CONSUMER OPERATED SERVICES (COS)
FIDELITY REPORT

Date: April 21, 2016

To: Suzanne Legander, CEO

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        ADHS Fidelity Reviewers

Method

On March 14th and 16th, 2015, Georgia Harris and Karen Voyer-Caravona completed a review of the Stand Together and Recover Centers, Inc. (STAR) West-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 has been in operation in Maricopa County, Arizona for over twenty years. In 1987, STAR began as a support group (S.O.O.N. – Survivors On Our Own) for ex-psychiatric patients of the Arizona State Hospital, later merging with another peer support group (S.E.L.F.F. –Survivors Educating Loving Friends and Family) in 2009, to form the current entity. STAR has three locations in the Phoenix area: East, West and Central. In October 2014, STAR launched a Job Skills Center, which recently transitioned into a Life Skills Center, in Central Phoenix. This review focuses on the STAR West center, located at 605 North Central Avenue in Avondale, Arizona.

The individuals served through this agency are referred to as "members", and the same term will be used throughout the report. 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 STAR West facility;
- Group interview with the Chief Executive Officer (CEO) and the Chief Clinical Officer (CCO) conducted on March 16, 2016;
- Group interview with the Site Manager (SM) and an Assistant Site Manager (ASM);
- Group interview with nine STAR staff: eight Recovery Support Specialists (RSS) and the Life Skills Program Manager;
- Group interview with eight participating STAR members; and
- Review of the center's key documentation, including organizational documents, Articles of Incorporation, polices, annual reports, training materials, job descriptions, etc.

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:
- Consumer Staff: STAR maintains a high ratio of staff identifying as persons with a lived experience in recovery. Above 90% of all staff companywide identify themselves in this fashion.
- Planning Input: STAR provides members with multiple opportunities to become directly involved in planning specific center activities, as well as the overall direction of the center's programs. This was most clearly exhibited through the collaborative approach used in the planning for the recent Family Night in March 2016. Both staff and member groups spoke confidently about this experience.
- Spiritual Growth: In the past year, STAR West has developed a Spirituality class which is used to help members to reflect on their daily experiences and explore them through frameworks that support universal truths. Member and staff reports reveal that this approach is embraced and supported by the participants.

The following are some areas that will benefit from focused quality improvement:
- Peer Principle: Continue to train and encourage staff to participate in reciprocating meaningful disclosures with members in appropriate contexts. The majority of members characterized their relationships with staff as mutually beneficial and reciprocal in nature. Still, some members felt self-disclosure by staff was unequal, and in a few cases, significantly less than is required from members.
- Consciousness Raising Activities: Consider expanding opportunities for members to plan and implement actions that impact the well-being of all persons with a lived experience in recovery. Though members attend community events related to mental health awareness, they appear to function as observers; no mention was made of opportunities for members to engage directly as participants in advocacy or action efforts related to civic responsibilities (i.e., local governmental policies impacting behavioral health).
- Outreach to Participants: Consider discussing with members their methods of preferred contact, then using this information to prioritize methods of outreach to absentee members. There was little evidence of multi-media or social media promotion of the program or activities to members, namely those outside of the center.

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 Board of Directors consists of nine members. The composition of members is a mix of attendees from the three center locations and people from the community at large. Six individuals with lived experience serve on the Board, three of whom represent each of the STAR locations and are nominated and elected by participating STAR members. Two Board members are self-identified as family members of recipients of mental health services. One member represents the community and is a former director of the Arizona Department of Health Services. Though the BOD can have up to 15 people, the STAR leadership reports that a BOD of 12 members has been most efficient over the years.	• It is recommended that STAR recruit qualified members to fill the vacant positions on the BOD. Ninety (90%) to 100% of BOD members should be people with a lived experience.
1.1.2	Consumer Staff	1-5 5	STAR leadership reports that over 90% of all center staff have identified as people with lived experience. There are 11 total employees at the STAR West location, two who are identified as both family and persons with a lived experience themselves. Four additional staff works between all three centers (e.g., Fun Bunch Director). Two employees identify as family members. All administrators identify as people with lived experience.	
1.1.3	Hiring Decisions	1-4 4	The CEO is ultimately responsible for all hiring and firing decisions; however, the center members are also involved in hiring decisions. Center members are asked to evaluate all potential candidates,	

