



**CONSUMER QUALITY
TEAM OF MARYLAND**

2013 Annual Report


July 1, 2012 to June 30, 2013

MISSION STATEMENT

The Consumer Quality Team of Maryland (CQT) empowers individuals who receive services as partners with providers, policy makers and family members, to improve care in the public mental health system and ensure services meet the expressed needs of consumers.

PURPOSE

The goal of CQT is to help individual consumers by reporting consumers' comments, requests and suggestions to the staff and systems that can address them. This process facilitates in the rapid resolution of reported concerns and problems, many times on the same day as the CQT site visit.



FROM THE CQT EXECUTIVE DIRECTOR

2013 was a terrific year for CQT! The program continued to grow by conducting interviews in Psychiatric Rehabilitation Programs throughout the entire state of Maryland and we laid the groundwork to begin the youth and family expansion. We also moved to new offices that now allow us to have better workspaces for all the team members and also allow opportunities to collaborate with our colleagues in other programs of the Mental Health Association of Maryland.

This year we have been extraordinarily busy; the day-to-day operations as well as the hiring and training of staff to launch the children's initiative have prevented us from dedicating the time that we usually spend preparing the annual report. In the interest of getting it published, we have put together an abbreviated report. Anyone who is interested in more details, please contact me and I will be happy to get you the information.

I want to thank all of the Consumers who shared their thoughts and helped improve our mental health services. I thank all the Providers, Core Service Agencies and Hospital staff and Administrators for being open and responsive to this information. Thanks to the Mental Hygiene Administration for their ongoing support. Thanks to our colleagues and the Board of the Mental Health Association of Maryland for their advocacy and all they do for all Consumers. Finally, I want to thank the CQT team for all their hard work and dedication to help other consumers towards recovery!

Joanne Meekins
CQT EXECUTIVE DIRECTOR

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CQT PROCESS

CQT makes site visits to public mental health facilities in Maryland. During our visit, consumers volunteer for confidential, qualitative interviews to share their thoughts, suggestions and level of satisfaction with the program or services they receive, as well as any specific needs or quality of life concerns. Individual consumers may give permission for their name to be shared with facility staff in order to have a request or concern addressed. CQT concludes the site visit with a verbal report of general comments to program staff as well as the names of individuals with specific requests.

After the visit, CQT provides a written *Site Visit Report* of consumers' comments in their own words. No consumer names or identifying information are included in the written report. The report is given to the program director and the funding agency for that program.

CQT meets monthly with representatives from the funding agencies, provider associations and the Mental Hygiene Administration to discuss *Site Visit Reports* for visits made to PRPs. CQT meets quarterly with the senior management of each inpatient facility to discuss site visits made to those units. Concerns brought up by consumers during site visits are addressed, referred or resolved at the table, and each agency provides CQT with a written report documenting any actions undertaken to resolve consumer concerns. Each site is visited 3-6 times each year, ensuring that concerns from previous visits have been addressed.

These *Feedback Meetings* with local and state administrators also provide an opportunity for the attendees to hear consumers' general concerns, praise and suggestions about different programs and initiatives throughout the state.



July 2013 ACCOMPLISHMENTS

From July 1, 2012 to June 30, 2013, CQT conducted:

- **292 Site Visits** (191 to PRPs, 101 to inpatient facilities)
- **1,270 interviews** with consumers (933 in PRPs, 337 in inpatient facilities) and processed **482 Individual Requests/Concerns** (315 in PRPs, 167 in inpatient facilities)
- **26 Feedback Meetings** with (2) MHA, (12) Inpatient Facility CEOs and (12) CSAs
- **125 training hours** for CQT staff
- **Committee Work:** CQT staff served on a variety of mental health advocacy boards and committees, including: Baltimore County Mental Health Advisory Board; Mental Hygiene Administration Hospital Discharge Planning Committee, Mental Hygiene Administration Residential Treatment Center Retooling Committee, Governor's Mental Health Advisory Council and the Mid-Shore Behavioral Health Services Network.
- **State Hospital Discharge Planning Project:** At the request of the Mental Hygiene Administration, in 2013, CQT was asked to interview consumers at Spring Grove Hospital Center who were identified as ready for discharge. We interviewed 50 people. The majority of consumers interviewed were looking forward to being discharged and requested to be linked with vocational, education/training, or volunteer opportunities. The completed surveys were used as a tool to help guide hospital staff, and mental health providers in developing housing and support services that would help consumers remain successful within the community.
- **Upper Shore:** At the request of MHA, in 2010 CQT began tracking the 63 consumers who were discharged as a result of the closing of the Upper Shore Community Mental Health Center. CQT has been successful in locating many consumers and will continue its efforts.

