

# Outcomes Report

2017-2018  
Annual

## Charlotte Behavioral Health Care

*...committed to restoring hope and changing lives...*



*Welcoming*



*Integrity*



*Respect*

*Innovation*

*Teamwork*



# Charlotte Behavioral Health Care

*...committed to restoring hope and changing lives...*



## CHARLOTTE



**Behavioral Health Care**

### Punta Gorda Campus

1700 Education Avenue

Punta Gorda, FL 33950

Telephone: 941-639-8300

Toll Free: 877-703-5267

Fax: 941-639-6831

*Northside  
Psychiatric Services*



### Northside Office

1032 Tamiami Tr, Unit 7

Port Charlotte, FL 33953

Telephone: 941-764-7988

Fax: 941-764-8114

*DeSoto*  
PSYCHIATRIC SERVICES



### Desoto County Office

811 N. Mills Avenue

Arcadia, FL 34266

Telephone: 863-494-4200

Fax: 863-494-4203

**S.H.A.R.E.**  
Self Help & Recovery Exchange



### S.H.A.R.E. Spot

1700 Education Avenue,

Bldg. B

Punta Gorda, FL 33950

Telephone: 941-764-6890



<https://www.facebook.com/charlottebehavioralhealthcare>

<https://www.facebook.com/pages/DeSoto-Psychiatric-Services/580259745433301?ref=hl>

<https://www.facebook.com/northsidepsychiatricservices?fref=ts>



<https://twitter.com/cbhcfi>



[https://www.linkedin.com/company/charlotte-behavioral-health-care?trk=nav\\_account\\_sub\\_nav\\_company\\_admin](https://www.linkedin.com/company/charlotte-behavioral-health-care?trk=nav_account_sub_nav_company_admin)



<https://instagram.com/charlottebehavioral/>



<https://www.pinterest.com/charlottebehav/>

# Charlotte Behavioral Health Care

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## Mission Statement

*Partnering to instill hope, inspire growth, and embrace life.*



## Fiscal Year

Quarter 1: July—September

Quarter 2: October—December

Quarter 3: January—March

Quarter 4: April—June

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[www.cbhcfl.org](http://www.cbhcfl.org)



## Core Values


- **Welcoming:** We create an environment that is comfortable, inviting, and friendly.
- **Integrity:** We do the right things for the right reasons.
- **Respect:** We treat others as we want to be treated-with dignity, compassion, and optimism.
- **Innovation:** We are forward thinking-embracing change and state-of-the-art methods to promote recovery and resiliency.
- **Teamwork:** We work together to produce meaningful change.





## INTRODUCTION

At Charlotte Behavioral Healthcare, Inc. (CBHC) we are dedicated to restoring hope and committed to enhancing the quality of life for the members of the community that we serve. We strive to be the leader in providing high quality and compassionate services in Charlotte County and surrounding areas. To ensure we provide the highest quality of services, we measure and evaluate performance data from a variety of sources, ranging from patients, families of patients, to staff and external stakeholders. Data is analyzed to identify areas of strength, areas for improvement, longitudinal changes, and other trends that may influence performance. This report includes performance data gathered over the past fiscal year and summaries from all relevant sources, including any performance improvement plans identified as necessary along with suggestions for growth and improvement.



If you are going to achieve excellence  
in big things, you develop the habit in  
little matters. Excellence is not an  
exception, it is a prevailing attitude.

Colin Powell

quote fancy

# Charlotte Behavioral Health Care

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## PATIENTS SERVED

### SUMMARY & ANALYSIS

Each year CBHC strives to increase the number of patients served and was pleased to see a 7.5% increase between July 2017 and June 2018. This fiscal year CBHC provided services to 13,282 individuals, compared to 12,353 patients served in the previous fiscal year.

CBHC uses four categories when estimating patients served; primary program, Healthy Start, Screening and Referral, and S.H.A.R.E. Spot. “Primary Program” patients are those that receive mental health and/or substance use services, either inpatient or outpatient, and that have an electronic medical record, which allows accurate identification of unique individuals served each year. This number has increased 3.3% from 6,899 in the previous fiscal year to 7,124 this fiscal year. In reality, many of the patients served at CBHC are receiving an integrated treatment program. This can be attributed to the expansions of the CSU, and addition of the CAT program.

CBHC offers evidenced-based therapeutic inpatient and outpatient treatment of mental health and substance use disorders for adults and children, including community-based services. The Punta Gorda campus served 5,018 unduplicated patients this fiscal year. Unduplicated admissions to the crisis stabilization unit increased by 24.5% this past fiscal year. Collaboration with Crossroads Hope Center allowed 50 youths to receive therapeutic and medication services, provided at their campus in Punta Gorda. Northside Psychiatric Services provided services to 1,096 unduplicated patients. This location is convenient for residents of Englewood and North Port.. Desoto Psychiatric Services, located in Arcadia, serves Desoto and its surrounding counties. The number of unduplicated individuals served in DeSoto were 393 this fiscal year.

Healthy Start participants are tracked through a separate electronic, state-based system. Healthy start served 1,527 patients this fiscal year.

Screening and information/Referral services include patients who either received an initial screening for services or who did not qualify for services at CBHC and attended the information and referral assistance sessions held by a case manager. This fiscal year, 4,532 individuals received services.

