

2021 ANNUAL REPORT

Credo Community Center for the Treatment of Addictions, Inc.



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Table of Contents

CREDO COMMUNITY CENTER OPERATING BOARD	3
CREDO COMMUNITY CENTER FOUNDATION BOARD	4
CREDO COMMUNITY CENTER EMPLOYEES	5
EXECUTIVE DIRECTORS REPORT	7
FINANCE	8
HUMAN RESOURCES.....	10
COMPLIANCE, QUALITY ASSURANCE, AND SAFETY	15
INFORMATION TECHNOLOGY.....	22
ELECTRONIC HEALTH RECORD/HEALTH INFORMATION TECHNOLOGY	25
OUTPATIENT SERVICES	28
RESIDENTIAL REHABILITATION SERVICES FOR YOUTH “THE FARM”	34
MEN’S COMMUNITY RESIDENCES.....	42
PATRICIA POND HINCKLEY WOMEN’S INTENSIVE RESIDENTIAL SERVICES.....	46
RESIDENTIAL CENTRAL INTAKE	55

CREDO COMMUNITY CENTER OPERATING BOARD

MISSION STATEMENT: *Transforming Lives Through Quality Treatment.*

- Peter Ouderkirk, President
- Joey Marie Horton, Vice President
- Jennifer Jones, Secretary
- John Nuber, Treasurer

- Cynthia Ackerman
- Teresa Gaffney
- David Geurtsen
- Kristine Maloney
- Cheryl Mayforth
- Sam Purington
- Jill Laureano-Surber
- Corey Zeigler
- Genevieve Fidler
- Kyle Aumell
- Edward Brown, *Emeritus*

CREDO COMMUNITY CENTER FOUNDATION BOARD

MISSION STATEMENT: *To morally and financially support the mission of the Credo Community Center for the Treatment of Addictions, Inc.*

- Terry Williams, President
- Tim Kelly, Vice President
- Paul DiFabion, Secretary
- Shane Simser, Treasurer

- Clifford Brown
- Jim Finnerty
- Julie Sawyer
- Sherry Wilson
- Sam Cavallario
- Stacy Spaziani
- Jennifer Hodge
- Allison Roselle
- Toby Schilling, *Emeritus*

CREDO COMMUNITY CENTER EMPLOYEES

As of December 31, 2021

Executive Leadership:

- John Wilson, *Executive Director*
- Tracy Leonard, *Director of Operations*
- Jeanette Hardy, *Human Resource Director*
- Jordan Jones, *Chief Financial Officer*
- James Kobylanski, *Information Technology Director*
- Caryn White, *Director of Outpatient Services*
- Nicole Pierce, *Director of Residential Services*

Melanie Adkins

Allison Albers

Jennifer Allen

Kizzy Allum

Issa Alzouma

Sally Ames

Johnny Bailey

Breanon Banner

Samantha Barter

April Beamer-Breen

Kara Benson

Shawna Berry

Dallas Blowers

John Breen

Danielle Brett

Jacob Broadbent

Shane Brown

Marissa Brown

Kennedie Brown

Kathy Cole

Natalie Cole

Nickcole Collins

Sara Colton

Iakohnhiio Cook

Christopher Coose

Jasmine Davis

Dawn DeLair

Sara Dick

Margaret Dillabough

Scott Donato

William Draper

Erica Eichner

Elizabeth Fairbanks

Donna Flanagan

Randi Forbes

Leon France

Craig Frederick

Ashley Fulmer

Melinda Gabriel

Megan Gadbow

Shannon Galarneau

Maddie Gist

Jessica Green

Olivia Grenier

Regan Gushlaw

Lori Hadley

Jeanette Hardy

Chant'y Harper

Christina Harris

Ryan Henry-Wilkinson

Gail Hicks

Charlotte Hicks

Meagan Hinkal
Danielle Holland
Erin Hunneyman
Irene Hunter
Gregory Ingerson
Alyssa Jenkins
Sabrina Jones
Christine Jordan
Julie Kampnich
Amanda Keller
Paul Kellogg
Cindy Kessler
Lesley Kirch
Jessica Kirk
Jessie Kloster
Richard Lanier
Hayley LaRose
James Liscum
Erin Loomis
Heather Loree
Cheryl Malbeuf
Jesse Martuzas
Greg Matukas
Timothy McConnell
Sean McDonald
Moriah McGhee
Kristan Morgan
Matthew Morin
Robert Mullin
Grace Nowak
Megan O'Meara
Matthew Orvis
Paula Otis
Teresa Padron
Arianna Pan
Shay Park-Richards
Jennifer Peckman
Daniel Pisaniello
Tina Porter

Priscilla Pruitt
Anna Puccia
Sydney Rainey
Angela Ramil
Alexandria Rawlins
Sarah Rebel
Kim Richards
Mykayla Richards
Cortney Salisbury-Corey
David Scanlin
Korin Scheible
Kathleen Scheible
Leah Schneider
James Scordo
Sean Scott
Jeffrey Sero
Stephanie Shafer
McKenzie Sharlow
Vicky Shaw
Roxy Sheltray
Timothy Skinner
Andrea Smith
Kristen Smith
Michele Smithers
Elizabeth Stevens
Kristie Towles
Stefanie Truesdale
Amy Turner
Alicia VanZandt
Jessica Vida
Heather Villarreal
Linda Vincent
Patricia Wetterhahn
Reese Wheeler
Paeton White
Brittany Williams
Wendy Wulfken
Jenna York

EXECUTIVE DIRECTORS REPORT

As a provider of Substance Use Abuse and Mental Health services 24/7 365, Credo's staff wear the badge of essential workers. They come to work, day in and day out without hesitation. Their commitment to the people they serve is second to none.

We have seen growth in client numbers during the COVID-19 pandemic due to the rise in substance use and mental health struggles among our population. In 2021 Credo served 1,620 unique substance use and mental health clients. The agency census ballooned to around 900 clients this year, with many of them having an Opioid Use Disorder.

Residential Care was very difficult during the pandemic. With state-imposed restrictions in place it was tough to increase censuses and to fill vacant positions. Residential census went from below 50% utilization at the beginning of 2021, to being almost 90% utilized at all locations. At the same time, they managed their way through COVID-19 outbreaks in the houses with minimal disruption.

Staff shortages seemed to plague us throughout the year, however, the staff we do have carried the programs by jumping in and covering shifts or whatever needed to be done.

We have an amazing staff that have been stressed during the pandemic, but they keep showing up. I am so proud of the work they have accomplished during this time and their willingness to go above and beyond.

I have a quote from a staff member when asked how everything is going, "Things are good. Really busy and stressful - but good!" I couldn't have said it better!

FINANCE

In 2021 all private donations, pledges and revenues went to the Credo Community Center Foundation, totaling \$42,553 - an increase of 17% from 2020.

The Foundation was able to hold limited events during the year due to COVID-19 restrictions, which generated \$10,222 in revenue for the organization.

The Foundation awarded \$8,300 in scholarships to alumni and employees of Credo Community Center for educational and vocational pursuits.

In November of 2021, the Credo Community Center Foundation purchased 1136 State Street as an opportunity for strategic growth for our programs in the future. In the short-term, this site will house Credo administrative staff and Credo Community Center for the Treatment of Addictions, Inc. will pay the Foundation fair market rent to utilize the space.

The United Way of Northern New York Supported the Credo Community Center in 2021 with \$24,000 in funding to support and expand our Opioid Overdose Prevention Program across the tri-county region including Jefferson, Lewis, and St. Lawrence Counties. By partnering with other organizations such as the North Country Family Health Center, Seaway Valley Prevention Services, Transitional Living Services, and Mountain View, we are expanding outreach across county lines and serving vulnerable populations and communities who would otherwise be without Opioid Overdose Prevention Programs.

The Deline Foundation provided \$24,000 to Credo Community Center to explore opportunities for shared services with another local non-profit (Transitional Living Services), to strengthen our service delivery and streamline operations where applicable, with Bonadio (the auditing firm for both agencies) facilitating the exploration process.

In September 2021, Credo was awarded a continuation of its SOR Outreach program in Jefferson County for one year in the amount of \$117,000. Credo was also awarded SOR funding through the North Country Regional Network of Care to improve treatment system collaboration by providing urgent or emergent response to individuals in need of addiction treatment services

including peer outreach and engagement, immediate connection during a crisis, crisis clinical assessments, rapid access to Medication Assisted Treatment prescribers, and seamless incorporation of naloxone and other person-centered risk reduction services in Jefferson and Lewis Counties, totaling \$73,000 and \$17,000 respectively.

2021 Total Program Budget for the Agency:

Total Budget: \$8,930,667

Total Revenues: \$ 6,536,316

Total State Aid: \$2,224,500

Credo's budget totals decreased compared to 2020 due to the ending of multiple SOR grants, though this will be temporary as the agency looks to adding additional programming and services to meet expected increasing demand in 2022.

The Health Home Program continued to experience significant growth with revenues increasing to \$421,000, a 13% increase from the previous year.

During 2021, OASAS conducted a fiscal review of Credo Community Center for the years 2018 through 2020. The fiscal review monitored our compliance with OASAS's fiscal and administrative guidelines across all areas of finance, from billing to AP entry, to reporting. Credo did extremely well on the review with only two minor findings that have since been corrected.

HUMAN RESOURCES

Benefits

In 2021 we were once again able to continue our high deductible health plan that includes a Health Savings Account (HSA) and a Health Reimbursement Arrangement (HRA). The cost to the employee for the health plan was not increased. Wellness Biometric screening continued to be offered to all full-time employees including those who do not participate in Credo's health plan. We had 66 out of 101 (65%) full time staff participate in the biometric screening. This is a decrease from 73% participation in 2020. Of the 66 who were screened, 10 were first time participants. Those who choose not to participate will continue to be offered another chance to participate next year. All other benefits for 2021 remained consistent with no change in cost.

