency's services, in an effort to improve the overall quality of behavioral health services in Maricopa County.

CHEEERS is a non-profit community service agency that has been helping residents of Maricopa County through the use of peer-support. Over the past year CHEEERS expanded their center size to accommodate for additional programs. Following the first fidelity review of CHEEERS in July, 2014, the program took action in various areas, including expansion of the center, updating the agency branding information, enhancing the agency website, and developing a social media presence.

The individuals served through this agency are referred to as "participants," but for the purpose of this report, and for consistency across fidelity reports, the term "member" will be used. In addition, throughout this COS report, the term "people with lived experience" will be used to reference self-identified people with lived experience of recovery.

During the site visit, reviewers participated in the following activities:

- Tour of the center's facility, including observations of group and class center meeting spaces
- Interview with the Chief Operating Officer and Director of Communications and Special Projects
- Review of the agency's key documentation: 2014 Fidelity Review Action Plan; advisory council meeting minutes; board meeting minutes; organizational documents; mission, vision, and values poster; newsletters and activity calendars; policies and procedures; etc.
- Group interview with six supervisory staff including the Director of Quality Management, Center Director, Assistant Center Director, Programs Manager, Assistant Programs Manager, Human Resource Coordinator
- Group interview with five nonsupervisory staff including the Recovery & Intake Coordinator, and four Peer Support Specialists
- Group interview with nine participating program members

The review was conducted using the Substance Abuse and Mental Health Services Administration (SAMHSA) Fidelity Assessment/Common Ingredients Tool (FACIT) of the *Consumer Operated Service (COS) Evidence Based Practice Tool Kit*. Using specific observational criteria, this scale assesses the degree to which an agency's operation aligns with a set of ideal standards established for high-fidelity COS. The 46-item scale considers the agency's operations in 6 domains: Structure, Environment, Belief Systems, Peer Support, Education and Advocacy. Each ingredient is rated on a point scale, ranging from 1 (not implemented) to 5 (fully implemented with little room for improvement). The FACIT was completed following the visit. A copy of the completed scale with comments is attached as part of this report.

### **Summary & Key Recommendations**

The agency demonstrated strengths in the following program areas:

- CHEEERS has social media platforms (e.g., Facebook page) and a website to better keep members apprised of program activities, including posting the Board of Directors, financial reports, and volunteer opportunities. Programs focus on employment and skill development, Peer Support Training (PST), food service program, and connections with local businesses for volunteer opportunities in the community.
- Ample opportunities exist for members and staff to share their stories (i.e., Speakers' Bureau), as well as contact with legislators to share stories of recovery, and invitations to representatives to tour the program.
- CHEEERS has an outreach plan to strengthen connections with traditional mental health services, other providers in the service area, and other COSPs. CHEEERS has a tracking sheet listing various treatment clinics, area providers, and community partners (e.g., colleges, food banks, health clinics, councils, and other member run programs). The outreach plan includes contact information for many providers and partners, and it logs the date materials were distributed to various locations. The COS program Chief Executive Officers (CEOs) meet regularly.
- CHEEERS made changes to improve the facility and program to accommodate members, including: coordination with property management to increase outdoor lighting; leasing additional space to expand the center size and allow for increased program options; adjustments to the physical layout to allow for smoother flow for members and to make the facility more accessible to persons with a wide range of disabilities. The program also has a wheelchair accessible entrance, wheelchair accessible toilets, as well as a 711 relay service.
- CHEEERS developed classes and opportunities for members to talk about spiritual growth as a component of recovery.
- There are opportunities to create and share member artwork; space is dedicated to artistic expression with a variety of media, and member artwork is prominently displayed in the center and in agency materials.
- Staff is trained on de-escalation techniques; the program offers classes and discussions with a focus on crisis prevention.

The following are some areas that will benefit from focused quality improvement:

- Continue efforts to increase the number of people with a lived experience as part of the Board of Directors.
- Continue to provide education and coordination efforts with traditional mental health care agencies (i.e., adult clinics); continue to seek out members open to sharing their stories with adult clinic staff. Attempt to educate clinic staff why coordination with CHEEERS is beneficial to co-served members.
- Consider removing locks from doors that do not house sensitive staff or member documents; consult with other similar programs to determine if locks or keypads restrict or control entry in those agencies. Consider eliminating space designated as staff-only, such as the lunch room; staff and members should be encouraged to eat together, if schedule allows, supporting a sense of equality and

cohesiveness.