FY 2013 FINDINGS

The focus of the CQT program is to ensure that the public mental health system is delivering the services needed by **individual consumers**. CQT only interviews those consumers who volunteer to speak with us. Interviews are not done as a random sample, and the analysis of consumer comments does not constitute scientifically valid findings. This information cannot and should not be used to evaluate individual programs. However, the types of comments, requests, suggestions and concerns heard by CQT across multiple areas throughout Maryland do give some information about current trends in our public mental health system.

As in the past, the highest number of positive comments heard in the PRPs were about the staff and the programs. We heard about programs helping people get their lives back on track and staff who were focused on helping consumers achieve their goals. The major areas of concern were the inability to find jobs and the staff in the Residential Treatment Programs. Most of the RTC staff concerns centered on a lack of respect.

This year, there was a substantial increase in the proportion of positive comments about both unit and clinical staff at the inpatient facilities! Additionally, there was a considerable increase in the positive comments about classes. There were still a large number of concerns reported about staff; again, mostly centering on respect. As in the past, there were also many concerns reported about forensic issues and a lack of understanding about them.

PRP COMMENTS

The program saved my life. I am back to interacting with people. I was a shut in for ten years.

I really enjoy the program. Being here has helped me a lot. I used to not be able to leave my house or even my room.

Staff asks what you want to do, and takes clients' input. Here they ask your opinion and help.

Staff is good. They treat me like one of them—with respect.

We have different groups each day. They discuss psychiatric issues, mental health, community skills, recovery, positive things, dealing with conflict. All those are helpful.

I like medicine management, understanding mental illness—it educates me more how to understand my own illness.

I need help with the job situation. They are not good at job placement. I speak to staff all the time about getting a job.

The groups are real good, but they need to change the schedule up a bit because it can get boring.

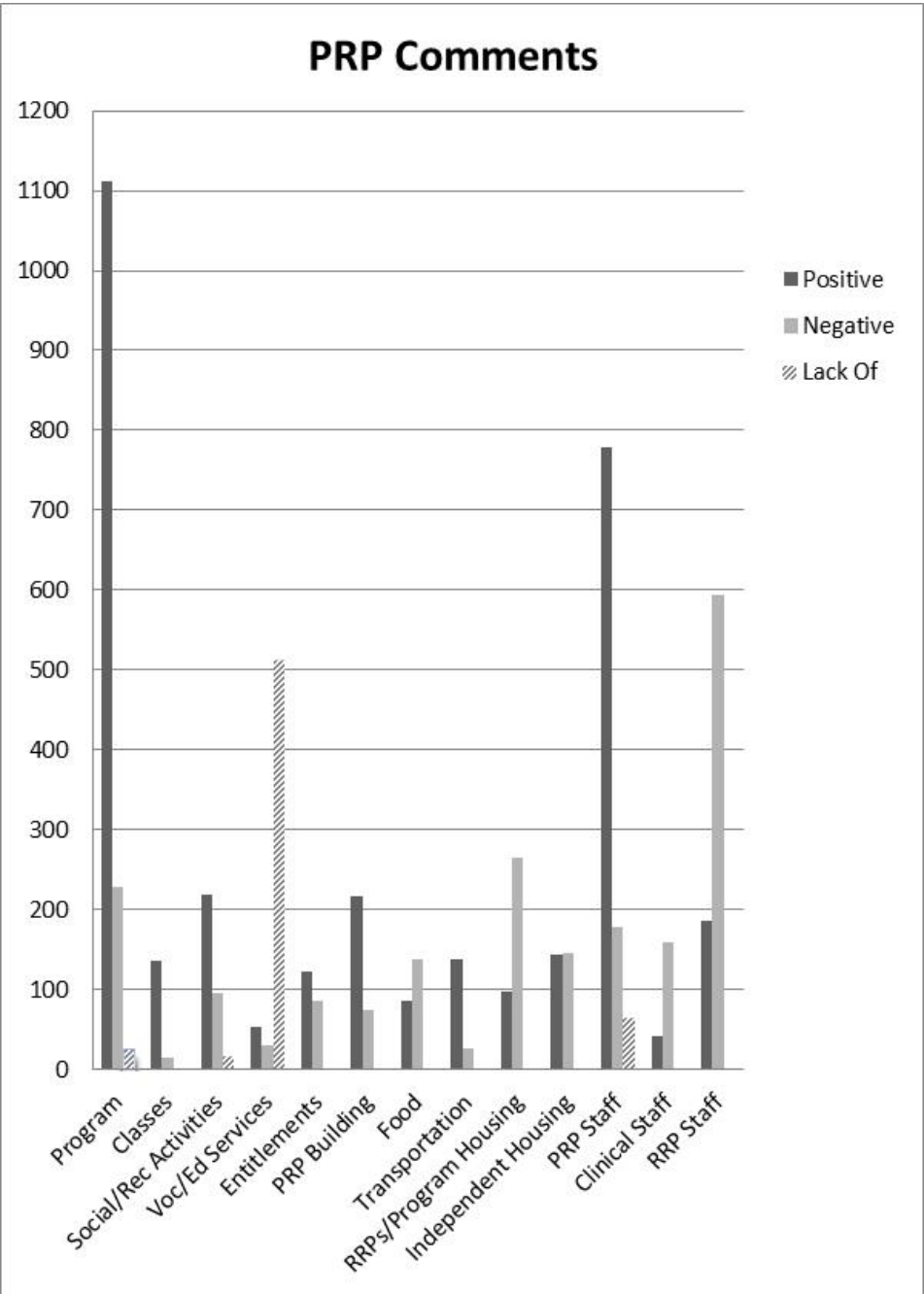
I don't smoke. I quit a week and a half ago. I'm just wearing the patch. I decided on my own. I'm saving money.