Credo transitioned the 401(k) platform to a new record keeper at the end of 2020 to enhance visibility and functionality for participants and administration. The move to Fidelity was an important step in modernizing the plan access. The Morgia Wealth Management Group remained as plan advisor.

Turn Over Rate

Credo had 122 employees in January 2021 and 135 in December 2021 which equates to a growth rate of 10.7%. We hired 61 employees over 2021. Millennials made up 39% of our staff population, while 18% of our staff population is made of Gen Z. 76% of our employees were female.

Credo's total employee turnover for 2021 was 37.6%; this is a slight decrease from 38.6% in 2020. If we break out the full-time turnover from the part time turnover, we see turnover for part time staff at 72.10%. This rate has increased for the first time since 2018. The high in 2018 was 80.8%. The average stay of a part time employee for 2021 was 2.9 years compared to 2020 at 4.8 years. Some of this can be attributed to the merging of part time roles to create full time opportunities to make positions more marketable, thus less part time openings are available. The full-time turnover rate has decreased to 29.20 % from 2020 at 38.4%. It is important to note that 20 of the 30 full-time positions (or 66%) were direct care or clinical staff which is lower than 2020 at 77%. In 2021, 6 separations or 13% of voluntary departures were related to relocation. Of the relocations four (4) were due to

affiliation with the military or a total of 8% of voluntary turnover, this is a reduction from 10% in 2020. The US Army still processed less permanent change of duty stations for 2021 due to the COVID pandemic which may have contributed to this continued reduction in staff departing due to military relocation.

Break Down of Turnover

We had a total of 48 staff members who left Credo in 2021; 45 departures were voluntary (93%) and 3 were involuntary (7%). Voluntary turnover was up by 29% for 2021. Positions of note that we saw turn over in were as follows; 10 were counseling staff (decrease from 12 in 2020); 9 were Relief Workers/Entry Level Counselors (a decrease from 10 in 2020) and 9 were clerical support or Engagement staff (a decrease from 12 in 2020). In addition, turnover included 4 RN's/LPN's (increase from 3 in 2020), 5 on-call/temp workers (increase from 4 in 2020), 1 case manager, 2 site managers/supervisors, and 2 Vocational positions. Overall, we saw a decrease in the number of full-time departures, 30 compared to 38 in 2020 and an increase in part-time staff departures, 18 compared to 12 in 2020.

Of the forty-five voluntary separations, reasons for departing fell into the following categories: Seventeen (17) another job offer, nine (9) left for personal reasons, six (6) staff moved out of the area, five (5) other reasons: dissatisfied with type of work, pay or no part timer role available, three (3) no call or show, three (3) response/reason not given, and two (2) returned to school. The average tenure for voluntary departing employees was 2.1 years; an increase from 2020 of 1.7 years.

We had 3 involuntary terminations in 2021 (compared to 15 in 2020). All three were temporary employees who completed the assigned role for the period requested.

Eighteen staff of the 48 who left (or 37.5%, up from 35% last year) had been employed at Credo less than one year with an average stay of 4 months (down from 6 months in 2020). Overall, it is noted that the average stay of someone with less than one year with Credo has decreased for two consecutive years.

The average turnover rate across companies in the North American Industry Classification System that are classified the same as Credo under NAICS Code

62 (Health Care and Social Assistance), Credo is below the industry benchmark of 51.8% with our total turnover rate at 37.6% for 2021. This is positive news, especially based on the challenges that have been in place during the pandemic which has been identified in the employment sector as the period of “The Great Resignation”.

Overtime Costs

Total overtime costs for 2021 were \$144,000. A large part of this was coverage for COVID related leaves and open positions in all programs throughout the year. This overtime cost also includes rates to pay part time employees for holiday time at time and a half as well as short notice pay for emergency call offs and illness. Total payroll for 2021 was \$6.6M a decrease in payroll in 2020 from \$6.7M. A healthy overtime standard rate for an organization is at or below 3%. Credo Community Center is falling just below that rate at 2.19% a small increase from 2020 which was 2.06%

Promotions and Internal Movement

In 2021 Credo had 11 promotions within the agency in addition to 20 staff whose title and job descriptions were updated to include additional responsibilities and duties. We had 5 part time employees who took on full time roles. Of the 11 promotions, 4 were promoted into roles with supervisor responsibilities.

Recruitment Efforts

HR continues to commit a large amount of dedication and time to recruitment efforts. Virtual job fairs were attended when able during 2021 to remain vigilant in sharing our openings. We consistently faced a challenge in applicants for residential direct care staff during 2021 but saw a slight increase in clinical staff applications during the year. In 2021 the HR staff recruited for a total of 89 openings and on average roles were filled in 66 days. In 2020 the average time to fill was 37 days. The average time to fill has increased by 29 days due in large part to the drought of available applicants. The average time to fill health service positions across the US in 2017 was 49 days, a recent updated industry standard metric is not available. HR has continued to track this metric for clinical staff as this has traditionally been a challenge. For 2021 time to fill vacancies for both residential and outpatient programs were the same.

HR staff decreased college relation communication during 2020 as other legislative and labor related matters arose with the pandemic. Relationships remained strong with limited communication with New York colleges as we worked through on site and remote internship opportunities. In 2021 Credo hired 4 interns into regular roles. In 2021 the agency increased the number of supervisors approved to provide supervision for interns. This has allowed the pipeline of future workers to grow, as well as a learning opportunity for senior staff to gain some supervisory experience.

Projects/Areas of Note

As NYS COVID-19 protected leave and federal protections under FFCRA continued for most of 2021, the HR department managed over seventy-five (75) Covid related leave cases. This was an increase from 2020 of 50 cases. Cases included time to document leave reasons, and coordination with supervisors and employees on return-to-work safety procedures, as well as internal contact tracing. A large amount of time was dedicated to supporting programs as the pandemic impacted employees personally and required coordination with public health, health care providers and employees to ensure required documentation was on file for protected leaves.

The HR department began tracking the vaccination status of each employee for weekly reporting to OASAS, as well as sharing all available opportunities for vaccination clinics to encourage vaccination. The HR department implemented digital health screenings for staff across the agency easing the burden for onsite daily screenings of staff as they were able to complete screenings on personal devices prior to reporting to work.

The Wellness Committee, with continued support from the HR department, once again stepped up to engage employees during this dynamic time in our community as employees experienced stressors from the pandemic. Events included a blood drive, earth day grow kits, a step challenge, personal hygiene drive for our clients, a summer scavenger hunt, and a costume contest. The Wellness Committee also supported and promoted community health events such as Run for Recovery, Community Cup, and the Heart Walk. Employees engaged in planting trees for the city of Watertown, a comfort food cook off in the Fall and our second annual event of members of the committee passing out donuts and apple cider to employees in appreciation. The committee ended the year with Coco and Conversations, a fun activity where staff can

meet virtually to learn a bit about random topics and get to know coworkers in a different way. This group of employees continues to make an impact on employee morale by offering wellness tips, health challenges and opportunities to engage in self-care activities that are fun and interactive for all employees.

In 2021 there was a decrease in unemployment claims processed through the HR Department with twenty-two (22) cases compared to thirty-five (35) in 2020. In 2021 imposter claims continued through the first quarter. 8 imposter claims were identified and halted compared to 4 in 2020. The agency had a 100%-win rate on protested claims for 2021 compared to an 80%-win rate in 2020. Unemployment benefits charged for 2021 were \$34,290 compared to 2020 of \$93,448. Credo avoided liability of \$28,732 by responding and protesting to claims.

COMPLIANCE, QUALITY ASSURANCE, AND SAFETY

Each year an Annual Corporate Compliance Work Plan is developed, reviewed by the Compliance Committee, and approved by the Operating Board. Credo's work plan is developed based on the anticipated needs of the agency; updates to regulations, Local Service Bulletins, and applicable guidance documents; and the NYS Office of Medicaid Inspector General's (OMIG) annual work plan.

The 2021 plan included monitoring charts and sites for compliance; updating and developing policy and procedures to remain in compliance with regulations and guidance; improving the incident management process to be more efficient and effective; training and education; and general assistance with other projects within the agency. Information technology policies, procedures and monitoring were originally included in the compliance plan; however, they were transitioned to the newly hired IT Director mid-year.

In 2021, the COVID-19 pandemic continued to play a role in service provision. Regulatory waivers enacted in 2020 were extended into and throughout 2021 allowing for continued flexibility in service delivery to clients. Telehealth has continued to play a significant role in service provision under the regulatory waivers.

A summary of the activities of the Corporate Compliance office for 2021 are summarized below.

Chart and Site Audits

Program chart audits focused on OASAS outpatient services, opioid treatment services, and inpatient rehabilitation services in accordance with the annual OMIG work plan that identified these programs for auditing in 2021. Based on the audits completed, documentation errors and omissions were identified; corrections and/or retraining have occurred; and Medicaid payments were returned for billed services, when appropriate.

Site audits were completed at each facility and any identified safety concerns or areas for improvement were communicated to the Program Director or their delegate for corrective action.

Policies & Procedures Developed or Updated

- Information Technology Business Continuity and Disaster Recovery

- OTP Policy
 - 822 regulatory updates
 - Admissions Policy
 - Treatment/Recovery Planning
 - Transition/Discharge Planning
- Community Residences
 - Non-Controlled Medication Disposal
- RRSY
 - Gambling Screen
 - Narcan
 - Client Case Loads
 - Communicating Visitor Searches
- Agency Wide Manual
 - Delayed Discovery
 - HCV Testing
 - Personal Protective Equipment
 - Telehealth

Safety Program

As COVID-19 guidance continued to evolve in 2021 through the Centers for Disease Control, NYS Department of Health, and OASAS; policies, procedures and posters with COVID-related safety information were updated and distributed to staff.

In response to the pandemic, New York State also required the implementation of the HERO Act. A plan was developed and communicated to staff which addresses exposure controls, housekeeping, infection response, training, and plan evaluations during a designated outbreak, as well as retaliation and violation reporting protections.

