

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

Date: November 6, 2015

To: Suzanne Legander, CEO

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On September 28, 2015, Georgia Harris, Karen Voyer-Caravona, and Mimi Windemuller completed a review of the Stand Together and Recover Centers, Central location (STAR Central) - a Consumer Operated Service 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.

STAR Central is one of three STAR locations in the Metro Phoenix Area. STAR Central is located at 2502 East Washington Street in Phoenix, Arizona. This facility is in close proximity to city bus routes and the Valley Metro light rail system and is open six days a week. Since the last review, STAR Central has expanded to include evening hours for members who have other daytime commitments. The current STAR Central location is approximately a year old and newly renovated. The center is wheelchair accessible and equipped with multiple classrooms, a kitchen, showers and laundry equipment for member use, an art room, food/clothing share, exercise room, library/quiet room, lounge areas, and a dining hall where daily meals are served. Members also have access to STAR's newly launched Job Skills Center, where they are offered work readiness-type programs, namely for those interested in the food service industry. The STAR staff and members often state that their center is for anyone who is "willing to work on their recovery".

The staff and members at STAR continually referred to their next phase of development as "going clinical". STAR administration and staff described "going clinical" as the addition and expansion of physical and behavioral health services for STAR members, put into practice upon approval of center's clinical licensure. Staff view this expansion as an opportunity to provide members with more of the services they desire, but are unable to attain through traditional service outlets. At this point it is unclear if, or how, this clinical change will affect services according to COS fidelity standards.

The individuals served through this agency are referred to as “member(s)” and for consistency across fidelity reports, the term "member(s)" 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 from a mental illness.

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

- Tour of the center’s facility, including observations of the classrooms, offices, group rooms, lounges, art studio, dining hall and reception hall.
- Interview with the Chief Executive Officer and Chief Clinical Officer.
- Review of the center’s key documentation, including organizational documents, Articles of Incorporation, policies, board of director minutes, training materials, job descriptions etc.
- Focus group with two supervisory staff- Area Manager and Site Manager.
- Focus group with eight non-supervisory staff.
- Focus group 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:

- The majority of STAR staff and/or personnel are self-identified persons with a lived experience of recovery from mental illness and/or a co-occurring disorder.
- STAR’s recently expanded hours accommodates the needs of the membership majority. Those who attend the evening program receive the same type of programming and access to a meal as is provided in the day.
- Members and staff appear to embrace the principles of recovery; each person could verbalize their how the center supports members on their recovery journey through programs, activities, and formal/informal supports.

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

- Some members felt comfortable with their level of disclosure regarding spirituality at the center; however, some members appeared to be frustrated and have become dispirited. Though a new spirituality group is being formed at the center, it is incumbent upon the center to find ways to create an environment where all members feel their expression of spirituality is an acceptable and integral component of their recovery. Also, consider expanding partnerships with any community resources that could provide members with support in this area.

- STAR recently implemented an offsite job skills program for members who are interested in learning skills that will improve their chances of obtaining employment. Though members are provided transportation to the Job Skills center, member attendance at the Job Skills center falls consistently below 10% of the total member population. Consider teaching some sessions onsite as both an engagement strategy for members who are unsure about work, and to create interest in the larger skills program.
- STAR members appear to be unfamiliar with the principles and purpose of the *Peer* Movement. Find a regular forum, such as the monthly member meeting, where members are introduced/re-introduced to the principles and importance of the peer movement.

FIDELITY ASSESSMENT/ COMMON INGREDIENTS TOOL (FACIT)