S.H.A.R.E. Spot offers a wholesome place for socialization, advocacy, and self-help for those with severe and persistent mental illness. S.H.A.R.E. Spot uses peers to help participants focus on their personal journey to recovery. Studies of drop-in centers throughout the United States have shown members who attend have a decrease in suicide rates, substance abuse, and hospitalization. Members also experience an increase in social contacts, quality of life, problem-solving and the ability to carry out activities of daily living. Through peer support, members gain self-esteem,

self-advocacy skills and are em-



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## PATIENTS SERVED BY PROGRAM AND LOCATION

Fig. 1

Program by Location	2016-2017	2017-2018
<b>Punta Gorda</b> (Patients may participate in more than one program)		
Behavioral Health Consult	-	291
Care Coordination—Adult	-	23
Case Management— Adult	369	332
Case Management—Child	92	55
CAT	-	63
Crisis Stabilization Unit—Adult	779	931
Crisis Stabilization Unit—Child	318	435
Crossroads	30	50
Drug Court	47	38
FIS	79	54
FIT	27	34
Healthy Start	1497	1527
Medication Administration-Adult	2545	2634
Medication Administration-Child	1123	1188
Mental Health Court	47	42
Crisis Support & Emergency Services-Adult	294	146
Crisis Support & Emergency Services-Child	77	48
Outpatient-Adult	861	1003
Outpatient Child	686	658
Recovery Center-28 Day Residential	64	70
Recovery Center-Detoxification	500	545
Screening, Information and Referral	3871	4532
S.H.A.R.E. Spot	86	99
SOAR	-	33
Substance Abuse-Adult	532	575
Substance Abuse-Child	217	208
TFC	47	39

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## PATIENTS SERVED BY PROGRAM AND LOCATION

Fig. 2

Program by Location	2016-2017	2017-2018
<b>Northside</b>		
(Patients may participate in more than one program)		
Medication Administration-Adult	629	628
Medication Administration-Child	596	515
Outpatient-Adult	326	318
Outpatient Child	436	406

Fig. 3

Program by Location	2016-2017	2017-2018
<b>Desoto</b>		
(Patients may participate in more than one program)		
Case Management—Adult	-	36
Medication Administration-Adult	113	105
Medication Administration-Child	188	176
Outpatient-Adult	166	103
Outpatient Child	260	194
Substance Abuse-Child	31	37

Fig. 4

Program by Location	2016-2017	2017-2018
<b>Lee County</b>		
(Patients may participate in more than one program)		
Behavioral Health Consult	-	509
FIS	113	105
FIT	15	74

Fig. 5

<b>Agency Wide Unduplicated Patients in Primary Programs</b>		
<b>Total Unduplicated</b>	<b>6899</b>	<b>7124</b>



## PATIENTS SERVED

Fig. 6

### Unduplicated Patients (Primary Programs) by Location Fiscal Year 2015-2018

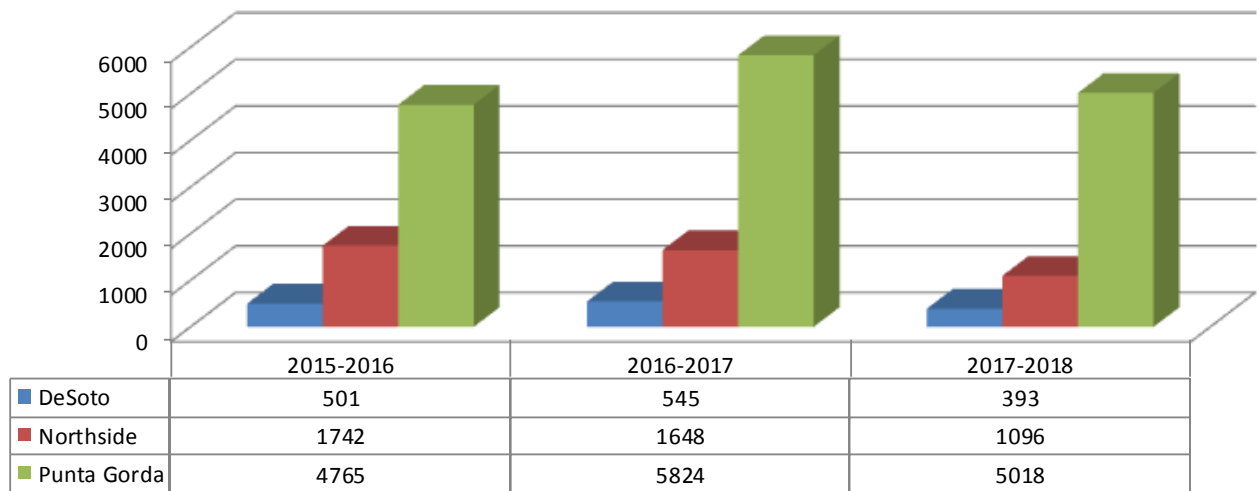
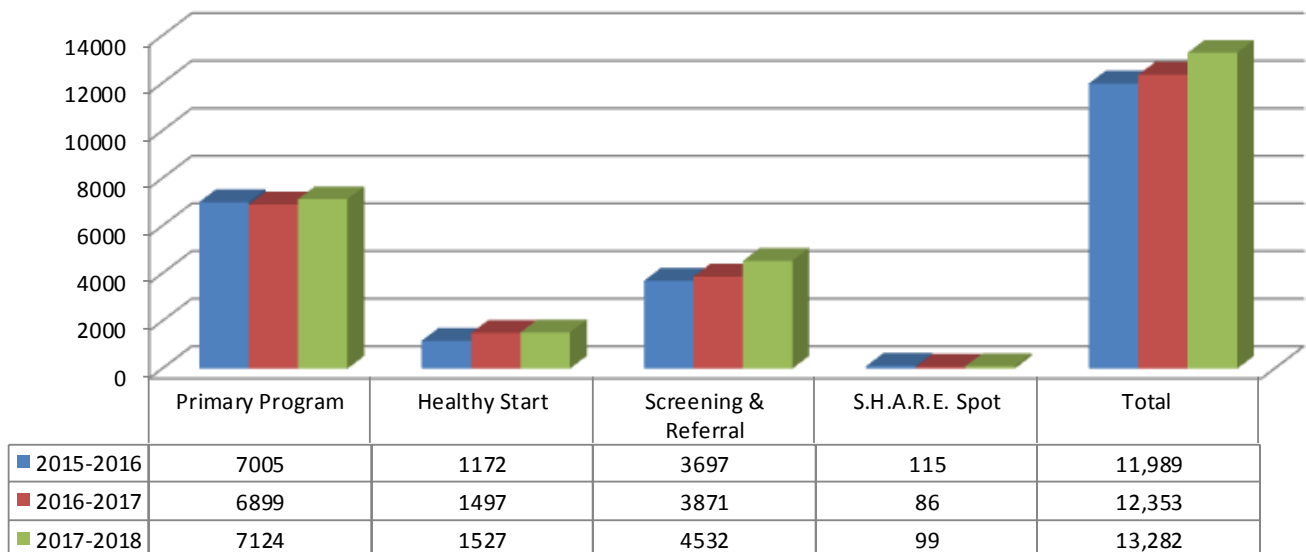


