

# Board of Directors' Packet

# September 25, 2024

Meeting time is 6:30 p.m.

Meeting held at 333 Broadway Street Rock Springs, WY



#### Agenda September 25, 2024 333 Broadway Street, Rock Springs, WY

- I. Call to Order
- II. Declare Quorum
- III. Approval of Agenda pg. 1-2
- IV. Approval of Minutes pg. 3-11
- V. Treasurer's Report pg. 12
  - a. Write-Offs pg. 13-15
  - b. Balance Sheet- pg. 16
  - c. Account Receivables pg. 17
  - d. Revenues pg. 18
  - e. Expenses pg. 19-20
  - f. Check Register pg. 21-26
- VI. Committee Updates
  - a. Finance
  - b. Personnel
  - c. Policy
  - d. Strategic Planning
- VII. Previous Business pg. 27
  - a. Residential Bed Utilization and Drawdown pg. 28
  - b. Residential Referrals and Admissions pg. 29
  - c. Title 25 Monthly Information pg. 30
  - d. SCS Staffing Report pg. 31-37
  - e. ARPA Bid Proposals
  - f. Sweetwater County and SCS Budget Agreement 2024-2025
  - g. Review of Facility Modifications
  - h. Strategic Planning
  - i. Crisis Opioid-Detox Application
- VIII. New Business
  - a. Personnel Policy on Tobacco Review Document in packet
  - b. Dry Creek Trona Project Industrial Siting Impact (Information only)
  - c. November and December Meeting Dates November 27 and December 25
  - d. Board Evaluations

- IX. Presentations pg. 38
  - a. Annual Report by Laura Schmid-Pizzato pg. 39-42
  - b. Year End Financial Report by Melissa Wray-Marchetti pg. 43-48
  - c. HR Annual Report by Amy Moser pg. 49-53
  - d. QA and Critical Incident Report by Michal Zanetti-Love and Ross Little pg. 54-64
  - e. Summer Program Report by Michal Zanetti-Love pg. 65-67
- X. CEO's Report pg. 68-70
- XI. Board Action pg. 71
  - a. Approval of Bid Proposal for Ankeny Facility pg. 72-73
  - b. Locum Tenens Contract Extension pg. 74-75
  - c. Sweetwater County and SCS Budget Agreement 2024-25
  - d. Tobacco Free Workplace Policy pg. 76
  - e. Add First of the Month Vendor pg. 77-78
- XII. Public and Board Comments/Questions
- XIII. Executive Session for the purpose of instructing negotiations, deliberating on contracts, personnel matter, and all other matters considered confidential by law
- XIV. Adjournment

# Board Meeting Minutes

August 28, 2024

Minutes for Southwest Counseling Board Of Director Meeting Held August 28, 2024 At 333 Broadway Street Rock Springs, Wy

1) Meeting Called to Order by Kayleen Logan @6:34pm

Attending: Kayleen Logan, Raven Beattie, April Thompson, Kori Rossetti Kristy Kauppi, Melissa Bates

- 2) Declare Quorum by Kayleen Logan
- Approval of Amended Agenda pg 1 Motion made by Ms. Thompson Second by Ms. Bates Motion passed
- Approval of Minutes- pg 2-8 Motion made by Ms. Kauppi Second by Ms. Beattie Motion passed
- 5) Treasurer's report- pg 9 (Presented by Ms. Kauppi)
  - a. Write-Offs- Semi Annual pg 10-17

There were no Accounts Receivable Write-Off Requests Self Pay Balances under \$25.00. There was no Accounts Receivable Write-Off Request Self Pay over \$25.00. There was an Accounts Receivable Write-Off Request Self Pay Balances under \$25 for June of 2024 in the amount of \$97.00. There is an Accounts Receivable Write- Off request for No Show Fees for June of 2024 in the amount of \$301.00. The Accounts Receivable Write- Off Request Suspended Collection Accounts for June of 2024 was in the amount of \$27,171.46. Accounts Receivable Write-Off Request Collection Accounts-Bankruptcies for June of 2024 was in the amount of \$1,366.43. There was an accounts Receivable Write-Off Request Collection Accounts-Bankruptcies for June of 2024 in the amount of \$2,472.41. There was an Accounts Receivable Write-Off Request Uncollectable Insurance/Third Party Payors June of 2024 in the amount of \$146.00

b. Balance Sheet- pg 18

The total cash assets are \$3,394,331.01. The previous month's total cash was \$1,926,033.19, an increase in cash in the amount of \$1,468,297.82 from the previous month. Increase is due to receiving 40% of the 40% of the fixed payment dollars under

the FY25 BHD Agreement. The year to date expenditures through July 31, 2024 total \$1,412,830.48. The average cost per day of operations remained consistent from the previous month at \$45,575.18. Liabilities as of July 1, 2024 total \$2,788.36. Based upon all cash balances, SCS is currently at 74 days of cash on hand, an increase from the previous month at 48 days cash on hand.

c. Accounts Receivable- pg 19

The total outstanding balance for amounts owed to Southwest Counseling Service for July 2024 is \$734,213.93 The receivables increased from the previous month due to lower adjustments in this period. The total receivables excludes Collection, State Contracts and Cancellation/No show fees.

d. Revenues- pg 20

The Revenues for July 2024 is \$ 6,949,216.26 which is 43% for the month and 43 % for the year.

e. Expenses - pg. 21-22

The expenditures for July 2024 is \$1,412,830.48 which is 7% for the month and at 7% for the year.

f. Amended Check register – pg. 22-28

The August 2024 check register total is \$1,394,262.73

Approval of the Treasurer's report Motion made by Ms. Thompson Second by Ms. Bates Motion passed

Motion passed.

6) Committee Updates

a. Finance Committee- SOR grant. Will be ending 2 years in September. 45 slots for medication. We will be getting 10 more slots for a total of 55. SCS will be on a 1 year agreement rather than a 2 year.

- b. Personnel Committee- did not meet in August. Will meet in September
- c. Policy Committee- need to schedule after our training today with Coal Creek Law.

d. Compliance and Board Training- Training with Coal Creek Law today regarding the Wyoming Open Meetings Act, WYO Stat. Ann 16-4-40 and the Wyoming Public Records Act Training.

e. Strategic Planning- Ms. Logan advised that they will be starting the strategic planning and asked if anyone was interested in joining the committee. It will be Ms. Logan and Ms. Kauppi.

- 7) Previous Business pg. 29
  - a. ARPA Bid Proposals pg. 30 Presented by Gene Legerski and William Wheatley. They advised that both bids were over the funding amount. They are under budget on the Washakie , Duran home and the other house; therefore, they are hopeful that they can utilize the leftover monies to complete this project. They further indicated that getting a project done is difficult due to not having the workforce or manpower to complete. Those that are outbid cannot re-apply due to already being employed and on other projects. Projects are based on a bonding capacity. Gene and Mellissa will handle the meeting with the County Commissioners. They are below state capacity is highlighted. SCS didn't hit target rate from June 1, 2024 to June 30, 2024 but Ms. Schmit Pizzato advised that SCS is the only agency in compliance right now. Money is a draw down and at a 40% fixed rate and will need a safety net. No comments/questions
  - a. Residential Bed Utilization pg. 31 Presented by Laura Schmid-Pizzato. New contract does not go by number of beds only use a dollar draw down amount. We need to look at 100% of the total do not look at the 85%. The state expects 85% of the draw down of %100, the target of 85% is 100%. SCS is currently \$22,000 short of the July goal but we can go over capacity in another category, however this will not reflect on what we receive in funding. Sub-acute beds pay the most. Ms. Logan asked if this could be reported to the board monthly. It would be nice to see how many were referred, how many were accepted, how many entered/admitted. It was discussed that every situation is different. Some clients come in on social detox for opiates/alcohol and are referred to sub-acute or can go into residential (TC or MH). They can also do crisis to MH. No other questions or comments.
  - b. Title 25 Monthly information- pg. 32-33- There were 18 emergencies, 8 committed and 0 of that amount were titled. Ms. Logan asked if there were any referrals and from where. On call clinician does the referrals. Ms. Schmid-Pizzato advised that possibly 2 but they may have been in August so it will go on next report. No other questions or concern.
  - c. SCS Staffing Report- pg 34-40- Ms. Kauppi asked if the two half vacancies for maintenance/groundkeeper could actually be filled with a full time employee rather than two. Would it cost the agency less money to hire one full time. It was discussed between

members that it saves the agency to contract these duties out. It is also a safety issue for their staff as they don't have the manpower or the equipment. Linda advised that the workforce is limited. No one wants to work part time. She also noted that they have numerous buildings to plow which will take quite a bit of time and effort.

#### 8. New Business

a. Nomination and election of Board Vice-Chair Replacement for Mr. Rich Fischer. Mr. Fischer resigned due to medical issues.

Ms. Rossetti made motion to nominate Ms. Beattie to fill this position Ms. Thompson seconded Motion passed

- b. Summary of the State On-Site Visit on August 13, 2024- The on-site team consisted of Ben Kifer, MHSA Administrator, Dani Sullivan, Quality and Evaluation Unit Manager, Ashley Provencio, Community Treatment Service Unit Manager, Claire Reyburn and Jamey Meyers, Treatment Specialists. Management team members joined as well as board members, Raven Beattie, Kori Rossetti, Kristy Kauppi, and Kayleen Logan. Commissioner West was also in attendance. The on-site is a block grant requirement for the Division of Behavioral Health, as well as to determine adherence to the performance standards. Due to Behavioral Health Redesign, the division did not spend time on the performance measures of last year. It did provide them with an opportunity to see some of SCS facilities of the agency and meet board members and the management team. It was a positive report for the agency. Ms. Beattie advised that the relationship between the State and SCS is great. They are on top of all the States requirements. Crisis Stabilization was addressed the State advising that this is hard to financially support and requires all stakeholders to work together. The State feels that the SCS does a good job with what they have. SCS is the only agency to have a greenlight in all areas. Ms. Kauppi advised that she was unaware that the meeting was going to be a Q&A session and would have liked to have known that prior so that she could have come prepared with some questions. It was discussed that the State and the County have different ideas on what the target populations is.
- c. Sweetwater County and SCS Budget Agreement 2024-2025. Ms. Thompson asked if it was possible for staff to have a plan by July 2025. Linda appears to believe a plan is possible. It was asked if it would be beneficial to have a liaison. Commissioner West advised that the idea is to develop a plan and make it a priority to get a committee, staffing and funding. Questions were asked if this is sustainable in Sweetwater County. Ms. Schmid-Pizzato advised to use caution when using the language "implementation by July 1." She also advised that the 23 hour program that Natrona County uses is a medical model.
- d. Request for Review of Facility and Modification- Michal Love asked for the Boards consideration in remodeling the playroom for play therapy. The request would require removal of a cork board and removed wall of cupboards. Commissioner West does not believe that this needs to go to the board or the County Commissioners. SCS was instructed to contact Gene Legerski. It was

asked to find out what the plan entails and if there is money in the budget to do the modification.

9) Presentation- Three Year Trend of Cash on Hand Presentation Requested by the Board and presented by Melissa Wray Marchetti- pg 41-42 -in FY22 the agency had 126 days cash on hand. In FY23 the agency had 96 days cash on hand and in FY24 the agency has 48 days cash on hand.

#### 10) CEO's Report - pg.43-46

Behavioral Health Redesign is underway and the centers are encountering some difficulties. One of the topics of concern is the Outcomes Measures. All centers had dollars removed from their budget to support the Outcome Measures. One of the difficulties is the field level, agency staff are not empowered to submit clients to be included in the pilot. Locally, I have met with Wyoming Department of Corrections and the Department of Family Services since these agencies have power to identify individuals for Behavioral Health Redesign, (BHR) but do not have the power presently to enroll in the outcomes. Individuals referred for the outcomes also have to agree to be part of the system. There are 900 slots for incentive payments. The primary reason was to study the effectiveness of the outcome's incentive payments. To date, there have only been a few individuals across the state that have entered into the outcomes. The concern of the centers is the inability to draw these dollars down from the State. WAMHSAC is requesting that the agencies be able to identify and include individuals into the outcomes to assist in this process. Wyoming Association of Mental Health and Substance Abuse Centers (WAMHSAC) received great news concerning ARPA dollars and outcomes. The approval is \$10 million over a two year period. Ms. Andi Summerville has been working with the Governor's office concerning ARPA funding and being utilized to replace the outcome dollars removed from the centers budget. Ms. Andi Summerville reported that she received confirmation that ARPA money has been officially approved by the Governor. The next steps are to finalize the MOU between the Governor's office and DOH, then to contract amendments. This is great news.

Division of Behavioral Health held their on-site visit with SCS on August 13, 2024. The on-site team consisted of Ben Kifer, MHSA Administrator, Dani Sullivan, Quality and Evaluation Unit Manager, Ashley Provencio, Community Treatment Service Unit Manager, Claire Reyburn and Jamey Meyers, Treatment Specialists. Management team members joined as well as board members, Raven Beattie, Kori Rossetti, Kristy Kauppi, and Kayleen Logan. Commissioner West was also in attendance. The on-site is a block grant requirement for the Division of Behavioral Health, as well as to determine adherence to the performance standards. Due to Behavioral Health Redesign, the division did not spend time on the performance measures of last year. It did provide them with an opportunity to see some of SCS facilities of the agency and meet board members and the management team. It was a positive report for the agency.

ARPA Projects: There are four APRA projects of Ankeny, Washakie, Duran and the Jonah Building. The walk through on the buildings were held on August 2, 2024 with bid openings on August 15, 2024. The board will be presented with the bids and then the bids will go to the County Commissioners for their selection. This is exciting for the agency. This has been a long process, starting in 2021.

- 11) Board Action
- a. Approval of Bid Proposal for Ankeny Home-postponed
- Approval of Bid Proposal for Duran Home pg. 48-49 Motion made by Ms. Beattie Second made by Ms. Thompson Motion passed.
- c. Approval of Bid Proposal for Washakie Home- pg 50-51 Motion made by Ms. Beattie Second made by Ms. Rossetti Motion passed.
- d. Approval of Bid Proposal for Modular Office postponed
- SOR MAT FY25 Agreement- pg 52-83 Motion made by Ms. Kauppi Second made by Ms. Thompson Motion passed.
- f. BI Collaborative Agreement for Software pg. 84-91

Motion made by Ms. Thompson Second made by Ms. Beattie Motion passed.

- g. Extension Agreement for Pat Swan-Smith Motion made by Ms. Thompson Second made by Ms. Rossetti Motion passed.
- Request of RFP with United States Probation Office, District of Wyoming Motion made by Ms. Kauppi Second made by Ms. Thompson Motion passed

- i. BHD Contract Amendment -Motion made by Ms. Kauppi Second made by Ms. Beattie Motion passed
- j. Locum Tenens Contract Extension Motion to postpone made by Ms. Thompson Second made by Ms. Beattie Motion passed
- Agreement with Ms. Andrea Valdez Motion to postpone made by Ms. Kauppi Second made by Ms. Beattie Motion passed
- Sweetwater County and SCS Budget Agreement 2024-2025- pg. 250-281 Motion to approve made by Ms. Kauppi Second made by Ms. Bates Motion passed
- 12) Public and Board Comments/Questions Mr. Jarvie thanked the Board for allowing him to work while doing his internship. It has been completed. He believes this opportunity immediately paid off and will have good results. He advised that Linda asked him "what he wanted, how can she help and what are my goals." He does not believe he needs to look elsewhere for job opportunity.
- 13) Executive Session

Motion made by Ms. Bates for purpose of personal and legal issues Second made by Ms. Beattie Motion passed.

A motion to adjourn Executive Session Motion made by Ms. Kauppi purpose of personal and legal issues Second made by Ms. Thompson Motion passed.

Motion to reconvene Board Meeting Motion made by Ms. Kauppi Seconded by Ms. Thompson

14) Adjournment at 10:36pm Motion made by Ms. Kauppi Second made by Ms. Thompson Motion passed.

Respectfully Submitted,

Kori Rossetti

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# Treasurer's Report

### Accounts Receivable Write-Off Request Self Pay Balances under \$25 August-24

Balances under \$25 are reviewed monthly and are only submitted for request when the balance is older than one year or the client is deceased or no consent to treat is obtained.

Client Account Number	Amount of Write-Off	Reason for the request for Write-Off
Total	\$ -	

**Board Signature** 

### Accounts Receivable Write-Off Request Self Pay Balances over \$25 August-24

Balances over \$25 are reviewed monthly and are only submitted for request when the balance is older than one year or the client is deceased or no consent to treat is obtained.

Client Account Number	Amount of Write-Off	Reason for the request for Write-Off
Total	\$-	

**Board Signature** 

### Accounts Receivable Write-Off Request Bankruptcy Discharged August-24

Bankruptcy Balances are requested for write-off once received by the agency for dismissal.