			primarily by sharing their feedback on their interactions with the applicants upon entry into the building. The member-elected Board Liaison will often participate in the candidate interview process. When interviewing potential candidates, STAR does give preference to those who identify as persons with lived experience.	
1.1.4	Budget Control	1-4 4	Members are responsible for the development and control of the STAR budget. Member councils and staff are asked to identify unmet needs and/or areas that are in need of resources/services. The Site Manager(s) and Members' Council discuss the interests and needs of the members. These requests are submitted to the finance subcommittee, which prioritizes those items and provides feedback on the available funding to the membership. Unanimous voting among members was identified as one of the methods used to determine the implementation of large-scale projects.	
1.1.5	Volunteer Opportunities	1-5 5	Staff reports that virtually all of the program volunteers are considered to be peers. A variety of volunteer opportunities are open to members; included are paid and unpaid positions, board, and leadership positions. Members serve as Peer Support Specialists, Center Ambassadors for new members, and paid staff positions called Recovery Support Specialists (RSS). Some volunteers receive *Freedom to Work* health insurance program benefits; they report that STAR has been amenable in scheduling their work shifts within these guidelines. Staff and members noted the lunch program as a key feature of the STAR volunteer program. When members complete a daily chore and attend a recovery group, they are eligible for a hot lunch. Members who do not fulfill the requirement are	

			still eligible for the daily breakfast bar and the free peanut butter and jelly sandwiches at lunch time.	
**1.2 Participant Responsiveness**
1.2.1	Planning Input	1-5 5	Both the member and staff groups report that the suggestion box and member council meetings are primary pathways for providing direct feedback and planning input to the center's leadership. All suggestion box submissions are read and answered by the council in the monthly membership meetings. The elected Board Liaisons interface with the Board of Directors for suggestions that require a higher level of approval. Members are free to speak with the Member Council officials, Board Liaisons and center staff at any time. Members expressed that they are satisfied with their level of input. Most recently, members formed a committee with staff to plan the Family Night celebration. Members had full control over the menu, activities, and program for the evening.	
1.2.2	Member Dissatisfaction/ Grievance Response	1-5 5	Members have formal ways to indicate dissatisfaction with the STAR program and/or services received. The grievance policy is made available to all members via the *member handbook.* Both the staff and member groups agreed that the policies are clearly defined and understood. Should members remain dissatisfied with the resolution provided by STAR, members are encouraged to take grievances or complaints directly to the Regional Behavioral Health Authority (RBHA). Many staff discussed their involvement in walking members through the grievance process. STAR also provides opportunities to express dissatisfaction through a quarterly satisfaction survey, with monitoring provided by Arizona State University. In addition, members are able to make an anonymous call to STAR administration to report wrongdoing in the	