To bolster the agency's ability to emergency readiness, Officer Ryan of the Watertown Police Department was invited to evaluate the preparedness of each facility to respond to a threatening situation, such as an active shooter or person with a weapon either inside or outside of a facility. The information gathered resulted in the purchase of additional first aid equipment, identified areas for improvement in current facilities, and provided specific safety features to consider as the capital project progresses. It is anticipated that Officer Ryan will provide response training to all staff in 2022.

A total of fifty-three (53) safety related incident reports were made in 2021 (includes incident types of: injury to client or staff, physical abuse/altercation between clients, slip/fall non-injury, and vehicle incident). No systemic issues were identified.

Continuous Quality Improvement (CQI) Program

The department utilized multiple levels of quality assurance throughout the agency to assist in quality improvement measures, such as:

- Simulated OASAS/OMIG audits being conducted at the executive level, which utilize standardized audit tools. This level includes corrective action planning to prevent reoccurrence.
- Monitored staff patterns within the community residences for house check and person search compliance.
- Conducted cell phone audits in the outpatient program to verify accurate documentation of service provision.

In 2020 CARF recommended that interventions put into place with the intention of correcting or improving behavior patterns be evaluated for effectiveness. In 2021 this was put into effect and the CQI committee chose to specifically target the two most frequent incident types, agency wide, for intervention and monitoring. Over the course of the year, interventions such as trainings, compliance tips, posters, and reference materials were implemented with the specific intention of reducing the incidence rate of the target incident types and, by the end of the year, the trendlines were successfully trending downward.

No program recertification audits occurred during the 2021 calendar year.

Billing & Revenue Cycle Management

- As billing practices continued to be altered under temporary COVID-19 relief, monitoring the billing of Medicaid and Managed Care Organizations (MCOs) continued to be a top priority. This will continue to be monitored until the temporary relief expires.

Corporate Compliance Program

- Completion of Justice Center Code of Conduct training to all agency employees
- Updated new hire onboarding materials
- Completion and approval of annual compliance work plan

- Distribution of conflict-of-interest disclosure statements to appropriate staff and Board members (Operating & Foundation)
- Compliance monitoring in the following areas:
 - Fiscal audit conducted by Bonadio Group
 - OASAS regulations, LSBs and guidance documents
 - Patient/Perception of Care Surveys
 - Suggestion boxes; and
 - Hotline calls and e-mails
- Reporting all Independent Practice Association (IPA) Requirements

Fraud, Waste and Abuse:

- In 2020 cell phone audits identified potential fraud by one employee in the outpatient program. The investigation was completed in 2021 and paybacks were made as appropriate.
- All new hires were provided with fraud, waste, and abuse training.
- All staff and Board members were provided annual compliance and fraud, waste, and abuse training.

Incident Management Program:

The Incident Review Committee reviewed a total of 276 incidents throughout 2021, 22 of which did not meet the definition of an incident. The committee met regularly and reviewed these incidents for trends and to identify areas for improvement through training and policy and procedure changes. When appropriate, incidents were also referred to Human Resources, and/or the Safety, Compliance or Continuous Quality Improvement committees for more information or further action. Corrective actions and/or safeguards that were put into place to prevent future occurrences of similar incidents were monitored for effectiveness. Incidents were also reviewed to ensure proper processes were followed for Justice Center and Mandated Reporter reports. When Justice Center reports were made, the agency fully cooperated with Justice Center investigations or conducted full internal investigations and submitted the findings to the OASAS Regional Office.

The two most frequently reported incident types that required intervention were medication errors and confidentiality violations.

- Medication Errors:
 - These types of errors accounted for forty-five (45) incident reports, one of which resulted in an adverse reaction.
 - Staff were provided with retraining.

- Processes were reviewed and revised.
- Confidentiality:
 - There were fourteen (14) potential violations of confidentiality that, upon review, while best practices were not followed, did not constitute a violation.
 - Nineteen (19) reports were determined to be reportable violations of confidentiality with the Office of Civil Rights.
 - Annual confidentiality training was conducted with staff
 - Privacy/Security Policies were reviewed and in the process of being updated at the end of 2021 to reflect new technology within the agency.

In both areas a concentrated effort was placed on interventions through process changes, trainings, compliance tips and/or posters. Through these efforts, by end of 2021, a downward trendline was achieved in both areas. These will continue to be a focus in 2022.

Other incident reports included:

- Forty-three (43) incidents under the category of “other reportable incidents.” When reviewing these incidents, no trends were identified in incident type, program, location, responsible staff member, or client of concern that would indicate a systemic issue.
- Thirty (30) reports regarding client injuries. At the request of the OASAS Regional Office, all client injuries that resulted in a recommendation for medical attention were reported to the Justice Center, whether the medical attention was or was not sought.
- Emergency services were called to facilities for non-medical purposes twenty (20) times and medical emergencies nineteen (19) times.
- Nineteen (19) reports were regarding the need for emergency services.

An Incident Action Plan form was also implemented to streamline communication between programs and the compliance department regarding after incident actions to include preventive actions taken, patient support provided, and patient, staff, and agencywide interventions. This has decreased the turn-around time of investigations.

Trainings:

The department continues to incorporate competency-based trainings. This means that all employees must be able to demonstrate their understanding of the training material through a test or simulation.

Topics discussed at Total Staff meetings or deployed to all staff:

- 1/27/2021 Justice Center and Credo Codes of Conduct
- 2/24/2021 Incident Report Form Updates & NX
- 3/24/2021 Cyber Security/E-mail Encryption
- 4/28/2021 Incident Management & Mandated Reporter
- 5/26/2021 Confidentiality/HIPAA/42CFR
- 7/28/2021 HERO Act

Other trainings conducted throughout the year included:

- Block Grant
- Preventative Driving
- Fire Safety
- Corporate Compliance
- Workplace Violence Prevention
- Tractor Safety
- Lawncare/Maintenance Training
- New Employee Training
- Compliance Tip Tuesdays – these are developed from regulation changes, process changes, incident trends, and quality assurance findings – topics included:
 - Reply All in Email
 - Confidentiality
 - Visitor Sign In
 - It Help Desk PHI Violation
 - Confidentiality on the Phone
 - Medication Management
 - Billing Fraud
 - Documenting Start/Duration Times in Session
 - Telehealth Audits
 - Confidentiality/Privacy
 - Password Protection
 - Welfare Check
 - Panic Button
 - Keep Up with Compliance Training

- COVID-19 Sanitization
- OASAS Incident Report Form 2
- Confidentiality
- Control Confidential Client Information with Confidence
- Confidentiality 24/7
- Virtual Private Network (VPN) Use
- CDC, NYS & Credo Mask Policy
- Verifying Identity Over the Phone
- Emails with PHI Must be Encrypted
- File Cabinet Safety
- Fill out Release the Correct Way
- Good Samaritan Law
- Documenting Physical Altercation
- Toxicology Result Communication
- Relationships
- 42 CFR Part 2 & Duty to Warn
- Name Change – Release
- Client-Centered Releases
- Avoid Duplicate Charts
- Releases for Care Coordination
- Medication Administration
- Stash Pockets & Spaces
- Who Can Sign Consents
- Client Appointment Reminders
- Don't Get Hooked
- Client Info in HelpDesk Tickets
- Spooky IT Statistics
- Office Ergonomics
- Bonus tip: Snip the Strings
- Components of a Valid Release
- Expiration of Consents
- Smoke & CO Detectors
- Slippery Season
- Reporting Injuries
- Avoid Fire Hazards
- Incident Trends
- Overdose Reporting
- Advocacy vs Lobbying
- Break the Chain of Infection

INFORMATION TECHNOLOGY

Credo's Information Technology (IT) infrastructure has undergone substantial change in the last year with oversight by the Director of Operations (Tracy Leonard), James Kobylanski, a temporary IT employee, CREG Systems (Credo's managed technology services partner), Credo's IT Committee, and the patience and receptivity of the entire staff. With continued support from CREG Systems and the added expertise from James, Credo dedicated significant time and resources to support our evolving technical needs.

Early in 2021, CREG Systems assessed Credo's IT infrastructure at each location to better understand how technology was being leveraged, and to identify potential areas of risk/weakness. The goal was to discover and address any issues to ensure the organization is well positioned for secure, efficient, and reliable IT operations and scalability. The assessment report was received and reviewed with the IT Committee in January. The recommendations/priorities proposed by CREG Systems were as follows:

1. Automation – increase the efficiency and accuracy of internal policies/procedures/documentation by automating as much as possible
2. Cybersecurity – adopt NIST standards in an effort to mitigate risk and educate employees as the first line of defense against malware/ransomware
3. Business Continuity & Disaster Recovery (BCDR) – define, develop, and test BCDR policies/procedures to minimize impacts when (not if) an event occurs

Based on the findings of the report, the IT Committee Chair and the Director of Operations worked with CREG Systems to develop a prioritization matrix based on risk level, effort level, and associated costs. A subsequent action plan was developed to address the identified areas of concern.

The action plan began execution, and significant accomplishments were made; however, it became clear that the lack of internal IT expertise was a limiting factor, capping the amount of progress possible to be made. In the absence of an internal resource, reliance was placed on our IT Committee Chair to help “translate” incoming proposals, as well as to help guide Credo's overall technology strategy. In March of 2021, Credo acted on the need to bring in additional internal IT expertise and hired James Kobylanski as a temporary IT employee. For the next few months, James and the Director of Operations

worked diligently to develop an IT road map to guide Credo into the future, as well as an IT budget to support sustainable, secure, and efficient operational growth, and aid in the quantification of predicted expenses for fiscal planning (for inclusion into the agency-wide budget). Finally, they worked to identify and define a necessary IT governance organizational chart, to maintain sustainability and succession planning for IT personnel.