- Revise policies implying participation in services is required.

**FIDELITY ASSESSMENT/ COMMON INGREDIENTS TOOL (FACIT)**

Ingredient #	Ingredient	Rating	Rating Rationale	Recommendations
<b>Domain 1 Structure</b>				
<b>1.1 Consumer Operated</b>				
1.1.1	Board Participation	1-5 (4)	The Board of Directors information is posted on the agency website, including contact information and affiliations of the board members. There are 13 individuals on the board. At least eight of the individuals (62%), including three of four officers (75%), self-identify as people with a lived experience. Some members who participate in services through CHEEERS serve as members of the board. The board can have up to 15 individuals serving, and is at 13 now. The agency is actively recruiting new board members; postings are located in the center and on the agency website.	<ul style="list-style-type: none"> <li>Continue efforts to enlist people with lived experience to serve on the board.</li> </ul>
1.1.2	Consumer Staff	1-5 (5)	Per the agency website and staff report, 90% of staff has lived experience with mental illness including the top two administrative positions, most other administrative positions, and staff that operate in the center.	
1.1.3	Hiring Decisions	1-4 (4)	Per staff report, people with a lived experience are responsible for all hiring decisions.	<ul style="list-style-type: none"> <li>The program should consider including program members in the candidate interview process.</li> </ul>
1.1.4	Budget Control	1-4 (4)	Per staff report, people with a lived experience are responsible for the development and control of the budget. This process includes obtaining input from agency programs, and members through the advisory committee. Financial report information is available on the agency website for fiscal years 2012 and 2013.	
1.1.5	Volunteer Opportunities	1-5 (5)	Per the agency website, staff report and member report, a variety of volunteer opportunities are available through CHEEERS. Some of these options include activities at the AZ Barber College, St.	

			Vincent de Paul, Sun Crest Center, as well as graffiti busters, and “adopt-a-street” events which are highlighted on the agency’s Facebook page. As noted above, program members serve on the board, lead program activities (e.g., yoga, karaoke), and CHEEERS has a fully stocked kitchen where members can learn to prepare meals through classes (Let’s Dish) after receiving their food handler’s card. The members involved prepare meals daily as well as for special agency events (e.g., grand re-opening and community awards ceremony).	
<b>1.2 Participant Responsiveness</b>				
1.2.1	Planning Input	1-5 (5)	<p>Based on review of agency documents, staff report, and member report there are numerous opportunities for members to provide input. These avenues include a member advisory committee twice a month, a member meeting once a month, suggestion box, and through one-on-one contacts with staff.</p> <p>Meeting minutes are maintained for the advisory committee and reflect member items of business as well as what items are approved by the committee to address with CHEEERS management. Members cite examples of how their voices were heard and supported during interactions with other members, interactions with staff, or regarding program activities.</p>	
1.2.2	Member Dissatisfaction/ Grievance Response	1-5 (5)	Staff and members report the steps of the agency grievance process, beginning with efforts to resolve the issue between the parties through conversation. The formal written policy, Participant Grievance, outlines the steps of the grievance process. The agency maintains a separate grievance policy for employees, with the same first step of attempting to resolve the issue through direct contact between the parties. The	