Ingredient #	Ingredient	Rating	Rating Rationale	Recommendations
Domain 1 Structure				
1.1 Consumer Operated				
1.1.1	Board Participation	1-5 4	The STAR centers have one Board of Directors for all three centers. Currently, there are 10 board members. Seven of the 10 board members self-identify as persons with lived experience with mental illness and/or a co-occurring disorder. Two board members are family members of persons with lived experience, and one is a community member.	<ul style="list-style-type: none"> • Though STAR has a board primarily comprised of people with a lived experience (70%), the agency should continually strive to obtain a board where all of its officers self-identify as persons with lived experience. • Promote the connection and collaboration between the community and the agency by acknowledging board members on the agency website.
1.1.2	Consumer Staff	1-5 5	The three STAR centers have a total of 82 staff. Agency leadership stated that 79 of the 82 staff are self-identified as persons with lived experience. Administrators are included in the staff count. Those three staff members are identified as family members of persons with lived experience.	
1.1.3	Hiring Decisions	1-4 4	Members are involved and responsible for all hiring decisions. When a candidate is selected for an interview, staff and a member delegate (often from the member counsel, participate in the interview panel. Agency leadership also stated that they will sometimes have members pre-screen candidates by having them interact and observe them prior to their interview. The members provide feedback to the hiring team. Staff and members report that all final hiring and firing decisions are made by the CEO.	
1.1.4	Budget Control	1-4 4	The Board of Directors approves the amount of money allotted to each STAR center. Once approved, the member counsel and board liaison	

			will meet to discuss the center’s needs and other requests made by the membership through the suggestions box and/or the monthly member meetings. Staff state that the members’ input drives the majority of expenditures, only limited by the denial of requests for items or trips that will only benefit a small segment of members (e.g. a trip to Disneyland).	
1.1.5	Volunteer Opportunities	1-5 5	Members volunteer as Peer Leads, Member Counsel, Board Liaisons and co-facilitators for programming. All members are encouraged to volunteer for a chore around the center. Upon arrival to the center, members sign in at the front desk and simultaneously sign-up for a daily chore. By volunteering for a chore, members earn STAR dollars, an in-center currency that can be used to purchase items and other privileges, as well as the opportunity to eat a hot lunch. For those who attend the evening program, the rules for STAR dollars and the evening meal are the same as the morning program. Staff estimate that over 90% of STAR attendees volunteer in some capacity. Members stated that they were in favor of the lunch rule and feel it is a necessary component to the program.	
1.2 Participant Responsiveness				
1.2.1	Planning Input	1-5 4	STAR members have multiple avenues to participate in planning for the center’s activities. The STAR Board of Directors decides the amount of money allotted to each center for the fiscal year. Members meet with their member council to discuss their programming needs. The member council then meets with the board liaison to finalize items. The board liaison meets with the Board of Directors for final approval. If items are not approved by the Board, members are notified in the member meeting. Members are also invited to voice requests in the member meeting, the	<ul style="list-style-type: none"> Though members have avenues for input, work towards giving members the final say on center programming. For example, present a number of board-approved options to the membership and have members make the final decision. This can be applied for not only budget items, but programming additions/changes.

			suggestion box, directly to the member council or to a staff member at any time.	
1.2.2	Member Dissatisfaction/ Grievance Response	1-5 5	STAR has a partnership with Arizona State University to provide member satisfaction surveys on a quarterly basis. Upon program entry, members are given a copy of the <i>Member Handbook</i> , which clearly outlines the grievance policy. Members interviewed were familiar with the handbook's policies and able to recite them. Members are also able to file a grievance with the Regional Behavioral Health Authority (RBHA) if they are dissatisfied with their services at STAR.	
1.3 Linkage to Other Supports				
1.3.1	Linkage with Traditional Mental Health Services	1-5 4	STAR works with members from multiple behavioral health clinics in the Phoenix metro area. Staff report that over the last year, the wait time for referral packets and updated service plans has been reduced. Most staff stated that they most frequently interact with the clinics for coordination of care, primarily in crisis situations. STAR maintains relationships and provides services to a number of other service agencies in the community. STAR collaborates with some local hospitals for inpatient coordination and discharge coordination for RBHA members. Peer Support Specialists are on site at the hospital to assist with post-hospitalization wraparound care. Staff had mixed reports on the linkages with clinic staff. Most staff agreed that the responsiveness of clinics is as individual as the case management staff themselves. Staff recalled a few incidents where they called for clinical back up with members in crisis, but received no support.	<ul style="list-style-type: none"> STAR should continue to educate clinic partners on their role in member treatment. Clinic presentations, information packets, and meet-and-greets are all ways to engage and educate clinical partners.
1.3.2	Linkage with Other COSPs	1-5 4	Linkages with other peer-run organizations were reported by STAR staff. STAR hosts the <i>Fun Bunch</i> -a community leisure activities group that is open	<ul style="list-style-type: none"> STAR provides programming that other community members can attend. However, regular opportunities to collaborate with