			center.	
1.3 Linkage to Other Supports				
1.3.1	Linkage with Traditional Mental Health Services	1-5 4	Staff reported that the linkages between traditional mental health services and the center are strong; however, these linkages are not always reciprocated. Staff noted that not all clinical teams are readily accessible. STAR staff also reported minor difficulty in getting updated documentation from select clinics for the annual renewal of member services. Agency leadership reported that various clinical teams have been invited and have attended scheduled tours of the center. Staff identified clinics and case managers who are responsive to their calls and email where there are concerns or progress with a member.	• Continue outreach and engagement efforts with traditional mental health service providers.
1.3.2	Linkage with Other COSPs	1-5 4	STAR reports having intense linkages with other COSPs; however, these linkages are not always reciprocated. STAR staff and members reported that members from three COSPs attend annual kick-ball and bowling tournaments. Members from all COSPs are eligible to attend outings scheduled by the *Fun Bunch* managed by STAR. STAR had a longstanding relationship with another COSP, CHEEERS; a joint group was held for members of both centers for survivors of suicide. The program was recently discontinued for what staff identified as "financial obligations" at the other agency.	• Work to re-establish or develop regular opportunities for members of all COSPs to attend jointly. Use these programs as opportunities to foster a sense of community and connectedness among peer programs at large.
1.3.3	Linkage with Other Service Agencies	1-5 5	STAR staff reported that the center has intense linkages with other service agencies. STAR works with the Valley Metro to provide transportation training services to members. STAR also works to connect members to the DB 101 training provided through the Disabilities Empowerment Center. Arizona State University Center for Applied	

			Behavioral Health Policy is contracted to perform the annual member satisfaction survey. The center is also invited annually by the City of Avondale to participate in a local community services fair. In addition to these opportunities, STAR provides co-located peer and after-care support to members at the Psychiatric Urgent Care center and other local hospitals.	
Domain 2 **Environment**				
2.1 Accessibility				
2.1.1	Local Proximity	1-4 3	The STAR West center is located in Avondale, AZ, a suburban community in west Phoenix, characterized by commercial and residential development. The center is located in an area linked by narrow sidewalks and surrounded by ongoing construction. The amount of obstructions from construction could pose challenges to individuals in wheelchairs or motorized scooters. While the center is located next to a residential neighborhood, most members do not live within walking distance. STAR West has a van that will pick up and return members who live within a 10 mile radius of the center during days of operation. Most other members will use transportation that is scheduled thorough the RBHA.	• STAR West is located in a population cluster, but many of the members live a fair distance from the center's location. Outside of long range planning efforts, the center may have limited ability to impact this item. Continue efforts to arrange transportation for members to the center.
2.1.2	Access	1-5 3	The center is accessible for members with arranged transportation. Members can get to the center through ComTrans, cab service (using vouchers arranged through their clinic) or use the center's free van service. The center is somewhat accessible for members who drive or use public transportation. Parking at the center is quite limited; however, there was no indication that many members drive to the center. The center is near a bus route and small circulator bus service,	• See recommendation for 2.1.1 • Consider developing and/or connecting members to advocacy opportunities in the community surrounding this issue.

			but the regularity of the buses was reported by members and staff to be infrequent at best.	
2.1.3	Hours	1-5 4	The hours of the center are Monday through Friday, 7:30am to 3:30pm, and Saturday from 7:30am to 2:30pm. Members who would like to participate in evening hours at STAR are eligible for transportation to the Central and East location for the evening programs until 7pm, Monday through Thursday. STAR rotates holidays between all three centers. STAR locations are closed on the day of the holiday itself. Staff will transport members to other sites that are open if their main center is closed.	• Consider expanding center hours at the West location, unless the demand is not present. Evaluate member needs at the STAR West location. Explore what their preferences are for center hours. Expanded hours could provide flexibility for members whose access to the center is limited by other daily activities (e.g., jobs) and are not willing to travel great distances to other locations.
2.1.4	Cost	1-5 5	All services at STAR are free of charge to members. Members use their earned STAR dollars for food/clothing share, trips, and other agency activities. There is no financial cost for meals; however, members are required to complete a chore and attend a group to qualify for lunch. Members expressed satisfaction with the lunch policy. Most members stated that they enjoyed the meals provided by the center, often stating that they recently voted to keep the policy in place so members can "take pride in the place".	
2.1.5	Accessibility	1-4 3	The center building is accessible, but some improvements can be imagined. Some of the hallways in the office area and leading to one of the restrooms are narrow and could be challenging to an individual in a wheelchair. The center has a wheelchair van to transport members to events. There is also a wheelchair space in the outdoor smoking area. The center currently serves two visually impaired members. The center provides one large text computer terminal. The art room does not have particular accommodations, but staff work with members to help them to achieve their goals. One staff said in regard to one member, "If we are	• STAR may have little opportunity to impact this item without a change in center location. Continue to find ways to maximize the use of the existing structure. • Consider installing a TTY/TTD device at the center.