Fig. 7

### Total Patients Served by Program Type Fiscal Years 2015-2018



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## PATIENT DEMOGRAPHICS

### SUMMARY & ANALYSIS

CBHC serves Charlotte and Desoto Counties, as well as the surrounding counties. According to the 2017 Population Estimates, 182,033 people call Charlotte County home and Desoto County had 36,862 residents. The inhabitants of Charlotte County tend to be primarily Caucasian (90.1%) with a much smaller Hispanic populace (6.6%) than both the state of Florida (24.1%) and the United States (17.3%) as a whole. In comparison, 55% of the population in Desoto County is Caucasian, while 30.7% of the residents are Hispanic.

The median income for Charlotte County is \$44,865 per year, which is 10-25% lower than Sarasota and Collier Counties, while significantly higher than Desoto County (\$35,513). In comparison, the majority of patients at CBHC (81%) report an annual salary of less than \$15,000 per year, while only 7% report a salary greater than \$30K.

This fiscal year, the percentage of patients who are considered self-pay increased from 33.5% to 37.8%, while payer source decreased from 23.6% to 22.3% and Medicaid coverage decreased to 39.8% from 41.5%. Other payer coverage includes private insurance (15.9%) and Medicare (6.4%).

CBHC strives to be as or more diverse than the community it serves. Comparatively, CBHC staff diversity is representative of the patients served racially with 79.9% of patients and 71% of staff being Caucasian (non-Hispanic), 48.8% of the patients being male with 27.5% male staff and 51.2% female patients with 72.1% female staff members. While none of the staff identify Spanish as their primary language, six (6) staff members speak it fluently.

Fig. 8

### Race Distribution

Race	CBHC Patients	CBHC Staff	CBHC Board	Charlotte County*	Desoto County*	Florida*	Nation*
White (non-Hispanic)	79.9%	70.9%	92.4%	90.1%	55.0%	75.9%	73.3%
Black/African-American	7.1%	20.3%	7.6%	5.7%	12.9%	16.1%	12.6%
Asian	0.2%	1.2%	0%	1.2%	0.2%	2.6%	5.2%
American Indian/Alaskan Native	0.3%	0%	0%	0.2%	0.1%	0.3%	0.8%
Native Hawaiian/Pacific Island	0.1%	0%	0%	0.1%	0.1%	0.1%	0.2%
2 or more	3.4%	0.4%	0%	2.0%	0.8%	2.5%	3.1%
Spanish/Hispanic	5.8%	6.7%	0%	6.6%	30.7%	24.1%	17.3%

Fig. 9

### Gender Distribution

Gender	CBHC Patients	CBHC Staff	CBHC Board	Charlotte County*	Desoto County*	Florida*	Nation*
Male	48.8%	27.5%	69.2%	48.7%	56.7%	48.9%	49.1%
Female	51.2%	72.1%	30.8%	51.3%	43.3%	51.1%	50.9%

Fig. 10

### Age Distribution

Age	CBHC Patients		Charlotte County*	Desoto County*	Florida*	Nation*
0-14	18.8%		11.5%	17.0%	17.4%	21.4%
15-19	16.1%		4.9%	6.6%	6.5%	7.2%
20-54	51.1%		32.7%	45.0%	46.3%	50.3%
55-64	10.4%		17.1%	12.1%	12.4%	8.6%
65+	3.6%		34.1%	19.4%	17.4%	12.4%