			for members of all the peer-run organizations to attend. Staff reported other opportunities, such as camping, kickball tournaments and bowling nights with other COS's. Terros/CHEEERS conducts a weekly suicide prevention group at the center. There was little evidence to support that STAR leadership had regular contact or collaboration with the leadership of other COSs. STAR also provides 90 day, post-hospitalization wraparound care for members from any COS in the RBHA.	other CEOs on jointly-developed initiatives for member advocacy and support could be further developed.
1.3.3	Linkage with Other Service Agencies	1-5 3	STAR maintains relationships and provides services to a number of other service agencies in the community. STAR collaborates with some local hospitals for inpatient coordination and discharge coordination for RBHA members. Peer Support Specialists are on site at the hospital to assist with post-hospitalization wraparound care. Aside from the post-care wraparound program, STAR does occasional volunteering during the holidays at St. Vincent De Paul and the St. Mary's food bank. Though STAR is working to build working relationships with community agencies, little evidence of reciprocation was found.	<ul style="list-style-type: none"> STAR should continue to outreach, educate and serve community agencies.
Domain 2 Environment				
2.1 Accessibility				
2.1.1	Local Proximity	1-4 4	Agency staff used results from their Arizona State University member satisfaction survey to report that over 75% of all members live within two miles of the center.	
2.1.2	Access	1-5 5	Local members are able to access the center easily. The center is located in close proximity to the Valley Metro Light Rail system and a Valley Metro bus stop. Members who drive will find ample parking onsite. Members who do not take public transportation are able to receive a ride in company-owned vans. STAR provides	

			transportation to scheduled events and also between all STAR locations for members participating in additional programming. Members also use the RBHA-contracted cab service for transportation when necessary.	
2.1.3	Hours	1-5 5	The center is open Monday through Friday from 7:30am-7:30pm, and Saturday from 7:30am-3:00pm. The center hours were recently expanded to include the evening program from 3:30pm-7:30pm. Each of the three STAR centers rotate being open for the holidays. The chosen center is not open on actual holidays, but is open on the days surrounding it.	
2.1.4	Cost	1-5 5	All programs at STAR are free of charge to members. Members earn STAR dollars for completing chores at the center. The STAR dollars can be exchanged for food share/clothing share privileges, and community trips that are more costly. Hot lunch is also earned by completing chores, but members are always welcome to eat sandwiches provided by the center regardless of participation level.	
2.1.5	Accessibility	1-4 4	The center is equipped with TTY/TTD for members who are hearing impaired, and a larger font computer for visually impaired members. The center is equipped with an elevator, and the hallways can accommodate two wheelchairs passing in opposite directions. The center uses the RBHA language line for translation services. STAR also has a sign language translator.	
2.2 Safety				
2.2.1	Lack of Coerciveness	1-5 4	Staff and members affirmed that members could participate at their own pace. However, when asked how members who are not engaging are treated, one member said, "They won't last long here. This is a place for recovery". Staff stated that members who are not participating are	<ul style="list-style-type: none"> • Work towards creating an environment where members feel absolutely no pressure to participate in center programs. Recovery is defined by the individual, at their chosen pace.