Leveraging the previously developed prioritization matrix, we were able to hit the ground running, beginning with the roadmap. 27 enterprise scale projects were identified, along with over 50 large-scale sub initiatives, not counting day-to-day operations. While the roadmap spotlighted these needs, actual implementation of many of the projects was hindered due to budgetary constraints. During this interim, James greatly assisted by helping the team understand where the greatest risks laid, along with their associated remediation costs, thus helping to reprioritize and, where possible, implement accordingly. As a result, seven “mission critical” initiatives were identified, accounting for security, scalability, and per dollar efficiency. Focus was placed on no cost, high benefit projects such as multifactor authentication, or Teams Governance. Other initiatives that were implemented during this timeframe included the purchase of a new phone system, the purchase of new camera infrastructure at Winthrop Street, a SDWAN (networking) external network architecture, a VPN implementation, the configuration and implementation of NinjaRMM (an automation, remote monitoring and help desk tool), an Office 365 backup, an IT Business Continuity and Disaster Recovery Plan, an outpatient capital project support plan relative to technology needs, Microsoft’s Advanced Threat Protection, the purchase and implementation of KnowBe4 (a cybersecurity monitoring & training tool), etc.

James not only provided direct oversight of the CREG Systems team, but he also worked closely with the Director of Operations to analyze and inventory potential staffing models for the agency to consider. He further assisted by reviewing and providing feedback on the IT Director job description, and he implemented a document to help ensure appropriate and high-quality managed service provided (MSP) services are available to Credo long-term. Because James was a candidate for the IT Director position, he was unable to assist the development of interview questions or participate in the interviews, but he offered his time and support when and where able to ensure Credo was positioned for success. He also offered to provide ongoing support for the transition if he was not selected for the position; however, in September of

2021, after interviewing a few very qualified candidates, James was selected as Credo's full time IT Director.

In December 2021, the Director of Operations and the IT Director submitted another application for funding (total of \$621,571.41) through the Federal Communications Commission (FCC). This funding opportunity was aimed to fund telehealth and connected care services provided by eligible providers with the goal of increasing vital access to healthcare services during the COVID-19 pandemic. If awarded, these funds would further advance Credo's ability to implement technology advancements to ensure accessible, high quality, safe, and secure service delivery.

While much of our advanced technology plan centered around us receiving this grant, and we did not receive notice of an award by the end of 2021. However, we didn't allow that deter progress! Through dedication, some financial creativity, and a lot of negotiation, Credo has managed to advance nearly all its technology initiatives, focusing heavily on those involving our security, scalability, and impact. Of the 27 enterprise scale projects, at least 20 have been wholly completed, or are actively moving forward. Of the seven "mission critical" initiatives identified, all seven have been either wholly or partially addressed, or are actively moving forward.

In the past nine months, Credo has advanced leaps and bounds from where we were, on nearly every technological frontier. Dependent on additional funding available, Credo is prepared to shift gears into optimization mode by mid-2022, compared to simply trying to modernize; transitioning from only addressing the things that will "kill" us, and onto things that will greatly increase efficiency and reach. 2022 is slated to be a monumental year of technological revolution for Credo, as many of the implemented changes will continue to roll out.

ELECTRONIC HEALTH RECORD/HEALTH INFORMATION TECHNOLOGY

Credo's Electronic Health Record (EHR) team became more formalized and robust during 2021 with the assistance of both a part time and a full time EHR Support Specialist, and oversight by the Director of Operations. Over the course of the year, the team spearheaded multiple initiatives to help drive workflow optimization using our NetSmart Evolv system.

In 2020, Credo was informed that NetSmart was pulling back services that support the Classic version of Evolv. Within 2021, we were required to transition to the NX version which is an advanced platform that is cleaner, and more user friendly, allowing for easy navigation and a seamless transition of client information. The multi-browser functionality of the new version allows for department specific "My Navigation" panels that provide shortcuts to commonly used views, as well as options to create a "My Favorites" list on each staff member's home screen relative to areas of high utilization.

To ensure competence, confidence, and agency wide understanding relative to this new version, the EHR support team met with each department individually and provided 1:1 training upon request during quarter 1 of 2021. Also, weekly EHR "office hours" were made available for anyone who wished to attend. Furthermore, "how to documents" and other training resources were shared on the Total Staff Teams site for users to reference in their day-to-day work; and weekly new hire NX trainings continue to be offered virtually by our EHR Support Specialists.

On April 2nd, the team successfully transitioned the clinical components of the system to NX. The financial/billing also transitioned around this time. While this change was somewhat difficult and scary for users, it opened the door to growth and new opportunities. With time, this transition has helped improve user satisfaction, it has made workflow process easier, it has brought about increased productivity, enhanced effectiveness, and ultimately, it has made us more efficient as a team so we can deliver higher quality patient care. Ultimately, by adopting the NX version of Evolv, we equipped Credo to have an EHR system that is up to date with the newest features and functionality supported by NetSmart.

Also, during 2021 with the assistance and technical expertise of Credo's new IT Director and Director of Operations, the EHR and IT help desk transitioned

from SpiceWorks to the Ninja Ticketing Portal which helped make our IT technicians and EHR Support Specialists more efficient with modern interfaces that puts all our decisions and tools in one place. This powerful endpoint management system allows the team to quickly resolve IT and/or EHR issues, minimizing downtime. The core device monitoring and management capabilities of this ticketing portal will eventually allow for us to capture data relevant to the number of tickets submitted by program, user, and type. In 2022, we will look to deploy more robust features of this portal that allows for more efficient user experience (“an easy button” and fillable form) that will provide us with the data for decision support. This information can then be used by the EHR team and supervisors as it relates to systemic vs. user specific EHR training needs.

To further support end users, the EHR team also arranged for a weekly EHR and outpatient clinical leadership team meeting. The goal of these meetings is to optimize workflow, enhance user experiences, and provide training resources. Some specific projects have been implemented/accomplished as a result of these collaborations, including, but not limited to: the higher level of care workflow optimization; an outpatient stratification dashboard; EKG billing for our integrated outpatient system and mental health clinic; PAS 48 FTE and allocation report; OTP take home report; bi-directional health information exchange procedures; certain navigation profiles by job titles; utilization of NetSmart’s State Reporting tool for the submission of PAS forms; nested forms; the addition of various gender identity options to promote diversity, equity, and inclusion; and perhaps, most noteworthy, 822 regulation changes! The 822 regulation changes resulted in countless meetings with the clinical team, NetSmart, Farnham and Credo’s Compliance Department to ensure the EHR system was modified and leveraged to support necessary regulatory changes in accordance with updated policies and procedures, including things such as treatment planning, comprehensive assessments, problem needs, session notes, etc.

In 2021, the EHR team also engaged with the residential leadership team to further explore opportunities to mitigate medication errors using the technology platform. A demo was conducted with NetSmart to better understand the E-MAR platform and how it could potentially support continuous quality improvement. Credo decided not to pursue this route, but the team continues to provide necessary support and training to the residential team upon request. Moving into 2022, the EHR team will look to

set up a similar reoccurring meeting with residential staff as they do for outpatient. Meeting with other departments (i.e., care management, finance, Central Intake, etc.) will also take place in efforts to accomplish similar outcomes. Furthermore, the EHR team will continue weekly collaborations with NetSmart's Client Account Executive and Farnham's EHR team to maximize partnership opportunities and enhance person centered care.

These and other initiatives will continue to be communicated through the monthly Evolv Explorer Newsletter that is distributed to total staff as means of communicating changes with the EHR, upcoming initiatives, and project successes.

Finally, at the conclusion of 2021, the EHR support team launched our second annual EHR survey to assess the quality, effectiveness, and satisfaction of the team relative to the features and functionality of NetSmart Evolv, as well as the support received by the EHR support team. Results were analyzed and a 2022 workplan was developed to further address some of our findings relative to training needs, communication preferences, etc.

A few upcoming initiatives highlights for 2022 include but are not limited to the following: new custom reporting and report library; an EHR Business Continuity and Disaster Recovery Plan; data insights from the Ninja Ticketing portal; exploration of potential patient portal options for enhanced client experience and engagement; and continued collaborations with various departments for workflow optimization, enhanced user experience, and training opportunities.

OUTPATIENT SERVICES

Watertown, NY 13601 & Lowville, NY 13367

Services Overview

Credo Community Center operates outpatient treatment programs in Jefferson and Lewis Counties with locations in Watertown and Lowville, as well as in community services. The Watertown office operates an Office of Addiction Services and Supports (OASAS) 822 Opioid Treatment Program (OTP), an Office of Mental Health (OMH) 599 Clinic Treatment Program and an OASAS 825 Integrated Outpatient Services (IOS) which combines the OASAS 822 Substance Use Disorder Outpatient Program and the OMH 599 Clinic Treatment Program. The Lowville office operates as an additional location for the OASAS 825 IOS.

Credo outpatient programs provides counseling, medical, peer and care management services using a person-centered approach with an emphasis on treatment of opioid use disorders and co-occurring substance use and mental health disorders. All services are available in-person and through telehealth, at either location or off-site. The services include clinical assessment, referral, individual, group, family, and significant other counseling, peer advocacy, psychiatric assessment, psychiatric medication management, medication assisted treatment (MAT) assessment, MAT medication management (including nicotine replacement therapy (NRT)), care management, vocational-educational services, individual, family and community opioid overdose prevention education, Narcan distribution, and outreach. Credo provides specialized evidence-based services for adolescents through the Seven Challenges program. Credo OTP provides dosing up to six days a week at the Watertown site for clients prescribed methadone or buprenorphine.

Pandemic Impact

All Credo outpatient services continued during the second year of the COVID-19 pandemic. Safety and mitigation efforts directed by OASAS were followed which kept our patients, staff, and community safe.

Integrated Care

The Credo outpatient treatment programs have integrated care services in the programs as much as possible and staff work across all three programs based on individual scope of practice. Policies and procedures have been created in a

way to make the experience as seamless as possible for patients and consistent for staff.