			same grievance form is used by staff and members.	
<b>1.3 Linkage to Other Supports</b>				
1.3.1	Linkage with Traditional Mental Health Services	1-5 (4)	<p>Staff reference contact with clinics for presentations or to set up booths to educate others about CHEEERS services. There are examples of staff participation with clinics during staffings. The agency CEO is on the board of an adult provider agency, and an agency newsletter recognized the contribution of staff from another provider.</p> <p>Although evidence of linkage exists, staff cite some examples of challenges coordinating with clinics, specifically obtaining required documents in a timely manner, and difficulty making contact with Case Managers (CMs) during times of member crisis. As a result, it is not clear if the intense linkage with traditional mental health providers is consistently reciprocated.</p> <p>Staff report the perception that some clinic staff are directed not to refer members to CHEEERS for services since supports similar to what CHEEERS provides may be available through the clinics.</p>	<ul style="list-style-type: none"> <li>● CHEEERS should coordinate with the Regional Behavioral Health Authority (RBHA) to identify and address barriers to reciprocated coordination with adult clinic staff.</li> <li>● CHEEERS staff should continue efforts to link with traditional mental health services in order to provide information on member run programs and the benefit to members, as well as those specific services offered through CHEEERS. Also, through the speaker's bureau at the agency, continue efforts to enlist members in sharing their stories as members of CHEEERS.</li> <li>● The tracking of CHEEERS member outcomes may be beneficial when providing education to clinic staff regarding the benefits of member run services.</li> <li>● Educate traditional mental health services how members are affected when certain required documents (e.g., annual assessment and treatment plan) are not provided in a timely fashion at intake or when requested by CHEEERS staff.</li> </ul>
1.3.2	Linkage with Other COSPs	1-5 (5)	<p>There is evidence of linkage and reciprocation with other member run programs. For example, on January 8, 2015 staff from another peer and family-run Provider Network Organization (PNO) in Tucson attended a CHEEERS board meeting to provide technical assistance. The agency collaborated with other member run agencies when developing the disruption policy in order to ensure that similar programs are in alignment and shared agency materials with other member run agencies in March 2015.</p> <p>The agency participates in a kickball tournament</p>	

			with other Community Service Agencies (CSA), as well as participates in a job fair. Staff members of CHEEERS sit on boards or workgroups where contact with other member run agencies occurs. (For example, a RBHA organized monthly member advocacy meeting, education workgroup, Mental Health Awareness Coalition (MHAC), and participation in the National Alliance on Mental Illness (NAMI) walk.) The agency works with Stand Together and Recover Centers (STAR), another member run program, to offer a support group which is held at the CHEEERS one time a week and each of the three STAR locations one time a week.	
1.3.3	Linkage with Other Service Agencies	1-5 (5)	<p>Examples of reciprocal relationships with other agencies include volunteers from The Association of American Retired Persons (AARP) who work in the food pantry, collaboration with Arizona Women’s Education &amp; Employment (AWEE) and representatives from an employment support service provider, VALLEYLIFE, whose staff goes to CHEEERS weekly to offer employment support services to members.</p> <p>The agency website has a link for community resource contact information, including shelters, food banks, as well a resource for medical and dental services. Other providers have presented at CHEEERS (e.g., vocational rehabilitation specialists presented at a monthly member meeting per board meeting minute notes). Staff of CHEEERS visited and met with network management from other providers.</p>	
<b>Domain 2 Environment</b>				
<b>2.1 Accessibility</b>				
2.1.1	Local Proximity	1-4 (4)	CHEEERS is centrally located, with nearby bus stops as well as light rail access. Many members	

			reside in the same zip code as CHEEERS based on member zip code tracking data.	
2.1.2	Access	1-5 (5)	Members work through assigned adult clinics to request transportation to CHEEERS. CHEEERS can also directly request transportation through RBHA contracted transportation vendors and provides bus tickets occasionally as needed. Additionally, CHEEERS offers bus and light rail mobility training classes and support.	
2.1.3	Hours	1-5 (5)	<p>Per staff report, members of CHEEERS helped to identify the need to be open evenings and on the weekends. As a result, the program accommodated the preference. Per the center website and staff report, hours of operation are 7:30AM – 4PM Monday-Wednesday, Saturday and Sunday, with extended hours of 7:30AM to 7:00PM on Thursday and Friday (dinner offered). All program services are available Saturday and Sunday as they are during weekdays.</p> <p>CHEEERS is closed various holidays; when closed, program staff makes efforts to link members to other supports and community resources. For example, CHEEERS was closed November 26-27, 2014 and December 24-25, 2014, but the program provided information as to where and when members could go for meals.</p>	
2.1.4	Cost	1-5 (5)	CHEEERS services, supports, meals, and activities are free to members. CHEEERS has an internal monetary system where members receive certificates that can be redeemed for goods and services in the center, but members have no out of pocket expenses to participate in the program. If members are in the community during an activity (i.e., Out-N-About) there is no cost for participation unless a member elects to purchase services or goods from outside vendors.	