Client	Amount of	
Account	Write-Off	Reason for the request for Write-Off
Number		
Total	\$ -	

Board Signature

#### Southwest Counseling Service Balance Sheet As of August 31, 2024

#### ASSETS

Current Assets	
Checking/Savings	
1020 · General Operating Account	1,460,590.73
1031 · Commerce Bank- Cash Reserve	1,108,668.88
Total Checking/Savings	2,569,259.61
Total Current Assets TOTAL ASSETS	2,569,259.61 <b>2,569,259.61</b>
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Other Current Liabilities	
24000 · Payroll Liabilities	288.36
Total Other Current Liabilities	288.36
Total Current Liabilities	288.36
Total Liabilities	288.36
Equity	
32000 · Unrestricted Net Assets	2,138,251.87
Net Income	430,719.38
Total Equity	2,568,971.25
TOTAL LIABILITIES & EQUITY	2,569,259.61

The Balance Sheet provides the assets and liabilities for the specific point in time of August 31, 2024. The total cash assets are \$2,569,259.61. The previous month's total cash was \$3,394,331.01, a decrease in cash in the amount of \$825,071.40 from the previous month. The year to date expenditures through August 31, 2024 total \$1,412,830.48. The average cost per day of operations remained consistent from the previous month at \$45,291. Liabilities as of August 31, 2024 total \$288.36. Based upon all cash balances, SCS is currently at 56 days of cash on hand, an decrease from the previous month at 74 days cash on hand.

FY 2025 Accounts Receivable Report	<u>t</u>												
<u>Aug-24</u>	Beginning Balance	Charges	Payments	Adjustments	1	Ending Balance	AR b	y Days Aging					
								0	30		60	90	120
Self Pay	\$ 303,033.67	\$ 32,245.76	\$ (19,252.62)	\$ (16,217.91)	\$	299,808.90	\$	15,376.16	\$ 9,046.52	\$	29,185.21	\$ 29,225.41	\$ 216,975.60
Insurance	264,049.64	99,079.52	(50,340.18)	(34,547.69)		278,241.29		91,888.75	94,532.19		35,210.51	11,143.34	45,466.50
Medicaid	110,456.83	43,498.39	(37,473.86)	(19,330.21)		97,151.15		38,395.71	31,438.54		11,843.89	8,160.49	7,312.45
Medicare	7,373.42	4,567.87	(1,820.42)	(560.01)		9,560.86		3,743.83	3,859.57		1,369.38	(30.33)	618.41
EAP	18,725.49	10,263.83	(1,743.33)	(4,182.50)		23,063.49		7,037.50	5,886.33		4,926.33	1,648.33	3,565.00
Client Contracts	30,574.88	21,556.26	(17,354.70)	7,144.71		41,921.15		5,641.10	13,888.32		13,834.63	7,547.88	1,009.22
Collection	1,499,669.19	27,995.06	(1,236.09)	(3,623.07)		1,522,805.09		-	50.02		2,472.67	4,269.51	1,516,012.89
State Contracts	407,551.99	630,479.95	(383,102.77)	70,536.06		725,465.23		414,046.87	299,119.27		12,299.09	-	-
Cancellation/No Show	18,374.28	960.00	(322.00)	(358.00)		18,654.28		820.00	807.00		744.00	600.00	15,683.28
Total	\$ 734,213.93				\$	749,746.84	s	162.083.05	\$ 158,651.47	¢	96.369.95	\$ 57 695 12	\$ 274,947.18

Jul-24						1	AR by Days Aging				
	Ве	ginning Balance	Charges	Payments	Adjustments	Ending Balance	0	30	60	90	120
Self Pay	\$	352,000.26	\$ 16,527.38	\$ (29,198.21)	\$ (36,295.76)	\$ 303,033.67	\$ 1,893.79	\$ 27,651.04	\$ 33,346.47	\$ 29,276.74	\$ 210,865.63
Insurance		220,327.34	140,100.17	(45,222.72)	(51,155.15)	264,049.64	127,688.57	70,181.49	14,680.34	12,053.88	39,445.36
Medicaid		59,061.74	80,714.02	(27,218.70)	(2,100.23)	110,456.83	74,051.79	21,579.91	8,568.21	3,935.11	2,321.81
Medicare		6,492.51	3,571.10	1,436.12	(4,126.31)	7,373.42	3,271.10	3,558.24	(64.33)	(81.01)	689.42
EAP		13,488.50	8,343.83	(1,907.84)	(1,199.00)	18,725.49	5,592.50	6,166.33	2,658.33	2,493.33	1,815.00
Client Contracts		15,912.76	16,419.28	(25,394.33)	23,637.17	30,574.88	8,696.39	13,146.39	7,547.88	59.22	1,125.00
Collection		1,499,301.82	33,147.57	(544.71)	(32,235.49)	1,499,669.19	25.02	1,041.61	2,109.69	5,030.85	1,491,462.02
State Contracts		897,303.14	1,965,401.02	(2,478,495.72)	23,343.55	407,551.99	388,011.59	19,540.40	-	-	-
Cancellation/No Show		17,762.28	920.00	(297.00)	(11.00)	18,374.28	870.00	799.00	641.00	635.00	15,429.28
Total	\$	667,283.11				\$ 734,213.93	\$ 221,194.14	\$ 142,283.40	\$ 66,736.90	\$47,737.27	\$ 256,262.22
Changes from Previous Month											
			Charges	Baymonto	Adjustmonts	Ending Palanco	1				

		Charges	Payments	Adjustments	Ending Balance
Self Pay	\$	15,718.38	\$ 9,945.59	\$ 20,077.85	\$ (3,224.77)
Insurance	\$	(41,020.65)	\$ (5,117.46)	\$ 16,607.46	\$ 14,191.65
Medicaid	\$	(37,215.63)	\$ (10,255.16)	\$ (17,229.98)	\$ (13,305.68)
Medicare	\$	996.77	\$ (3,256.54)	\$ 3,566.30	\$ 2,187.44
EAP	\$	1,920.00	\$ 164.51	\$ (2,983.50)	\$ 4,338.00
Client Contracts	\$	5,136.98	\$ 8,039.63	\$ (16,492.46)	\$ 11,346.27
	_			\$ -	
Amount Increase/Decrease	\$	(54,464.15)	\$ (479.43)	\$ 3,545.67	\$ 15,532.91

The total outstanding balance for amounts owed to Southwest Counseling Service for August 2024 is \$749,746.84 The receivables increased slightly from the previous month due to higher self-pay charges in this period. The total receivables excludes Collection, State Contracts and Cancellation/No show fees.

#### Southwest Counseling Service

#### **Revenues FY25**

Revenues FY25						
State Contracts	FY25 Budget	Aug-24	% Month	YTD	%YTD	Difference
Outpatient Services						
MH - Outpatient	\$ 1,038,642.78	\$ 25,578.35	2%	\$ 278,314.71	27%	\$ (760,328.07)
MH - CARF	14,015.00	305.78	2%	3,716.10	27%	(10,298.90)
MH- Direct Care Salaries	182,343.00	4,252.38	2%	48,622.51	27%	(133,720.49)
MH- Emergency Services #95	29,218.00	637.48	2%	7,747.19	27%	(21,470.81)
MH- Regional Med. Management #58	133,729.00	2,917.72	2%	35,458.44	27%	(98,270.56)
MH- Regional Nursing Support #100009	41,291.00	900.89	2%	10,948.37	27%	(30,342.63)
MH- Regional Early Intervention #10008	53,302.00	1,162.95	2%	14,133.10	27%	(39,168.90)
MH- ESMI	56,277.73	7,686.62	14%	12,176.69	22%	(44,101.04)
MH- Jail Based Services	50,000.00	1,090.91	2%	13,257.58	27%	(36,742.42)
SA - Outpatient #32	606,870.00	13,240.81	2%	160,912.47	27%	(445,957.53)
SA- Direct Care Salaries	313,899.00	6,848.71	2%	83,230.80	27%	(230,668.20)
SA - CARF	6,100.00	133.09	2%	1,617.42	27%	(4,482.58)
SA - HB 308	454,450.00	9,915.27	2%	120,498.11	27%	(333,951.89)
MH & SA- Peer Specialist	90,000.00	1,963.64	2%	23,863.64	27%	(66,136.36)
CCRS	208,800.00	4,555.64	2%	55,363.64	27%	(153,436.36)
MH - LT Group Home -Sweetwater #100026	632,675.31	20,123.10	3%	174,074.09	28%	(458,601.22)
MH - LT Group Home - Uinta #100028	517,643.44	25,696.12	5%	151,656.02	29%	(365,987.42)
SOR- Medication Assisted Treatment	483,000.00	55,705.00	12%	161,505.00	33%	(321,495.00)
SA - Peer Review	2,500.00		0%	101,505.00	0%	(2,500.00)
Mitigation	1,830.00	_	0%	-	0%	(1,830.00)
ССВНС	1,830.00	-	0%	-	0%	(1,830.00)
ССВНС	1 000 000 00		0%	-	0%	(1 000 000 00)
	1,000,000.00	-	0%	-	0%	(1,000,000.00)
Regional Services - MH	420 500 46	21.001.20	F.0/	120 004 57	200/	(200,002,00)
MH- Transitional Grp - Sweetwater #100026	438,588.46	21,961.38	5%	128,684.57	29%	(309,903.89)
MH - SIP- Sweetwater #34	155,302.06	3,388.41	2%	41,178.70	27%	(114,123.36)
MH- SIP- Uinta County #100025	207,069.41	12,216.82	6%	62,603.71	30%	(144,465.70)
MH- Transitional Grp - Uinta #100028	389,856.40	16,234.26	4%	111,099.31	28%	(278,757.09)
MHSub-Acute Crisis Residential #10027	397,917.00	20,394.47	5%	123,322.15	31%	(274,594.85)
MHSub-Acute Crisis Residential Uinta #10027	79,583.00	1,736.36	2%	15,000.20	19%	(64,582.80)
Regional Services - SA	2.244.052.22	40.004.05	201	504.047.00	0.70/	(4.646.704.40)
SA - Residential #30	2,241,069.28	49,021.05	2%	594,347.88	27%	(1,646,721.40)
SA- Residential Women and Children #30	703,347.15	32,720.75	5%	203,868.55	29%	(499,478.60)
SA-Transitional (SL) #30	199,290.49	12,916.11	6%	61,410.14	31%	(137,880.35)
SA- Detox #30	136,417.08	2,976.37	2%	36,171.19	27%	(100,245.89)
Quality of Life						
MH - Quality of Life	102,730.00	14,533.00	14%	23,649.00	23%	(79,081.00)
SA- Quality of Life	23,680.00	5,010.00	21%	10,020.00	42%	(13,660.00)
General Funds						
County	650,488.00	56,917.67	9%	113,835.34	17%	(536,652.66)
Client Fees	370,000.00	19,493.46	5%	,	12%	
Insurance	631,305.00	50,329.24	8%	92,404.71	15%	(538,900.29)
Medicaid	557,825.00	37,473.86	7%	64,692.56	12%	(493,132.44)
Medicare	44,325.00	1,820.42	4%	3,531.55	8%	(40,793.45)
EAP	61,375.00	1,743.33	3%	3,651.17	6%	(57,723.83)
DFS	5,000.00	-	0%	197.74	4%	(4,802.26)
DVR/DDS	2,000.00	175.00	9%	516.50	26%	(1,483.50)
Medical Service Fees	112,000.00	892.00	1%	4,455.20	4%	(107,544.80)
Food Stamps	99,520.00	8,274.70	8%	12,577.33	13%	(86,942.67)
Grants and Contracts						
General Contracts	110,500.00	8,855.00	8%	27,907.46	25%	(82,592.54)
Treatment Court	82,800.00	-	0%	-	0%	(82,800.00)
Federal Probation	4,000.00	-	0%	-	0%	(4,000.00)
County Prevention	243,229.00	6,779.33	3%	25,062.93	10%	(218,166.07)
ARPA Capital Construction	1,780,217.00	-	0%	67,501.18	4%	(1,712,715.82)
VOA BHR	270,000.00	-	0%	83.10	0%	(269,916.90)
Miscellaneous Funds						
Operations Carryover	2,900,000.00	-	0%	2,900,000.00	100%	-
Reserve	1,383,095.50	-	0%	1,383,095.50	100%	-
Interest Earned	22,000.00	2,826.54	13%	5,437.50	25%	(16,562.50)
Commissary Funds	5,700.00	436.19	8%	810.44	14%	
Miscellaneous	15,000.00	550.00	4%		28%	(10,843.34)
			· +/0	-,_JU.00	20/0	(10,043.34)
Total Revenues	\$ 16,058,720.59	\$ 572,390.18	4%	\$ 7,521,857.42	47%	\$ (8,536,863.17)

16%

#### Southwest Counseling Service

#### Expenditures FY25

Expenditures F125						
Personnel	FY25 Budget	Aug-24	% Month	YTD	%YTD	Difference
Salaries	\$ 7,918,379.34	\$ 668,156.52	8%	. , ,	16%	(6,685,193.51)
FICA	685,470.00	48,866.49	7%	89,893.60	13%	(595,576.40)
Wyoming Retirement	1,203,450.00	119,177.82	10%	222,351.32	18%	(981,098.68)
Health Insurance	2,138,440.00	194,202.00	9%	383,643.20	18%	(1,754,796.80)
Life Insurance	35,700.00	4,060.21	11%	7,940.64	22%	(27,759.36)
Worker's Compensation	49,000.00	5,091.29	10%	9,392.58	19%	(39,607.42)
Unemployment	25,000.00	4,979.96	20%	4,979.96	20%	(20,020.04)
Wellness	13,580.00	661.10	5%	1,366.49	10%	(12,213.51)
Background Check	11,010.00	1,292.95	12%	2,475.57	22%	(8,534.43)
Contracts	513,000.00	50,145.55	10%	84,230.64	16%	(428,769.36)
Contract- Transitional Grp - Uinta	389,856.40	8,505.96	2%	40,993.99	11%	(348,862.41)
Contract - SIP Uinta County	207,069.41	4,517.88	2%	21,773.66	11%	(185,295.75)
Contract - Sub-Acute Crisis Stabilization	79,583.00	1,736.36	2%	8,368.28	11%	(71,214.72)
Contract - LT Group Home - Uinta	517,643.44	11,294.04	2%	54,430.99	11%	(463,212.45)
Consultation	10,000.00	-	0%	1,273.00	13%	(8,727.00)
Recruitment	8,225.00	434.17	5%	796.95	10%	(7,428.05)
Travel/Vehicle Expenses						
Travel-Mileage Reimbursement	12,000.00	676.26	6%	1,722.64	14%	(10,277.36)
Vehicle Fuel	28,300.00	1,928.38	7%	3,655.84	13%	(24,644.16)
Vehicle Maintenance	16,000.00	2,762.50	17%	3,066.64	19%	(12,933.36)
Conference and Seminar Travel	22,600.00	1,260.46	6%	2,901.66	13%	(19,698.34)
Training	30,000.00	4,927.09	16%	7,214.02	24%	(22,785.98)
Operating	30,000.00	1,527.05	10/0	7,211102	2170	(22,703.30)
Supplies	164,748.00	8,839.76	5%	17,150.56	10%	(147,597.44)
Food	235,295.00	22,974.53	10%	39,201.03	17%	(196,093.97)
Rent	113,400.00	15,599.74	10%	28,083.74	25%	(85,316.26)
Utilities	192,454.00	19,004.87	14%	35,890.69	19%	(156,563.31)
Insurance- G&P/ Vehicles	160,590.00	19,004.87	0%	125.00	0%	(160,465.00)
Advertising	35,500.00	5,663.40	16%	12,140.64	34%	(23,359.36)
Books/Magazines/Video	4,000.00	899.70	22%		22%	(3,100.30)
Client/Insurance Refund	3,000.00	175.00	6%	175.00	6%	(2,825.00)
Computer Hardware	86,000.00	344.15	0%		0%	,, ,
•			2%		51%	(85,655.85)
Computer Software	475,505.00	9,358.87		241,269.25		(234,235.75)
Computer Maintenance	10,000.00	-	0%	-	0%	(10,000.00)
Computer Communication	57,000.00	3,053.25	5%	6,106.50	11%	(50,893.50)
Equipment	118,220.00	1,391.62	1%	10,124.58	9%	(108,095.42)
Leased Equipment	50,000.00	3,626.74	7%	7,231.63	14%	(42,768.37)
Maintenance	182,400.00	9,218.75	5%		9%	(165,918.86)
Postage	12,250.00	512.56	4%		17%	(10,193.20)
Cleaning Supplies	18,205.00	1,067.34	6%		8%	(16,762.27)
Telephone	74,000.00	42,645.50	58%	48,847.74	66%	(25,152.26)
Testing and Materials	20,000.00	3,501.50	18%	3,501.50	18%	(16,498.50)
Drug Testing	25,000.00	3,702.16	15%	5,157.13	21%	(19,842.87)
Client Medical	175,000.00	3,977.00	2%	22,480.41	13%	(152,519.59)
Client Rx	15,000.00	7,264.36	48%	14,311.61	95%	(688.39)
APRN Medical Lab Fees	20,000.00	1,394.00	7%	1,898.00	9%	(18,102.00)
Recreation	3,850.00	351.43	9%	682.59	18%	(3,167.41)
Membership Dues	30,000.00	888.00	3%	888.00	3%	(29,112.00)
Collection Agency	2,000.00	143.60	7%	169.60	8%	(1,830.40)
CARF	20,115.00	-	0%	1,095.00	5%	(19,020.00)
MH Quality of Life						
Medical	55,030.00	6,487.88	12%	8,449.50	15%	(46,580.50)
Emergency Subsistence	3,200.00	393.17	12%	539.34	17%	(2,660.66)
RX	15,000.00	2,045.81	14%	3,770.74	25%	(11,229.26)
Housing	5,100.00	-	0%	69.00	1%	(5,031.00)
Transportation	15,400.00	168.96	1%	168.96	1%	(15,231.04)
Recreation	1,000.00	-	0%	-	0%	(1,000.00)
Community Center	8,000.00	-	0%	-	0%	(8,000.00)
Regional Quality of Life	.,					(-,
Regional Quality of Life	23,680.00	3,029.13	13%	3,366.06	14%	(20,313.94)