Opioid Treatment Services:

The Credo Opioid Treatment Program (OTP) celebrated its five-year anniversary in September 2021. The OTP has continued to grow both with the increase of patients, as well as with the need for additional staffing as the need for this specialized service continues in this community. During the span of 2020, the clinic grew again and started 2021 with 232 admitted clients and ended with 281. During 2021 the OTP has focused on implementing rapid access to Medication Assisted Treatment (MAT), a process that works to engage and assess patients for MAT quickly and as soon as they decide they are ready for services. With the growing census of patients, in March the OTP opened a second dosing window which reduces wait times in the lobby and in general, improves the services patients receive. This helped the dosing process immensely. Credo is hoping to improve the dosing process further and open a third station in 2022.

Lessons were learned in 2020 as the OTP adapted to the COVID-19 pandemic. These practices continued in 2021 and the OTP remained open daily throughout the pandemic, treating existing patients and admitting new ones. All patients, regardless of COVID-19 exposure or infection received their medications, including by delivery by program staff. Individual counseling, medical, and peer services continued in 2021 either in-person or by telehealth. Group therapy also increased in 2021 despite the requirement of social distancing.

The opioid use crisis continues to be an issue within the communities we service and thus the OTP is making plans to serve additional clients in 2022 onsite, and in the community depending on the need and request of patients.

Outreach and Offsite Services:

Credo outpatient's Outreach and Offsite Services Program, with the help of State Opioid Response (SOR) funding, operates in both Jefferson and Lewis Counties and provides assessment, clinical and peer services in-person, in the community, and by telehealth connecting with community providers. The outreach and offsite services staff provide education about Credo services and treatment options in general for substance use symptoms, connect people to services with Credo and other providers and facilities, and educate on harm

reduction practices and the use of Narcan. The outreach and offsite staff coordinated transportation between service providers such as inpatient facilities, residential care, hospitals, and local jails. Additionally, a collaborative agreement was established with the probation department in Jefferson County to co-locate a Credo outpatient staff in their office one day per week. The program is planning more services in the community in 2022.

In 2021, Lewis County partners developed a more structured and efficient overdose mapping process, and Credo outreach and offsite services staff participate in the committee. Peer Advocates from both Northern Regional Center for Independent Learning (NRCIL) and Credo are contacted by the Mapping Committee to assist in outreaching identified individuals who may benefit from treatment services. Credo continues to collaborate with other providers on an overdose Mapping Committee in Jefferson County and contacts at-risk individuals to educate and offer them available community resources.

The outreach and offsite staff have continued to provide substance use services directly to patients incarcerated at the Jefferson and Lewis County jails. Due to the pandemic, much of the services in 2020 and 2021 had to be provided by telehealth, but the program is anticipating more in-person care at these facilities in 2022. In 2021, 115 services were provided to patients incarcerated at Jefferson County jail and 101 at the Lewis County jail.

Opioid Overdose Prevention Program (OOPP)

In 2021, Credo outpatient continued to focus efforts on opioid overdose education and prevention and operated an NYS OOPP, which provided 678 individual trainings and 694 Narcan kits. Credo outpatient partnered with agencies in Jefferson, Lewis, and St. Lawrence Counties to help them provide OOPP services and all met quarterly throughout the year. Lewis County worked collaboratively with the Healing Communities initiative to distribute and provide Narcan kits for up to five Naloxboxes around the county. To date, three Naloxboxes have been hung and filled with kits. Naloxboxes are currently within the Lewis County Department of Social Services building, Lewis County courthouse, Lewis County Probation and the NRCIL waiting room.

Central Intake:

In 2021, Central Intake remained the hub of all activity at the outpatient clinics for both telehealth and in-person services, including greeting patients and visitors, answering telephones, updating the electronic health records (EHR), encouraging patients in their treatment and recovery, coordinating transportation, central scheduling, opioid overdose prevention training and Narcan distribution, and screening for COVID-19 symptoms or infection. This team continued to increase their skills and focus on engagement and assessment at the time of first call or walk-in to the buildings. To accommodate this model, additional Counselor Level I staff were hired and trained to provide a full engagement and assessment service to new patients, along with group and individual services as needed to admitted patients.

Service Comparison for Patients Prior to Admission

	2019		2020		2021	
	Watertown	Lowville	Watertown	Lowville	Watertown	Lowville
Patients Served	771	186	766	363	801	191
Individual Units of Service	1682	391	1447	671	1652	412
Medical Units of Service	73	1	219	0	189	0
Peer Units of Service	58	11	122	10	61	9

Service Comparison for Admitted Patients

	2019				2020				2021			
	OTP	IOS Water town	IOS Low ville	MH Clinic	OTP	IOS Water town	IOS Low ville	MH Clinic	OTP	IOS Water town	IOS Low ville	MH Clinic
Patients Served	255	638	196	65	308	683	371	69	397	704	294	70
Individual Units of Service	3990	5321	2156	832	6471	7957	6112	1111	5595	6646	3875	911

Group Units of Service	7616	9043	3794	524	2495	2484	1467	274	2215	1799	668	493
Medical Units of Service	1143	1009	*	326	1214	1602	315	282	936	1893	111	315
Peer Units of Service	508	282	407	n/a	1265	1240	1656	n/a	714	800	1149	n/a

*Data collection was improved after 2019 to represent IOS services unique to Lowville

Ancillary Services:

For 2021 Credo Care Management set ambitious goals to enhance the care management program through added capacity, further strengthen the relationship with Central New York Health Home Network (CNYHHN) and striving to be the leading downstream provider for the unique individuals Credo serves.

Continuing to build upon the overhauled outreach and enrollment program of 2020 we identified what our strengths were, improved them and actively addressed areas of improvement. Specifically, we collaborated with CNYHHN on improving our flexibility to go over caseload caps. This allowed us to account for what we found to be a lag time between disengagement and discharge.

Growth of the Care Management program both with staffing and ability to meet the complimentary needs of our program saw many challenges. Each challenge was seen as an opportunity to rise and creatively view our program to reflect the changing landscape on how services and successes can be achieved. The Care Management program transitioned to the use of a hub space in the outpatient building in Watertown and spends a greater amount of work hours in the community with clients and have the option to work remotely from their homes. This change provides for far greater person-centered care services and the department's growth is no longer limited to the size of the outpatient buildings.

Late in 2020 we began to address the Health Home Plus opportunity, providing enhanced services to 16 individuals. In 2021 that number quickly

grew to 58. Health Home Plus requires care managers to provide a minimum of four core services a month instead of the minimum of one for non-Health Home Plus individuals, due to the greater complexity of challenges the client experiences. These clients received 174 more core services a month or 2,088 more services a year. Collaborating with CNYHHN we began the process of becoming a state designated Health Home Plus agency with the Office of Mental Health (OMH). Through this evaluation period we learned that through our effective enrollment and engagement process Credo far exceeded the minimum expectation of providers to identify individuals eligible for this enhanced service provided more Health Home Plus services than any other downstream provider in the CNYHHN network.

These challenges and subsequent changes have created a foundation for the care management program to seek and achieve opportunities for growth. These plans include growing leadership opportunities in the program to meet the growing demand for effective billing and quality care; improving training and onboarding activities for new and retained care managers; increasing the care management case load to meet the needs of the community; as well as exploring additional ancillary programs that will strengthen the available support to increase client and staff opportunities.

RESIDENTIAL REHABILITATION SERVICES FOR YOUTH “THE FARM”

Evans Mills, NY

The Residential Rehabilitation for Youth (RRSY) facility is located 10 miles north of Watertown, on a 115-acre working farm. The program provides intensive chemical dependency services to adolescent and transitional age adult males. Residents must be at least 16 years of age and no older than 20 to enter treatment at the facility, and stay an average of six to eight months, depending on the severity of their symptoms and the environment they will be moving to after treatment. All residents have a recent chemical dependency diagnosis and come to treatment with a using history of any number of substances and many are using multiple substances on a regular basis. Residents that come to the Farm are sometimes involved in the criminal justice system and typically are mandated to complete treatment as an alternative to incarceration. In the past two years there has been an uptick in family referrals and referrals for residents without legal obligations.

Treatment at the Farm consists of a combination of services, including individual, group, and family counseling, mental health counseling, equine therapy, vocational training, educational services, active recreation, quiet recreation, fitness, daily living skills training, recovery skill development, relapse prevention education, and spirituality opportunities. Whenever possible, these services are delivered through activity-based programming, using the various resources available directly on the property. Treatment continues to be based on the values the Farm was built on, which include personal accountability, work ethic, integrity, respect, trust, hope, and self-worth.

In 2021 the treatment team at the Farm was led by the medical director, Dr. Robert Pyke, MD, Program Director, Megan O'Meara, LMFT, CASAC-II, Residential Coordinator, Craig Frederick, and overseen by the Director of Residential Services, Nicole Pierce, LCSW, CASAC, and the Executive Director, John Wilson, BA. In 2021, the program experienced a notable shift as Megan O'Meara took on the role of Program Director and as Craig Frederick stepped into his new role of Residential Coordinator at the managerial level. The program had other changes in staffing as well, most notably the transition of Cortney Salisbury-Corey who transitioned to the Equine Specialist/Counselor position and Greg Ingerson who moved into a Primary Counselor role, while Andrea Smith joined the team from Outpatient as the Family Counselor.

In the beginning of 2021, the Farm began with a lower utilization than the prior years, coming out of 2020 with 78% utilization for the year. The program remained committed to the 817 Residential Rehabilitation Services for Youth and worked to find new ways of retaining clients amidst a difficult climate. In 2021, the RRSY received a total of 68 referrals and completed 33 admissions for the year. 2021 continued the RRSY trend of marketing regularly and engaging in cold calls to help maintain and increase referrals. The effects of these efforts, however, were still significantly impacted by COVID-19 and the program's utilization continued to struggle. The effects of COVID-19 can be seen in the average quarterly utilization as follows: 1st quarter- 73.3%, 2nd quarter- 71.6%, 3rd quarter- 83.3%, and 4th quarter- 84.3%. There was an overall increase by 30% from 2020 to 2021. The number of assessments completed also increased by, 25% and there was an increase of 10% of actual admissions. The RRSY provided treatment to a total of 37 unique clients and maintained the 14-bed capacity.