2.1.5	Accessibility	1-4 (4)	<p>Some printed program materials and groups are in Spanish as well as available in larger print (e.g., glass and group schedules). Staff are trained on how to use 711 relay services.</p> <p>CHEEERS adjusted the office space, including widening hallways, adding stabilization grab bars, and adding wheelchair accessible bathrooms in order to better serve individuals with a wide range of disabilities. CHEEERS has bathrooms equipped with showers and can offer members a shower seat if necessary.</p>	<ul style="list-style-type: none"> <li>CHEEERS should consider adding stabilization grab bars and built in shower chair to showers.</li> </ul>
<b>2.2 Safety</b>				
2.2.1	Lack of Coerciveness	1-5 (5)	<p>Members interviewed are involved in a variety of program activities and classes of their choice. Staff and members report member participation is based on their own desire; if members want to attend and participate they can and members proceed at their own pace. Members report feeling like they can walk into the program and interact with others without being required to participate. Members report recovery goals are discussed.</p> <p>Staff report engagement and exploration of member preferences occurs at intake; a Recovery Service Plan (RSP) is developed with members. Per report of staff, members identify what recovery is for them and the pace they elect to proceed. Agency Admission and Re-Admission Criteria policy indicates the agency “recognizes and respects the right of voluntary participants to refuse services.” Other policy outlining member expected behaviors does not indicate participation is required, but the agency Outreach and Termination of Services policy does indicate services can be terminated based on “refusal on</p>	

			<p>behalf of the participant receiving services to participate in treatment services offered.”  Staff do check in with members if they do not attend or have contact with the program consistently, and do close members from services if there is no contact in 90 days. However, they note members can re-enroll but need to have updated paperwork submitted. Agency policy indicates outreach includes at least two phone calls, a letter, and if no contact within 30 days, the file is closed.</p>	
2.2.2	Program Rules	1-5 (5)	<p>Per staff report, CHEEERS program rules were developed with input from members, and are discussed at the beginning of each group. These program rules and expectations are posted, and outlined in the agency Participant’s Expected Behaviors &amp; Disruption Policy. During the group interview, all members reported they feel safe at the program.</p>	
<b>2.3 Informal Setting</b>				
2.3.1	Physical Environment	1-4 (4)	<p>The CHEEERS facility has program and class spaces to accommodate the various activities that occur daily at the program; these include spaces for larger groups as well as private meeting spaces. The program offers meals to members daily and has lockers for members to secure their belongings for the day. If a member experiences a break in stable housing, CHEEERS can provide up to three days outside storage in a locked area. As noted above, bathrooms with showers, as well as washer and dryer units are available to members who do not have consistent access to those amenities.</p>	
2.3.2	Social Environment	1-5 (4)	<p>Staff and members cite their involvement with CHEEERS is similar to being in a family. During the tour of the agency, staff and members describe their interactions as open and sincere,</p>	<ul style="list-style-type: none"> <li>• CHEEERS should evaluate if keypad entry locks are needed on the internal office and meeting space doors; consider removing the keypad entry locks from doors of spaces where sensitive</li> </ul>

			<p>with only minor distinctions between members and staff.</p> <p>There is some separation of staff space with some administrative office space separate from other center or group meeting spaces (suite two), separate eating space for staff if they elect to eat meals away from members (located in a room in suite seven), as well as keypad locks on many office and meeting room doors. However, members can meet with staff who work in suite two by notifying the receptionist who works in suite seven.</p>	or confidential information is not housed.
2.3.3	Sense of Community	1-4 (4)	<p>Members and staff report there is ample opportunity for members to engage with each other to create a sense of community. Various activities are offered on site (e.g. roundtables, karaoke, Spiritual Expression, Your Wise Mind, Recovery Goals, Wellness Through Creativity, Bingo, pool tournaments, open mic activities, committees) as well as off-site (e.g., bowling, volunteering, fitness center visits, swimming, community garden) to link with others in the community. Staff report they facilitate interactions between members, with a goal of members building relationships and connections as well as a support system outside of CHEEERS. Members are encouraged to buddy up on outings and in the program in order to ensure members feel safe. Members cite examples of friendships and supports cultivated at the program, and these types of interactions were observed during the program tour.</p>	
<b>2.4 Reasonable Accommodation</b>				
2.4.1	Timeframes	1-4 (4)	<p>If a member is in contact with the program there is no formal time limit on services. Staff and members report members are able to select those</p>	

