



**ACADIANA AREA
HUMAN SERVICES DISTRICT**
Serving Acadiana with Quality Compassionate Care

Annual Management Report

July 1, 2019 – June 30, 2020



Mission:

To improve the quality of life for the citizens of Acadiana who have behavioral health and/or intellectual/developmental disabilities.

Vision:

To become the preeminent provider of community-based supports and human services which promote the independence, respect, and inclusion of all citizens dealing with issues of behavioral health and/or intellectual/developmental disabilities.

Values:

Accountability – To be good stewards of our resources and to exceed all contractual, legal, and regulatory requirements in providing services.

Transparency – To operate in such a manner as to be above reproach in all of our governance and operational processes.

Value – To achieve optimal outcomes by implementing cost-effective, evidence-based practices in a timely manner.



INTRODUCTION

The Acadiana Area Human Services District (AAHSD) was created by the Louisiana State Legislature under the provisions of the Louisiana revised statutes (LSA-RS), per Act 373 of the 2008 Regular Session, and updated by Act 73 of the 2017 Regular Session, to provide administration, management, and operation of behavioral health (addictive disorders and mental health) and developmental disabilities services to the residents of Acadia, Evangeline, Iberia, Lafayette, St. Landry, St. Martin, and Vermilion parishes. This seven-parish area encompasses approximately 5,000 square miles, approximately 12% of the state total; and has a population of approximately 606,000 (from 2018 US Census estimates), approximately 13% of the state total. Within this area, AAHSD operates sites in Crowley, Lafayette, New Iberia, Opelousas, and Ville Platte.

This Management Report is offered as partial fulfillment of the standards set forth by CARF and is designed to summarize the results of the program plans; quality assessment; goals and objectives; the data collected in the areas of effectiveness, efficiency, service access, and consumer satisfaction; and from other operating systems and to provide a synopsis of ‘significant events’. This report is ‘above and beyond’ and in addition to any State-specific required reporting formats. (Specific descriptions of clinical programs – including population served, admission criteria, and program philosophy – are located in the ‘Clinical Programs Overview & Outcomes Management System’ report.)

This Management Report will be made available to a number of readers, including the Board of Directors and employees of the organization, and other community, state, and national stakeholders.

SIGNIFICANT EVENTS DURING THE PAST YEAR

- AAHSD received its third accreditation survey by CARF International. Four of our behavioral health programs (Crisis Intervention, Intensive Outpatient, Outpatient, and Prevention) were re-accredited at the highest level of international standards. AAHSD also included the Governance standards and all Developmental Disabilities Services and these were also recognized at the highest level of conformance. During this three-day survey the team applied approximately 1,725 standards and our cumulative rate of conformance was 98.72%.

At the time of this writing AAHSD is the only Human Services District/Authority in the state to have all developmental disabilities services nationally/internationally accredited. Also, AAHSD is the only public entity (and probably private as well) to have the governance standards applied in the site survey.

- A very significant event impacting our services and programs is the current COVID-19 crisis. Not unlike most other businesses and organizations, AAHSD has had to adapt many of its programs, policies/procedures, and protocols to ensure ongoing services in a safe manner. One of the biggest adaptations was the implementation of tele-health services. So far, the behavioral health service numbers seem to be in line with the previous face-to-face schedule and the developmental disabilities services are also continuing to be provided in the community.

The State of Louisiana has set up ‘shelters’ around the state and AAHSD is serving in a rotation of providing behavioral health coverage to residents in the Camp Chicot shelter. At the time of this writing AAHSD has provided 15 rounds (48hr shift) of coverage. Based upon census at the shelter, the schedule will most likely be extended to the end of July before being re-evaluated.

Additionally, AAHSD has developed and implemented a written plan to guide our efforts during this time. Items addressed include: personal protective equipment (PPE); social distancing; treatment/client care; documentation; and human resources. The plan also includes an outline for workplace transition specific for behavioral health staff, developmental disabilities staff, and administration.

Other impacts to this include the overall budgeting process due to the economic impact on the State. At the time of this writing the State Legislature is meeting to develop the FY21 budget and is addressing revenue short-falls and increased Federal monies. It is unknown at this time the final impact upon our budget. Senior Leadership has participated in numerous calls with State Leadership to discuss this and has submitted several fiscal exercises to plan for changes.