Miscellaneous Expenses						
Finance Charge	2,000.00	-	0%	-	0%	(2,000.00)
Credit Card Fees	20,000.00	1,060.33	5%	2,075.14	10%	(17,924.86)
Other Expenses	32,255.00	2,636.82	8%	7,076.44	22%	(25,178.56)
Debt Service/Capital Maintenance						
Capital	830,000.00	-	0%	-	0%	(830,000.00)
ARPA Funding Capital Projects	3,113,312.50	79,115.14	3%	79,115.14	3%	(3,034,197.36)
Total Expenses	\$ 20,341,816.09	\$ 1,395,212.06	7%	\$ 2,808,042.54	14%	(17,533,773.55)

Check No.	Vendor	Program	Check Amt.	Description
117230	Amazon	Admin., Bridges, TC, Recovery, Century, WAP, Duran, Crisis	\$ 1,346.68	National Recovery Month decorations; office supplies; wired on-ear headphones, qty: 2; books (Catholic Bible, Webster Dictionary, & Thesaurus); telephone communication accessory, qty: 2; mesh shower caddy, qty: 8; multi-purpose push broom; Raion Power 24V High Rate Replacement UPS Battery, qty: 4; Western Digital Internal Hard Drive; first-aid supplies for houses; water fountain repair part
117231	CenturyLink Business Services - Lumen	Mental Health	2,214.38	Business IP, data, and voice service
117232	Coal Creek Law	Admin	133.00	Professional services rendered 7/25/24
117233	Kum&Go Fleet	Independence, Transitions, Recovery, Crisis, Detox, Duran, Century, Continental, Admin., WAP, TC	1,198.51	Fuel for SCS vehicles
117234	LocumTenens	Psychiatric	21,484.00	Services Rendered From 7/29- 8/22/24
117235	McKesson Medical- Surgical, Inc.	Medical	11.20	Ammonia inhalant
117236	Nicholas & Company	Century, Duran, WAP, Bridges, Transitions, Continental, Independence, TC, Mental Health	10,667.77	Food and paper supplies
117237	Verizon Wireless	Mental Health, Admin., Child & Adol., Recovery, TC, Bridges, Medical, Emergency, Independence, Duran, WAP, Continental, Transitions	855.25	Residential homes, agency phones, and notebook line access monthly charges- 7/16-8/15/24
117238	White Mountain Water & Sewer District	WAP, Duran	672.76	Water and sewer reading from 7/15-8/15/24
117239	All West Communications	Continental, Mental Health, WAP, Century, Sober Living, TC, Recovery, Transitions, Crisis, Detox, Independence	3,367.38	Business internet service 9/1- 9/30/24
117240	Century Link	TC, Recovery	111.34	Monthly telephone service 8/25- 9/24/24
117241	CenturyLink Business Services - Lumen	Mental Health	24.46	Business IP, data, and voice service
117242	Insurance Information Exchange	Century, TC, Duran, Independence, Mental Health, Bridges, Admin., Recovery	199.95	Motor vehicle reports
117243	Leaf Prior SVC By TimePayment	Bridges, Mental Health	120.00	Monthly water system
117244	Pitney Bowes Global Financial Services LLC	TC, Recovery	1,068.00	Contract #0041082669 postage meter charges 9/30-12/30/24

117245	Western Star Communications	Mental Health, TC	304.00	Business answering service and
	LLC			transaction usage for September 2024
117246	Wyo Waste	Mental Health, Duran, WAP, Century, Bridges, Medical, TC, Recovery, Child & Adol.	1,363.38	Monthly waste collection 9/1- 9/30/24
117247	Pioneer Counseling	Admin	191,064.36	July payment excluding bed days
117248	RMP- Rocky Mountain Power	Century, Child & Adol., Mental Health, Transitions, Duran, WAP, Sober Living, SIP, Continental, Crisis, Detox, Independence	4,359.87	Monthly energy and power readings 7/29-9/5/24
117249	Petty Cash	QOL, SA-QOL, Continental, Independence, TC, Bridges	504.61	Client transportation covered under QOL grant; food and recreation for Bridges clients; background for potential employees
117250	Wal-Mart	Sober Living, Century, Duran, WAP, Crisis, Detox, Independence, Transitions, Continental, 3 SOR-MAT, Admin., Bridges, TC, Recovery, QOL	10,445.64	Food, cleaning supplies, client Rx, and consumables
117251	Coal Creek Law	Admin		Professional services rendered 8/1-8/28/24
117252	First Bankcard	Independence, Continental, Admin., QOL, Medical, TC, Recovery, Mental Health, Prevention, Century, Bridges, Child & Adol., Duran, 3-SOR- MAT, Sober Living, WAP		Vehicle fuel; ART training for staff; PESI training for staff; recruitment; vehicle maintenance (battery cleaner, keyless transmitter); coalition meetings; Prevention booth volunteer at Sweetwater Events Complex; food for Unity Day; furnishings for Sober Living; client hygiene items; client medical & client Rx paid under QOL grant; payroll supplies; backgrounds for potential employees; client Rx paid under 3-SOR-MAT grant; CCBHC covered retreats; Casper Star Tribune subscription
117253	Pitney Bowes Bank Inc. Purchase Power	TC, Recovery	502.25	Meter refill- SN-0378038
117254	RS Municipal Utility	Bridges, Medical, TC, Recovery, Century, Transitions, Independence, Continental, Crisis, Detox, Admin., Mental Health, Child & Adol.	4,840.13	Monthly water and sewer readings 7/27-8/26/24
117255	Blomquist Hale Consulting	Personnel	546.26	Wellness/EAP
117256	Sweetwater County Section 125	Payroll Deduction	4,713.26	Payroll Liability
117257	Empower Trust Company, LLC	Payroll Deduction	4,020.00	Payroll Liability
117258	Goldman Sachs 529 Plan	Payroll Deduction	2,000.00	Payroll Liability

117259	NCPERS Wyoming	Payroll Deduction	208.00	Payroll Liability
117260	Wyoming Retirement			Payroll Liability
117200	System		100,200.04	
117261	Aflac	Payroll Deduction	1,015.43	Payroll Liability
117262	Sweetwater County	Personnel and Payroll	3,139.16	Payroll Liability
	Health Savings	Deductions		
	Account			
117263	Sweetwater County	Personnel and Payroll	224,614.31	Payroll Liability
	Claim Fund	Deductions		
117264	Aflac Group	Payroll Deduction		Payroll Liability
117265	Transamerica	Personnel		Group Life Insurance
117266	Circuit Court Third	Payroll Deduction	787.25	Payroll Liability
	Judicial District			
117267	U.S. Bank	TC, Recovery		Leased copy/printers
117268	Ace Hardware	TC, Mental Health, Century	115.91	Ball valve; slide rug; first aid kit;
447000			070.00	bandages; washers; couplings
117269	All Pro Storage	Admin		Monthly storage for units A-8, A- 10, C-3
117270	Altitude Analysis	Admin	255.00	Background testing for potential employees- 8/7-8/22/24
117271	Amazon	Admin., Recovery, TC, Prevention	847.08	Office supplies; supplies for Prevention; recovery medallions; Staying Sober: A Guide for Relapse Prevention, qty: 12; clinical library books on stuttering
117272	Aspen Construction	Duran, Century, Mental Health, Child & Adol., Transitions	2,800.00	Jetted plugged sewer line; mow lawns 8/24, 8/31, & 9/7/24
117273	Century Link	TC, Recovery, Mental Health, Bridges, Medical	288.82	Monthly telephone service 9/7- 10/6/24
117274	CenturyLink Business Services - Lumen	Mental Health	4,945.51	Business IP, data, and voice service
117275	Change Companies	Recovery	795.50	Outpatient group workbooks
117276	Copier & Supply	Mental Health, TC, Recovery,		Contract base rate charges for
		Admin., Bridges, Medical	,	SAVIN/MP copiers; staple refill
117277	Dominion Energy	Sober Living, SIP, Continental, Bridges, Medical, Crisis, Detox, Transitions, TC, Recovery, Independence, Admin., Mental Health, Child & Adol.	1,767.21	Monthly gas service from 8/10- 9/16/24
117278	Eagle Uniform & Supply Co.	TC, Recovery, Mental Health	1,159.23	Office rugs maintenance- 8/8- 9/12/24
117279	Electronic Network System	Admin	104.79	EDI Claims; Remittance Advice
117280	Evolve Technologies	Admin	3,109.87	Yealink IP Dect phones, qty: 14; Yealink IP Conference Phone, qty: 3
117281	Farmers Brothers	TC, Recovery	674.10	House blend coffee, qty: 6 (Fills are usually done once per month, per location)
117282	Fremont Motor Rock Springs, Inc.	Admin	81.38	Programmed two key fobs on 2005 Dodge, VIN: 56940
117283	Green River Star	Admin	80.00	Health & fitness advertisement
117284	Home Depot- Credit	TC, Century, Mental Health,		General maintenance hardware;
	Services	Sober Living	.,520110	tools; LED strip; light bulbs; extension cords; dryer
117285	Hunter Family Medical Clinic P.C.	Medical	2,591.71	Client lab fees

117286 JME Fire Protection, Inc.		Sober Living, Mental Health, Crisis, Detox, TC, Recovery, Child & Adol., WAP, Century,	1,298.04	Annual stored pressure inspections
117287	John Paras Furniture	Duran, Sober Living	1 319 75	Sofa; twin mattresses, qty: 2; twin
117207		Sober Living		box, qty: 2.
117288	Kronos	Admin		UKG Ready Time- Timekeeping software
117289	LOCKMED	Prevention	3,197.30	Small Guardian Combination Lockbox, qty: 40; Medium Guardian Combination Lockbox, qty: 42
117290	LocumTenens	Psychiatric	18,803.50	Services Rendered From 8/19- 9/5/24
117291	Memorial Hospital	Emergency Services	350.00	Reappointment fees for Todd Bader, Michal Zanetti-Love, & Jessica Nielson; Initial appointment for Laura Mercer- Wetzel & Amanda Wilson
117292	Motion Picture Licensing Corporation	TC, Recovery, Bridges	953.07	MPLC Blanket License covering the term: 11/1/2024-10/31/2025
117293	Netsmart Technologies, Inc.	Admin	9,528.60	myLearningPointe- LMS Premier 50-299 Users 10/1/24-9/30/25
117294	Nicholas & Company	Century, Duran, WAP, Bridges	7,490.99	Food and paper supplies
117295	Orion Healthcare Technology	Recovery	935.00	Adult ASI & Progress Notes- Service Dates: 11/1/24-10/31/25
117296	Pain Care Centers	3-SOR-MAT	5,782.00	MAT services for clients. Paid for by 3-SOR-MAT grant
117297	Pioneer Counseling	Admin	65,624.69	Bed days; September payment
117298	Pitney Bowes Global Financial Services LLC	Mental Health		Contract #0041080490 for billing period 10/10/24-1/9/25
117299	Plan One/Architects	Ankeny, Duran, WAP, Admin	13,636.60	Bidding & Negotiation Phase- 7/24-8/9/24
117300	Redwood Toxicology Laboratory	Recovery, Century, Duran, Detox	884.05	Outpatient drug testing 8/2- 8/31/24
117301	RMP- Rocky Mountain Power	TC, Recovery, Bridges, Medical	4,235.88	Monthly energy and power readings ending 9/9/24
117302	Rocky Mountain Air Solutions	Medical	116.20	Industrial liquid nitrogen delivery
117303	Royal Flush	Prevention	1,222.00	Adult overconsumption bathroom ads for August; Suicide prevention bathroom ads for September
117304	SCS	QOL	5,128.00	Client medical fees covered by QOL Grant
117305	SCS	3-SOR-MAT	292.00	Client medical fees covered by 3- SOR-MAT Grant
117306	SCS	QOL	112.00	Housing covered under QOL grant
117307	Shadow Ridge	Sober Living	5,800.00	October rent for recovery clients
117308	Silver Ridge Village	SIP	6,835.98	October rent and August utilities for SIP apartments
117309	Smiths	3 SOR-MAT, QOL, WAP, Century, Duran	9,610.47	Client RX; commissary items; med room supplies

117310	Stericycle	Medical, TC, Recovery	562.28	Steri-safe budget subscription
	,			from 9/1-11/30/24
117311	Summit Accounting Services, P.C.	Admin	795.00	Review and reconcile accounts with accountant
117312	Sweetwater County District Board of Health	Admin	156.00	Hep B 2 dose vaccine for new employee
117313	SweetwaterNOW	Admin	2,050.00	Tobacco- My Life My Quit August Banner Ads
117314	Terminix	Transitions, Continental, Independence, Crisis, Detox, Duran, WAP, Century		Pesticide control; wasp nest removal
117315	Top-Tech Auto Service	TC, Century	238.90	Smoke evap system test on 2017 Dodge Journey, VIN: 591595; Oil change 2019 Chevy Express, VIN: 367222
117316	University of Utah Medical Center - Psych	Psychiatric	8,462.50	Services rendered from 8/5- 8/30/24
117317	Wakefield & Associates LLC	Admin	95.00	Collections payments
117318	Wal-Mart	Century, Duran, WAP, Crisis, Detox, Independence, Transitions, Continental, 3 SOR- MAT, Admin., Bridges, TC, Recovery, QOL	4,244.87	Food; cleaning supplies; vacuum for WAP; client Rx, and consumables
117319	Whisler Chevrolet	Century	340.52	N-Panel replacement on 2010 Chevy Van, VIN: 157308
117320	WyoData Security Inc.	Mental Health, TC, Recovery	345.00	Confidential paper collection and disposal
117321	Wyolectric, Inc.	TC, Recovery	217.50	Removed old battery system and installed a new Ballast and bulbs into light fixture
117322	Wyoming Department of Health	Medical	1,055.00	Client Lab fees rendered 8/1- 8/23/24
117323	WyoRadio	Admin	4,478.00	Adult overconsumption ads for August; Suicide prevention ads for September; August BHD Media ads
117324	YESCO Outdoor Media	BHD-Media	750.00	Advertisements posted 9/23- 10/20/24 covered under BHD- Media Grant
117325	Swan-Smith, Patricia		4,229.20	Contract services rendered 8/15- 9/16/24; Retreats paid for by CCBHC grant 8/30-9/1 & 9/14- 9/15/24
117326	Petty Cash	QOL, Continental, Transitions, Independence, WAP	ons, 409.79 Client transportation covered under QOL grant; food and recreation for Bridges clients birth certificate & school feet clients child	
117327	Bramwell, Kimberly	Mental Health		Employee reimbursements
117328	Brown, Rhonda	TC		Employee reimbursements
117329	Christensen, Vanessa	Medical		Employee reimbursements
117330	Conner, Jody	Century		Employee reimbursements
117331	Coon, Olivia	Admin		Employee reimbursements
117332	Eardley, Mindy	Recovery		Employee reimbursements
117333	Gilmore, Stephani	Recovery	88.44	Employee reimbursements

117334	Gomez, Janell	Mental Health	60.97	Employee reimbursements
117335	Grenier, Dana	Medical		Employee reimbursements
117336	Haney, Shaelyn	Admin		Employee reimbursements
117337	Keith, Kaleb	Admin		Employee reimbursements
117338	Lee, Corina	Admin		Employee reimbursements
117339	Legault, Christy	TC		Employee reimbursements
117340	Love, Michal	Child & Adol.		Employee reimbursements
117341	Lux, Jason	Admin		Employee reimbursements
117342	Moser, Amy	Admin		Employee reimbursements
117343	Nielson, Jessica	Child & Adol.		Employee reimbursements
117344	Norton, Krystle	Recovery		Employee reimbursements
117345	Schmid-Pizzato, Laura	Recovery		Employee reimbursements
117346	Stringham, Leslie	Mental Health	455.84	Employee reimbursements
117347		Recovery		Employee reimbursements
117348	Vavra, Mona	Mental Health	34.17	Employee reimbursements
117349	Wray-Marchetti, Melissa	Admin.		Employee reimbursements
117350	AdTel International, Inc.	TC, Mental Health		Software & Support License, qty: 1; Software & Support Additional Loc., qty: 2; Full Time Monthly Provider, qty: 13; Part Time Monthly Provider, qty: 5; e-forms FT, qty: 13; e-forms part time, qty: 5; Extreme Part Time (Amanda Wilson & Michael Bauer); Surveys; 10-DLC
117351	McKesson Medical- Surgical, Inc.	Medical	544.18	Aplisol; mono test kits; gauze sponges; blood collection set
117352	Wyolectric, Inc.	Mental Health	480.42	Added receptacle to College Hill office
EFTPS	Aspire	Payroll Deduction		Payroll Liability
EFTPS	RSNB	Personnel and Payroll Deductions		Payroll Taxes
300001- 300003 &400026- 400033 & Electronic	Salaries	Payroll	450,577.69	Salaries