			doing drawing in Arts and Crafts, I ask him what he would do with the project. I help him with the project. I have a special book for him." The center does not have TDD services for the deaf and hard of hearing. The language line is available for members who require interpretation services.	
2.2 Safety				
2.2.1	Lack of Coerciveness	1-5 4	The STAR program encourages members to participate in peer support programs. Members are not required to participate in services to attend STAR; however, members cannot receive the lunch benefit without participation in a chore, and a group. Staff and members interviewed stated that the members recently voted and are in favor of the lunch benefit rule. Members who do not "earn" lunch are still provided with peanut butter and jelly sandwiches. STAR staff report that there has been occasional challenges with the families and guardians of some members. Some families have made attendance at STAR mandatory for their member relatives. Staff continually works with the families to remind them that participation in the program is entirely the member's choice.	• Educate families and guardians on ways to provide an environment that is free from the threat of coercion.
2.2.2	Program Rules	1-5 5	Members and staff both report feeling physically and emotionally safe at the center. Members and staff are equally aware of the program policies/standards and can recite the implications of violated rules (i.e., The Disruption Policy). All staff and members were able to locate a copy of the policy in group rooms and throughout the center. Also, the member handbook documents all of the safety policies most pertinent to members (e.g., contraband, disruption, group rules).	

			When asked how the program and group rules are developed, both members and staff stated that the rules were developed by members and approved by the BOD and/or the center administration.	
			2.3 Informal Setting	
2.3.1	Physical Environment	1-4 3	Members report that STAR West offers a setting where they feel comfortable. In the past year, STAR West received upgraded flooring to replace the previously unfinished concrete flooring. Though most members are comfortable, some physical improvements can be imagined. Staff and members report that the building needs more classroom spaces for increased privacy for group sessions.	• The center may have limited ability to impact this item but should explore any options that may maximize the current use of the space.
2.3.2	Social Environment	1-5 5	Members report that staff relate to members with warmth, respect, concern and genuine caring. Staff interviewed said that being persons with lived experience has helped to forge genuine connections with members on a personal level, through their shared experiences. Staff expressed a profound belief in the importance to their recovery of giving back by providing understanding, support, guidance, and being models of what recovery looks like.	
2.3.3	Sense of Community	1-4 4	Members expressed a sense of community and belonging at their center. STAR provides multiple opportunities to socialize through groups and *Fun Bunch* and *Young Adult Program* activities. Multiple members described isolating themselves prior to coming to the center; now they are fully-engaged in activities. In addition to outings, the members congregate in spaces at the center where they can enjoy conversation and recreational activities with each other.	
			2.4 Reasonable Accommodation	

2.4.1	Timeframes	1-4 4	Members can attend the program as long as they wish and work at their own pace. Staff reported that the only timeframe concern appears in the form of the mandatory deadline for receipt of the annual Individual Service Plan (ISP) from the clinical teams. Staff begin outreach efforts to receive an updated plan, which cites participation in peer support programs, 30 days in advance of the ISP expiration date. Staff report they continue to serve members regardless of the paperwork backlog that sometimes occurs when clinical teams do not provide documents in a timely fashion.	
Domain 3 **Belief Systems**				
3.1 Peer Principle				
3.1	Peer Principle	1-4 3	Self-disclosure is common, but not universal. Most staff and members stated they willingly share their experiences of having psychiatric disabilities with each other. Staff stated that it is a requirement of employment to agree to share your story of recovery. Staff also stated that sharing their stories with members helps in their own recovery journey. Most members report that staff will disclose; however, some members expressed that self-disclosure is not reciprocated to the degree expected of the members.	• Train and encourage staff to participate in reciprocating meaningful disclosures with members in appropriate contexts.
3.2 Helper Principle				
3.2	Helper Principle	1-4 4	Most members report helping others in informal ways. Some members stated that they have offered friendly advice to peers; others confirmed receiving help from peers. Staff are an important resource to members. Both staff and member groups interviewed stated that both staff and members are considered equally important sources of guidance and help for members.	
3.3 Empowerment				