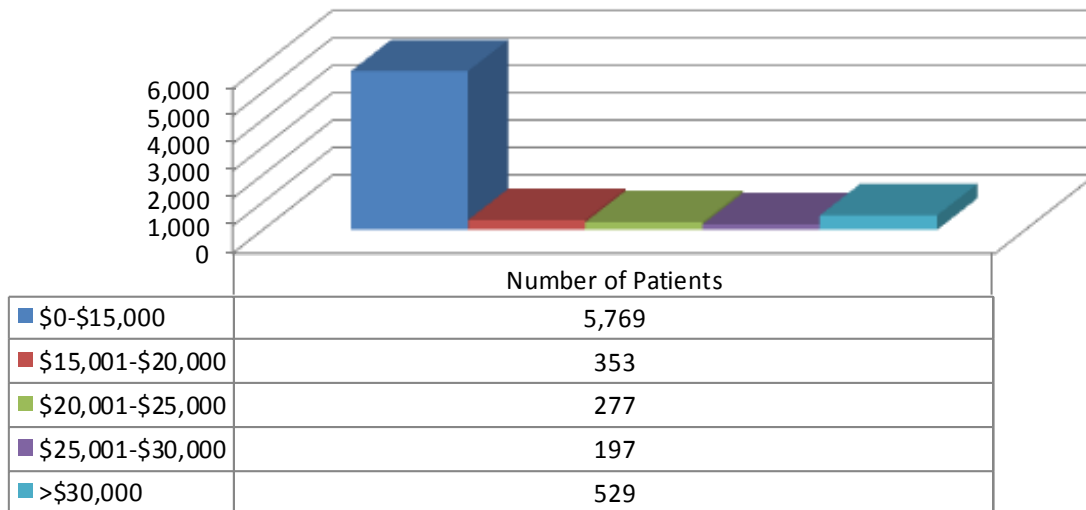
\*Source <http://www.census.gov/>



## PATIENT DEMOGRAPHICS

Fig. 11

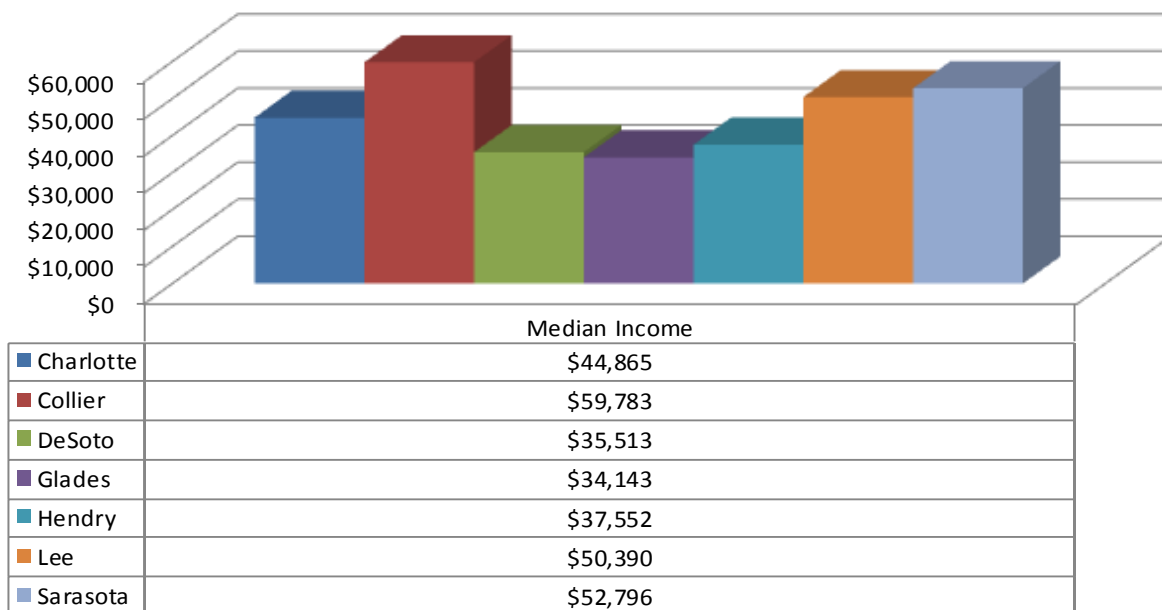
### Salary Range Comparison Fiscal Year 2017-2018



Source: *Anasazi Patient Income Report*

Fig. 12

### Median Income Levels DCF District 8 & Suncoast Region Fiscal Year 2017-2018



Source: *censusbureau.gov*

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## PATIENT DEMOGRAPHICS

Fig. 13

Patient's Primary Language Spoken

Category	CBHC Patients	CBHC Staff	CBHC Board	*Charlotte County	*Desoto County	*Florida
English	98%	100.0%	100.0%	89.9%	69.9%	71.7%
Spanish	1.6%	0.0%**	0.0%	5.3%	27.8%	20.9%
Other	0.5%	0.0%	0.0%	6.4%	3.1%	7.4%

\*Data taken from the United States Census Bureau

\*\*At least (6) staff speak Spanish fluently

Fig. 14

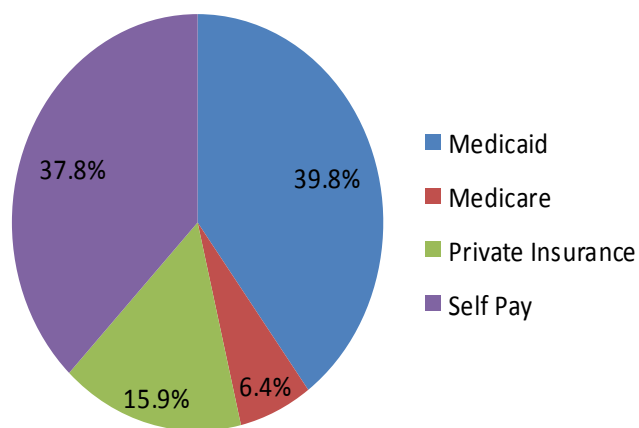
Patient Disability Distribution

Disability	Number of Patients
Developmental Disabilities	373
Physically Impaired	234
Non-Ambulatory	14
Visually Impaired	245
Hearing Impaired	65
English Limited	67

Source: Anasazi Unduplicated Patient Report

Fig. 15

Annual Payer Mix  
Fiscal Year 2017-2018



\*Data taken from Access to Care Log. Not inclusive of all payer sources.