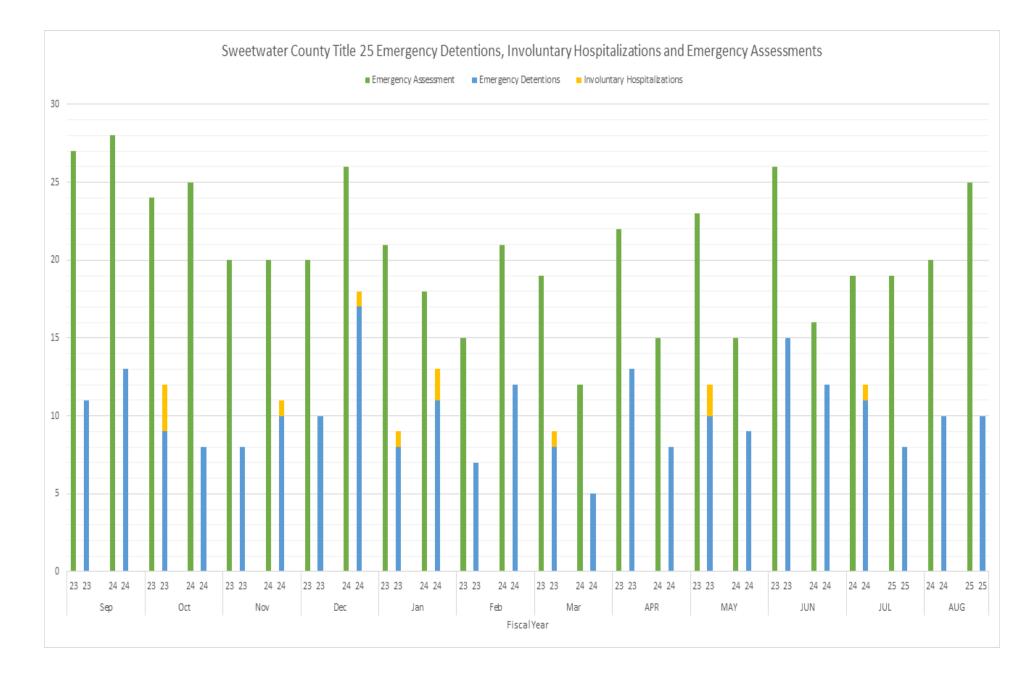
\$1,437,467.93

# Previous Business

## FY25 Residential Bed Utilization and Drawdown

		Jul-24		Aug-24		FY25 YTD		
Total SUD		70 beds				\$ 1,968,074.40	SUD Ra	tes
Bed Days Provided:		1785		1924		3709	SUD Residential	\$ 125.00
Provided:	\$	165,800.84	\$	187,356.80		252 453 64	Social Detox	\$ 141.10
YTD Provided:	\$	165,800.84	\$	353,157.64	\$	353,157.64	Sober Living	\$ 30.82
\$ Needed per Month:	\$	164,006.20	\$	164,006.20		1 000 070 55		
Deficit/Overage:	\$	1,794.64	\$	23,350.60	\$	1,802,273.56		
Monthly Utilization:		101.09%		<b>114.24%</b>		47.049/		
YTD Utilization:		101.09%		107.67%		17.94%		
Total MH		32 beds			\$	735,939.50	MH Ra	tos
				740	<u>ې</u>			1
Bed Days Provided:	ć	731	\$	749		1480	Transitional	\$ 83.10 \$ 73.48
Provided:	\$ \$	42,740.40	\$ \$	43,076.10	\$	85,816.50	Long Term	
YTD Provided:	\$	42,740.40	\$ \$	85,816.50			SIP	\$ 22.06
\$ Needed per Month:		61,328.29	· ·	61,328.29	\$	693,199.10		
Deficit/Overage:	\$	(18,587.89)	\$	(18,252.19)				
Monthly Utilization:		69.69%		70.24% 69.96%	11.66%			
YTD Utilization:		69.69%		69.96%				
Sub-Acute		5 beds				238,750.20	Sub-Acute	Rate
Bed Days Provided:		59		74		133	Sub-Acute	\$ 240.75
Provided:	\$	14,204.25	\$	17,815.50	ć	22.010.75		
YTD Provided:	\$	14,204.25	\$	32,019.75	\$	32,019.75		
\$ Needed per Month:	\$	19,895.85	\$	19,895.85	\$	224,545.95		
Deficit/Overage:	\$	(5,691.60)	\$	(2,080.35)	Ŷ	224,545.95		
Monthly Utilization:		71.39%		89.54%		13.41%		
YTD Utilization:		71.39%		80.47%		15.41%		
Overall		107 beds			\$	2,942,764.10		
Bed Days Provided:		2575		2747		5322		
Provided:	\$	222,745.49	\$	248,248.40	ć	470.002.00		
YTD Provided:	\$	222,745.49	\$	470,993.89	\$	470,993.89		
\$ Needed per Month:	\$	245,230.34	\$	245,230.34	\$	2 471 770 21		
Deficit/Overage:	\$	(22,484.85)	\$	102,213.82	Ş	2,471,770.21		
YTD Deficit/Overage:	\$	(22,484.85)	\$	(19,466.79)	\$	(19,466.79)		
Monthly Utilization:		90.83%		101.23%				
Monthly Othization:	_				16.01%			







#### September 15, 2024

SCS provides mental health and substance disorder services in Sweetwater County. The following positions offer direct services: Full-Licensed Clinicians, Provisional Clinicians, Certified Social Workers, Certified Addictions Practitioners, Case Managers, Peer Specialists, and Treatment Support Staff. SCS has a medical office which employs a Nurse Practitioner, Medical Assistant, and Medical Services Clerk. Prevention Specialists provide prevention services throughout the community. Ancillary services are also provided at SCS which include: Clerical, HR, Accounts Receivable/Payable, Purchasing, Data Clerk, Maintenance/Groundskeeper, Information Technology/PC Network. Administration oversight is provided with Managers and Supervisors in all service areas, along with the CEO. Currently, SCS has 130.5 FTE's.

#### **Current Openings at SCS:**

Licensed Clinician	1
Treatment Support Staff	3
Case Manager	1
HR Clerk	.5
APRN – Psychiatric	1
Custodian	1

Position	Range #	FTE's Filled	Vacant FTE's
Chief Executive Officer	85	1	0
Program Operations Coordinator	46	2	0
Treatment Support - Recovery	32	29	3
Residential Coordinator	41	1	0
Treatment Support - Psychosocial	32	21	0
Case Manager Supervisor	46	1	0
Case Manager	39	12.5	1
Peer Specialist	34	5	0
Office Manager	52	1	0
Clerical	32	9.5	0
Custodian	29	2	1
Human Resources Manager	55	1	0
Human Resources Payroll Clerk	40	1	0
Human Resources Clerk	36	1.5	0.5
Chief Financial Officer	69	1	0
A/R Supervisor	45	1	0
A/P Clerk	36	1	0
A/R Clerk	36	2	0
Data Clerk	36	1	0
MyAvatar Specialist	50	1	0
Purchasing Clerk	36	1	0
Medical Servicecs Clerk	36	1	0
APRN - General	81	1	0
APRN - Psychiatric	81	0	1
Medical Assistant	37	1	0
Maintenance Supervisor	64	0.5	0
Maintenance Level 2	36	1	0
Lawn Care - Groundskeeper	29	0.5	0
Network Administrator	67	1	0
PC/Network Support	50	1	0
Manager of Psychosocial Services	72	1	0
Manager of Mental Health Services	72	1	0
Manager of Children and Family Services	70	1	0
Recovery Services Manager	76	1	0
Outpatient Recovery Supervisor	66	1	0
Clinician - Fully Licensed	64	7	1
Provisional Clinician	56	9	0
Certified Addictions Practioner	49	1	0
Certified Social Worker	49	3	0
Prevention Specialist	39	2	0

## September SCS Staffing Report

Range #	Title	Pay Period	Pay Period				
16		Hourly	\$ 10.55	\$ 17.41			
		Monthly	1,828.67	3,017.73			
		Annual	\$ 21,944.00	\$ 36,212.80			
17		Hourly	\$ 10.81	\$ 17.85			
		Monthly	1,874.38	3,093.18			
		Annual	\$ 22,492.60	\$ 37,118.12			
18		Hourly	\$ 11.08	\$ 18.29			
		Monthly	1,921.24	3,170.51			
		Annual	\$ 23,054.92	\$ 38,046.07			
19		Hourly	\$ 11.36	\$ 18.75			
15		Monthly	1,969.27	3,249.77			
		Annual	\$ 23,631.29	\$ 38,997.22			
20		Hourly	\$ 11.65	\$ 30,557.22			
20		Monthly	2,018.51	3,331.01			
		Annual	\$ 24,222.07				
21		Hourly	\$ 24,222.07	\$ 39,972.16			
21		-		\$ 19.70			
		Monthly	2,068.97	3,414.29			
22		Annual	\$ 24,827.62	\$ 40,971.46			
22		Hourly	\$ 12.23	\$ 20.19			
		Monthly	2,120.69	3,499.65			
22		Annual	\$ 25,448.31	\$ 41,995.75			
23		Hourly	\$ 12.54	\$ 20.70			
		Monthly	2,173.71	3,587.14			
		Annual	\$ 26,084.52	\$ 43,045.64			
24	Bridges Cook	Hourly	\$ 12.85	\$ 21.21			
		Monthly	2,228.05	3,676.82			
		Annual	\$ 26,736.63	\$ 44,121.78			
25		Hourly	\$ 13.18	\$ 21.74			
		Monthly	2,283.75	3,768.74			
		Annual	\$ 27,405.05	\$ 45,224.82			
26		Hourly	\$ 13.50	\$ 22.29			
		Monthly	2,340.85	3,862.95			
		Annual	\$ 28,090.18	\$ 46,355.45			
27		Hourly	\$ 13.84	\$ 22.84			
		Monthly	2,399.37	3,959.53			
		Annual	\$ 28,792.43	\$ 47,514.33			
28		Hourly	\$ 14.19	\$ 23.41			
		Monthly	2,459.35	4,058.52			
		Annual	\$ 29,512.24	\$ 48,702.19			
29	Janitor	Hourly	\$ 14.54	\$ 24.00			
	Lawn Care - Seasonal	Monthly	2,520.84	4,159.98			
	Maintenance 1	Annual	\$ 30,250.05	\$ 49,919.74			
30		Hourly	\$ 14.91	\$ 24.60			
		Monthly	2,583.86	4,263.98			
		Annual	\$ 31,006.30	\$ 51,167.74			
31		Hourly	\$ 15.28	\$ 25.21			
		Monthly	2,648.45	4,370.58			
		Annual	\$ 31,781.45	\$ 52,446.93			

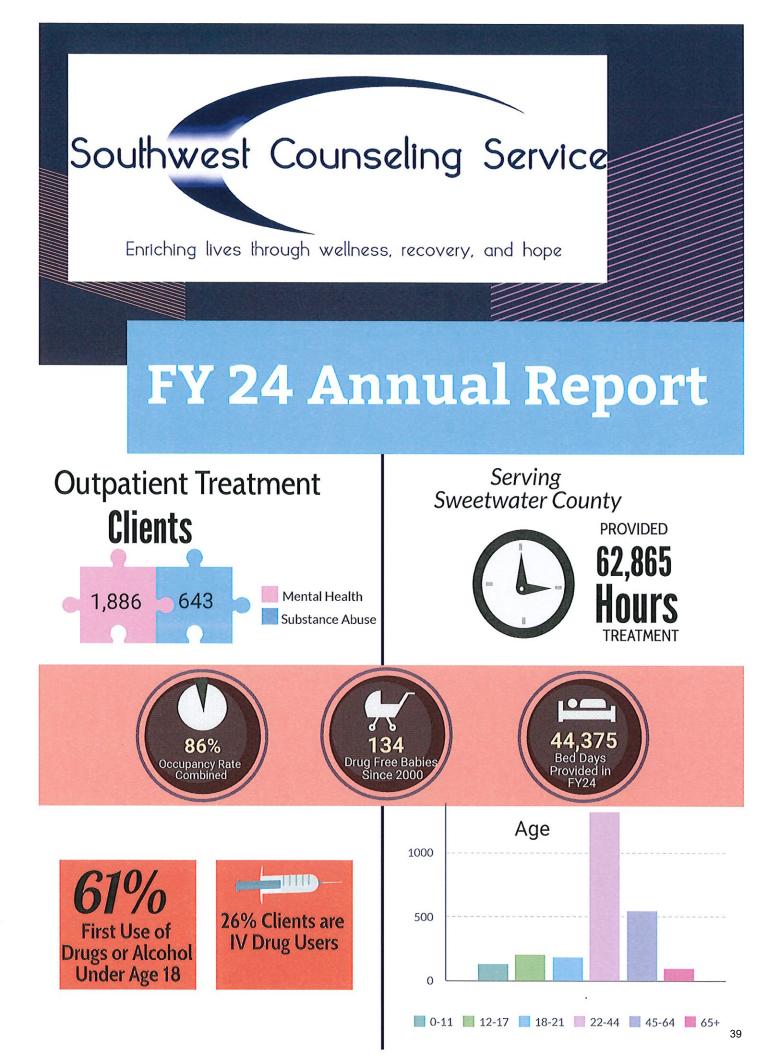
32 Sca	nning Clerk	Hourly	\$ 15.66	\$ 25.85
	ce Support Staff	Monthly	2,714.67	4,479.84
	idential Treatment Support Staff	Annual	\$ 32,575.99	\$ 53,758.11
	nsportation		<i>+ • = ,• • • • • • •</i>	<i>+ 00)/001</i>
	Clerk			
	care			
33		Hourly	\$ 16.05	\$ 26.49
		Monthly	2,782.53	4,591.84
		Annual	\$ 33,390.39	\$ 55,102.06
34 Pee	r Specialist	Hourly	\$ 16.45	\$ 27.15
		Monthly	2,852.10	4,706.63
		Annual	\$ 34,225.15	\$ 56,479.61
35 Nor	n-Degreed Case Manager	Hourly	\$ 16.87	\$ 27.83
CAF	PA	Monthly	2,923.40	4,824.30
Ben	efit Enrollment Specialist	Annual	\$ 35,080.78	\$ 57,891.60
36 Mai	intenance 2	Hourly	\$ 17.29	\$ 28.53
Pur	chasing Clerk	Monthly	2,996.48	4,944.91
Hur	nan Resource Administrative Clerk	Annual	\$ 35,957.80	\$ 59 <i>,</i> 338.89
Me	dical Services Clerk			
Acc	ounts Receivable/Insurance Billing Clerk			
Dat	a Clerk			
Adr	ninistrative Assistant			
37 Me	dical Assistant	Hourly	\$ 17.72	\$ 29.24
		Monthly	3,071.40	5,068.53
		Annual	\$ 36,856.74	\$ 60,822.36
38		Hourly	\$ 18.16	\$ 29.97
		Monthly	3,148.18	5,195.24
		Annual	\$ 37,778.16	\$ 62,342.92
39 Cas	e Manager	Hourly	\$ 18.62	\$ 30.72
	vention Specialist	Monthly	3,226.88	5,325.12
	ployment Specialist	Annual	\$ 38,722.62	\$ 63,901.49
40 Acc	ounts Payable Clerk	Hourly	\$ 19.08	\$ 31.49
Рау	roll Clerk	Monthly	3,307.56	5,458.25
		Annual	\$ 39,690.68	\$ 65,499.03
41 Res	idential Coordinator	Hourly	\$ 19.56	\$ 32.28
		Monthly	3,390.25	5,594.71
		Annual	\$ 40,682.95	\$ 67,136.51
42		Hourly	\$ 20.05	\$ 33.08
		Monthly	3,475.00	5,734.58
		Annual	\$ 41,700.02	\$ 68,814.92
43 Lice	nsed Practical Nurse	Hourly	\$ 20.55	\$ 33.91
		Monthly	3,561.88	5,877.94
		Annual	\$ 42,742.52	\$ 70,535.29
44		Hourly	\$ 21.06	\$ 34.76
		Monthly	3,650.92	6,024.89
		Annual	\$ 43,811.09	\$ 72,298.67
45 Acc	ounts Receivable Supervisor	Hourly	\$ 21.59	\$ 35.63
		Monthly	3,742.20	6,175.51
		Annual	\$ 44,906.36	\$ 74,106.14