3.3.1	Personal Empowerment	1-5 5	All members agree that their participation at the center has helped them to make positive changes in their lives. Members unanimously agreed their participation in the STAR program has made a positive and lasting impact on their health and quality of life. Members also shared their personal stories of how attending STAR has improved their self-esteem, social life, and confidence.	
3.3.2	Personal Accountability	1-5 5	STAR inspires independence in members by encouraging them to explore their options when faced with challenges. Members confirmed that STAR staff will help members to identify the possibilities but will not make decisions for them.	
3.3.3	Group Empowerment	1-4 4	Members have many opportunities to become a part of the team. Members can join the Member Council, run for a Board of Directors' position, become peer leaders, volunteer, or work towards becoming paid staff members. Some members are co-facilitating groups at the center with other STAR staff. There is a wall of recognition in the dining area that displays pictures of members fulfilling various roles at the center. This includes Peer of the Month, Employee of the Month, and Progress of the Month.	
3.4 Choice				
3.4	Choice	1-5 5	STAR has an extensive group and community trip calendar. STAR's group options range from classroom-based, psychoeducational programming such as Anger Management and Stress Management, to social outings in the community such as the Wildlife World Zoo. Groups and activities are often developed upon member suggestion, and members have the opportunity to co-facilitate groups. Staff will suggest or recommend groups or activities that could support a member's individual recovery goals, but participation in groups and activities is	

			voluntary.	
3.5 Recovery				
3.5	Recovery	1-4 3	The mission statement describing the recovery oriented approach of the center is clearly displayed at the entry of the building. Members and staff clearly articulate what recovery means and how it is being implemented in all of their activities. Staff and members speak with recovery-focused language. All members and staff acknowledge that recovery is a process, and each person is at different stages. Though recovery is embraced at the center, some members expressed their concern regarding the use of the term "mental illness" in the STAR mission/vision statements; members felt the term could be updated with the term "behavioral health" as a use of more recovery-focused language.	• STAR administration should discuss the possibility of revising of the mission/vision statement with the members and BOD.
3.6 Spiritual Growth				
3.6	Spiritual Growth	1-4 4	Expressions of spiritual beliefs, practices, and experiences are embraced and respected at the center. Members are encouraged to participate in spiritual practices that have meaning to them, without imposing them upon other center members and staff. In the past year, STAR West has developed a Spirituality class which is used to help members to reflect on their daily experiences and explore them through frameworks that support universal truths.	
Domain 4 Peer Support				
4.1 Peer Support				
4.1.1	Formal Peer Support	1-5 5	The members receive formal peer support primarily through groups and individual one-on-one meetings with staff. The group calendar features classes such as ANTs (Automatic Negative	