My physical health is good. I quit smoking!

I love my therapist. I had her before. She's easy to contact if I'm having troubles.

I see the psychiatrist and therapist here. The psychiatrist is interested in what I have to say.

I passed the two day WRAP program and I am certified... I would like to do the peer counseling.



ONPATIENT COMMENTS

The groups are awesome. We have yoga, music therapy, walking on the mall with music, arts and crafts and jam sessions. It gets you off the unit.

There are no groups or classes. We just hang out in the day room. The TV is always on. We don't get too much exercise.

There are jobs here too. You can work with the grounds crew or in the dining room. I do grounds crew.

Staff treats me okay. They help me out with certain things I need to take care of. They help me with my goals, routines, and keep me on track.

Staff treats me very well, with respect and dignity — even when I act out.

The staff brings in personal problems from home.

There are five people in my room, including me. It is not very private. At night it is noisy and cold.

The food is alright. I'd like to eat more fruit.

I'm a vegetarian. I am working with the dietitian. She is good. We are working to set up a diet.

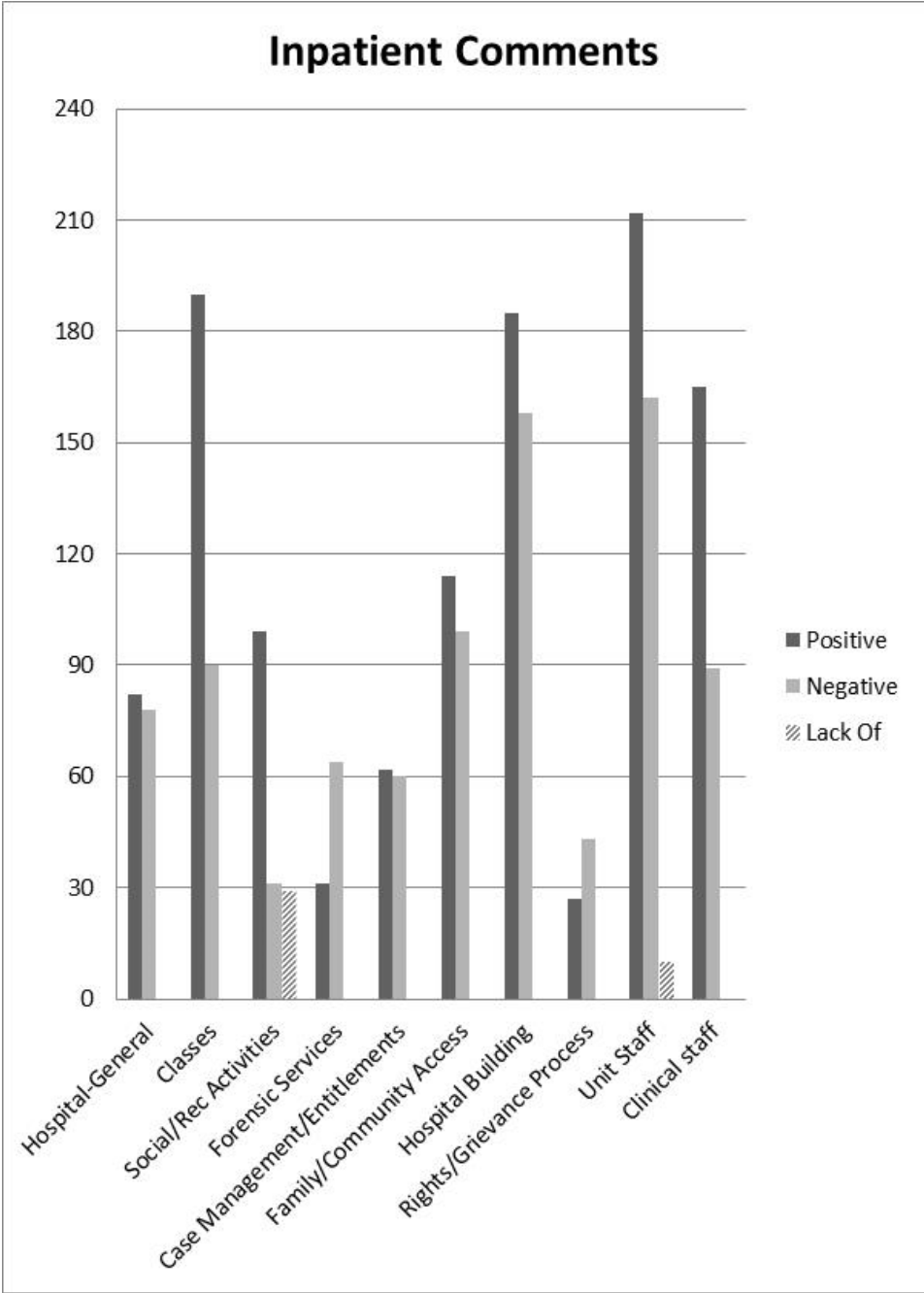
We're working on a privilege for coffee or tea in the afternoon. The staff is listening to us and trying to get it for us.

I would like to have the tobasco sauce be made available again in the cafeteria.

One staff is peer support. He comes in some afternoons and shows us things that are helpful on the outside, like how to write bank checks, things that will help you find a job and stuff like that.