46	Case Manager Supervisor	Hourly	\$ 22.13	\$ 36.52
	Program Operations Supervisor	Monthly	3,835.75	6,329.90
		Annual	\$ 46,029.02	\$ 75,958.80
47	Public Relations Specialist	Hourly	\$ 22.68	\$ 37.43
		Monthly	3,931.65	6,488.15
		Annual	\$ 47,179.75	\$ 77,857.77
48		Hourly	\$ 23.25	\$ 38.37
		Monthly	4,029.94	6,650.35
		Annual	\$ 48,359.24	\$ 79,804.21
49	Certified Social Worker	Hourly	\$ 23.83	\$ 39.33
	Certified Addictions Worker	Monthly	4,130.69	6,816.61
		Annual	\$ 49,568.22	\$ 81,799.31
50	PC Support Specialist	Hourly	\$ 24.43	\$ 40.31
	myAvatar Specialist	Monthly	4,233.95	6,987.02
	Data Analyst 1	Annual	\$ 50,807.43	\$ 83,844.30
51		Hourly	\$ 25.04	\$ 41.32
		Monthly	4,339.80	7,161.70
		Annual	\$ 52,077.61	\$ 85,940.40
52	Office Manager	Hourly	\$ 25.66	\$ 42.35
		Monthly	4,448.30	7,340.74
		Annual	\$ 53,379.55	\$ 88,088.91
53		Hourly	\$ 26.30	\$ 43.41
		Monthly	4,559.50	7,524.26
		Annual	\$ 54,714.04	\$ 90,291.14
54		Hourly	\$ 26.96	\$ 44.49
		Monthly	4,673.49	7,712.37
		Annual	\$ 56,081.89	\$ 92,548.42
55	Human Resource Manager	Hourly	\$ 27.64	\$ 45.61
		Monthly	4,790.33	7,905.18
		Annual	\$ 57,483.94	\$ 94,862.13
56	Provisional Clinician	Hourly	\$ 28.33	\$ 46.75
		Monthly	4,910.09	8,102.81
		Annual	\$ 58,921.04	\$ 97,233.68
57		Hourly	\$ 29.04	\$ 47.92
27		Monthly	5,032.84	8,305.38
		Annual	\$ 60,394.07	\$ 99,664.52
58		Hourly	\$ 29.76	\$ 49.11
20		Monthly	5,158.66	8,513.01
		Annual	\$ 61,903.92	\$ 102,156.13
59		Hourly	\$ 30.51	\$ 50.34
		Monthly	5,287.63	8,725.84
		Annual	\$ 63,451.52	\$ 104,710.04
60	Psychological Resident	Hourly	\$ 31.27	\$ 51.60
20	,	Monthly	5,419.82	8,943.98
		Annual	\$ 65,037.80	\$ 107,327.79
61		Hourly	\$ 32.05	\$ 52.89
01		Monthly	5,555.31	9,167.58
		Annual	\$ 66,663.75	\$ 110,010.98
62		Hourly	\$ 32.85	\$ 54.21
02		Monthly	5,694.20	9,396.77
			J.U34.20	11.050.77

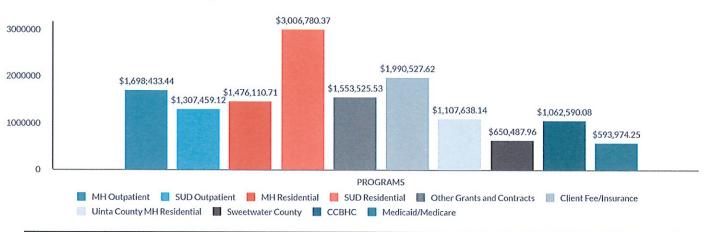
63		Hourly	\$ 33.67	\$ 55.57
03		-		9,631.69
		Monthly	5,836.55	-
C A	Facility Maintenance Supervisor	Annual Hourly	\$ 70,038.60 \$ 34.51	\$ 115,580.29 \$ 56.96
04		•		
	Data Architect	Monthly	5,982.46	9,872.48
C	Licensed Clinician	Annual	\$ 71,789.57	\$ 118,469.80
65	Registered Nurse	Hourly	\$ 35.38	\$ 58.38
		Monthly	6,132.03	10,119.30
	Clinical Companying a	Annual	\$ 73,584.31	\$ 121,431.54
66	Clinical Supervisor	Hourly	\$ 36.26	\$ 59.84
		Monthly	6,285.33	10,372.28
<b>C</b> 7		Annual	\$ 75,423.91	\$ 124,467.33
67	Network Administrator	Hourly	\$ 37.17	\$ 61.34
	Clinical Quality Review	Monthly	6,442.46	10,631.58
	Licensed Psychologist	Annual	\$ 77,309.51	\$ 127,579.01
68		Hourly	\$ 38.10	\$ 62.87
		Monthly	6,603.52	10,897.37
		Annual	\$ 79,242.25	\$ 130,768.49
69	Chief Financial Officer	Hourly	\$ 39.05	\$ 64.44
		Monthly	6,768.61	11,169.81
		Annual	\$ 81,223.31	\$ 134,037.70
70	Manager of Children and Family Services	Hourly	\$ 40.03	\$ 66.05
		Monthly	6,937.82	11,449.05
		Annual	\$ 83,253.89	\$ 137,388.64
71		Hourly	\$ 41.03	\$ 67.70
		Monthly	7,111.27	11,735.28
		Annual	\$ 85,335.24	\$ 140,823.36
72	Manager of Mental Health Services	Hourly	\$ 42.05	\$ 69.40
	Manager of Psychosocial Services	Monthly	7,289.05	12,028.66
		Annual	\$ 87,468.62	\$ 144,343.94
73		Hourly	\$ 43.10	\$ 71.13
		Monthly	7,471.28	12,329.38
		Annual	\$ 89,655.33	\$ 147,952.54
74		Hourly	\$ 44.18	\$ 72.91
		Monthly	7,658.06	12,637.61
		Annual	\$ 91,896.72	\$ 151,651.36
75		Hourly	\$ 45.29	\$ 74.73
		Monthly	7,849.51	12,953.55
		Annual	\$ 94,194.13	\$ 155,442.64
76	Manager of Recovery Services	Hourly	\$ 46.42	\$ 76.60
		Monthly	8,045.75	13,277.39
		Annual	\$ 96,548.99	\$ 159,328.71
77		Hourly	\$ 47.58	\$ 78.52
		Monthly	8,246.89	13,609.33
		Annual	\$ 98,962.71	\$ 163,311.92
78		Hourly	\$ 48.77	\$ 80.48
-		Monthly	8,453.06	13,949.56
		Annual	\$ 101,436.78	\$ 167,394.72
79		Hourly	\$ 49.99	\$ 82.49
		Monthly	8,664.39	14,298.30
		Annual	\$ 103,972.70	\$ 171,579.59

80		Hourly	\$ 51.24	\$ 84.55
		Monthly	8,881.00	14,655.76
		Annual	\$ 106,572.02	\$ 175,869.08
81	Advanced Nurse Practitioner	Hourly	\$ 52.52	\$ 86.67
	Physician Assistant	Monthly	9,103.47	15,021.72
		Annual	\$ 109,241.64	\$ 180,260.60
82		Hourly	\$ 53.83	\$ 88.83
		Monthly	9,330.60	15,397.70
		Annual	\$ 111,967.22	\$ 184,772.45
83		Hourly	\$ 55.18	\$ 91.05
		Monthly	9,563.87	15,782.65
		Annual	\$ 114,766.40	\$ 189,391.76
84		Hourly	\$ 56.56	\$ 93.33
		Monthly	9,802.96	16,177.21
		Annual	\$ 117,635.56	\$ 194,126.56
85	Chief Executive Officer	Hourly	\$ 57.97	\$ 95.66
		Monthly	10,048.04	16,581.64
		Annual	\$ 120,576.45	\$ 198,979.72

# Presentation

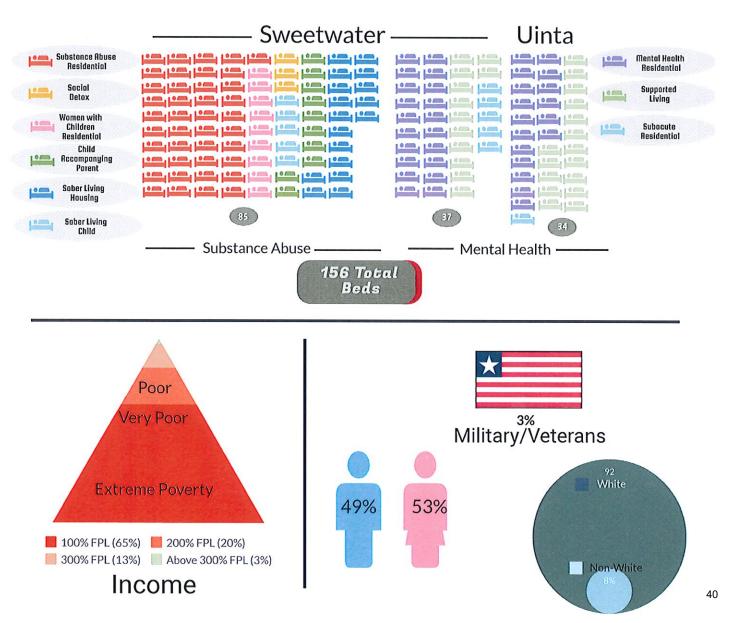


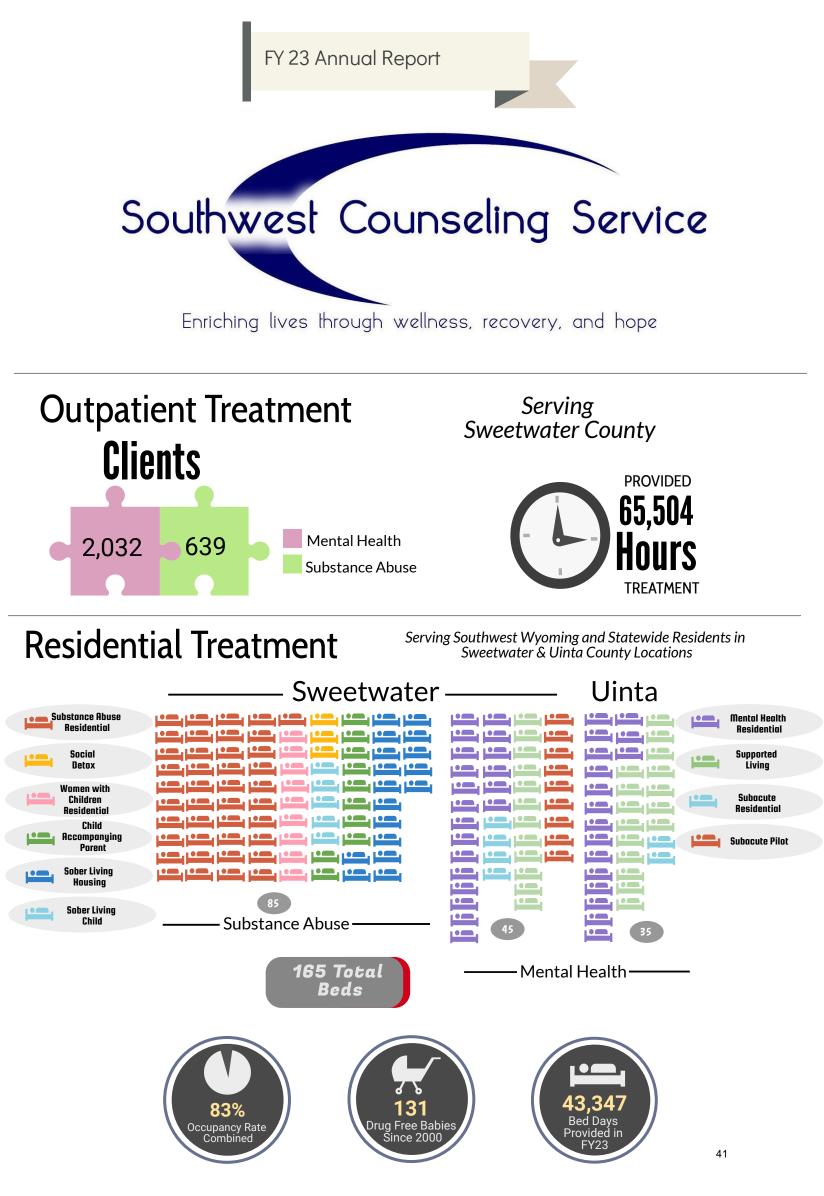
# Funding

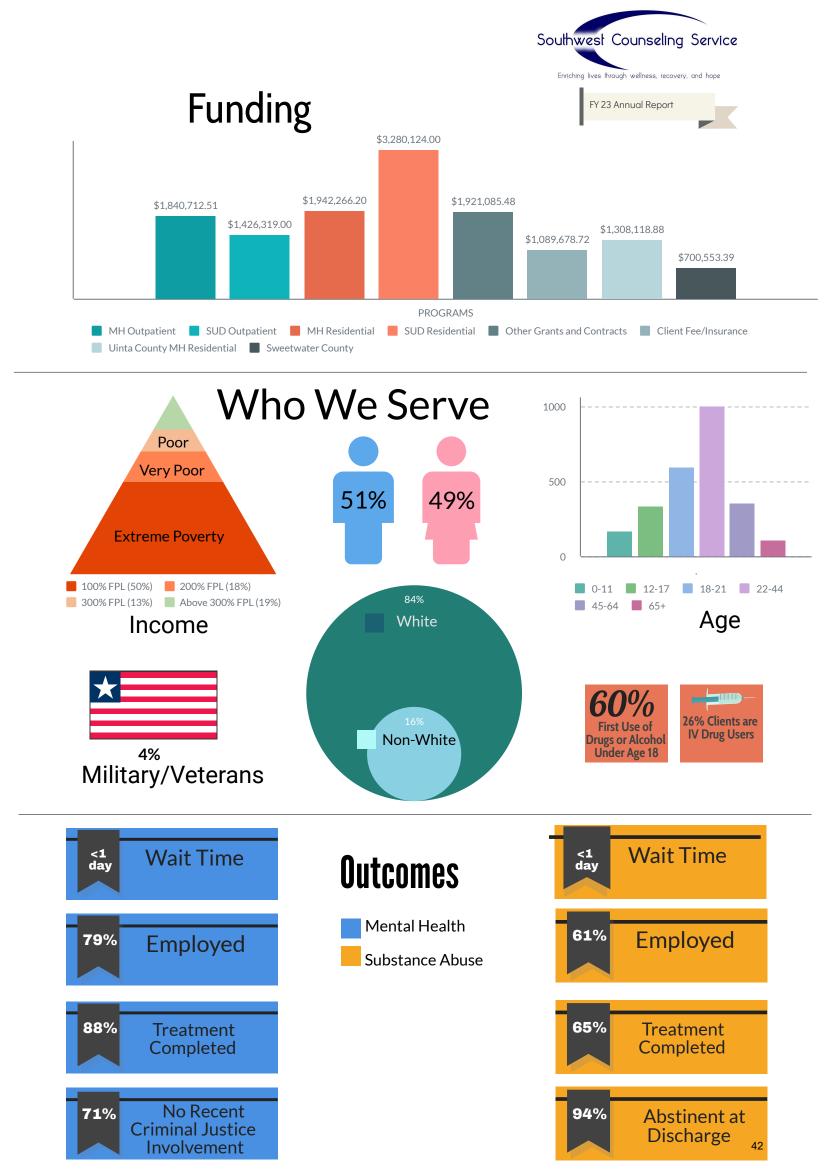


# **Residential Treatment**

Serving Southwest Wyoming and Statewide Residents in Sweetwater & Uinta County Locations







# Southwest Counseling Service

# Year End Financial Summary

Fiscal Year 2024

Enriching lives through wellness, recovery, and hope.

## YEAR IN REVIEW

### FY24

Southwest Counseling Service provides a continuum of behavioral healthcare services with financial stewardship of the funding sources to include State, Federal, County, third party insurance, and self-pay funding.

FY24 marks the 62<sup>nd</sup> anniversary. In the previous year SCS met a majority of the required outcome measures for the clients served in our community.

SCS continues to strive toward being the provider of choice and excellence in providing comprehensive, integrated mental health and substance use disorder treatments.

In FY24, SCS did experience challenges with a decrease in cash flows due to changes in payment timelines from the Behavioral Health Division, SCS' largest funding source.