			Thoughts), WRAP-Wellness Recovery Action Planning (aka Action Planning), and Self-Advocacy. Staff members are available to meet with members to discuss personal concerns at any time.	
4.1.2	Informal Peer Support	1-4 4	Members were able to articulate numerous situations where they have given or received informal support from peers. Members felt comfortable with supporting one another outside without staff intervention. Many members shared their experiences in providing support to one another by using informal techniques such as going on walks and talking through the problem without staff intervention.	
4.2 Telling Our Stories				
4.2	Telling Our Stories	1-5 4	Members tell their stories in formal and informal ways. Staff stated that some members prefer to share their experiences in group settings, while others use artistic mediums. Members who are open to sharing and mentoring other members will often volunteer to become Peer Leaders or council members. Though opportunities exist at the center to share personal stories, there were few opportunities to share personal stories in the larger community discussed.	• Work towards developing an interface for members to share their stories in the community regularly. Consider creative opportunities such as a member-run newsletter, a blog section on the STAR website, or social media pages, etc.
4.2.1	Artistic Expression	1-5 4	The center has regular artistic outlets provided to members through the use of the onsite art classroom. Members may participate in scheduled art classes or in open studio. Members explore different mediums of art. The pieces crafted are both personal and expressive. Some members have expanded their involvement in art programs by volunteering to participate in an outside art fair being held in the Downtown Phoenix area. Though the art program seems to be a key feature of the STAR program, members and staff alike expressed concern regarding recent budget cuts	• STAR administration should discuss the recent budget concerns with the BOD and other stakeholder parties (i.e., RBHA). Find ways to realign the budget to underwrite the types of programs requested by the members.

			which have limited the available art supplies.	
**4.3 Consciousness Raising**
4.3	Consciousness Raising	1-4 3	STAR connects members to advocacy and awareness activities in the community. The most frequently mentioned event among staff and members were the NAMI walk and the annual Candlelight Vigil. Staff stated that the center occasionally brings guest speakers in to speak to members about relevant issues. Though members attend these events, no mention was made of opportunities for members to engage directly in advocacy or action efforts related to civic responsibilities (i.e., local governmental policies impacting behavioral health).	• Expand member involvement in planning and implementation of advocacy efforts. (e.g., a social change committee). Helping members to find causes they can directly impact may increase their sense of contribution to their communities.
**4.4 Crisis Prevention**
4.4.1	Formal Crisis Prevention	1-4 4	STAR's weekly calendar consists of multiple groups designed to help members use and develop effective crisis prevention strategies. Groups such as ANTs, Meditation and Recovery, and Action Planning are held multiple times per week, and some are based on identified best practices through the Substance Abuse Mental Health Services Administration (SAMHSA). All staff are trained in Applied Suicide Intervention Skills Training (ASIST). Staff also use a technique called "the Santa Laugh" at lunchtime to help all members relieve stress.	
4.4.2	Informal Crisis Prevention	1-4 4	Members clearly stated that they assist each other with crisis prevention. Peer practices include peer-to-peer discussions, going for walks, and working on expressive art pieces. The art room is open during center hours for anyone to use. Members are also encouraged to journal or use the quiet space in the library room for relaxation and self-affirmation.	
**4.5 Peer Mentoring and Teaching**

4.5	Peer Mentoring and Teaching	1-4 4	Nearly all members report that there are others within the program that they look up to, and from whom they can receive guidance, support, and companionship. Both STAR staff and member groups interviewed report having received mentoring from other peers in the program.	
Domain 5 **Education**				
5.1 Self Management/ Problem Solving Strategies				
5.1.1	Formally Structured Problem-Solving Activities	1-5 5	The center offers an Action Planning class which is identical to the Wellness Recovery Action Plan (WRAP). This program focuses on symptom management and crisis prevention. There are other classes on the schedule, such as ANTs (Automatic Negative Thoughts) that focus on everyday solutions to member concerns. Staff confirmed that a number of their classes are based on multiple resources; workbooks are created from this material and handed to participants. Staff stated that having curriculum is useful, and administration has been providing curriculum as needed.	
5.1.2	Receiving Informal Problem-Solving Support	1-5 4	The majority of members agreed that they received informal problem-solving support. Staff estimate that around 75% of members participated in informal support. Members stated that they were able to have honest conversations with each other at any time; these conversations often took place during meal times or other unstructured activities (e.g., playing pool).	• Encourage members to rely on each other for problem solving support. Use examples or stories of how this has helped others in the past.
5.1.3	Providing Informal Problem Solving Support	1-5 5	Most or all of members agreed that they have provided informal problem-solving support. Members stated that they enjoyed providing help and support whenever called upon. Members felt they could rely on peer leads and Center Ambassadors for support just as much as the center staff.	