## INITIAL ASSESSMENT TRACKING

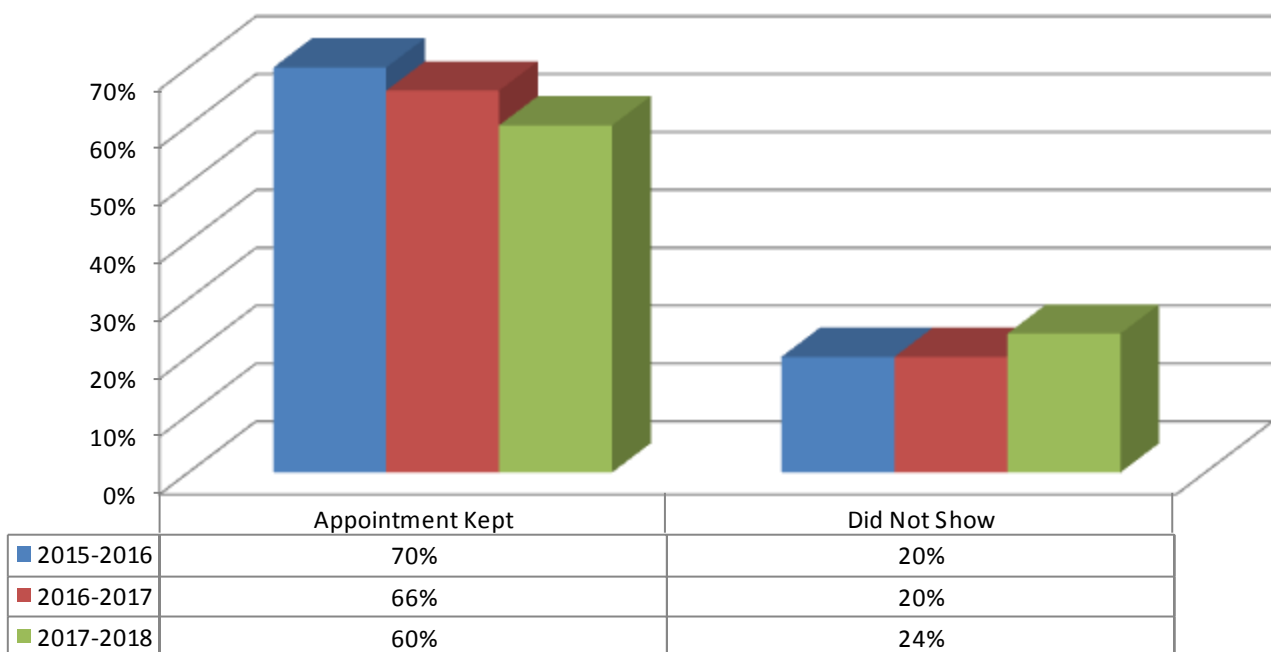
### SUMMARY & ANALYSIS

CBHC uses the Access to Care log to measure the percentage of Initial Assessment appointments kept. The “did not show” target is currently twenty percent. At an agency-wide level, there continues to be a collaborative effort to increase access to services for initial assessments for new or returning patients and to minimize patient no show rates. On a daily basis, the front desk and screening departments manage the scheduler, filling appointment slots which have opened as a result of cancellations or no shows. CBHC also utilizes a text appointment reminder service. This text service, along with the telephone appointment reminder service, notifies patients two days in advance of their scheduled appointments to allow ample time for rescheduling.

CBHC is committed to reducing barriers to service and a quality improvement process that allows for enhanced data collection. With production standards, our therapists proactively inform the scheduling staff about cancellations and offer extended hours such as lunch hours. The agency is working with MTM Services to assess access to care, customer service, organizational culture, patient engagement, comprehensive care, outcome measures, and value of services. CBHC offers an open access model which gives children and adults the opportunity to walk in and receive a comprehensive assessment. This allows patients immediate access to services; instead of a wait time between screening and the initial appointment. CBHC will continue implementing new procedures through the next fiscal year to increase the amount of services provided and decrease barriers

Fig. 16

### Longitudinal Initial Assessment Tracking Fiscal Years 2015-2018



\*Cancelled will Not Show and Cancelled by Provider not shown



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## DIETARY SATISFACTION

### SUMMARY & ANALYSIS

Dietary satisfaction surveys allow CBHC to assess satisfaction from patients and staff regarding dining options. Dietary and Quality Management worked together in the third quarter of 2015-2016 to create a survey that allowed people to rate their satisfaction on topics Dietary has control over.

Our Dietary department works diligently to improve our dietary program while cutting costs and maintaining a high standard of quality. This fiscal year, 71 surveys were collected from patients and staff. Satisfaction with the overall quality of food was 89%.

Fig. 31

### Dietary Satisfaction 1st and 2nd Quarter Fiscal Year 2017-2018

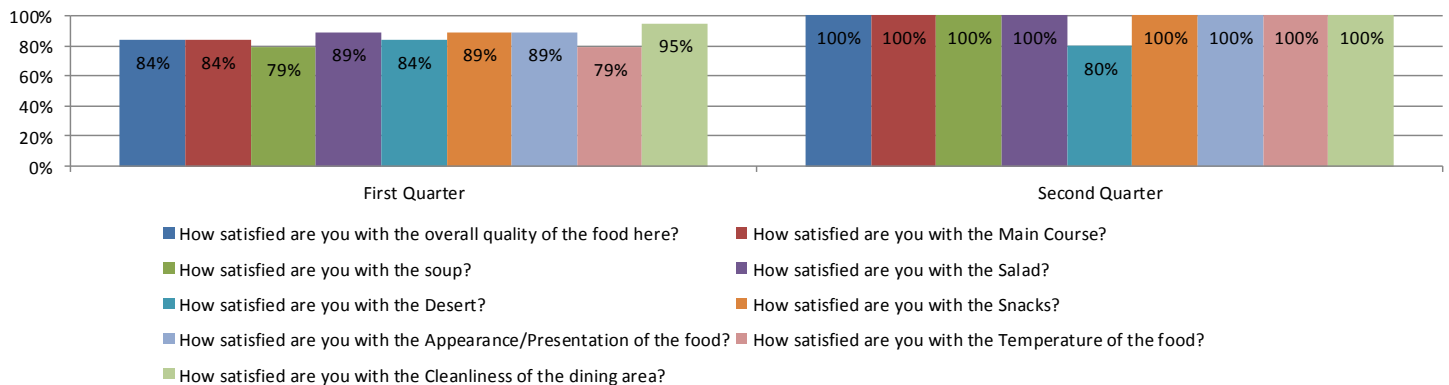
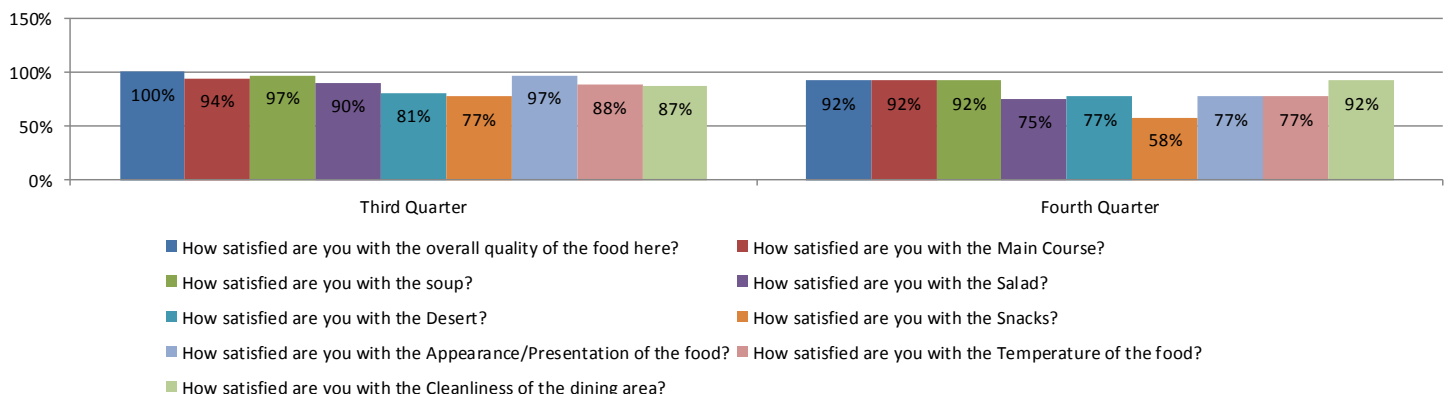