*The 988 Suicide & Crisis Lifeline is free, confidential and always available for those that may be experiencing emotional distress.* 

### **FINANCIAL SUMMARY**

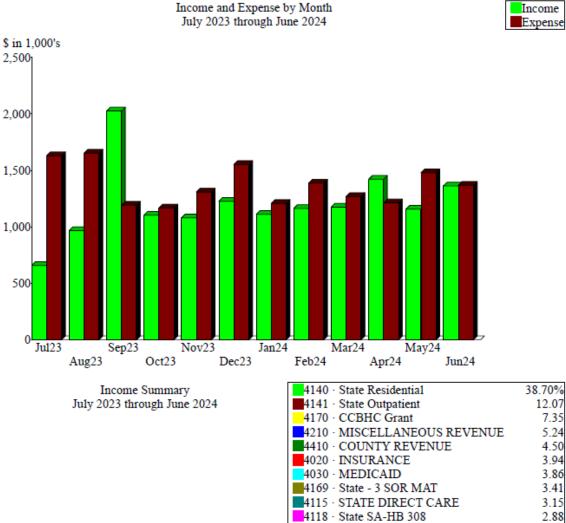
The FY24 Budget for SCS totaled \$20,341,816, an increase of \$2,968,255 from the previous fiscal year. The increase in the budget from FY23 to FY24 stems from additional one time funding for nine additional residential beds, the approved funding for the ARPA capital construction projects and the CCBHC grant.

Total actual revenues for FY24 are \$14,447,527 with total expenditures at \$16,414,186.

- The average daily cost of operations ended the year at \$44,970 per day
- The average days cash on hand equate to 48 days
- Revenues increased by 2.3% from FY23
- Expenditures increased by 10.6% from FY23

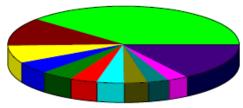




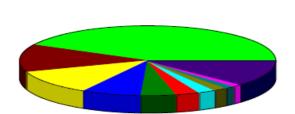


Other

Total



Expense Summary July 2023 through June 2024

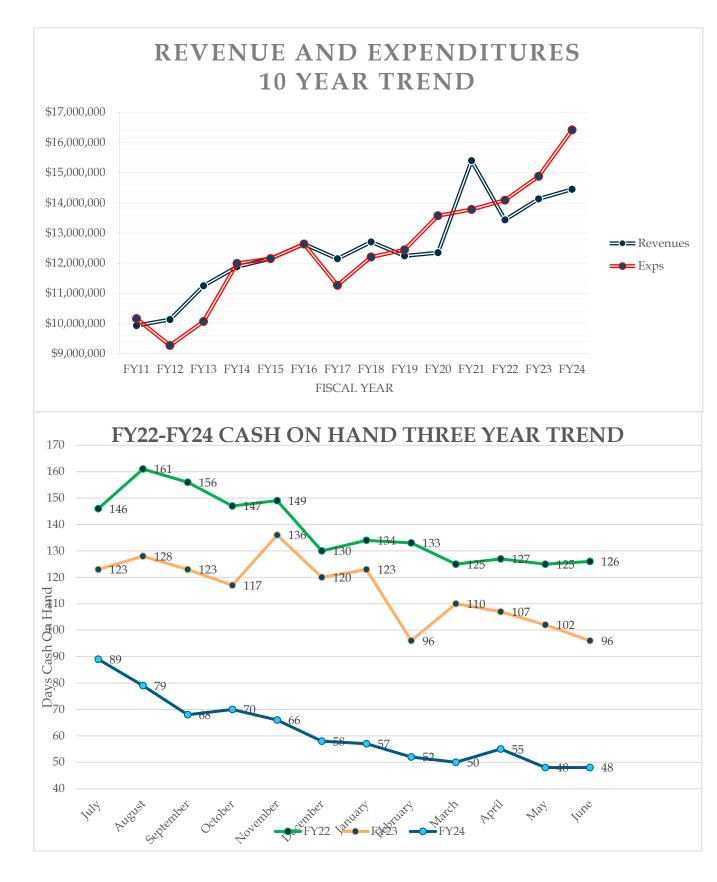


5110 · SALARIES	42.55%
5220 · HEALTH INSURANCE	12.99
5320 · CONTRACT	11.35
5210 · WYOMING RETIREMENT	7.58
6000 · OTHER EXPENSES	4.60
5200 · FICA	3.08
5505 · COMPUTER SOFTWARE	2.30
5525 · FOOD	1.88
5612 · UTILITIES	1.28
5470 · Insurance-Professional & Gene	era 1.12
Other	11.27
Total \$	16,414,720.75

14.89

\$14,447,527.22

### **HISTORICAL TRENDS**



FY24

### **UPCOMING**

FY25 marks the beginning of Behavioral Health Redesign. The way SCS has historically received funding from the Wyoming Department of Health, Behavioral Health Division will change the way revenues are received.

Monitoring the financial health of the agency is a top priority and as the new fiscal year progresses, fiscal transparency is a key element as funding changes. SCS makes every effort to enroll providers with third party payers, Medicaid, and Medicare to maximize reimbursements. Expenditures are closely monitored

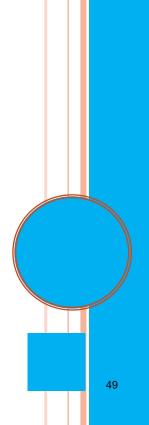




# 2024 YEAR END RECRUITMENT AND RETENTION SUMMARY

"Southwest Counseling Service strives to provide a working environment where employees are engaged and committed to their work." Southwest Counseling Service Board of Directors Core Value.

Amy Moser, Human Resource Manager 9/20/2024



# 2024 YEAR END RECRUITMENT AND RETENTION SUMMARY

The Management Team of Southwest Counseling Service is committed to the recruitment, retention, and training of professional employees. The success of Southwest Counseling Service is attributed to the quality of individuals we employ.

### RECRUITMENT

SCS is dedicated to finding highly skilled and qualified professionals to fill current openings. The implementation of a new policy of offering paid internships for Master level interns (15 hours a week) that are employed with SCS has been a way to gain more full-time clinicians when they are finished with their internships. SCS was able to move one (1) provisional clinician to fully licensed clinician, and hire one (1) fully licensed clinician from an external source.

### Clinicians

Number of Clinicians as of 6/30/24: 20 Number of clinicians that left SCS during FY24: 0 Current Openings: 2 SCS has 1 Master Level Interns as of 7/1/24

### **Treatment Support Staff**

Number of Treatment Support Staff as of 6/30/24: 53 Number of Treatment Staff that left SCS during FY24: 24 Current number of openings: 3

### Advertising

SCS is committed to identifying the most effective job advertising platforms to attract talent. Platforms used to recruit talent in FY24:

- Indeed
- LinkedIn
- Wyo4News

### **TURNOVER**

SCS employed an average of 139 employees in 2024. SCS had 41 individuals leave the agency for a turnover rate of 29%.

Turnover by PositionTreatment Support (24)44%Case Manager (5)10%

Admin/Support (10)	28%
Manager (1)	14%
Janitor (1)	33%

### **Type of Termination**

Voluntary: 34 Involuntary: 8

### **Reason for Termination**

 No reason given (4):
 10%

 Retired (4):
 10%

 More Money (11):
 26%

 Personal reasons (9):
 21%

 Moved (2):
 5%

 Other employment (4):
 10%

 Involuntary (8):
 19%

### **Historical Turnover Rates**

	FY2010	24%
•	FY2011	24%
•	FY2012	35%
•	FY2013	24%

- FY2014 37%
- FY2015 23%
- FY2016 29%
- FY2017 31%
- FY2018 31%
- FY2019 28%
- FY2020 28%
- F12020 207
- FY2021 26%
- FY2023 21%
- FY2024 29%

### EXIT FEEDBACK

Upon exit from Southwest Counseling Service, employees who leave voluntarily are given the opportunity to provide feedback on their employment experience. The Exit Survey covers areas such as salary, benefits, satisfaction with supervisor/manager, orientation, training, physical environment, etc. All exit survey information in FY24 was gathered using Survey Monkey. Approximately 50% of employees leaving employment on a voluntarily basis completed the SCS Exit Survey. This is up from 27% for FY23. SCS exceeded the goal of 40% completion that was set last year.

The Exit Survey will be reviewed and modified in FY25 to gather information in the new Fuse HRIS. SCS will strive to achieve at least 50% completion rate for FY25.

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### EMPLOYEE RETENTION STRATEGIES

The retention of qualified and highly skilled employees remains a priority for the leadership of Southwest Counseling Service. For FY25, SCS Management Team will focus on the following key strategies to improve employee retention and satisfaction:

- Employee Engagement
- Communication
- Salary and benefits
- Health and safety in the workplace
- Providing employees with a paperless experience with the new HR/payroll system

### **Professional Development and Training**

During FY24 SCS was able to offer many trainings for staff. Each and every employee was able to attend at least one in-person training this past year since we executed the initiative to have in-person training with the Sweetwater County Sheriff's Office for Active Shooter Training. In addition, SCS was able to provide many other training opportunities in FY24. The following is a list of trainings that were completed by one or more employees in FY24:

2024 Wyoming Peer Specialist Annual Meeting and Training Active Shooter Advanced Accelerated Resolution Therapy **Basic Accelerated Resolution Therapy** Child & Adolescent Mental Health Conference Contingency Management: An Evidenced Based Behavioral Intervention for Treating Stimulant Disorder Crisis Intervention Team Conference (CIT) DLA -20 **Enroll Wyoming Benefits Training KPI** Dashboards Military Culture Motivational Interviewing National Council for Mental Wellbeing Annual Conference New Wyoming Peer Specialist Training **Opioid Overdose Prevention** Suicide Assessment: Columbia Protocol, Violence and Safety Plan Suspected Fentanyl Decontamination Protocol Trauma Informed Care WRAP Training

All staff are required to complete online, myLearningPointe computer-based learning modules during new hire orientation. They are also required to repeat the myLearningPointe trainings each year. For employees needing further training, myLearningPointe has a course library of over 450 courses allowed to staff to individualize their own professional development and receive CEU's at no additional cost to the employee or SCS.

### Employee Engagement Committee

The employee engagement committee is a group of employees within SCS that focus on boosting morale, connectivity of staff and contributing to a positive work culture. The employee engagement committee has SCS staff members from all areas of the agency to plan fun, interactive activities to keep employees engaged and contributing to a positive work

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environment. Each month, the committee plans for activities throughout the agency. Some of the highlights for this fiscal year were:

**July 2023** - Patriotic Month-Trivia, Patriotic jar, wearing red, white and blue, decorate office in red, white and blue.

**August 2023** - Step Challenge-Employees in teams walking for the month. Fun activity for employees.

**October 2023** - Decorate for fall/Halloween, wearing costumes to work on Halloween and wearing fall shirts for a week and Halloween Potluck. Buildings decorated for Holiday.

November 2023 - National Hug a Bear Day and National Nacho Lunch.

**December 2023** - Food bank drive in all building, hot chocolate/apple cider, ugly sweater day, wearing Christmas sweaters/shirts all months. Building decorated for Holiday.

**January 2024** - National Wear a Hat, National Pie Day, National Compliment day-write or verbally to a co-worker.

**February 2024** - Valentine Boxes Decorated, World Cancer Day-decorate a ribbon in memory/honor of someone known by employee

March 2024 - St. Patrick Shirts, hunt for eggs for all employees, plant growing contest.

**April 2024** - Pet day employees send pictures of their pets, National Licorice Day, Animal food drive.

May 2024 - Mental Health Awareness Month-Wearing green all month, art day and potluck.

**June 2024** - National Picnic Day, employees brought their favorite side dish and National Ice Cream Day.

The Engagement Committee consists of Christy Legault, Kim Bramwell, Angela Hansen, Carrie Fellbaum, Janell Gomez, Tara Moore, Helen Silvers and Julie Scott.

#### EMPLOYEE LONGEVITY

- Less than 1 year (25) 18%
- 1 Year (15) 18%
- 2-5 years (44) 32%
- 6-10 years (24) 17%
- 11-15 years (10) 7%
- 16-20 years (9) 6%
- 21+ years (12) 9%

### LOOKING AHEAD

Areas of focus for FY25:

- Complete/update all Job Descriptions
- Update the SCS salary structure
- Implement the Onboarding and Training portion of the HRIS with Fuse
- Training and development
- Communication
- Employee engagement



Annual Quality Assurance Report Professional Quality and Peer Review July 1, 2023 through June 30, 2024

### **Utilization/Quality Review**

The purpose of the Utilization/Quality Review is to monitor appropriateness of service usage patterns in order to ensure each client is receiving appropriate and quality service to resolve the presenting problem. The Utilization/Quality Review also monitors for appropriate length of effective service necessary to resolve the presenting problem(s).

In addition, the Quality Review is a peer assessment of the appropriateness, quality, and adequacy of clinical assessment, diagnosis, treatment plan(s), client progress, clinical transfer, and discharge summary. It also includes determining whether clinical notes reflect the client's diagnosis, provide a summary of clinical services provided, and demonstrate the implementation of the treatment plan. Quality Review includes an independent review of therapeutic necessity for every service provided.

The purpose of the Utilization and Quality Review is fulfilled when deviations from criteria are identified and corrective action is recommended. The appropriate party either makes corrective action, when possible, improves documentation in the client record, when recommended, or documents on the review why corrective action was not possible. Corrective action includes, but is not limited to: providing feedback, supervision, education or training to clinicians, reviewing additional clinical records of clinicians and establishing or revising agency policies and procedures.

### **Chart Reviews**

A total of 570 Medicaid clients were served during the fiscal year, resulting in a minimum of 57 Medicaid charts to be reviewed to fulfill the annual 10% Medicaid requirement. This was exceeded by the QA team, as 95 Medicaid charts were reviewed during the fiscal year. Additionally, the team reviewed 30 non Medicaid charts. Overall, the team reviewed 125 charts in FY23.

For FY23 there were 4238 possible Medicaid errors. 79 errors were found for a Medicaid error percentage rate of 1.86%. There were 4771 possible CARF errors. 81 errors were found for a CARF error percentage rate of 1.70%. The combined percentage error rate for Medicaid and CARF errors is 1.78%. These error rates continue to be well below our goal of less than 5% error rate. These numbers are detailed below.

These statistics are in the attachment.

	Medicaid Errors	<b>CARF Errors</b>	Total
Charts Reviewed	125	125	125
Potential Deficiencies	4238	4771	9009
Actual Deficiencies	79	81	160
Deficiency Rate	1.86%	1.70%	Mean 1.78%

	Possible Errors	Error Found	<u>Error</u> <u>Rate</u>
Clinical Assessment			
a. Consent to treat present and up to date.	125	30	<mark>24.00%</mark>
b. Describes specific symptoms/behaviors of MH/SA disorder which constitute the presenting problem	125	0	0.00%
c. History of MH/SA disorder and previous treatment, including diagnostic information	125	6	<mark>4.80%</mark>
d. Documentation of both past and present substance use/abuse	125	0	0.00%
e. Documentation of advanced directives	125	0	0.00%
f. Medical health history including current medical needs	125	0	0.00%
g. Documentation of the use of complementary health approaches	124	1	.81%
h. Medical allergies and adverse reactions to medications	125	4	3.20%
i. Medication use and efficacy of current or previously used medications.	125	2	1.60%
j. Education (current & historical)	125	0	0.00%
k. Employment (current & historical)	121	0	0.00%
1. Documentation of military history	121	1	0.83%
m. Legal history and current legal involvement plus status	125	0	0.00%
n. Relevant family and social data and applicable family history	125	0	0.00%
o. Need for, and availability of, social and/or natural supports	125	0	0.00%
p. Documentation of social preference and cultural background and gender identity	125	0	0.00%
q. History of abuse, neglect, violence, and/or trauma	125	1	0.80%
r. Documentation of immediate needs	125	1	0.80%
s. Psychological and Social Adjustment to Disabilities and/or Disorders	125	0	0.00%
t. Documentation of personal strengths, needs, abilities, and preferences	125	0	0.00%
u. Desired outcomes and expectations of the client/family served	125	0	0.00%
v. Documentation of risk taking behavior and threat of violence	125	2	1.60%
w. Documentation of current levels of functioning	125	0	0.00%
x. MSE and narrative of significant mental status findings	125	2	1.60%
y. DSM Diagnosis supported by findings	125	5	<mark>4.00%</mark>
z. Interpretive Summary	125	0	0.00%
z1. Diagnostic Interpretation	125	0	0.00%
z2. Documentation of SPMI/SED, including whether the findings are accurate according to the diagnosis and functioning of client	125	3	2.40%
z3.Co-occurring status matches diagnostic findings	125	1	0.80%
Child and Adolescents			
aa. Developmental history, such as developmental age factors, motor development, and functioning	34	0	0.00%
bb. Immunization record	34	0	0.00%