Of the 34 client discharges in 2021, four of these individuals completed the program, resulting in a 12% completion rate (a decrease of 33% from 2020). During 2021, the Farm faced a myriad of difficulties in maintaining residents through the continuation of pandemic. The influx of inappropriate referrals due to the virtual nature of legal, educational, and outpatient services for clients often led to a lessening of in-person assessment. This created a maintenance of lower referrals for the year with an increase not occurring until near the end of 2021. The Farm staff continued their education to meet the needs of the increasing complexities of mental health needs that the referrals of 2021 brought to the facility. In each instance of discharge, staff worked diligently to create a safe environment before clients departed, and referrals to recovery agencies were offered when appropriate.

Staffing also became a challenge during the year. Recruiting qualified staff was difficult when positions became vacant. This led to short staffing and an increase in work hours for those who remained at the facility.

Though 2021 did not yield the most positive outcome of successful completions compared to recent years, the Farm will always be in the pursuit of increasing successful completions, maintaining high standards, and providing person-centered care to meet the needs of this population.

In 2021, the Farm continued with the focus of implementing the Evidence Based Journal (EBJ) System. The MEE Journals (Motivational, Educational, and Experiential) have now been used for over five and a half years and have enhanced counselors' work with clients to promote an optimal therapeutic approach that aligns well with the Farm's use of Cognitive Behavioral Therapy and Motivational Interviewing approaches and techniques. The variety of journals continue to be expanded and new topics were added to treatment to meet the needs of clients. Staff incorporated the journals on both an individual and group basis with the residents and this provided opportunity for guided discussion and skill building across a multitude of life areas.

Additionally, staff implemented the following evidence-based treatments: STEPPS program, DBT (Dialectical Behavior Therapy) group, Solution-Focused Therapy, Narrative Therapy, CBT (Cognitive Behavioral Therapy), and the utilization of Acceptance and Commitment Therapy. The Farm also continued their working relationship with Liz Stevens, an Integrated Treatment Therapist from Credo Outpatient, who provided art therapy to clients in a weekly group setting.

Continued training was provided to staff in the areas of concurrent charting, treatment planning, and note writing to increase the effectiveness of the electronic health record as well as to better manage program time. Farm staff took time to focus on their own continued education and find ways of reinvigorating their work experience while continuing to work through the unorthodox times.

In 2021, the agency and the Farm continued to focus on person-centered care for all clients receiving services. Person-centered care focuses treatment on the values, culture, and insight of clients regarding their needs and the movement of their treatment. Included in the model can be goals of abstinence or harm reduction, with clinicians working with all clients to minimize risk associated with substance use. Individual goal setting becomes a collaborative process reflecting a shared decision making and informed choice between clients and clinicians. Person-centered care is an evidence based, strength based, and non-punitive approach. The Farm worked to implement person-centered care through resident chosen topic groups and sign ups, as well as allowing residents to engage in more flexible programming to benefit their needs as they shifted throughout their stay. Due to the stressors of COVID-19,

staff continued their incorporation of person-centered care, encouraging residents to designate the number of sessions they engage in on a weekly basis and having them create their own treatment plans.

Another area of focus for the RRSY facility was training staff and clients on the LGBTQIA+ population. Diversity among our client population increased in 2021, allowing the training to be implemented, creating a safe place for all to receive quality treatment. Trainings were provided by Megan O'Meara and the Q-Center who offered in-person and virtual trainings multiple times for staff and clients alike. The Farm also partnered with Jefferson County Public Health to reimplement quarterly trainings for residents on communicable disease prevention and pregnancy.

The clinical team continued to emphasize the importance of healthy social leisure opportunities by providing activities such as attending overdose awareness month events and hiking. Staff arranged for Sandra Sabine to come do a full day workshop of art and drumming expressive therapy with the residents. Both staff and residents participated in rhythmic drumming and a guided painting exercise as an alternative outlet and coping skills for recovery. The RRSY also continued with the yearly traditions of apple picking, skiing, fishing, and canoeing. One tradition of the Farm has been to teach clients how to work hard in return for numerous opportunities to engage in different activities. Residents exchanged their hard work to earn passes for skiing and an opportunity to go white water rafting. Residents worked to engage in a successful maple syrup season, yielding 20 gallons of maple syrup from their commitment. Residents engaged in the process from the sap collection to the boiling process.

The Farm was persistent in utilizing the Level System and worked to refine the levels of treatment. Residents have provided feedback about additional components to add to the level system, such as new responsibilities and privileges. Each level reflects the stages of change a client experiences in their recovery and in treatment, and it is designed to encourage individuals to make forward progress in their program. Clients have a clearer understanding of what is expected of them as well as how to reach the goals they established at the beginning of their treatment.

In 2021, the Farm continued its work in equine therapy and horsemanship with the residents. Residents continued learning valuable skills from mucking stalls to picking hooves and learning natural horsemanship practices. In the summer of 2021, Andrea Collela, a natural horsemanship expert and EAGALA (Equine Assisted Growth and Learning Association) certified practitioner, provided a 5 week-long seminar on natural horsemanship. Residents and staff alike learned new techniques and ways to best communicate with the horses that are implemented daily now at the Farm. Additionally, residents can work closely with the veterinarian and farrier, allowing for potential networking for those residents interested in careers with large animals. The barn continues to allow for residents to examine their own emotional presence and how they can communicate and work in partnership with the horses. The successful implementation of EAGALA therapy provided opportunities for residents to explore key themes in their lives, in both the group and individual setting. Throughout the year, horsemanship and bonding with the horses became more integrated into the team's perspective and the residents' lives. The equine team also worked to provide EAGALA opportunities outside of the Farm, opening the barn to the Women's Intensive Residence for group therapy.

During 2021, the Farm continued its incorporation of the barn in programming and treatment components. Residents had opportunities to learn about having respect in a relationship with animals and working together, as well as how to care for a being other than themselves. Residents have found the barn to be beneficial to their overall well-being to include building a strong work ethic, the benefit of physical labor, and caring for animals; the addition of the equine program to the barn will work to enhance treatment and offers a better utilization of the barn and property. Staff worked with residents to grow several garden boxes as well as utilize our home-grown fertilizer to grow vegetables and flowers of all varieties which were started from seed in the greenhouse. Residents continued to utilize the roadside vegetable stand (built the year prior) to support the residents in their time at the facility and ensure the harvest gets utilized. The crop produced in 2021 provided a full harvest and residents and staff celebrated the demanding work with our annual Fall Harvest during which dishes were prepared with produce from the garden. The Farm continued to tend to the several young apple trees as well as the upkeep and planting of the "rock garden" by residents.

Also, in 2021 there was a maintained focus on the importance of animal relationships and the therapeutic benefit of animals in the lives of staff and residents. The continued training and growth of the farm dogs, Rosie and Fitz, helped residents learn the value of animal connection. Residents continued to enjoy the presence of Nova (farm cat) who remained involved in the milieu and has become more people-friendly throughout the year. Finally, the choosing and addition of new fish to the fish tank allowed residents to be an active part in understanding the importance of community and meditation in their recovery.

The Farm stands firm on our belief in building relationships and connections to further the healing process for clients. The environment creates natural opportunities for personal growth and self-reflection, both vital components to maintaining long-term recovery. The integrated approach to treatment and recovery is what sets the Farm apart from other programs. The Farm remains committed in the provision of substance abuse and mental health counseling, involvement of family and family therapy, educational services, physical fitness opportunities, a variety of sober leisure activities, development of a healthy support network, emphasis on relapse prevention skill building, and case management for discharge planning are all components of the quality care the program provides. The Farm also encourages clients to remain in contact after completing the program through the Credo Alumni group which hosts an annual reunion and encourages support amongst one another. Graduates visit the Farm throughout the year, including recovery meetings and spending holidays with current residents, which are always a benefit to everyone involved.

Staff also worked diligently to increase activities such as campfires, nature walks, spending time at our Sugar Bush, and recreational and creative activities alike. Staff utilized the horses on-site as often as possible as well, bringing residents down to the barn for therapy sessions and involving them in the grooming process as a method of grounding. Residents also engaged in leading the horses for nature walks and putting up another pasture to help increase the wellbeing of the horses. Staff worked to find creative ways to get residents off-site as well, including isolated trips to the lakefront, walks along Perch Lake, and drives around the areas as the leaves turned.

Further, alumni engagement both in-person, virtually, and through writing was at an all-time high as the alumni network attempted to support residents

during these trying times. While 2021 was, at times, a difficult year for the Farm, it certainly proved the dedication and passion the Farm staff have for the residents, and their belief in the impact of the Farm on the lives of those who live here.

2021 Goals and Results:

- Consistently maintain a 90% monthly utilization.
 - Results: As mentioned previously, this goal was not obtained during the 2021 year.
- Consistently provide EAGALA therapy to 80% of clients.
 - Results: In 2021 EAGALA therapy was implemented with 80% of residents on a regular basis.
- Increase marketing and improve number of referrals by 20%
 - Results: The Farm increased in referrals from 2020 by 10% and thus, did not achieve this goal.

Statistics for 2021:

- Referrals- 68
- Intakes/Admissions- 33
- Discharges- 34
- Total Units of Service- 4,320

Family Services:

In 2021 the family program at the farm thrived with the addition of Andrea Smith as the family counselor. As Andrea grew into the position, families became more invested in the programming of their residents and their own therapeutic work. Families engaged in not only sessions, but family visit off-sites such as the 5k Run for Recovery and Blueberry Festival in the spring.

The following is a list of family sessions completed during 2021:

- A total of 185 family sessions, with an average of 50 minutes per session.
- A total of 12 family visits, occurring on the first and third Sundays of the month from 1:00 pm - 4:00 pm.