- As reported last year, two clinical staff members received training in ASIST (Applied Suicide Intervention Skills Training) and are now certified to train others. Since that time, AAHSD has trained 179 community-based practitioners. The ASIST program

teaches and enhances skills to enable persons to more effectively work with persons at risk of suicide or self-harm.

Other specialized training for staff this year includes: child parent psychotherapy (CPP); parent-child interactive therapy (PCIT); mental health first aid (MHFA); and training from the Office for Citizens with Developmental Disabilities for behavioral health staff. This last training (a technology transfer initiative) focused on developing/expanding clinical skills for behavioral health practitioners when working with persons with co-occurring intellectual/developmental disabilities.

- AAHSD continues to be involved in many corporate citizenship efforts: Acadia Parish Chamber of Commerce; Greater Iberia Chamber of Commerce; Human Services Interagency Council; Louisiana Association of Nonprofit Organizations; Louisiana Substance Abuse Counselors and Trainers; National Council for Behavioral Health; One Acadiana; and the St. Landry Chamber of Commerce.

New this year, AAHSD has sponsored a staff member to participate in the “Leadership Lafayette” program as part of the Leadership Institute of Acadiana, a program of One Acadiana. This program “provides education, community awareness, and hands-on experiences that prepare program graduates to apply their talents toward improving our community”. Additionally, AAHSD has joined the Acadiana chapter of Volunteer Organizations Active in Disaster (VOAD) and actively participates with the Child Wellness Committee. VOAD fosters efficient, streamlined service delivery to people affected by disaster, while eliminating unnecessary duplication of effort through cooperation, communication, coordination and collaboration in the four phases of disaster: preparation, response, recovery, and mitigation.

- In addition to the ongoing programs/services, AAHSD is participating in several pilot programs as well. AAHSD has partnered with the Evangeline Parish School Board to implement the Good Behavior Game ® (from the Paxis Institute). All K-12 teachers (375 teachers and 15 administrators) in the District have been trained in this program and several community partners will receive training prior to June 30, 2020. This program will continue for EPSB next year and will also expand to St. Landry Parish. From the Paxis Institute:

“The Good Behavior Game ® is a powerful Evidence-Based Practice consisting of proven instructional and behavioral health strategies used daily by teachers and students in the classroom. This universal preventive approach not only improves classroom behavior and academics, but also provides a lifetime of benefits for every child by improving self-regulation and co-regulation with peers.”

AAHSD has participated in a statewide campaign regarding opioid use and abuse and has also worked with a community partner to provide professional trainings to the medical community regarding opioid prescribing practices.

AAHSD also continues to sponsor and pilot a suicide prevention program throughout Acadiana.

STRATEGIC PLAN

As part of the operation and development of AAHSD, and in keeping with the spirit and intent of the national accreditation standards, AAHSD has developed a strategic plan in which the following domains were recognized: management; fiscal; human resources; accountability/communications; and crisis response.

Goals for 2020-2021:

Theme: Management

- Goal:** Maintain contract with LDH for services in Acadiana.
- Goal:** Maintain current, relevant administrative and operational policies and procedures.
- Goal:** Maintain appropriate licensure and accreditation status.

Theme: Fiscal

- Goal:** Work with LDH and DOA to establish budgets for 2020/2021.
- Goal:** Increase collections for self-generated revenue.
- Goal:** Ensure billable contacts and contractual events are processed accurately & timely.
- Goal:** Monitor all financial transactions for accuracy and compliance.

Theme: Human Resources

- Goal:** Maintain adequate staffing patterns to support organizational goals.
- Goal:** Maintain appropriate training calendar for employees/contractors.
- Goal:** Maintain competitive compensation and recruitment efforts.

Theme: Accountability/Communications

- Goal:** Continue to participate in local and statewide initiatives to support persons served.
- Goal:** Increase the number of public events/outreach activities within the service community.
- Goal:** Meet with/report to all Parish Appointing Authorities on a regular basis.

Theme: Crisis Response

- Goal:** Assure provision/availability of comprehensive array of crisis services sufficient in variety of service type to meet the needs of consumers/community.
- Goal:** Continue to participate in the Office of Emergency Preparedness activities as required.