Fig. 32

### Dietary Satisfaction 3rd and 4th Quarter Fiscal Year 2017-2018





## STAKEHOLDER SATISFACTION

### SUMMARY & ANALYSIS

CBHC encourages stakeholders to complete a survey to let us know how we are doing. The link to this survey is on the website and is emailed to identified stakeholders throughout the year.

In the 2017-2018 fiscal year, 12 stakeholders completed this survey. Two areas fell below the target of 90%: Phone System and CBHC's Community Reputation. Without a statistically representative sampling from our stakeholders, it is difficult to determine if the scores for these two areas that fell below target are accurate and true of our stakeholders.

Fig. 33

### Stakeholder Type

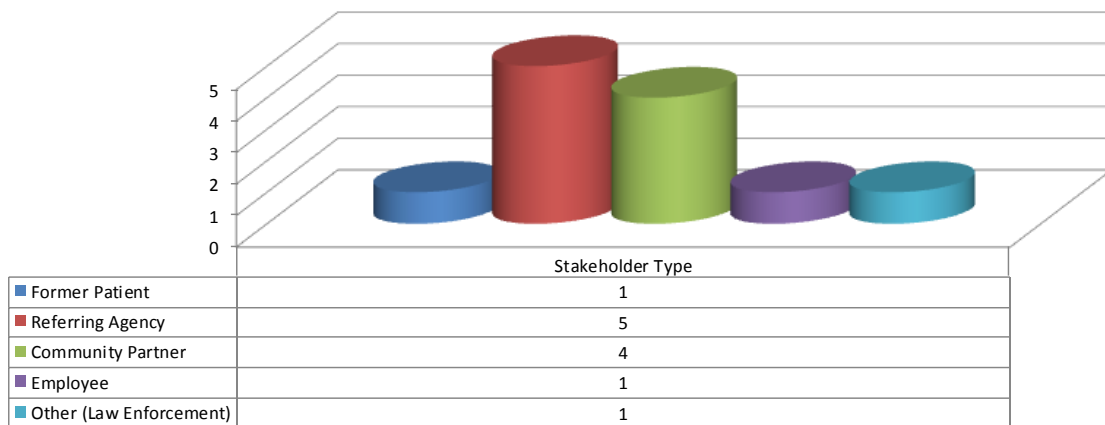
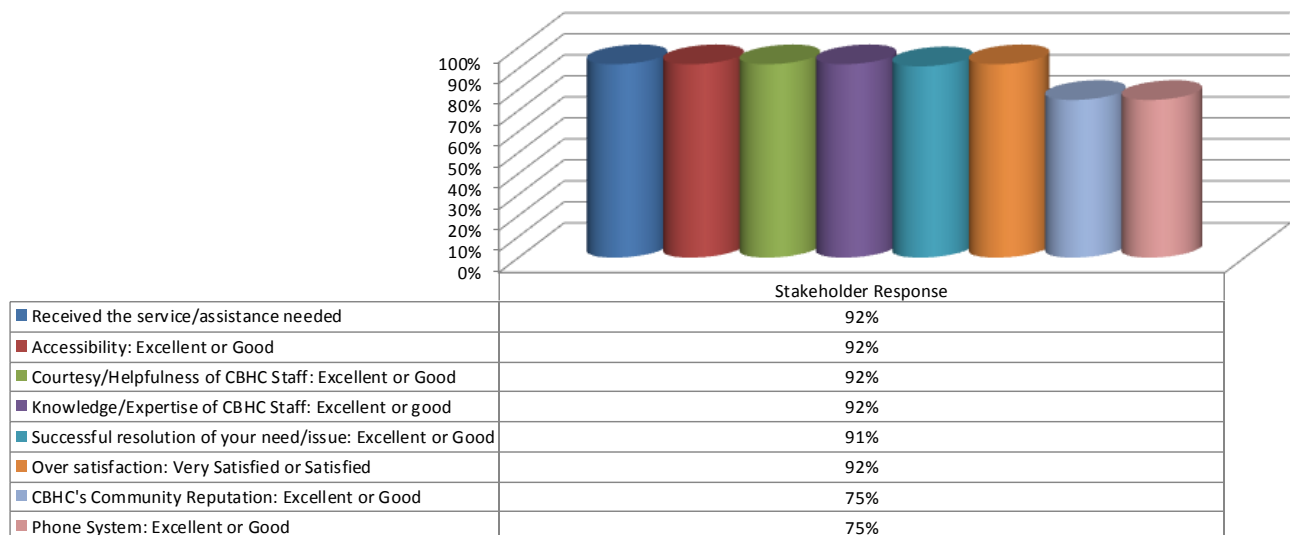