			activities they elect to participate in, can attend those activities when they want with no mandated activities, and can participate at a pace of member choosing.	
<b>Domain 3 Belief Systems</b>				
<b>3.1 Peer Principle</b>				
3.1	Peer Principle	1-4 (4)	<p>Per the agency website, staff at CHEEERS utilize their shared experience to “empower our participants to identify and utilize their strengths in order to advance their recovery; provide education and resources, so that our participants can promote understanding and work to de-stigmatize mental illness and substance abuse; help those we serve to develop job skills and find gainful employment, so that they can move forward in their lives with hope and purpose.” This philosophy was consistent with staff and member interviews; staff shares their personal experiences with members when it benefits the members. Staff usually ask members for permission if it is ok for staff to share their experience.</p> <p>Staff and members are offered the opportunity to share their stories, with some electing to post the information on a wall in the center. The agency website has a link and contact information if someone is interested in sharing their story. Program staff and a member met with state legislators and shared their experiences. The program invited state representatives to visit the agency, and one representative toured the program.</p>	
<b>3.2 Helper Principle</b>				
3.2	Helper Principle	1-4 (4)	Members recount stories of helping other members of the program. During the program	

			<p>tour, members were observed assisting other program members. These interactions included discussions to problem solve issues in a member's life, as well as one member assisting another member with an unsteady gait. Other members share their experience helping others during group interactions, computer skill teaching, and through other social interactions.</p>	
<b>3.3 Empowerment</b>				
3.3.1	Personal Empowerment	1-5 (5)	<p>Members and staff confirm that being involved in the program has helped them make positive changes in their lives. Members cite examples of support through the program by helping members: to maintain sobriety, to stay out of jail, to maintain an improved quality of life through stability, to avoid higher levels of institutional treatment, to be more self-sufficient, to interact effectively with other agencies (e.g., Social Security Administration), to build a social support network following the death of a close support, to share stories that reduce their sense of isolation, to create a sense of community, and to support relapse prevention.</p> <p>Some examples from staff include setting annual goals, increased volunteer activity in the community, being active in their own recovery as a means of being accountable to their obligations as staff of the program, involvement in community groups, and member advocacy that may not be available without program involvement.</p>	
3.3.2	Personal Accountability	1-5 (5)	<p>CHEERS developed program policies that address member accountability, including: the Participant's Expected Behaviors &amp; Disruption Policy, an outline of expected behaviors, program rules, and information specifying a tiered level for</p>	

			<p>various program rule infractions with associated consequence. Additionally, the program supports direct member-to-member, member-to-staff, or staff-to-staff discussions to address issues or concerns, with this type of direct conflict resolution listed as the first step in the Participant Grievance policy. Members cite examples of how they were supported to address issues directly with peers or staff to find an agreeable resolution. The program member handbook specifies if members violate the disruption policy, the matter is discussed in private, members are afforded an opportunity to share their point of view, and are given the opportunity to correct the inappropriate behavior(s).</p>	
3.3.3	Group Empowerment	1-4 (4)	<p>Members recount examples of how they contribute to the program, including roundtable discussions or member advisory opportunities. Staff reports they work to create a sense of comradery through shared experiences, and as a result strong bonds are built with members. Staff and members reference the value of shared experiences such as homelessness, recurrences of substance use, periods of isolating behaviors, and the ability to connect through those experiences as part of group empowerment. The program newsletter highlights the contributions of member volunteers, participants of the month, and staff.</p>	
<b>3.4 Choice</b>				
3.4	Choice	1-5 (4)	<p>Members have the choice to participate in a wide array of program activities such as Wellness Recovery Action Plan (WRAP), computer skills building activities, various pre-GED classes for reading, writing, math and phonics as well as Peer Support Training (PST), Anger Management, and Relapse Prevention.</p>	<ul style="list-style-type: none"> <li>• The program should consider revising policies that imply participation in services is required.</li> </ul>