Results/Actions (from 2019-2020 goals):

Management:

- AAHSD maintained a valid contract with LDH.
- AAHSD clinical and administrative policies and procedures were reviewed by CARF, Civil Service, Office of Risk Management, and LDH. All met or exceeded standards.
 - 100% compliance rating from ORM
 - 99.78% compliance rating from Civil Service
 - 98.72% conformance rating from CARF
- AAHSD received successful State licensure and State contract reviews.
- AAHSD expanded its accreditation status to include Governance and all DD services.

Fiscal:

- AAHSD maintained operations within budgetary guidelines.
- AAHSD exceeded the budgeted self-generated revenue amount.
- Professional and service contracts maintained and monitored by AAHSD. Monitoring was increased to at least quarterly for all contracts (some monitored monthly). This process has received positive comments from two separate regulatory reviews.

Human Resources:

- Employees completed State Civil Service PES as required.
- AAHSD continued its employee training program/schedule and utilized two online training programs – LEO and Relias Learning. All targets and timeframes were met.
- All Senior Managers have maintained a succession plan for their respective areas.

Accountability/Communications

- AAHSD maintained credentialing by all MCOs (5) within the State plan.
- AAHSD conducted and/or participated in numerous public events, health fairs, community forums, and other professional forums.
 - Provided/sponsored public education/training events – attendance total: 4,745
- AAHSD was monitored by: CARF, ORM, LDH/OBH and OCDD, LDH/Bureau of Health Standards, LPAA, State Civil Service, and the Fire Marshal. All reviews were successful.

Crisis Response

- AAHSD provides crisis services and continues its suicide prevention program.
- Selected staff has completed training in Applied Suicide Intervention Skills Training (ASIST) and have provided training to thirty (30) community practitioners.
- AAHSD was trained and participated in OPH/Emergency Preparedness exercises/activities.
- AAHSD has fully participated in providing Behavioral Health services to the emergency shelter as part of the State's COVID-19 response.

SYSTEMS REVIEW

Accessibility

AAHSD has implemented an accessibility plan which includes a review of accessibility issues into its ongoing internal inspection process. Areas addressed in this plan and review(s) include: architectural; attitudinal; communication; community integration; employment; environmental; financial; transportation; or technology barriers to service, both within the organization and in the community. An accessibility review was conducted at each site on a quarterly basis; at this time, there are no issues of accessibility pending.

AAHSD reviews any specific accommodation request on an ongoing basis as those may be received. For this reporting period there were two specific requests. First, the overhead lights in several offices were adjusted due to requests related to medical conditions. AAHSD has recently replaced many older lights with new ballast and energy efficient bulbs. For some, these new lights were too 'clean' (bright) and aggravated certain conditions. For these offices, adjustments to the overhead lights were made. Secondly, in accordance with licensure standards mirrors in the restrooms are made from either reflective metal or shatterproof glass. Due to the age of some of these fixtures, the image can be somewhat distorted. A family member made a request on behalf of a client for the mirror to be updated to decrease the level of distortion. This update was completed.

Corporate Citizenship

Corporate citizenship is defined as an organization's efforts, activities, and interest in integrating, contributing, and supporting the communities where it delivers services to better address the needs of persons served. AAHSD has maintained membership in several national, state, and local professional organization:

- National – National Council for Behavioral Health; Health Care Compliance Association; CARF *
- State – Human Services Interagency Council; Louisiana Association of Nonprofit Organizations; Louisiana Association of Substance Abuse Counselors and Trainers
- Local –Acadia Parish Chamber of Commerce; Greater Iberia Chamber of Commerce; Justice and Health Collaborative; One Acadiana; St. Landry Chamber of Commerce; Acadiana Volunteer Organizations Active in Disaster (AVOAD) – Children's Mental Health and Child Wellness Committee

*(*Although not a 'membership' AAHSD is accredited by CARF and has maintained active participation in several events with them. AAHSD has sponsored 'CARF 202' trainings on an annual basis and makes this available to all interested parties across the state.)*

These memberships and activities allow AAHSD to stay on the forefront of national trends and best practices which in turn improves the overall governance and operational systems and services provided.