			engaged and encouraged by staff to participate. One staff said, "Participation is individual; there are some people whom we are glad they simply sat through a group".	
2.2.2	Program Rules	1-5 3	New members are supplied a member handbook and invited to take the new member orientation class. New members have one week to learn the rules of the center. STAR members help to keep each other accountable to the center guidelines. Staff does not require participation in center programs; however, in order to receive the hot lunch/dinner option, members must participate in at least one group and complete one chore. When members were asked about the source of the center's rules, many members stated they were developed by STAR's administration team. Members further expressed they were supportive of the center rules and that the rules were too lenient with "offending" members.	
2.3 Informal Setting				
2.3.1	Physical Environment	1-4 4	The physical environment of the center is clean and welcoming. Multiple classrooms and lounge areas are available to accommodate the center's group/activity schedule. The furnishings are comfortable and attractive; all rooms and bathrooms are spacious and accommodating.	
2.3.2	Social Environment	1-5 4	Staff and members report having good relationships with each other. Members spoke on having trusting relationships with staff, expressing gratitude for the availability of employees for one-on-one discussions. All staff are certified Peer Support Specialists (PSSs). Only staff members are allowed to facilitate groups, but members are able to co-facilitate with them. Certain staff have offices at the center, but the staff indicated that they have an <i>open door policy</i> , as outlined in the member handbook. These offices are equal in	<ul style="list-style-type: none"> STAR should designate an office/workspace for agency leadership onsite. Members should have equal access to all employees of the center.

			comfort to the member areas. Reviewers were unable to visit the agency administrative/leadership offices, which are at a separate offsite location.	
2.3.3	Sense of Community	1-4 4	Many opportunities exist to for members to socialize and have interpersonal interactions with other members. Center Ambassadors are assigned to new members to help them to acclimate to STAR’s culture. Many members shared their new-member experiences, often saying their attendance at STAR has improved their confidence and helped them to become more social. Most members referred to the staff and members of STAR as “family”.	
2.4 Reasonable Accommodation				
2.4.1	Timeframes	1-4 3	Per members and staff, STAR does not have an expectation for participation. However, members who are “not focused on recovery” do not “stay here very long”. Members felt they were able to engage in center activities at their own pace. Many members said that staff will reach out to members who seem withdrawn. Staff reported that clinical teams are not contacted when member participation is lacking. Clinical teams are contacted for crisis and coordination of care concerns. Staff had conflicting responses regarding what was termed a “freeze list”; some staff believed membership was halted if clinical treatment plans/assessments were not renewed on time. Other staff stated that the “freeze list” was no longer in effect.	<ul style="list-style-type: none"> Though no formal time limits were identified, ensure that all staff are familiar with the center’s policy on annual membership renewal.
Domain 3 Belief Systems				
3.1 Peer Principle				

3.1	Peer Principle	1-4 3	Self-disclosure amongst staff is common, but not universal. Many staff interviewed said they felt comfortable with disclosing parts of their recovery story with members, but only if it will help the person in their recovery. Both member and staff groups believe that though staff are trained to self-disclose as a part of their PSS training, staff are still much more restrictive with what they are able to share with members.	<ul style="list-style-type: none"> Help and encourage staff to integrate elements of their recovery story into the groups and classes taught. This may help members to feel more connected to staff as peers rather than superiors.
3.2 Helper Principle				
3.2	Helper Principle	1-4 4	Most STAR members interviewed felt confident in their ability to help other members at the center. Each member was able to share examples of instances where they have helped another peer in need. A few members shared a recent situation where they each have committed to assist a physically disabled member with his needs while onsite.	
3.3 Empowerment				
3.3.1	Personal Empowerment	1-5 5	All members interviewed reported improved levels of confidence and personal empowerment since attending the center. Members shared their experiences, often stating that their involvement with the program has helped to improve self-confidence levels, renewed self-worth, and the courage to challenge difficult friends and/or family members.	
3.3.2	Personal Accountability	1-5 5	Members are expected to be personally responsible for their behaviors and actions while at the center. Members interviewed are familiar with the program structure and rules, with most being able to recite the consequences for breaking center policies. Many members expressed confidence in their ability to self-manage and to hold other center members accountable for their actions.	