In 2021, the following goals for the family program were established:

- Further develop and complete semi-annual family workshops.
 - Results: This goal was not met due to various circumstances.

- Maintain and create new methods of communication with family members.
 - Results: This goal was achieved with the implementation of Zoom sessions for families.
- Begin EAGALA family sessions.
 - Results: This goal was not achieved, in large part due to visitation restrictions imposed based on the COVID-19 regulations. This goal will be continued into 2022.
- Educate staff on family dynamics, attachment, and family systems theory.
 - Results: This goal was achieved during the year with staff engaging in numerous family trainings.

MEN'S COMMUNITY RESIDENCES

Community Residences 417 Washington St. & 138 Winthrop St.
Watertown, NY 13601

The Community Residences provide a safe and supportive home-like living environment that is drug and alcohol free and promotes an abstinent lifestyle while living in the program. All individuals admitted into the programs have completed a short- or long-term inpatient program. The Community Residences are designed to provide individuals with structure, daily living skills, responsibility, accountability, vocational/educational programming, and employment opportunities, as well as fun and recreational-type activities. The programs work by utilizing a level system where the clients earn privileges based on the current level they are on. Levels are obtained through working a program of recovery as evidenced by responsibility, engaging in treatment expectations and legal obligations, as well as being an overall positive member of the house.

The Credo Men's Residence focuses on treating the whole person. Within the first 30 days, a referral is established with Black River Medical to ensure that the clients have a primary care physician while in treatment and that they receive an updated physical examination. Clients are also encouraged to improve their physical health by utilizing the YMCA passes purchased by Credo. Upon entry to the residence, if a mental health diagnosis is identified, or if a client identifies they are struggling with mental health, clients are referred to Kim Richards, Credo's Psychiatric Nurse Practitioner. During a client's intake they are educated on the medication assisted treatment (MAT) options available through the Credo's Opioid Treatment Program. Counselor's will make a referral to the Credo OTP if a client is interested in obtaining a MAT to assist them in their recovery program. Community Residence clients have shown great success in combination with therapy, MAT, mental health medications and improving physical health.

During 2021 the Community Residences continued to adapt to changes in staffing. In January, Nicole Pierce, accepted the role of Director of Residential Services, and through some managerial changes, by the 3rd quarter of 2021, Robert Mullin had become the Program Manager of Winthrop Street and Matthew Morin had joined the Credo team as the Program Manager of Washington Street. Jessica Vida and Jennifer Peckman also joined the clinical team as primary counselors at Winthrop Street and Washington Street

respectively. At the end of 2021, there were 7 positions open between the two residences.

2021 saw the continuation of the impact of COVID, and after 18 months of the onset of COVID, Washington Street was the first to experience COVID positive client cases within the residential system. The staff worked diligently through two separate house quarantines to provide quality care to the individuals in the program. Clients were able to return to a more “normal” treatment experience in 2021, with the return of onsite Services at outpatient, daily dosing in the Opioid Treatment Program (OTP), as well as the availability of day and weekend passes to return to their home communities.

The changes that were made in 2021 regarding making more “normal” opportunities available to clients saw a positive impact on both staff and client morale. In addition to the continued impacts of COVID, Winthrop Street maintained its adherence to the Corrective Action Plan (CAP) it was placed under by OASAS since July 2020 (program allowed to increase its census by only one client per week). This continued to slow down the growth of the program by limiting its admissions, but in August, the program received notification of the completion of the CAP and was able to increase admissions into the program.

In the 3rd quarter, both sites received a Focused Review Audit from OASAS to ensure ongoing compliance with the 819 regulations since these regulations were no longer being relicensed. Winthrop and Washington Street received positive reviews with no quality indicators cited. This was a testament to these program’s hard work to have obtained these accomplishments during a year of transition and low staffing.

2021 brought many staffing changes which left both programs with significant vacancies in positions. The current staff remained dedicated to covering shifts and continuing to provide quality care, even with limited staff resources. At the end of 2021, a decision was made to explore if the current staffing pattern was the most effective and changes were made to help streamline shifts and make open positions more marketable. It is the hope that 2022 will see more staffing stability for both programs.

In 2021, the two Community Residences did not meet the utilization goals due to following the COVID guidance and restrictions. Winthrop Street ended the

year with an 80% utilization (19% increase from 2020) and Washington Street with an 81% utilization (10% increase from 2020). Per OSASAS guidance, one bed was required to always be available for isolation, thus restricting the programs from being 100% utilized. As such, a more accurate representation of their utilization is 84% for Winthrop Street and 87% for Washington Street. Combined, both residences served a total of 88 clients from counties across all of New York State, providing 9,182 units of service for the year. Winthrop Street had 33 admissions and 27 discharges while Washington Street had 33 admissions and 37 discharges. Of Winthrop Street's 27 discharges, 50% were considered treatment complete and Washington Street had 40% of their 37 discharged clients complete treatment.

At the Credo Men's Residence, collaboration for clients happens weekly during our multi-disciplinary treatment team meeting. In attendance are clinical staff from the residences, Kim Richards NP, outpatient counselors, and care management. Everyone involved in the care of the clients attend the treatment team meeting to ensure communication, collaboration, and continuity of services. This treatment team meeting provides the opportunity to discuss coordination of care for clients, regarding physical and mental health, as well as medication assisted treatment. In addition to weekly treatment team meetings, routine meetings were held throughout the year with the Program Managers and Melinda Gabriel, a clinician at Outpatient, to review and ensure the effective provision of services to the clients.

2021 Goals and Results:

- Goal: Update policy and procedures to reflect ongoing changes. Provide comprehensive training to staff on the program's policies and procedures.
 - This goal was met, and staff continued to receive training and support in understanding and effectively using policy and procedure.
- Goal: Identify and implement plans as needed to transition to the 820 regulations.
 - In the 3rd quarter of 2021, an application was started in collaboration between Nicole Pierce and Tracy Leonard, Director of Operations. The 820 application is anticipated to be submitted in the first quarter of 2022.

- Goal: Enhance training and supervision of staff to increase skill building and competency in roles.
 - This goal was achieved in the realm of more consistent supervision for staff. This will be a continued effort in 2022.

PATRICIA POND HINCKLEY WOMEN'S INTENSIVE RESIDENTIAL SERVICES
1130 State Street, Watertown 13601

Comprehensive services for those ages 16 or higher are offered to a maximum of 15 clients at Credo WIR. Our program cares for pregnant women and women with whose children need to live with them in the house (age 5 and under). Our program can house up to 4 children at a time.

In 2021, 35 clients received services at the Credo Women's Intensive Residence from the following counties: Jefferson, Oneida, St. Lawrence, Cortland, Hamilton, Livingston, Onondaga, Otsego, Franklin, Ontario, Oswego, Yates, and Tompkins. Residents with substance abuse problems received comprehensive treatment services. These services included individual and group counseling, vocational and educational classes, life skills, daily living skills and case management.

In 2021, the Women's Intensive Residence provided 4,807 units of service. For the year, our program's utilization rate was 88%. The utilization rate was decreased from our goal of 90% due to COVID but did increase from 2020. At the end of 2021, all clients remained COVID free while in treatment. Throughout 2021, clients were offered the COVID vaccine and/or booster, many of which chose to receive the vaccine.

At the WIR, clients have an individual session with their primary counselor on a weekly basis. Clients are also expected to attend 3-6 group counseling sessions a week, which focuses on understanding their abuse history, recurrence of abuse, and recovery. In addition, there are many other weekly groups and classes in our program.

Primary counselors ran approximately 325 groups and classes on the topics of:

- Spirituality
- Self-esteem
- Recurrence prevention
- Seeking Safety Trauma Recovery
- Nicotine treatment
- Art & crafts
- Opiate group
- Non-opiate group

- Music group
- GED
- Voc-Ed
- Meditation
- Team Building
- Check In
- Closing group
- Client history
- Cornell group
- Home processing group
- House meeting
- Primary group
- Step class
- MEE Journals
- Communicable Disease Class
- Medication Education Class
- LGBTQAI+ Education Class
- Boundaries
- EAGALA Therapy
- Daily Living Skills
- Topic Group
- Open Group

A unique asset of our program is its capacity to treat pregnant women and allow mothers to be accompanied by their child under the age of five. The mothers in our program that have their child reside with them develop an understanding of what it takes to care for their child while in long-term recovery. While in treatment, a healthier pregnancy is encouraged due to the mother receiving regular health care and abstaining from using alcohol or other substances that could affect the baby. Parenting classes are a requirement of all mothers in our program; however, it is available to all residents. Due to our residence being a family atmosphere, clients are expected to know how to appropriately interact with the children who reside and visit here. In 2021, primary counselors provided parenting education materials to those residents that had children residing with them. These materials were provided by NCPPC, CareNet and Cornell Cooperative Extension. Staff also received Child Development Training by Cory Leshner.

In 2021, the Women's Intensive Residence (WIR) continued to focus on providing person-centered care for all clients receiving services.

This became even more important as COVID had a strong impact on clients, staff and treatment. As OASAS guidance decreased the duration and quantity of visiting families at one time, our program obtained IT equipment to implement regular zoom visits, while increasing the amount of phone calls residents made to their families. A cell phone was made available for clients to use for mental health sessions and family visits if they were quarantined or needed additional privacy. Mental health sessions, nurse practitioner appointments, and medication appointments were maintained through Zoom or Teams. Nutrition classes, communicable disease classes, and self-help meetings were also made available. New guidelines for achieving levels in the program were provided to clients through Zoom, Teams, or in-person classes or meetings. Prior to the pandemic, clients left the residence more frequently; however, during 2021, due to COVID, programming was redeveloped resulting in clients being afforded the opportunity to move into higher levels without leaving the residence as frequently.