Corporate Compliance

The compliance officer conducts random and ‘for cause’ audits and reviews of clinical and financial records for the purposes of demonstrating ethical and legal practices and to prevent, detect, and report any cases of fraud, waste, or abuse, whether intentional or unintentional. Approximately six hundred fifty (650) clinical records have been reviewed with no significant findings. Internal control audits and petty cash reviews were conducted at all service locations and no findings were noted. Additionally, the HHS/OIG excluded provider list is reviewed on a monthly basis; there have been no concerns noted.

Finance

AAHSD strives to be financially responsible and solvent, conducting fiscal management in a manner that supports the mission, vision, and values, and performance objectives. Fiscal practices adhere to established accounting principles and business practices. Fiscal management covers daily operational cost management and incorporates plans for long-term solvency. To this end AAHSD has developed and implemented fiscal policies and procedures and receives ongoing internal and external reviews of fiscal systems. AAHSD is a public entity and is subject to review by the Louisiana Legislative Auditor (LLA). AAHSD receives a formal fiscal review every two years from the LLA and this review includes two fiscal years so that each fiscal year of financial operations is reviewed. The fiscal review report is presented to the Board by the audit team from the LLA and Board members are allowed direct access to the report and have the opportunity to ask any questions to the audit team.

For the past five years AAHSD has met its self-generated revenue goal and this fiscal year we are on track to exceed our self-generated budget target again.

Governance

As noted, AAHSD did apply the governance standards during its most recent accreditation survey. This is one way AAHSD and the Board have demonstrated their commitment to Accountability, Transparency, and Value to our stakeholders. As outlined in Act 73 of the 2017 Regular Session of the Louisiana Legislature, the Board is comprised of ten individuals whose experience/expertise include the following: mental health; addictive disorders; developmental disabilities; finance/accounting; judiciary/criminal justice; law enforcement; public health; and include consumers, parents, family members, and advocates.

The Board Chair did participate in a state-wide meeting of all of the local governing entities’ Boards and made a presentation on best-practices of AAHSD. Also, the Board has participated in an annual strategic planning session and completed required training as specified in Act 73.

The Board subscribes to a “policy governance” model and does not focus on day-to-day operations. However, the Board does receive regular updates as to service deliverables, such as: waiting times; number of persons served; number of evidence-based practices provided; outreach

efforts; special events/projects; and a monthly financial summary. Additionally, information is provided on a monthly basis in the form of written reports and presentations by Senior Managers, community stakeholders and providers, and other pertinent sources.

Health and Safety

AAHSD participates in both internal and external inspections of all facilities in accordance with timeframes outlined in the national accreditation standards, and as required by the Office of Risk Management (ORM). We obtain written reports of all external monitoring and respond to these with corrective action plans. These reports, along with the corrective action plans, are submitted to the Executive Director. Likewise, internal inspections of fire, safety, and security result in a written report and a corrective action plan that is submitted to the Executive Director. Minutes and other documentation of the Health/Safety Team meetings and activities are maintained and reviewed by the ORM to ensure proper participation and outcomes in the area of health/safety. Additionally, all critical incidents are reviewed to determine any trends/patterns and the need for any corrective action. During this timeframe, there were two (2) critical incidents reported. These incidents were documented and reviewed and also reported as appropriate. There were no trends/patterns noted. Original documentation is maintained by the Health/Safety Officer. There were no (0) sentinel events during this timeframe.

Human Resources (Workforce Development and Management)

AAHSD recognizes personnel as an invaluable resource and has established numerous policies/procedures in the area of human resources/workforce development and management. These policies have been developed to encourage and foster mutual respect between employer and employees and to promote the involvement of personnel in the success of the organization. An employee handbook has been developed to enhance employee orientation and to provide an overview of relevant information. During the past year, fourteen (14) employees have completed the onboarding process. There have been no (0) employee grievances.

Information Management and Technology

AAHSD continues to note the following: real time supervisory monitoring of productivity and documentation; real time resource utilization and resource deployment; improved interaction between clinical systems and financial systems; improved accuracy of data/demographics used for reporting and monitoring; increased compliance with Federal requirements; increased collections; increased accuracy in financial reviews for reconciliation of billing/payments; and increased number of records reviewed as part of QI process.