3.3.3	Group Empowerment	1-4 3	Most members interviewed felt strong feelings of membership and acceptance within the STAR program. Members felt secure in their ability to contribute to the center through participation in groups and volunteering opportunities. Though members felt affirmed within the center, few mentioned how their new-found confidence extended beyond their participation at STAR.	<ul style="list-style-type: none"> • Help members to extend skills learned beyond the center by connecting them with other interests in and/or their larger community. For example, members may find interest in planning a quarterly service project for a community group in need.
3.4 Choice				
3.4	Choice	1-5 4	Members have an array of daily groups/classes to choose from. The weekly group schedule is located in the dining hall of the center. Members are able to identify the group and group facilitator by a color-coding system. In addition to hourly groups, members can choose from other offsite activities as scheduled. If members would like to see a new group implemented, they may present it to staff and/or the member council. Members must become a certified Peer Support Specialist prior to facilitating a group. Members may co-facilitate with a staff until that time. Staff mentioned having difficulty finding members interested in co-facilitating. Though members have the ability to shape discussions within the established groups, members could not express a clear pathway to volunteering in this capacity at the center. Also, participants may elect not to participate in groups at any time; however, a recovery group and chore must be completed to qualify for a hot lunch/dinner at the center.	<ul style="list-style-type: none"> • Establish a clear, identifiable pathway for members to transition into group facilitators. Promote and recruit members who display leadership qualities amongst peers to assist in this capacity. • Solicit member input and assistance to identify and implement topics and strategies for improving current groups, or establishing new ones.
3.5 Recovery				
3.5	Recovery	1-4 4	According to STAR members and staff, recovery is the central theme and focus of all the STAR programs and activities. All staff and members interviewed were able to articulate the principles of recovery, and describe how they are implemented in their lives, and the lives of those	

			around them. Members focused on a strong “willingness to recover” as the factor which separated STAR from non-STAR members. STAR’s mission and values are clearly displayed in the building. Agency materials and programs offered align with their mission to “empower adults with a mental illness...and promote personal recovery through socialization, education, and self-advocacy”.	
3.6 Spiritual Growth				
3.6	Spiritual Growth	1-4 2	STAR members reported mixed feelings about their opportunities to experience spiritual growth at the center. Some members felt comfortable with their level of disclosure regarding spirituality at the center; however, some members expressed frustration and discontent, stating that they have “given up talking about it” because they “don’t feel comfortable”. When asked what forums are available for spiritual growth, some members identified some groups at the center such as <i>Mediation</i> and <i>Yoga</i> . One member stated, “They teach you meditation, but you can’t practice it at the center because you look like you are sleeping. No sleeping allowed”. Staff stated that the center has recently added a <i>Spirituality</i> group to the calendar. It debuted the week of this review.	<ul style="list-style-type: none"> • Consider options for adding opportunities for exploration of faith concepts and spirituality; provide members with a resource for locating faith-based supports in the community. • Create an environment where members feel comfortable expressing the role of spirituality in their recovery.
Domain 4 Peer Support				
4.1 Peer Support				
4.1.1	Formal Peer Support	1-5 5	There are multiple formal peer support activities at the STAR Central location. If seeking employment, members can enroll in the Peer Support training program available. New members are assigned program ambassadors to help them acclimate to the center culture. Members also benefit from scheduled classes such as <i>Positive Affirmations</i> , <i>Self-Esteem</i> , and	

			<i>Building Support.</i>	
4.1.2	Informal Peer Support	1-4 4	Both members and staff gave examples of how informal peer support is being implemented at the center. Members connect with each other before the <i>Setting Goals</i> group each morning. Furniture and social settings in the center are arranged in ways that facilitate private discussions between members. The members stated that they help each other with personal situations and/or physical needs. In one instance, members recalled helping a current member who recently became physically disabled with his chores and activities.	
4.2 Telling Our Stories				
4.2	Telling Our Stories	1-5 3	STAR provides some opportunities for members to tell their stories. Staff and some members stated that sharing stories of recovery is built into certain scheduled groups/classes. Members and staff concur that at STAR, personal stories are most appropriately shared in one-on-one situations. Notable members are acknowledged with their picture on the photo wall, but their stories/achievements are not attached to their pictures. When asked, members could not identify opportunities to share their stories in the larger community.	<ul style="list-style-type: none"> Identify regular opportunities for members to share their stories in the center and the larger community. Creative opportunities to share stories of recovery can include speaker's bureaus, artistic expression nights, member awards, etc.
4.2.1	Artistic Expression	1-5 4	STAR Central members benefit from a large, spacious art room. The room is equipped with adequate supplies to engage in multiple artistic mediums, such as fused glass, molds, and ceramics. Members are tested for their skill level, and then are trained on techniques that will improve their skills. Members are taught how to sell their projects on the STAR Etsy web store. Member art is also displayed around the center.	<ul style="list-style-type: none"> Consider creating opportunities for members to share their stories (see recommendations in 4.2) through the use of a greater range of artistic expression such as haiku, spoken word, digital photography, and blogging. This can also be used as an opportunity for advocacy and community education.
4.3 Consciousness Raising				