			<p>Members can participate in activities of various levels or forms of participation; many classes have modules where a member can attend a certain number of classes and receive certificates. Some include standalone activities, such as Let’s Dish where members first obtain a food handler’s card with support from the program, then learn to prepare 25 different recipes they can make at home, and some of those modules have nutritional information related to ingredients of the meals. Members shape activities, with examples of members leading activities (e.g., yoga, karaoke).</p> <p>There are references in the agency Outreach and Termination of Services policy indicating services can be terminated if “goals identified in the service plan have been achieved,” or “refusal on behalf of the participant receiving services to participate in treatment services offered.”</p>	
<b>3.5 Recovery</b>				
3.5	Recovery	1-4 (4)	<p>The mission statement of CHEEERS “is to empower individuals and families affected by behavioral health conditions to achieve a healthy and meaningful life through the use of recovery-based community services and our shared experiences.” The agency vision “is to create a community of hope, purpose, and wellness.” As part of the agency efforts to support the mission statement, various recovery related classes are offered, including WRAP, Philosophy of Recovery, PST, Peer Recovery Empowerment Program (PREP), Recovery Goals, Health and Wellness, etc.</p> <p>All members and staff interviewed convey themes</p>	

			that align with the mission and vision statements. Staff and members discuss programs, activities, classes, and relationships built on mutual respect and shared experiences in helping all individuals involved with the program.	
<b>3.6 Spiritual Growth</b>				
3.6	Spiritual Growth	1-4 (4)	<p>The agency website has a link for community contact information for spiritual resources consisting of phone numbers to places of worship of various faiths. A spiritual expression class is offered and appears to create a forum for expression of spirituality; for example, it is noted in advisory committee minutes that the group offers a forum for meditation. The Spiritual Expression group flyer is available in English and Spanish.</p> <p>Although member opinions vary on how the Spiritual Expression class should be facilitated, with some preferring a quieter tone and others more lively interactions, members cite the option to participate in this class as well as a Philosophy of Recovery class as a forum to discuss their spirituality. Staff report members are free to share their spiritual beliefs; they emphasize that everyone has their own view of spirituality, and it is part of recovery for many individuals. Members are encouraged to express their spirituality, discuss differences, and to be open to other spiritual values.</p>	
<b>Domain 4 Peer Support</b>				
<b>4.1 Peer Support</b>				
4.1.1	Formal Peer Support	1-5 (5)	Formal member support services are available through CHEEERS, and some examples include PST, Your Wise Mind, Philosophy of Recovery, Wellness through Creativity, and WRAP. Many	

			<p>activities occur at least once weekly, some multiple times per week, and some monthly (e.g., Advocacy Training) per the program schedule of events.</p> <p>Roughly eight to 12 group activities are offered daily; member participation varies based on the group (staff estimate between two and 22), with less participation over the weekend hours.</p>	
4.1.2	Informal Peer Support	1-4 (4)	<p>Opportunities for members to provide and receive mutual support exist; one member reported assisting others with computer skills, one member was observed assisting another member to an activity, and members were observed offering support to other program members through informal interactions. Less formal options where informal support occurs cited by members include roundtables, karaoke, open mic, bowling, bingo, member run yoga, etc.</p>	
<b>4.2 Telling Our Stories</b>				
4.2	Telling Our Stories	1-5 (5)	<p>The agency website has information for members and staff to contact to set a time to share stories of challenges and successes in recovery. CHEEERS offers other options for members and staff to share their stories (i.e., Speakers' Bureau), including setting up contacts with legislators to share stories of recovery. The agency appears to support members and staff in sharing their stories; during interviews, staff and members shared experiences of recovery and struggles. As noted previously in this report, numerous program activities include components of members sharing experiences.</p>	
4.2.1	Artistic Expression	1-5 (5)	<p>Examples of program activities supporting artistic expression include crocheting, sewing, open mic, karaoke, creation of a recovery quilt, a class titled Wellness Through Creativity with dedicated studio</p>	