AAHSD has implemented a written technology and system plan (policy) to proactively plan for any potential threats to ensure uninterrupted access to systems. This plan addresses: hardware; software; security, including e-mail and internet use; confidentiality; backup policies; assistive

technology; disaster recovery preparedness; and virus protection. Additionally, AAHSD completes an annual technology assessment.

Services are not provided via social media; however, AAHSD maintains a Facebook page as a way to provide information and education to the community at large. As noted, AAHSD has recently implemented tele-health services. This system was initiated via emergency administrative directive in order to ensure ongoing services during the COVID-19 crisis. Policies and procedures are being written and the ongoing use of this system will be reviewed and merged into the ongoing strategic planning process, written technology plans, and quality improvement systems.

Performance Measurement and Management

AAHSD participates in quality management and monitoring, and data collection and reporting as outlined in both the CARF standards and the Accountability Plan (which includes fifty-eight (58) specific performance indicators). These indicators are monitored and reported on, either on a monthly or quarterly basis, depending on the specific requirements and are independently reviewed by LDH.

Input from Persons Served and Other Stakeholders

In addition to programmatic outcomes data, AAHSD actively solicits feedback from staff, persons served, and other stakeholders. AAHSD participates in a statewide satisfaction survey process, the “C’est Bon” survey and the results are posted throughout the facilities. Additionally, five hundred fifty-six (556) satisfaction surveys were completed with overwhelming positive responses.

AAHSD has a ‘comment box’ in each service site – this allows any person to offer feedback regarding satisfaction, complaints, general comments, etc.; this information is collected regularly and forwarded to the Executive Director for review. Stakeholder surveys are sent to all contractors, referral sources, community organizations, and other interested parties. For this reporting period, AAHSD received eleven (11) stakeholder surveys. Additionally, AAHSD conducted a ‘Staff Development Survey’ in April 2019. The results of these surveys are reviewed by administration and are integrated into the strategic planning process.

During this reporting timeframe, AAHSD has hosted and/or sponsored numerous public forums and/or training sessions with a cumulative attendance of four thousand seven hundred forty-five (4,745) participants. Surveys/questionnaires are collected at each event and this information has been summarized and reviewed by Senior Management and the Board and will be used to revise or develop policies/plans as appropriate.

Contracted Services

Above and beyond the services provided directly by AAHSD, we offer services to our community by contracting with community-based providers; this ensures that a full continuum of care is available to those in need. The total value of the contracts listed below is approximately \$3 million per year and AAHSD serves approximately 16,381 persons per year via contracted services. The following is a summary of contracted services (not including professional services contracts):

- Activity/Resource Center – community-based centers where individuals with behavioral health conditions are able to go during the day (without appointment) for socialization and the building of social skills; opportunities are available on an ongoing basis for linkages to employment, education and advocacy activities;
- Assertive Community Treatment – contracts with two community providers for approximately 42 individuals at a time (based upon clinical need);
- Case Management – adult case management services is comprised of community-based services to individuals with behavioral health conditions; with low staff-to-client ratios, it provides intense, individualized services for those individuals for whom clinic services alone are not sufficient, allowing the person to maintain community tenure;
- Child and Adolescent Case Management – case management and consumer care resources is comprised of community-based services to individuals with behavioral health conditions; with low staff-to-client ratios, it provides intense, individualized services for those individuals for whom clinic services alone are not sufficient, allowing the person to maintain community tenure;
- Child and Adolescent Response Team (CART) – provides an array of crisis intervention, family preservation, respite and community services for children and youth under 18 and their families; prevent or reduce the need for hospitalization; and maintain children and youth in schools in the least restrictive environment;
- Detoxification – this contract provides ASAM level 3.7 services for adults with substance abuse disorders;
- Halfway House – provides ASAM level 3.1 services;
- HIV Services – provides HIV rapid testing, referrals, outreach and education;
- Housing – Supported Independent Living services, including transportation and housing and adult intensive case management services;
- Interpretive Services – language and hearing impaired interpretive services to those in need to increase service accessibility;
- Prevention – four areas of focus
 - educational materials through community coalitions to businesses that sell tobacco products
 - Kids Don't Gamble Wanna Bet? – gambling prevention curriculum provided to elementary and middle school (Grades 3-8) settings
 - Life Skills – a research-validated substance abuse prevention program proven to reduce the risks of alcohol, tobacco, drug abuse, and violence by targeting the major social and psychological factors that promote the initiation of substance use and other risky behaviors