	5.2 Education/Skills Training and Practice			
5.2.1	Formal Practice Skills	1-5 5	Members are taught skills that will equip them for participation in the community. STAR provides many opportunities for members to enhance social skills. The center offers a daily schedule of on- and off-site activities that provide opportunities for practicing social skills in the community. The daily groups range from advocacy to life skills trainings.	
5.2.2	Job Readiness Activities	1-5 3	All STAR centers share a centralized Life Skills Center (previously the Job Skills Center), located in Central Phoenix. Members are transported to the center weekly to participate in classes in nutrition, computer skills and resume building. Staff estimated that approximately 10 members regularly participate at the Life Skills Center. The STAR West members also participate in job readiness activities at that location. Staff reported that the Life Skills teacher will occasionally teach the food handler's course on site. Staff reported that the food handler's course consistently has 10-14 members. There is also a cooking class taught on site which approximately 44% of members have attended.	• Educate members about the long-term benefits of developing job readiness skills and encourage members to attend various job readiness trainings at the STAR West center or the Life Skills Center.
	Domain 6 **Advocacy**			
	6.1 Self Advocacy			
6.1.1	Formal Self Advocacy Activities	1-5 5	Members participate in formal advocacy activities inside and outside of the center. Staff report that advocacy classes such as DB101, Myth Busting, and Action Planning are offered regularly at the center. Members are taught how to effectively call their clinical teams when they need assistance. Staff estimates that about 85% of STAR members are formally participating in these activities. In addition, members can request additional, one-on-one assistance for handling	

			personal advocacy concerns by completing a STAR request form.	
6.2 Peer Advocacy				
6.2	Peer Advocacy	1-5 5	Information on peer advocacy activities is posted around the center on bulletin boards. Members receive information on community events such as the NAMI walk and the Day at the Capitol. Members can request additional assistance in advocacy activities from the STAR team through a request form. There is evidence that members assist other members in efforts to advocate for needs and concerns. Members reported developing advocacy skills at the center and thorough opportunities provided by the center.	
6.2.1	Outreach to Participants	1-5 3	Most of the center's outreach to participants occurs within the building itself. There were flyers and brochures located at the receptionist desk. Group listings are posted on a large white board in the dining hall; the finalized daily schedule is posted in the lobby. The center has sign-up sheets for volunteering/chores within the program. There was little evidence of multi-media or social media promotion of the program or activities.	• Explore the use of social media platforms (Blogger, Facebook, Ning, Twitter) as an outreach tool to membership. • Increase member-to-member outreach efforts to those who have not attended in a while through phone calls, periodic emails, etc.

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	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	4
1.3.3 Linkage with Other Services Agencies	1-5	5
Domain 2: Environment	**Rating Range**	**Score**
2.1.1 Local Proximity	1-4	3
2.1.2 Access	1-5	3
2.1.3 Hours	1-5	4
2.1.4 Cost	1-5	5
2.1.5 Accessibility	1-4	3

		Rating Range	Score
2.2.1 Lack of Coerciveness		1-5	4
2.2.2 Program Rules		1-5	5
2.3.1 Physical Environment		1-4	3
2.3.2 Social Environment		1-5	5
2.3.3 Sense of Community		1-4	4
2.4.1 Timeframes		1-4	4
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	4
3.4 Choice		1-5	5
3.5 Recovery		1-4	3
3.6 Spiritual Growth		1-4	4
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	4

	Rating Range	Score
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	4
4.5 Peer Mentoring and Teaching	1-4	4
Domain 5: Education	Rating Range	Score
5.1.1 Formally Structured Activities	1-5	5
5.1.2 Receiving Informal Support	1-5	4
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	3
Domain 6: Advocacy	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	3
Total Score	**188**	
Total Possible Score	**208**	