			<p>space, and the program recently obtained a kiln to fire ceramic pieces.</p> <p>A variety of media materials are used, including stained glass, computers to create art pieces, paintings, marbled paper, cards, and mosaics, with examples of member creations visible in the center and program websites. Some examples include: member artwork on the center walls; member artwork greeting/donation cards (available for sale at the center's grand re-opening event in 2014); a member created recovery tree mural on one of the center walls; and member artwork is featured in some recent program newsletters.</p>	
<b>4.3 Consciousness Raising</b>				
4.3	Consciousness Raising	1-4 (4)	<p>The program facilitated contact with legislators so staff and a member could share their personal stories of recovery. State representatives were invited to tour the program. Members report the program staff keeps members informed of events, and they feel informed. The agency shares information with members through daily program activities, postings in the centers, the program website, Facebook page, newsletters, and member meetings; this appears to support a high level of transparency in how program information is shared with members. Members and staff report they feel they are part of a community.</p>	
<b>4.4 Crisis Prevention</b>				
4.4.1	Formal Crisis Prevention	1-4 (4)	<p>In addition to classes focused on recovery mentioned earlier in this report, formal classes specific to crisis prevention include Journey of Hope (for survivors of suicide), WRAP, and staff are trained in de-escalation techniques.</p> <p>The agency website has information for the</p>	

			county crisis line, staff report they can contact clinic contacts or 911 if a crisis emerges that is outside the scope of staff training.	
4.4.2	Informal Crisis Prevention	1-4 (4)	As noted earlier in this report, members offer support to one another, and report feeling supported by staff at CHEEERS. In addition, classes include Relapse Prevention, Mind Over Mood, Good Grief, Health and Wellness skills, as well as Boundaries (for women, for men, and a co-ed option). Some examples of members providing mutual support were observed during the program tour as well as referenced during interviews. For example, a member shared a story of interacting with another member who was considering suicide; the member had experienced similar feelings in his own life and was able to provide support to the other individual. Members report if members are not getting along, and staff will intervene and work with members to resolve the issue.	
<b>4.5 Peer Mentoring and Teaching</b>				
4.5	Peer Mentoring and Teaching	1-4 (4)	Staff and members easily identify others involved with the program who are mentors. Members report staff also have lived experience, and acknowledge some are in different places in their recovery. Members give examples of friendships and supports developed, such as meeting a friend at an activity, or renewed, such as connecting with another member who attends the same church.	
<b>Domain 5 Education</b>				
<b>5.1 Self Management/ Problem Solving Strategies</b>				
5.1.1	Formally Structured Problem-Solving Activities	1-5 (5)	A variety of classes and program activities are offered to help members develop formal problem solving and self-management skills. During member interviews, most have engaged in one or	

			more of the formal groups or activities.	
5.1.2	Receiving Informal Problem-Solving Support	1-5 (5)	CHEEERS staff encourages members to practice informal problem-solving skills. For example, it was reported in an advisory meeting that some members voiced concerns about pushing their religious beliefs. Solutions included addressing the issue with the member, asking staff to intervene, and reminding members depending on an individual's point in recovery, additional support to develop social skills may be needed.	
5.1.3	Providing Informal Problem Solving Support	1-5 (5)	During the program tour, members were seen interacting with each other without program staff involved. Members report they provide support to each other, including some examples noted earlier in this report such as with computer skill training, member-to-member support during a time of crisis, and contact through informal group experiences or through spiritual expression sharing. Most members report providing and/or receiving support from other members at the program.	
<b>5.2 Education/Skills Training and Practice</b>				
5.2.1	Formal Practice Skills	1-5 (5)	The program offers volunteer opportunities to members through programs such as the food pantry, meal planning and preparation class (i.e., Let's Dish), as well as pre-GED classes in writing, math, reading, and phonics. Computer skill training, PST, and Recovery Goals are other examples of classes with a formal skill practice component, with some members pursuing a position as a Peer Support Specialist. Members cite involvement in volunteer activities in the community, including graffiti busters, and at an older adult care facility. Most members reference involvement with one or more of these program activities where formal skills practice occur. Staff gives examples of members employed following	