- Suicide Prevention – outreach and education to all public high schools to provide students with the tools necessary to help themselves or others who may be showing signs of potential at-risk behavior
- Residential Treatment – contracts with two community providers for ASAM level 3.3 & 3.5 services for adults with substance abuse disorders;
- Transitional Assistance with Homeless – provides services for the Projects for Assistance in Transition from Homelessness (PATH) SAMHSA grant and provides services for individuals who have severe mental illness, substance use disorders, or co-occurring disorders;
- Transportation – provides transportation to and from clinical treatment services for those individuals who live in rural areas and/or do not have access to public transportation
 - for those with access to public transportation, bus passes/vouchers are provided as funding is available.

Summary of Services Provided (7/1/19 – 6/30/20)

Program	Number of Persons Served
Adult Mental Health	6250
Adult Addictive Disorders	1027
Child/Adolescent Behavioral Health	540
Crisis Intervention Services	186
Prevention Contacts*	9389*
Developmental Disabilities	2868
AAHSD Direct Service Total	20,260
AAHSD Contract Total	16,381
AAHSD GRAND TOTAL	36,641

* Prevention contacts – AAHSD participated in several social media campaigns and state-wide campaigns addressing the Opioid crisis and underage alcohol use. The number of reported ‘hits’/‘views’ and billboard traffic is 1,728,405. The 9,389 contacts listed above are for traditional face-to-face contact.

Quality Improvement

AAHSD strives to make available and foster the highest quality of direct services in meeting the needs of the persons served and to assure continuity of care and maintenance of clients’ records. To this end, we have instituted a Quality Improvement Team to provide objective and systematic evaluations of the quality and appropriateness of client care, identify acceptable levels of care,

and recommend actions to improve care. Team members represent a cross-section of service locations and disciplines; including, the Medical Director, staff psychiatrists, and medical psychologists in the peer-review process.

This year the team reviewed three hundred sixty-eight (368) clinical records (155/BH, 213/DD) with minimal corrective action required. There were no trends/patterns regarding issues identified. An additional thirty-six (36) have been reviewed by our Medical Director as part of a more intensive ‘medical peer review’ process.

Rights of Persons Served

In keeping with national accreditation standards and other licensure requirements; AAHSD has implemented policies and procedures to ensure the rights of persons served. Persons served are afforded the right to file formal complaints and/or grievances; these are handled on a case-by-case basis. During this timeframe there have been no (0) complaints and/or grievances. Also, contact information for the Bureau of Health Standards has been posted in all service sites to ensure that persons served have appropriate information to file complaints and/or grievances with an outside party. During this time frame, AAHSD has not received any information as to any reports being filed.

Above and beyond these minimal legal/regulatory requirements AAHSD strives to not only ensure basic rights but to demonstrate dignity and respect to each person served. Some of the efforts in this area include: annual staff training in customer service; improvements to physical locations to ensure safety and to provide a pleasant environment (artwork and office decorations, interior and exterior painting of service locations, landscaping, new furniture in waiting rooms and service areas, safety lights in parking areas); review by legal counsel of all records requests and subpoenas to ensure appropriate release of information and to maintain privacy of persons served.

Risk Management*

AAHSD has developed a Risk Management plan and completes a ‘risk management assessment’ on an annual basis; the results are presented to the Executive Director and the Senior Management Team. This internal assessment is intended not only to demonstrate conformance with CARF standards regarding risk management, but to also address issues as outlined by the Statement of Auditing Standards (SAS) 104-111; referred to as the ‘the risk management suite of standards’. The results of the risk management have been incorporated into the organization’s strategic planning and budget development process.

**(As a matter of clarification, the “Office of Risk Management” as noted in the area of Health/Safety is a State office that more closely identifies with issues regarding health and safety. AAHSD uses the term ‘risk management’ as a broader term to include health and safety but to expand to other areas as well, more closely following the CARF interpretation of ‘risk management’).*