4.3	Consciousness Raising	1-4 3	During group interviews, members were asked how they stay connected to the larger <i>peer movement</i> . Most members were unaware of the <i>peer movement</i> itself, but were familiar with groups such as NAMI. The center has a table where information related to recovery matters is located, and staff state that they will present on issues, current events, and legislation affecting peers on a regular basis. Members are also invited to attend legislative and informational sessions with guest speakers whenever scheduled.	<ul style="list-style-type: none"> • Find a regular forum, such as the monthly member meeting, where members are introduced/re-introduced to the principles of the peer movement. • See recommendation in 3.3.3. Helping members to connect to regular service projects could help to improve members' view on their ability to contribute to larger society. • Consider posting updates and important community events/connections on the agency website, giving members another resource that is accessible on their own schedule.
4.4 Crisis Prevention				
4.4.1	Formal Crisis Prevention	1-4 4	Staff and members often referred to the <i>Action Planning</i> class as the main source for formal crisis prevention at the center. The <i>Action Planning</i> class is based in the <i>Wellness Recovery Action Planning (WRAP)</i> model. STAR also provides groups such as <i>Anger Management</i> and <i>Better Days</i> to help members develop coping skills for difficult times. STAR also offers a weekly suicide prevention group, facilitated by Terros/CHEEERS – another local COS. If a member becomes escalated and is incapable of de-escalating, the clinical team or the police are asked to assist.	
4.4.2	Informal Crisis Prevention	1-4 3	One-on-one with staff discussions were identified as the primary method of informal crisis prevention. Members are able to speak with staff at any time about their concerns and feelings. Staff uses verbal de-escalation techniques to help members through difficulties they experience.	<ul style="list-style-type: none"> • Consider training the members on how to assist other members in crisis. This may help to lessen member dependence on staff to provide solutions for personal difficulties.
4.5 Peer Mentoring and Teaching				

4.5	Peer Mentoring and Teaching	1-4 4	Both staff and members were able to identify people in the program they relied on for support and encouragement. Members felt comfortable relying on other members as much as staff for guidance, support and companionship. Staff also spoke of ways that members inspire them on a daily basis to become better people.	
Domain 5 Education				
5.1 Self Management/ Problem Solving Strategies				
5.1.1	Formally Structured Problem-Solving Activities	1-5 3	As mentioned previously, STAR has an array of daily groups focused on problem-solving activities. However, staff only identified <i>Action Planning</i> as a group with a formally structured curriculum. Staff reported an above 75% attendance rate for groups. Staff stated that most groups are designed around expressed concerns by members and current interests. Staff are fully-responsible for creating curricula for the groups they facilitate.	<ul style="list-style-type: none"> Consider implementing or revising some of the current groups with structured curriculum. Course effectiveness is better measured by determined outcomes.
5.1.2	Receiving Informal Problem-Solving Support	1-5 5	All members interviewed reported receiving informal problem solving support from fellow center members and staff. Members recalled situations where staff and fellow members have helped them to de-escalate personal situations using verbal techniques, coping skills, and action planning.	
5.1.3	Providing Informal Problem Solving Support	1-5 4	A majority of participants interviewed indicated they have provided problem-solving support to other members. Most people interviewed felt they have acquired skills through the program that are useful and relevant in helping other persons in need.	<ul style="list-style-type: none"> Continue to encourage members to practice skills learned at the center to help others. Staff may consider rewarding good deeds that reflect key principles taught in a recent group as reinforcement for continued action.
5.2 Education/Skills Training and Practice				
5.2.1	Formal Practice Skills	1-5 5	The center has an established class/group calendar, filled with opportunities to learn and practice communication, assertiveness and daily	