Fig. 34

### Stakeholder Feedback





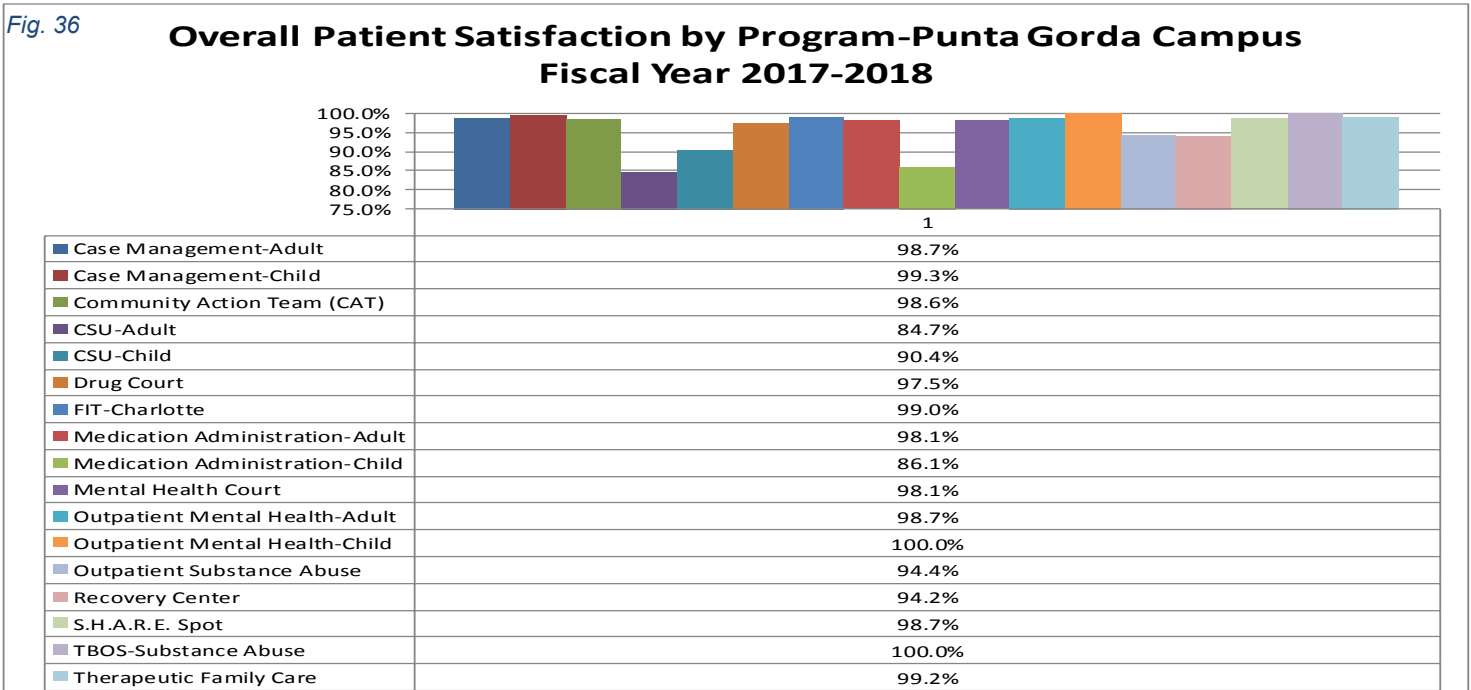
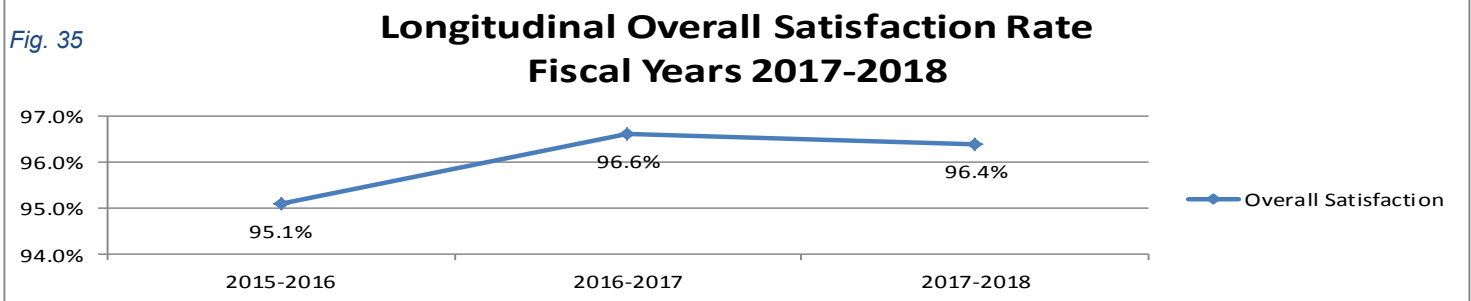
## PATIENT SATISFACTION

### SUMMARY & ANALYSIS

We believe it is important to involve our patients in the services they receive, which is why CBHC obtains regular feedback from them. This is an effective means of evaluating the services we provide. Surveys are conducted regularly but a patient can request one at any time. Satisfaction rates are calculated by counting incidents of “Strongly Agree” and “Agree” in the overall sample.

Staff was able to collect 1,540 completed surveys this fiscal year, which is a 19% decrease from 1,895 completed in the previous Fiscal Year. Quality Management is working with Management in an effort to obtain a statistically representative sampling size based on the number of patients served in each program; which will provide statistically valid results.

Agency-wide, the overall satisfaction rate for the year was 96.4%, in line with the previous year at 96.6%. Of the 19 programs surveyed, we are pleased to note that 95% (18/19) met or exceeded the target. “I am greeted with a smile when I come in” is the highest scoring question at 98.9%. Ninety-seven percent (97.8%) of our patients feel the staff cares about whether they get better. These results are consistent with CBHC’s emphasis on compassionate services to the population that we serve.