In 2021, person-centered care was provided for 35 clients. Of those clients, there were 5 pregnant women who received services and 1 that gave birth to their child while in treatment. There were 46 children able to be reunified with their mothers while in treatment. This was accomplished through in person visits, virtual visits through Zoom, and weekly phone calls. Some residents attended virtual family counseling sessions. We had speakers in 2021 that were past graduates and others in recovery who shared their stories and put the skills taught in our program into real-life situations on how they have been helpful for their recovery.

Another area of focus for the WIR was creating a safe place for all to receive safe, non-discriminatory, high-quality treatment. This included having all staff and clients educated on the LGBTQIA+ population. Diversity among our client population increased in 2021, allowing the training to be implemented. Megan O'Meara, TGNCNB (transgender, gender non-conforming, and non-binary) certified trainer, sent out LGBTQIA+ training materials. Additional trainings were provided by Aids Community Resources (ACR Health). Staff received in-person and virtual trainings, while clients received an in-person training.

Mental Health

Most of our residents have a history of substance abuse and a behavioral health diagnosis. Clients may come into our program with or without a mental health history, but regardless are still evaluated to receive our mental health services and may be diagnosed with a behavioral health diagnosis. Trauma endured by most of the population we serve has contributed to their behavioral health problem. Our program provides an Evidence Based Practice Trauma Recovery Group weekly that is facilitated by clinical staff. This group is beneficial in helping our residents work through their trauma history. In addition, behavioral health evaluations are provided to our residents when medication management is needed by our Credo Outpatient nurse practitioners. Furthermore, Credo's integrated outpatient services provides mental health therapy, family therapy, mental health groups and medication maintenance off-site services at our Credo Integrated Outpatient location at 595 West Main St, Watertown. This is supervised through Caryn White LCSW, CASAC, Program Director of Outpatient Services, and Melinda Gabriel LMFT, Advanced Master CASAC Mental Health Therapist. Credo Outpatient's clinicians have provided helpful feedback and guidance regarding specific coping skills and acting as a great resource for our multidisciplinary treatment team. This has been a crucial factor to retention of clients who have severe behavioral health disorders.

Medicated Assisted Treatment (MAT)

Since 2020, Credo's Outpatient located at 595 W. Main St., Watertown, New York, has continued to increase the number of clients that were seen in the opioid treatment clinic. The program offers medicated assisted treatment (MAT) to help individuals overcome their opiate/heroin abuse under the supervision and guidance of Dr. Pisaniello, nurses, and counselors. Residents in the program have the availability to be referred for these services. During the COVID-19 pandemic, Credo OTP and Credo Women's Intensive Residence coordinated services so residents could safely be dosed by staff.

Spirituality

As residents enter our program, they often are unaware of what spirituality is and the difference between spirituality and religion. As a result, they often lack a sense of self. To assist our clients with this, our staff help clients understand what spirituality is, how it differs from religion, and how it can be beneficial to their recovery. Most of our clients feel spiritual bankruptcy but know that it could be a key component to recovery. For interested clients, we

allow opportunities to learn about different spiritual paths that may enhance their recovery. We've had inspirational speakers regarding spirituality. In 2021 the residents received education on different types of religion, increasing the level of spirituality that was practiced within the residence. Many of our residents chose to attend Emmanuel Congregational Church, in person or via Zoom, on Sundays and became volunteers for different church events. Our clients are frequently invited to volunteer and participate in special programming at the church. They explored the Christian faith, overcoming life challenges, healing, prayer, purpose, and direction. There was also a donation to assist women in their transition after graduation. Helen from Emmanuel Church has also been a spiritual speaker that we have had at our site. Clients went on several spiritual walks throughout the year as well. As a result of our residents' connection with Emmanuel Congregational Church, donations were made to the residents and babies by the church.

Education and Vocational Training/Employment

As a requirement to our program, all women who enter treatment without a high school diploma or general equivalency diploma (GED) attend classes two times per week, instructed by Christine Jordan. These classes are meant to prepare them for the GED exam. In 2021, we had 8 women participate in GED class, either in person or via zoom; however, due to COVID, testing was not available.

To assist with clients' employable skills and interest, vocational preparation occurs at our program. Our Vocational Counselor consistently assisted with job applications, transporting to interviews, obtaining needed identification for employment, answering questions about gaps in employment, and filling out higher education applications. Clients have an assessment to start their vocational preparation. There were 3 clients who became employed while residing in the house towards the end of their treatment. On a weekly basis, classes and individual sessions are held by the Vocational/Educational Counselor and outside educators from the area. Some of the class topics included:

- Computer skills
- Job readiness
- Resume writing
- Cover letter writing
- Interest's survey/Career assessments
- Interviewing skills

- Dressing for success
- Proper job etiquette
- Public speaking
- College preparation
- Applying for financial aid
- Presentations
- Kitchen safety
- Tax preparation
- Marketing
- Budgeting, bill paying & banking
- How to obtain identification
- Maintaining a safe work environment
- How to handle sexual harassment or discrimination
- Successful women in history
- Workplace first aid & safety
- Healthy work relationships/boundaries
- Professional leadership
- Mock Interviews
- Provides planners

Every client is encouraged to volunteer as part of their treatment, whether it is individually in the later phase of their stay, or with the house. This allows the clients to experience what it's like to give back to the community and helps to implement their recurrence prevention tools learned while in treatment, which can help them maintain their safety once graduating from the residence. All clients in the program enhance their resume by their volunteer work. In 2021, 12 women volunteered at Emmanuel Church.

Due to COVID, volunteer opportunities were limited regarding what the group had traditionally participated in. 13 of the residents were creative and developed volunteering opportunities within the home environment. These included:

- Cosmetology
- Home Improvement
- Crocheting to donate
- Creating inspirational cards for retirement homes that had visitor restrictions
- Painting

Fitness, Recreation, and Nutrition

As part of their treatment, clients regularly engage in fitness 2-3 times a week. Some of the physical activities they participated in included: visiting falls, swimming at the beach, walking, and hiking. Our clients were additionally taken to local recreational areas with staff. Also, our residents have been provided fitness videos through streaming media. This has made available exercises and dance routine videos that they can select from. In addition, staff have provided clients with a fitness challenge to give them the ability to increase their personal scores.

In 2021 all residents participated in sober leisure activities. Examples of fun sober leisure activities included Alex Bay Beach, Mini Golf in Alex Bay, Pixley Falls, Thompson Park, Thompson Park pool, Thompson Park Zoo, Lucky Star Ranch, Talcott Falls, Old McDonalds Farm, and Flower Memorial Library.

There were multiple series of classes that focused on parenting, nutrient, and life skills. The instructors were Julie Dean and Holly Louise Rubacha. Both are Nutrition, Parenting and Life Skills Educators. This was a scheduled class held for all clients. This program taught the clients how to budget with food shopping, how to cook nutritious meals at low-cost, how to read food labels, and general nutrition guidelines for a better health.

Collaboration

The Women's program has been fortunate to have been supported by local agencies that have provided services for clients' needs that cannot be met through services at the house. Here is list of local agencies we collaborated with to meet those needs:

- Jefferson County Department of Social Services
- Aqua Dental
- Rescue Mission/Thrifty Shopper
- Urban Mission
- First Step Daycare
- New Day Daycare
- North Country Pre-Natal Perinatal Council
- North Country Family Health
- Black River Medical
- Quik-Med
- Community Health Center of the North Country

- Jefferson Community College
- BOCES
- Jefferson County Drug Court
- Samaritan Medical Center
- Transitional Living
- Cornell Cooperative Extension
- Flower Memorial Library
- Planned Parenthood
- Public Health
- Majak Podiatry
- Jefferson County WIC
- Child and Adolescent Health Associates
- Watertown Pediatrics
- North Country Orthopedic Group
- North Country Neurology
- Children's Home of Jefferson County
- WellNow Urgent Care
- Nova Oral Surgery
- Women's Health and Wellness
- CareNet
- Dr Dines

Credo Women's Intensive Residence collaborated with Anchor Recovery Center this year to allow our clients to participate in a variety of different groups and activities. These groups and activities included a life/boundaries group, relationships group, cooking group, SMART recovery meeting, and drumming circle.

During each quarter, clients are asked to share their experience in treatment through a perception of care survey. This survey includes what they found most helpful and the changes they would like to see. Data from these surveys is collected to allow our agency to monitor its program effectiveness and make any needed changes to enhance the treatment experience. This includes a meeting with a site staff representative, 2 client representatives, and the Executive Director of our agency for review.

The clients in our program in 2021 have advocated for change. This has been done through various forms such as the perception of care surveys, meetings

with a client representative, or the clients coming together as a group to express what they feel would help their treatment run smoother.

Our Goals for 2021:

- Goal: Maintain 90%-92% utilization
 - Result: Due to COVID 88%
- Goal: Ethics training for staff-Decision making, approach, self-care and development
 - Result: Staff completed ethics training for staff-decision making, approach, self-care and development.
- Goal: Identify appropriate and effective implementation of 820 regulations
 - Result: Policy and Procedures are currently being written.

RESIDENTIAL CENTRAL INTAKE

Residential Intake and marketing efforts continued to be conducted by each of the sites in 2021. Discussion was had about absorbing residential intake back into the Central Intake Department, but the decision was made to re-evaluate later due to the transitions occurring within that department. During the year, new practices were introduced that yielded positive results and allowed for sites to have quicker access to incoming referrals, particularly through the referral email inbox.

2021 Goals and Results:

- Goal: Maintain 90% utilization for all residential programs.
 - Result: Sites made significant improvements in comparison from 2020 to 2021 but still encountered barriers to reaching 90%. (Refer to site specific information for utilization results)
- Goal: Complete the final plan for Residential Intake and how it interacts with Central Intake for the agency.
 - Result: This goal was not met due to the transition that occurred in the Central Intake Department during 2021. This will be further explored in 2022.
- Goal: Improve the use of technology to streamline the intake process as well as collect data about referrals.
 - Result: This goal was achieved, and many barriers were eliminated by increasing the use of effective technology in the referral process.