			living skills. Agency leadership estimated more than 75% of members attend daily groups.	
5.2.2	Job Readiness Activities	1-5 2	STAR recently implemented an offsite job skills center that is open to STAR members at the three locations. The offsite location is the hub for most job readiness activities such as resume writing, food handler's card certification, and interviewing skills. Staff may assist members with job search basics (such as setting up an email address) in the computer lab at the center; however, members who request specific assistance are referred to the skills center. When asked about member enrollment at the job skills center, staff estimated between 5% and 8% of the total membership attend.	<ul style="list-style-type: none"> Educate members on the positive role employment plays in recovery. Explore all opportunities to improve member attendance in job readiness activities. For example, consider moving some of the introductory job skills classes back into the center as an engagement strategy for members who are unsure about the benefits of work.
Domain 6 Advocacy				
6.1 Self Advocacy				
6.1.1	Formal Self Advocacy Activities	1-5 4	Members have access to classes/groups at the center. STAR leadership identified the <i>Communication</i> class and <i>Advocacy</i> class as primary sources for formal advocacy training for members. Leadership also stated that over 50% of members have taken the communication class, and between 50% and 75% of all members have taken the advocacy class.	<ul style="list-style-type: none"> Continue to encourage and invite members to participate in formal self-advocacy activities.
6.2 Peer Advocacy				
6.2	Peer Advocacy	1-5 4	Members are invited to participate in local peer advocacy events such as the NAMI walk. Members can schedule with staff for special assistance with advocacy concerns such as entitlement issues, medical concerns, and behavioral health needs.	<ul style="list-style-type: none"> Coach and train members who have a functional expertise in advocacy issues and/or have received assistance with advocacy issues, so they may be asked to assist fellow members with similar concerns.
6.2.1	Outreach to Participants	1-5 3	Upon entry to the center, members can find information about the daily schedule at the front reception desk. STAR maintains an information table in the center, filled with flyers and information for local/community agencies and	<ul style="list-style-type: none"> Consider expanding member services to include targeted outreach to members who have not attended in a while. Also, consider outreach using social media outlets to keep members informed of center updates. For

			support services. Members can locate the weekly groups/classes calendars on the walls of the dining hall. No evidence of a targeted outreach or social media program/promotion was identified.	<p>example, a portion of the member newsletter can be used to disseminate important information surrounding advocacy issues.</p> <ul style="list-style-type: none">• Use a portion of the agency website as a space where members can receive current, up-to-date information on empowerment/advocacy issues.
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FACIT SCORE SHEET

Domain	Rating Range	Score
Domain 1: Structure		
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	4
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	4
1.3.3 Linkage with Other Services Agencies	1-5	3
Domain 2: Environment		
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	4
2.2.2	Program Rules	1-5	3
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	3
Domain 3: Belief Systems		Rating Range	Score
3.1	Peer Principle	1-4	3
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	3
3.4	Choice	1-5	4
3.5	Recovery	1-4	4
3.6	Spiritual Growth	1-4	2
Domain 4: Peer Support		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	3

4.2.1	Artistic Expression	1-5	4
4.3	Consciousness Raising	1-4	3
4.4.1	Formal Crisis Prevention	1-4	4
4.4.2	Informal Crisis Prevention	1-4	3
4.5	Peer Mentoring and Teaching	1-4	4
Domain 5: Education		Rating Range	Score
5.1.1	Formally Structured Activities	1-5	3
5.1.2	Receiving Informal Support	1-5	5
5.1.3	Providing Informal Support	1-5	4
5.2.1	Formal Skills Practice	1-5	5
5.2.2	Job Readiness Activities	1-5	2
Domain 6: Advocacy		Rating Range	Score
6.1.1	Formal Self Advocacy	1-5	4
6.1.2	Peer Advocacy	1-5	4
6.2.1	Outreach to Participants	1-5	3
Total Score		177	
Total Possible Score		208	