cc. Documentation of developmental history, such as developmental age	34	1	2.94%
factors, motor development, and functioning. dd. Parental/guardian custodial status and ability/willingness to participate in	34	4	11.76%
services	54	1	11.7070
dd1. Parental Strengths	34	7	<mark>20.59%</mark>
ee. Family relationships	34	0	0.00%
ff. Interactions with peers	34	0	0.00%
gg. Environments/locations where client spends time	34	0	0.00%
hh. School history	34	0	0.00%
ii. Language, speech, hearing, and visual functioning	34	0	0.00%
jj. Learning ability	34	0	0.00%
kk. Documentation of the initial treatment plan and recommendations developed with the client	108	0	0.00%
11. Documentation of clinical necessity	108	0	0.00%
Treatment Plan			
a. Documentation of risk to self or others, including risk of dangerous behaviors, when applicable	124	8	6.45%
b. Documentation the treatment plan was discussed with the client (family/legal guardian, if applicable) & goals were mutually established	125	0	0.00%
c. Client goals are in clients own words	622	34	<mark>5.47%</mark>
d. Needs beyond the scope of the program	122	3	2.46%
e. Discharge plan or transition plan initiated	120	2	1.67%
f. Treatment plan is based upon SNAP	125	0	0.00%
g. Documentation a copy of the treatment plan was offered to the person served and if they accepted it or not	125	0	0.00%
h. The problem(s) documented should be specific to what is being addressed rather than an entire history of their problems.	125	1	0.80%
i. Documentation of the overall goals expressed in words of the person served and/or family/legal guardian	124	9	7.26%
j. Goals are reflective of the informed choice of the person served and/or parent/guardian	125	0	0.00%
k. Objectives are reflective of the expectations of the person served and service/treatment team	125	0	0.00%
1. Objectives are reflective of person's age, development, and culture/ethnicity & responsive to person's disabilities/disorders or concerns	125	0	0.00%
m. Treatment plan objectives are measurable, achievable, time specific, and appropriate for treatment setting	125	14	<b>11.20%</b>
n. Identification of specific interventions, modalities, or services	125	1	0.80%
o. Type and frequency of service appropriate to resolve presenting problem	125	2	1.60%
p. No more and no less than the length of service(s) necessary to resolve the presenting problem(s)	125	0	0.00%
q. Co-occurring disabilities and/or disorders are specifically addressed in an integrated manner	108	1	0.93%

r. Documentation of personal safety that identifies triggers, current coping	120	0	0.00%
skills, warning signs, preferred interventions, and advanced directives, when evidence of risk to self or others			
s. Clinical necessity including full date, signature & degree/ licensure	125	0	0.00%
t. Is the documentation justifying why the client needs to be seen	125	0	0.00%
u. Appropriate signatures if provisional clinician or bachelor level	125	0	0.00%
On-Going Case Management			
v. Documentation of need for array of services needing coordination	125	0	0.00%
v1. Treatment plan includes case management plan and a therapy service at minimum	125	0	0.00%
Targeted Case Management			
w. Documentation that client meets eligibility requirements	93	1	1.08%
w1. Documentation of need for array of services needing coordination	93	0	0.00%
w2. Documentation that overall treatment plan includes case management plan and a therapy service at minimum	93	0	0.00%
Individual Rehabilitative Services (IRS)			
x. Documentation that the client's diagnosed mental health/substance			
abuse disorder has impaired the enrolled client's basic living and/or social skills	4	0	0.00%
x1. Documentation in the treatment plan of the changes that the enrolled client will exhibit in basic living and/or social skills	4	0	0.00%
x2. If applicable, documentation that client meets criteria for use of intensive IRS	4	0	0.00%
Diagnosis			
a. Diagnosis is current and reflected in treatment plan & the treatment provided	125	3	2.40%
b. Diagnosis qualifies for reimbursement	125	1	0.80%
Progress Notes			
a. Demonstrates treatment that implements the treatment plan	125	0	0.00%
b. Summarizes the client's condition and issues addressed	125	0	0.00%
c. Documents progress toward achieving identified objectives & goals	125	0	0.00%
d. Documents significant events or changes in the life of person served	125	1	0.80%
e. Documentation of acute signs and symptoms of why the person needs to be seen	125	0	0.00%
f. Documentation that specifies what the therapist and client worked on during the session	125	2	1.60%
g. Documents the delivery and outcome of specific interventions, modalities, and/or services that support the treatment plan	125	2	1.60%
h. Documents changes in frequency of services and levels of care	125	12	<mark>9.60%</mark>

Transition Plan			
a. Identifies process to ensure coordination and person responsible for coordinating transition	40	0	0.00%
b. Ensures seamless transition when person served is transferred to another level of care or after care program or prepares for planned discharge	40	0	0.00%
c. Identifies the person's current progress in recovery or move toward well- being and gains achieved during program participation	40	0	0.00%
d. Information on the continuity of the person's medication(s)	40	1	2.50%
e. Includes referral information	40	0	0.00%
f. Includes communication of information on options & resources available if symptoms recur or additional services are needed	40	0	0.00%
g. SNAP is used to create & support the transition plan	40	0	12.50%
h. Evidence it was developed with the person served and/or family and/or legal authorized representative when appropriate, and/or the referral source when appropriate	40	5	0.00%
i. Evidence the transition plan was given to individuals who participated in the development of the plan, when permitted	40	3	7.50%
Discharge Summary			
a. Completed within 90 days of the last therapeutic contact	14	3	<mark>21.43%</mark>
b. Includes date of admission and date of discharge	14	0	0.00%
c. Describes the reason for discharge	14	0	0.00%
d. Admitting GAF score completed	14	0	0.00%
e. Discharge GAF score completed	14	0	0.00%
f. Identifies status of person served at last contact	14	0	0.00%
g. The discharge was developed with check box is filled out	14	0	0.00%
h. The treatment received check box is filled out	14	0	0.00%
i. Identifies the presenting condition	14	0	0.00%
j. The progress in achieving treatment goals & objectives text box is filled out	14	0	0.00%
k. Includes information on medications prescribed or administered when applicable	13	0	0.00%
1. Lists recommendations for services or supports	14	0	0.00%
m. Substance abuse sections are filled out if applicable	13	0	0.00%
n. Documentation necessary notifications were provided (example: legal)	14	0	0.00%
o. MIS date is completed	14	0	0.00%
p. Notification section is filled out and final	14	0	0.00%

### **Recommendations**

The QA team acknowledges that the average 1.78% overall error rate is below the 5% goal. We congratulate staff on this achievement. At the same time there is always room for improvement. Many of the following recommendations correspond with items found that had higher error rates. The QA team recommends that managers/supervisors review each of these items with their staff in individual and group supervision and document.

• Several charts where the consent to treat was not up to date were identified (24%). Encourage clerical staff and clinical staff to continue to work on making sure these are up to date and present. In most all

cases the client had not been seen yet after the last consent expired, it would most likely be caught when they come in again.

- Clinical Assessment items identified with a somewhat higher error rate were:
  - History of MH/SA disorders and previous treatment, including diagnostic information is filled out (4.80%). Clinicians to ensure that this information is documented as accurately as possible to include any previous diagnosis.
  - DSM diagnosis supported by findings, are the criteria met (4.0%). Clinicians to ensure that adequate symptoms are documented in order to support diagnosis (i.e. longevity, frequency, duration, intensity and appropriate illustrations, to not include direct quote from DSM).
  - Parental Strengths (20.59%). Clinicians to assess and complete this section and ensure this is being addressed. SCS to move to this being a mandatory field in order to reduce error rate. +
- Treatment plan items found with a somewhat higher error rate were:
  - Client goals are in client own words (5.47%). Please review this standard with your staff.
  - The treatment plan objectives are measurable, achievable, time specific and appropriate for treatment setting/understandable to the person serviced (11.20%). Managers and supervisors to review with their teams and ensure that new hires are aware of this criterion when writing objectives.
- Progress Notes items found with a somewhat higher error rate were:
  - Documents changes in frequency of services and levels of care (9.60%). Documentation
    of change in frequency of service and levels of care must be appropriately identified and
    noted. Please review with your staff this standard. The progress notes need to connect
    with what is on the treatment plan.
- Transition Planning items found with a somewhat high error rate were:
  - SNAP is used to create and support the transition plan (12.50%). This is a newly added CARF requirement to the transition plan. Results have been skewed due to implementation mid-year.
- Formal Discharge Plan/Summary items found with a somewhat higher error rate were:
  - Documentation is completed within 90 days of the last therapeutic contact (21.43%). Clinicians and case managers to be more cognizant of the need to close clients who have not been seen or have not responded to text messages sent by SCS.
- It is recommended the QA committee members continue to work with individual clinicians and case managers to ensure documentation standards, focusing especially on areas where the error rates are higher than expected.
- The QA team continues to recommend that new clinicians be given the opportunity to work on the QA team so as to better understand documentation standards.
- It is recommended SCS continues to send clinical staff to trainings/workshops when financially possible and applicable.
- Currently the QA team recommends a clinician from the recovery program be assigned to the team when possible.



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### Quality Assurance Report Professional Quality and Peer Review-Psychiatric July 1, 2023 through June 30, 2024

### Utilization/Quality Review

The purpose of the Utilization/Quality Review is to monitor appropriateness of service usage patterns in order to ensure each client is receiving appropriate and quality service to resolve the presenting problem. The Utilization/Quality Review also monitors for appropriate length of effective service necessary to resolve the presenting problem(s).

The Quality Review is a peer (psychiatric staff) assessment of the appropriateness, quality, and adequacy of psychiatric assessment, diagnosis, treatment plan(s), client progress, and medication information and efficacy. It also includes determining whether clinical notes reflect the client's diagnosis, provide a summary of clinical services provided, and demonstrate the implementation of the treatment plan.

Additionally, the reviews are to assess appropriateness or medication; medication side effects as well as drug interactions; education of clients of side effects, warnings about use in child bearing women, pregnant women or breastfeeding women; assessment of client satisfaction of the medications; obtaining medication regardless of ability to pay and assessment of side effects through labs and therapeutic blood levels. Quality Review includes an independent review of therapeutic necessity for every service provided.

The purpose of the Utilization and Quality Review is fulfilled when deviations from criteria are identified and corrective action is recommended. The appropriate party either makes corrective action, when possible, improves documentation in the client record, when recommended, or documents on the review why corrective action was not possible. Corrective action includes, but is not limited to: providing feedback, supervision, education or training to psychiatric staff, reviewing additional clinical records of clinicians, and establishing or revising agency policies and procedures.

### Chart Reviews

A total of 30 psychiatric charts were reviewed in FY23 to FY24 by peers of the SCS psychiatric staff. The error rate for psychiatric charts was 0.00%. These error rates are below our goal of less than 5% error rate. These statistics are detailed in the following table:

	Total
Charts Reviewed	30
Potential Deficiencies	390
Actual Deficiencies	11
Deficiency Rate	3%

Supporting Standards in Quality of Care	<u>Possible</u> <u>Errors</u>	<u>Errors</u> Identified	<u>Error</u> <u>Rate</u>
Diagnosis/assessment supported by subjective & objective			/
criteria	29	0	0.00%
Assessment of appropriateness of each medication as determined by needs and preference of client	29	0	0.00%
Treatment plan is complete, clearly defined, and appropriate for diagnosis and symptoms	29	0	0.00%
Suicidality and homicidality assessed	8	0	0.00%
Laboratory test are appropriate for diagnosis, treatment, and identification of potential side effects – <i>While labs are</i> <i>typically being done, they have not consistently been</i> <i>documented in notes. The psychiatric providers have</i> <i>discussed the issues and provided feedback to each other in</i> <i>this area. The psychiatric notes have been reformatted so</i> <i>that when the labs are ordered it is documented. When labs</i> <i>are received it is documented the date the labs are drawn,</i> <i>normal and abnormal values are also documented with</i> <i>levels. This way the labs can be followed from the psych note</i> <i>and identify when labs need to be drawn. Also,</i> <i>documentation now justifies when labs are received and the</i> <i>billing out for the review by the provider. This change was</i> <i>done in an attempt to have labs ordered, received and</i> <i>reviewed in a more timely matter.</i>	15	1	6.67%
<i>Medication</i> Side effects and unusual effects of medications are monitored and documented and contraindications are identified and addressed (i.e., child bearing, pregnant, breastfeeding, drug- drug, etc.)	26	3	11.54%
Is justification for polypharmacy and/or off label use of medications documented?	14	0	0.00%
Identification of medication interactions	15	1	6.67%
Documentation			
Is documentation present regarding client's response to treatment?	29	0	0.00%
Is documentation present regarding client's response to satisfaction?	29	0	0.00%
Is documentation present regarding client's response to effectiveness?	29	0	0.00%
Is documentation present regarding informed consent, risk factors, and side effect education of client?	25	3	12.00%
Standard of care met?	29	3	10.34%

### **Recommendations**

The psychiatric team utilizes the Wyoming Prescription Drug Monitoring Program to assess for use of controlled substance. Due to a new CARF standard and to ensure CARF compliance with the psychiatric team, a statement was added to the Psychiatric Notes to remind providers to utilize the PDM Program and provide a place to document the use of the program and findings.

During the last few months changes were made to the psychiatric notes to assist in ensuring required documentation is completed. To ensure more accurate documentation of the Psychiatric Team the Assessment and plan section of the record was placed as a mandatory field.

For the upcoming fiscal year, the psychiatric team has the following recommendations:

- Continued peer review of psychiatric charts by the psychiatric providers at SCS with
  ongoing feedback and suggestions for improvement of client care and standards of care
  being met by psychiatric services.
- ~ Continue to keep error rates below 5.00%.
- ~ Ensuring that lab work is well documented in psychiatric notes, whether it is followed and collected by SCS staff or another medical provider.
- Complete and thorough documentation of medications being prescribed, including supporting documentation justifying use of one type of medication over another and medication interactions.



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Annual Quality Assurance Report Critical Incident Review July 1, 2023 through June 30, 2024

<u>Members of the Quality Assurance Team are currently</u>: Michal Love, Ross Little, Angela Hansen, Todd Bader, Jessica Nielson, and Elisa Robbins. The team meets from 10am ~12noon every other week on Thursdays. When critical incidents are reported, members of the team or other Professional Peers with a Co-leader of the team meet ASAP to review the incident.

### Critical Incident and crisis notes Review

The purpose of the Critical Incident and crisis notes Review is to provide a professional review and provide feedback to management and staff.

The Professional Quality and Peer Review Team reviewed 22 critical incidents this fiscal year. These incidents included the following types of critical incidents of open SCS clients:

8 Attempted Suicides1 Completed Suicide10 Client Deaths2 Serious Events2 Workplace Threats

The QA team reviewed 8 critical incidents involving suicidal gestures and 1 critical incident involving completed suicide this year. The team did not identify any measures that should have taken place prior to the incidents that would have affected the ultimate outcomes.

The QA team reviewed 9 client deaths. All contact with these clients was appropriate, timely, and clinically sound. The team had no recommendations regarding the clinical contact, services, or documentation with any of these clients.

The QA team reviewed 2 serious events and 2 workplace threats/violence this year.

The team did not identify any measures that should have taken place prior to the incidents that would have affected the ultimate outcome.

The team reviewed crisis notes for all emergency on call clinicians. There were not any recommendations after reviewing these notes.

The team had specific concerns and recommendations for some of the incidents this year but overall praised the efforts of all staff members involved in the incidents.

### **Recommendations**

Overall SCS staff is responding appropriately and in a timely fashion to all critical incidents that arise. Generally, all critical incidents received the attention and response warranted for the incident and were properly handled by staff.

While most of the documentation was thorough and complete, this is the one area that continues to need improvement by staff members. The QA team made the following recommendations concerning overall documentation:

- We recommend the current treatment plan for each client who has made a recent suicidal gesture or who has been identified as having recent suicidal or homicidal ideations will include goals, objectives (including a specific safety plan) and interventions that address the suicidal/homicidal gesture and/or ideations. We recommend that if the current treatment plan does not include these items then it will be updated ASAP after the suicidal gesture or suicidal ideations have been identified by the clinician.
- ~ In addition it is recommended the clinician always develop a safety plan collaboratively with the client at first contact after the incident and give the client a copy of that plan and add (scan in) our copy to the chart.
- Some progress notes following a suicide attempt did not document that suicidal ideations and the safety plan were addressed during follow up contacts. We recommend all progress notes following a suicide attempt will document the client's current suicidal risk and the review of the safety plan until no longer warranted.
- ~ The QA team recommends clinical managers review these issues with all clinical staff during supervision and document it was reviewed.

### SOUTHWEST COUNSELING'S

# SUMMER YOUTH PROGRAM JUNE 10-AUGUST 1 MONDAY-THURSDAY 1-4PM

# AGES 7-13

ACTIVITIES WILL INCLUDE PSYCHOEDUCATIONAL GAMES, THERAPUTIC ART PROJECTS, TEAM BUIDLING AND LEADERSHIP EXERCISES WHEREIN YOUTH WILL LEARN TO INCREASE AND IMPROVE COMMUNICATION, COPING, LEADERSHIP, AND SOCIAL SKILLS

AGE APPROPRIATE YOUTH MUST BE OPEN TO SCS

### **TRANSPORTATION AND SNACKS PROVIDED**

### MEDICAID FRIENDLY

PLEASE CONTACT CLAY JARVIE OR MICHAL LOVE AT (307) 352-6680

### Summer Youth Program 2024

Revenue Expected/Received Total Received from Medicaid Total Outstanding from Medicaid Total expected from BHR Total Outstanding from BHR Total Received from Insurance Total expected from Insurance Total Received from Client Total Amount expected to received from client	23,532.98 7,633.56 9,978.20 4,807.35 1,008.02 8,010.00 24.00 126.00 \$ 55,120.11	This is an increase of \$9,407.52 from last year
Total Transportation Provided Average Number of Attendance Total number of unduplicated clients served	354 12 22	
Total number of groups held Average of \$1574.86 per group	35	This is an increase of \$402.74 from last year
<b>Expenses</b> Salaries and Benefits Travel Cell Phone Maintenance Supplies Food Activities Utilities	<pre>\$ 14,699.08 28.60 120.00 1,257.23 705.88 825.28 943.14 \$ 18,579.21</pre>	
Profit/Loss	\$ 36,540.90	

In June the highest number of group members was	19
In June the lowest number of group members was	7
In July the highest number of group members was	17
In July the lowest number of group members was	9
In August the number of group members was	13

Group started with 19 members in June, and ended with 13 in August. Over the course of the program 22 unduplicated clients were served.