## PATIENT SATISFACTION

Fig. 37

### Overall Patient Satisfaction by Program-DeSoto Campus Fiscal Year 2017-2018

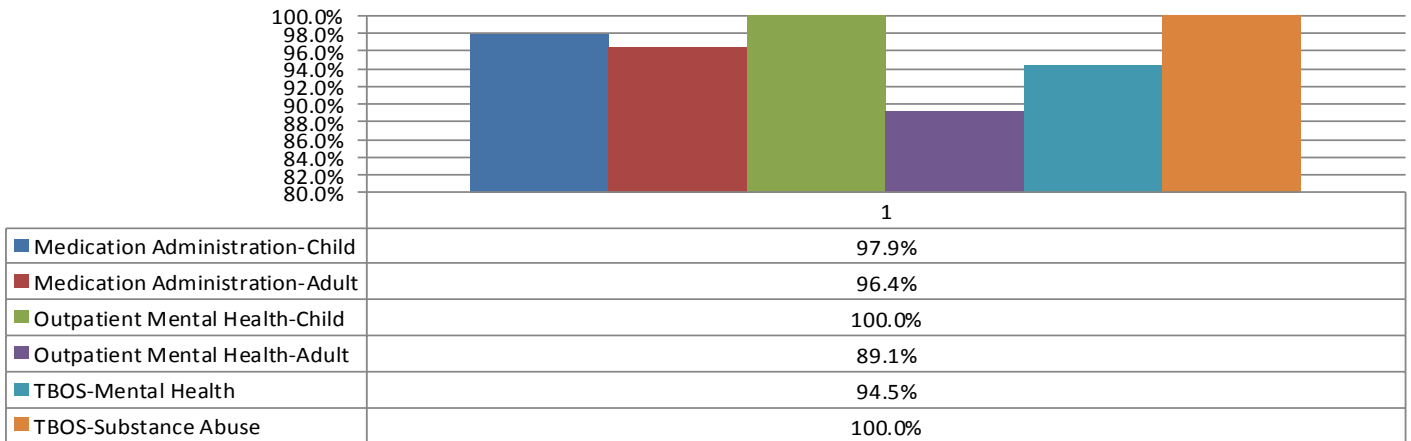


Fig. 38

### Overall patient Satisfaction by Program-Northside Campus Fiscal Year 2017-2018

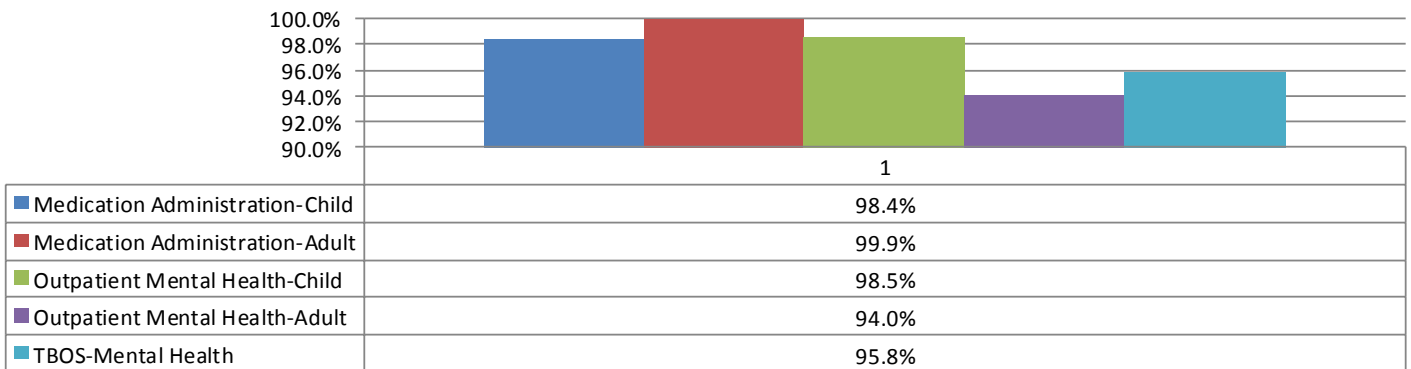
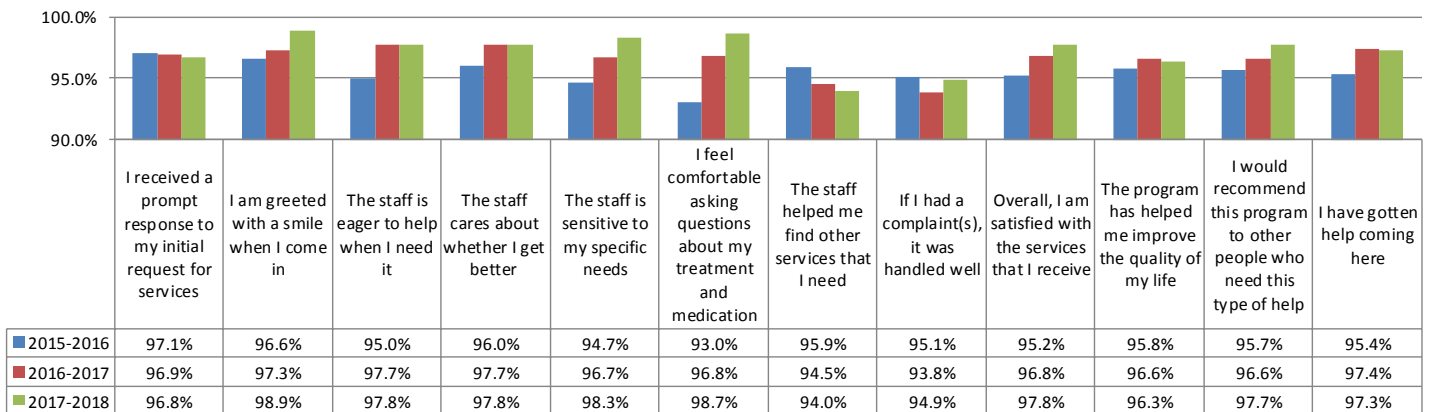


Fig. 39

### Longitudinal Satisfaction Percentages by Question Fiscal Year 2017-2018





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