I feel good. I lift weights, bike, walk, play games, and shoot pool.

Physically I'm fine. I walked and lost weight. I try to walk two-and-a-half miles daily.



FY 2013 FINANCIALS

Revenue

| | |
|----------------------|------------------|
| Federal Block Grant | \$418,455 |
| State General Funds | <u>224,157</u> |
| Total Revenue | \$642,606 |

Expenses

| | |
|-----------------------|------------------|
| Personnel | \$491,620 |
| Equipment | 14,471 |
| Leasing | 4,390 |
| Postage | 1,078 |
| Telephone | 10,895 |
| Supplies | 5,241 |
| Insurance | 3,313 |
| Accounting | 5,484 |
| Rent | 49,081 |
| Travel/Meetings | 25,347 |
| Printing | 6,802 |
| Advertising | 140 |
| Training | 3,589 |
| Purchased Services | <u>21,155</u> |
| Total Expenses | \$642,606 |

CQT STAFF

Joanne Creaney Meekins, *Director*
Deana Krizan, *Deputy Director*
Kathleen (Kate) Wyer, *Program Manager*
Karuna David, *Interviewer*
Marion Ehrlich, *Interviewer*
Cintra Harbold, *Interviewer*
Jean Smial, *Interviewer*
Sara Breidenstein, *Interviewer*
Selena Chaney, *Interviewer*
Meghan Jamison, *Interviewer*
Chuck Buckler, *Interviewer*
Susan Tager, *Interviewer*
Lisa Cinelli, *Interviewer*
Rochelle Howard, *Interviewer*

CONTACT INFORMATION

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Visit our website for more information on CQT's purpose, current activities and findings.

www.cqtm.org



CONSUMER COMMENTS ABOUT

“CQT came in here before and things changed for the better. CQT listened and change happened.”

“In the past, when I called CQT, things got done.”

“Down here it is like they care. I like that you guys [CQT] are here”