Total Medicaid clients over the summer	11
Total Insurance clients over the summer	9
Total Self pay clients over the summer	2

# **CEO Report**

### **CEO REPORT**

### SEPTEMBER 2024

September is National Recovery Month and has been celebrated since 1989. It is an opportunity to highlight advances and utilization of evidenced based practices, and to celebrate people in recovery and all the dedicated professionals working in the field. The National Recovery Month theme is Recovery. Hope. Healing. SCS is utilizing the image of an elephant and let's talk about the elephant in the room-addiction and mental illness. SCS is continuing the advertisement campaign of services and if a person qualifies, there may be no or little out of pocket expense.

September is Suicide Awareness Month. The national observance is to raise awareness about suicide, identify ways to prevent suicide and remember the lives lost. Governor Gordon initiated the Proactive Reduction of Suicide in Populations via Evidence-Based Research (Prosper) in Wyoming to focus on suicide prevention. The intent is to target all levels of a community to increase awareness, empower and train community members, increase clinicians competence and to have a comprehensive community response. In Wyoming and the U.S., the highest suicide rate is among 20-24 year olds. In Wyoming, the suicide rate among 15-19 years was more than double the U.S. rate for that age group. SCS clinicians and case managers did attend the Prosper training held in Rock Springs. The report from employees was positive. The 988 Suicide Lines in the State are reporting receiving more text and chat from younger individuals. We continue to let SCS clients and community members know about 988 as an important resource. I have enclosed a flyer on destigmatizing the language about suicide.

Behavioral Health Redesign (BHR) continues to have a work group at the state level with Wyoming Association of Mental Health and Substance Abuse Centers (WAMHSAC) providers. The state is utilizing SCS resources for applications, non-payment of codes and no BHR numbers. The work on the back end of BHR is extensive and takes an incredible amount of time. SCS will continue to work through the issues.

### **PREVIOUS BUSINESS:**

**ARPA Projects**: The Sweetwater County Commissioners accepted two bids on September 3, 2024. Two bids could not be accepted due to the bids being over the available funding. These bids were HHS-1134 (Ankeny) and HHS-1127 (Jonah). There were single bids for Duran and Washakie and Sweetwater County Commissioners awarded the bids. Since the Ankeny Office building bid was over the ARPA dollars available, SCS reduced work on the outside of the building, (concrete and camera system) that will not interfere with the occupancy of the building. This bid will come before SCS board this month. SCS did receive permission from the SLIB board to rebid this project, but must have everything completed by October 31<sup>st</sup>. It will be a tight timeline since bids have to be advertised for 3 weeks. Bids will be opened and SCS will need a special board meeting and the County Commissioners approval.

**Open Access Update:** I thought I would give an update on Open Access. SCS does have an evidenced based practice called Open Access. Open Access is same-day appointments when an

individual shows up for an appointment. The primary reason SCS has Open Access is to decrease no-show appointments for first time appointments and for individuals to be seen on the day they present at the office. There has been criticism of the system. With increased mental health clinicians and recognizing the needs for appointment time for individuals, SCS has times available in schedules for scheduled appointments. Presently, SCS continues to have Open Access and scheduled appointments.

### **NEW BUSINESS:**

### Item A: Personnel Policy on Tobacco Review

**Item B: Dry Creek Trona Project Industrial Siting Impact** - SCS was contacted by Eric Bingham, Sweetwater County Land Use Director, concerning an application for impact funding. Ms. Laura Schmid-Pizzato provided the tentative documentation to the county.

Item C: November and December Meeting Dates - November 27 and December 25

### **BOARD ACTION REQUIRED:**

**Item A: Approval of Bid Proposal for Ankeny Facility** - Request for approval of the bid to Shepard Construction Solutions in the amount of \$893,000.

**Item B: Locum Tenens Contract Extension** - Request to extend Brenda Alexander-O'Neil agreement through November 21, 2024. The current agreement expires September 26, 2024. The rate is \$160.03 per hour for a maximum of 7.5 hours per week.

**Item C:** Sweetwater County and SCS Budget Agreement 2024-25 - Request for approval and signature of the 2024-25 budget agreement.

**Item D: Tobacco Free Workplace Policy** - Request for approval of amended Tobacco Free Workplace policy.

**Item E: Add First of the Month Vendor** - Request to add Pioneer Counseling Service as a first of the month vendor.

# Board Action Supporting Documents



Southwest Counseling Service 2300 Foothill Boulevard Rock Springs, WY 82901 (307) 352-6677 / Fax: (307-352-6614

Enriching lives through wellness, recovery, and hope

September 25, 2024

Sweetwater County Board of County Commissioners:

Below are the FY25 bid results associated with Grant ARPA-HHS-1134 Southwest Counseling Ankeny Home.

<u>Contractor</u> Shepard Construction Solutions <u>Total Bid</u> \$893,000

### **Recommendation:**

Award the Bid for the FY25 Southwest Counseling Ankeny Home project to Shepard Construction Solutions in the sum of \$893,000 and authorize the Chairman to sign all necessary project documents.

Sincerely,

Mon

Melissa Wray-Marchetti CFO of Southwest Counseling Service

### THE BOARD OF COUNTY COMMISSIONERS SWEETWATER COUNTY, WYOMING & THE BOARD OF SOUTHWEST COUNSELING SERVICES

### **GRANT ARPA-HHS-1134 ANKENY HOME MISCELLANEOUS RENOVATIONS & UPGRADES**

### NOTICE OF AWARD

TO: Shepard Construction Solutions, LLC 1111 Daley St. Rawlins, WY 82301

### **PROJECT DESCRIPTION:**

The Board of County Commissioners of Sweetwater County, Wyoming (Sweetwater County) & The Board of Southwest Counseling Services has considered the Bid submitted by you for the above-described work in response to its Advertisement for Bids and Invitation to Bid.

You are hereby notified that your Bid has been accepted in the amount of \$893,000.00 (eight hundred ninety three thousand and zero cents).

You are required by the Invitation to Bid to execute the Contract and furnish the required Contractor's Performance Bond, Payment Bond, and Certificate of Insurance within seven (7) calendar days from the date of this Notice to you.

If you fail to execute said Contract and to furnish said Bonds within seven (7) days from the date of this Notice, said Sweetwater County will be entitled to consider all your rights arising out of the Sweetwater County's acceptance of your Bid as abandoned and as a forfeiture of your Bid Bond. Sweetwater County will be entitled to such other rights as may be granted by law.

You are required to return an acknowledged copy of this Notice of Award to Southwest Counseling Services.

Sweetwater County, Wyoming:	By: Keaton D. West-Chair			
	Date:			
Southwest Counseling Services:	By: Kayleen Logan-Chair			
	Date:			
ACCEPTANCE OF NOTICE				
Receipt of the above Notice of Award is hereby acknowledged				
by				
this day of	, 2024.			
Ву:	,Title:			



### **CONFIRMATION OF ASSIGNMENT**

DATE CONFIRMED:	September 17, 2024
DATE CONFIRMED.	OEFIEMDER 17, 202T

**CONFIRMATION TO:** MELISSA WRAY-MARCHETTI

SENT VIA EMAIL TO: MWRAYMAR@SWCOUNSELING.ORG

LOCUMTENENS.COM CONSIDERS THE FOLLOWING PROVIDER CONFIRMED AND SCHEDULED TO WORK AS OUTLINED BELOW:

#### NAME OF PROVIDER

BRENDA ALEXANDER-O'NEIL, NP

#### DATES

EXTENDING THROUGH 11/21/24 with the option to extend

FACILITY: SOUTHWEST COUNSELING SERVICE (ROCK SPRINGS, WY)

#### **BILL RATES**

**REGULAR RATE:** \$155.00 **OVERTIME RATE:** 

\$232.50

PER HOUR PER HOUR AFTER 40 HOURS PER WEEK

MALPRACTICE: \$5.03 PER HOUR HOLIDAY BONUS: \$650.00 PER DAY HOLIDAY MULTIPLIER: 1.50

**CONTACTS** ALLAN HAMPTON CALEB MCRAE

AHAMPTON@LOCUMTENENS.COM CMCRAE@LOCUMTENENS.COM

800.562.8663

You agree to supply the Clinician, according to the required specialty, with reasonably maintained usual and customary equipment, including but not limited to PPE, customary supplies, and a suitable practice environment complying with accepted clinical and procedural standards

THANK YOU FOR CHOOSING LOCUMTENENS.COM FOR YOUR LOCUM TENENS NEEDS.



LocumTenens.com, LLC 2575 Northwinds Parkway - Alpharetta, GA 30009 - 800.562.8663 SIGNATURES CONFIRM ASSIGNMENT:

**CLIENT SIGNATURE:** 

Placement Services Provided By

LOCUMTENENS.COM SIGNATURE:

LocumTenens.com, LLC 2575 Northwinds Parkway – Alpharetta, GA 30009 – 800.562.8663

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Series & Contraction of the

Воокіng: BKG-1117596 75

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### **Current Policy**

### 2.1 Tobacco Free Workplace

SCS will take reasonable steps to ensure that all workplaces of SCS will be free of tobacco products, second hand smoke, and tobacco litter.

The CEO will take reasonable steps to ensure that each office, residential setting, and vehicle will be smoke and tobacco free. Staff, clients and visitors who wish to smoke or use tobacco products must do so outside of the facility at a minimum of twenty-five (25) feet from the building or in a permanent smoking shelter.

SCS will take reasonable steps to ensure that a tobacco cessation program is available, either on site or through referral, for both clients and staff.

### **Suggested Policy**

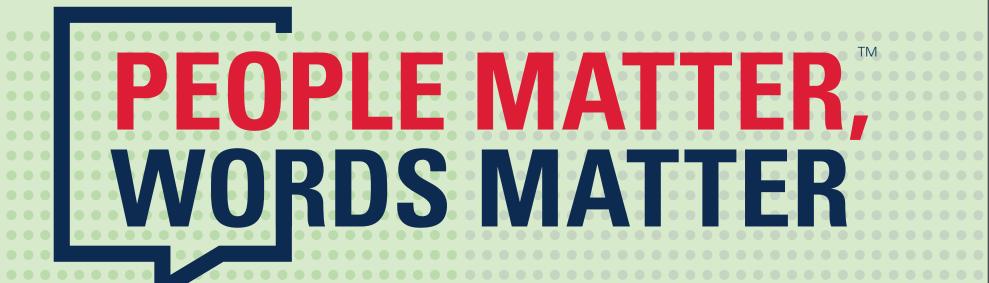
The Health and Safety Chairperson(s) or his/her designee will ensure that each SCS office, residential setting, and vehicles will be smoke and tobacco free, including smokeless tobacco, electronic nicotine delivery systems (vapes), and all other nicotine products that are not FDA-approved cessation aids. FDA-Approved cessation aids like nicotine pouches, gum, and lozenges are allowed. Staff, clients and visitors who wish to smoke, vape, or use non-FDA-approved nicotine products must do so outside of the facility at a minimum of twenty-five (25) feet from the building. Clear signage indicating this policy must be posted near the public entrances of each facility.

### **EXPLANATION OF CHANGES**

New products like vapes and nicotine pouches may not necessarily be considered "tobacco" but nonetheless have harmful effects similar to traditional tobacco products. This wording provides a blanket prohibition while still allowing nicotine products that have been approved as effective cessation aids (NRTs). Requiring clear signage will help this to be apparent to all people using the facility, not just those familiar with policy.

Allwest Communications Amazon **Century Link** Century Link-Lumen **Dominion Energy** FedEx First National Bank Omaha Coal Creek Law (Formerly Hickey & Evans, LLP) Information Insurance Exchange Kum & Go M&M Transfer McKesson Medical-Surgical Inc. Nicholas & Company **Pitney Bowes Global Financial Services Pitney Bowes Purchase Power Rock Springs Municipal Utility Rocky Mountain Power** Leaf (Formerly TimePayment Corp) UPS U.S. Bank Verizon Wireless Western Star White Mountain Water & Sewer Wyoming Waster Services Pat Swan-Smith Retreats Only AdTel International **Altitude Analysis** Aspen Construction **Copier & Supply** Dell Marketing L.P. Farmers Brothers FB McFadden Wholesale Home Depot- Credit Services JM Electrical Inc. Kronos-UKG LocumTenens **Redwood Toxicology** Pain Care Center Petty Cash **Plan One Architects Rock Springs Winnelson** Silver Ridge (Utilities) Smiths Summit Accounting Services P.C. **Top-Tech Auto Service** Vaughns Plumbing & Heating Wakefield & Associates, LLC

Walmart WyoData Security Wyolectric, Inc Wyoming Department of Health Pioneer Counseling Services



### ARE YOU USING DESTIGMATIZING LANGUAGE ABOUT **SUICIDE**?

Language matters in compassionate care, especially in behavioral health care, and that doesn't mean just what you say in front of a patient. What you say behind closed doors with co-workers can be the seed for stigma and perpetuate discrimination against a person based on a physical or mental health disorder. The topic of suicide, and the sometimes-stigmatizing language around it, must be handled with compassion. The language you use can be an important factor in whether or not a person decides to seek care.

# IF YOU HEAR THIS...

- People who talk about their thoughts or urges to commit suicide do so because they want attention.
- Someone who really wants to end their life is beyond help, and there's nothing we can do.
- The patient committed suicide.
- The patient had an (un)successful suicide attempt.
- I deal with a lot of suicidal patients.
- If we talk about suicide, it will put the idea in their heads.
- I'll kill myself if I miss my bus/I'd rather shoot myself than do that/This task makes me want to

# TRY SAYING THIS....

- Talking about suicidal thoughts is an important first step for someone with suicidal ideation, and can lead to seeking professional help.
- Suicide is preventable. Nine out of 10 people who attempt suicide will not go on to die by suicide.\*
- The patient died by suicide.
- The patient attempted suicide/The patient died by suicide.
- I work with patients experiencing suicidal thoughts or who have attempted suicide.
- Talking about thoughts of suicide reduces its stigma and normalizes these conversations, allowing for open conversations that can lead to the person seeking help.
- Joking about or using suicide in hyperbolic manner can increase stigma.

jump off a bridge

[ THESE TERMS PROPAGATE MYTHS AND FALSEHOODS THAT CAN PREVENT PEOPLE FROM GETTING THE HELP THEY NEED. ]

### [ THESE DESTIGMATIZING WORDS SHOW COMPASSION AND UNDERSTANDING, WHICH CAN LEAD TO TREATMENT. ]

\*Source: www.hsph.harvard.edu/means-matter/means-matter/survival Special thanks to Laurel Ridge Treatment Center for their guidance on this language.



Advancing Health in America

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November 2021



# Board of Directors FY25/July 1, 2024

Kayleen Logan, Chair 3513 Santa Ana Drive Rock Springs, WY 82901

Raven Beattie, Vice Chair 2490 Foxtail Lane Rock Springs, WY 82901

Kristy Kauppi, Treasurer 2220 Westview Avenue Rock Springs, WY 82901

Melissa Bates, Secretary 518 Sidney Street Rock Springs, WY 82901

Kori Rossetti 605 Meadow Drive Rock Springs, WY 82901

**April Thompson** 807 Quincy Drive Rock Springs, WY 82901

**Commissioner Keaton West** (ex-officio member) 80 W. Flaming Gorge Way Green River, WY 82935 Cell: 307-371-0377 logank@sweetwatercountywy.gov Appointed: 7/1/21 Term expires: 7/1/25

Appointed: 7/1/22

Appointed: 7/1/21

Appointed: 7/1/23

Appointed: 7/1/22

Term expires: 7/1/27

Term expires: 7/1/25

Term expires: 7/1/26

Cell: 307-389-7658 beattier@sweetwatercountywy.gov

Cell: 307-220-7508 kauppik@sweetwatercountywy.gov

Cell: 307-371-9012 batesm@sweetwatercountywy.gov

Cell: 307-389-9004 rossettik@sweetwatercountywy.gov

Cell: 307-389-2307 thompsona@sweetwatercountywy.gov

Term expires: 7/1/26

Appointed: 12/19/23 Term expires: 7/1/25

Office: 307-872-3895 Cell: 307-389-1888 westk@sweetwatercountywy.gov

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