			participation in program activities. For example, on an outing a member inquired about a position at a local business and was hired, as well as a member hired at another healthcare program.	
5.2.2	Job Readiness Activities	1-5 (5)	CHEEERS offers pre-GED, Disability Benefits 101 classes and a Peer Support Specialist internship. Resume preparation is covered in the computer skills training class. Members have the option to participate in various community activities through Out N' About events, which include attending job fairs. Members can participate in the advisory council, as well as share their stories in the program or in the community. Members can inform staff if they are interested in employment and can receive on-one-one support. As mentioned previously, CHEEERS also partners with an employment support service provider whose staff visit CHEEERS weekly to offer employment support services to members.	
<b>Domain 6 Advocacy</b>				
<b>6.1 Self Advocacy</b>				
6.1.1	Formal Self Advocacy Activities	1-5 (5)	CHEEERS offers classes on Wellness Recovery Action Plan (WRAP), Recovery Goals and an Advocacy Training class. Members report they have seen classes suggested and quickly implemented at the program. Program staff will assist members, if needed, in advocating with other clinic staff. CHEEERS staff give examples of members empowered to interact with other agencies; one member engaged a community partner to facilitate spay, neuter, and vaccination access for pets of program members. The program advertises to and engages members in attending fairs or other community events. Members report support in interacting with Social Security Administration (SSA). All members are	

			engaged to develop recovery goals through the development of a Recovery Service Plan.	
<b>6.2 Peer Advocacy</b>				
6.2	Peer Advocacy	1-5 (5)	Members report experiences assisting other members in resolving problems, as noted earlier in this report. Members report they feel heard in the program, sharing what they like and do not like about the program, and providing examples of how they have learned skills to interact with others in and outside of the program.	
6.2.1	Outreach to Participants	1-5 (5)	Members are informed about the program and activities through the agency website, Facebook page, agency newsletters, program flyers posted in the agency, and through member advisory boards and councils. There is evidence of a strong advocacy and member voice component throughout agency materials.	

## FACIT SCORE SHEET

Domain	Rating Range	Score
<b>Domain 1: Structure</b>		
1.1.1 Board Participation	1-5	4
1.1.2 Consumer Staff	1-5	5
1.1.3 Hiring Decisions	1-4	4
1.1.4 Budget Control	1-4	4
1.1.5 Volunteer Opportunities	1-5	5
1.2.1 Planning Input	1-5	5
1.2.2 Dissatisfaction/Grievance Response	1-5	5
1.3.1 Linkage with Traditional Mental Health Services	1-5	4
1.3.2 Linkage to Other Consumer Operated Services Program (COSPs)	1-5	5
1.3.3 Linkage with Other Services Agencies	1-5	5
<b>Domain 2: Environment</b>		
2.1.1 Local Proximity	1-4	4
2.1.2 Access	1-5	5
2.1.3 Hours	1-5	5
2.1.4 Cost	1-5	5
2.1.5 Accessibility	1-4	4
2.2.1 Lack of Coerciveness	1-5	5

2.2.2	Program Rules	1-5	5
2.3.1	Physical Environment	1-4	4
2.3.2	Social Environment	1-5	4
2.3.3	Sense of Community	1-4	4
2.4.1	Timeframes	1-4	4
<b>Domain 3: Belief Systems</b>		Rating Range	Score
3.1	Peer Principle	1-4	4
3.2	Helper's Principle	1-4	4
3.3.1	Personal Empowerment	1-5	5
3.3.2	Personal Accountability	1-5	5
3.3.3	Group Empowerment	1-4	4
3.4	Choice	1-5	4
3.5	Recovery	1-4	4
3.6	Spiritual Growth	1-4	4
<b>Domain 4: Peer Support</b>		Rating Range	Score
4.1.1	Formal Peer Support	1-5	5
4.1.2	Informal Peer Support	1-4	4
4.2	Telling Our Stories	1-5	5
4.2.1	Artistic Expression	1-5	5
4.3	Consciousness Raising	1-4	4

4.4.1	Formal Crisis Prevention	1-4	4
4.4.2	Informal Crisis Prevention	1-4	4
4.5	Peer Mentoring and Teaching	1-4	4
<b>Domain 5: Education</b>		Rating Range	Score
5.1.1	Formally Structured Activities	1-5	5
5.1.2	Receiving Informal Support	1-5	5
5.1.3	Providing Informal Support	1-5	5
5.2.1	Formal Skills Practice	1-5	5
5.2.2	Job Readiness Activities	1-5	5
<b>Domain 6: Advocacy</b>		Rating Range	Score
6.1.1	Formal Self Advocacy	1-5	5
6.1.2	Peer Advocacy	1-5	5
6.2.1	Outreach to Participants	1-5	5
<b>Total Score</b>		<b>204</b>	
<b>Total Possible Score</b>		<b>208</b>	