



Dundee Township Mental Health Board

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Work Plan Agreement

INTRODUCTION: This Work Plan Agreement defines the expectations the Dundee Township 708 Mental Health Board has of the agency and program listed, including the work to be performed and/or the results to be achieved, for the stated contract year.

Agency:	Ecker Center for Behavioral Health (Ecker)
Hours of Operation:	M-F 8:30AM-9PM; Sat & Sun closed
Service, Program or Project Name:	Psychiatry & Nursing
Amount:	\$22,857
Contract Year:	July 1, 2023 - June 30, 2024
Priority Areas: Primary funding category	<p>Mission is to optimize the well-being of individuals and communities through the delivery of accessible, comprehensive, and quality behavioral health care which includes prevention, education, and intervention.</p> <p>The psychiatry program provides accurate diagnostic and medication services that provide clients with optimal symptom control to facilitate their highest level of functioning. Our psychiatrists and APN provide diagnoses and work closely with youth and adults to find the medications that work best for each individual. Psychiatric nurses assist to our clients by offering medication monitoring services, and assistance in resolving insurance issues,</p>

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	<p>education on various psychiatric topics including medication management, and other related</p> <ul style="list-style-type: none"> • <u>mental health services</u> <u>Mental Health</u> • <u>Program Serves Youth</u> • <u>Program Serves Adults</u>
<p>Target Population Served: Target population served in this service, program or project.</p>	<p>Ecker's clinicians are dedicated to treating individuals, we serve not the diagnosis. We realize everyone is unique & require a different path in their treatment. We realize that our clients have a strong voice in their plan for recovery. Residents with mental health challenges needing assistance to live successfully in the community.</p>

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FUNDING AGREEMENT SPECIAL CONDITIONS

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	Title	Description	Due Date	Completed
#A	Blinded Patient Intake into Ecker Program eligible for Mental Health Board funding	Verified, non-duplicated Dundee Township patients broken-out by ZIP code <u>(by referent when available)</u>	Monthly by 15th, <u>per contract Quarterly</u>	
#B	Blinded Patient Intake for patients on waiting list into Ecker program	Verified, non-duplicated Dundee Township residents broken-out by ZIP code <u>(by referent when available)</u>	Monthly by 15th <u>Quarterly</u>	
#C	Blinded patient data referred to Ecker by law enforcement/official first responders	Verified, non-duplicated Dundee Township residents broken-out by ZIP code referred by 590 Crisis program* or comparable program <u>as available (by referent when available)</u>	Monthly by 15th <u>Quarterly</u>	
#D	Mid-year report	Mid-year update	4/15/2024	
# D E	Medication Possession Report for Dundee Township Program Patients	Verified, non-duplicated Dundee Township residents broken-out by ZIP code	Monthly by 15th <u>Quarterly</u>	
# E F	Maximum Gap Report for Dundee Township Program Patients	Verified, non-duplicated Dundee Township residents broken-out by ZIP code	Monthly by 15th <u>Quarterly</u>	
# F G	Client Symptoms Improvement Report	Verified, non-duplicated Dundee Township residents broken-out by ZIP code	Monthly by 15th <u>include in End-of-Year Report</u>	

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# <u>G</u> #H	Applicable Dundee Township-specific Results for SAMHSA funded projects SM085520-01 & SM086670-01	Verified, non-duplicated Dundee Township residents broken out by ZIP code <u>As available</u>	11/15/2023 <u>Include in End-of-Year Report</u>	
#H	<u>End-of-Year Report</u>	<u>Reporting on goals met/unmet during period of activity including but not limited to goals in Section D of the funding application</u>		

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* 590 Crisis Program – From work with police departments in Dundee Township developed out of the 988 line.

SERVICE, PROGRAM, or PROJECT TO BE SUPPORTED OR DELIVERED:

Three goals of Ecker Behavioral Health Nursing & Psychiatry Program with objectives.

To enable people with serious mental illness to live successfully in the community. The objective supporting the goal is two-fold:

- Provide the case management services that assist clients in obtaining adequate food, clothing, shelter, medical and dental care
- Help clients to control symptoms through medication by providing psychiatry and nursing services and easy access to mental health specialty pharmacy services

Enable clients to reach their highest personal level of functioning:

- Help clients understand their illness and the steps they must take to control symptoms through therapeutic interventions and training provided in Therapy and wellness center
- Help clients build their personal repertoire of positive coping skills through therapeutic interventions and training provided in Therapy, groups and wellness center

Provide clients in Dundee Township with exceptional, best-practice mental health care utilizing the rules and regulations outlined by the State of Illinois (DHS, HFS and IDPH), the Federal Government (DEA, FDA etc.), Centers for Medicare & Medicaid Services (CMS) and under the guidelines of the accreditation by The Joint Commission

OUTCOME REPORTS

Psychiatry and nursing outcomes have an objective and a subjective measurement. The objective measure is the Medication Possession Ratio (MPR). The MPR is calculated by dividing the number of days' supply of medication the client received by the number of days'

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supply that is needed if the client is taking the medication as prescribed. This measure is used to identify how regularly clients are taking their medication. Not taking medications regularly has been shown to have a direct correlation with higher hospital re-admission rates. We evaluate each client's monthly medication adherence using the MPR numbers as provided by Genoa/QoL, our on-site pharmacy. A measure of 1.0 indicates 100% MPR.

Another measure we track is the Maximum Gap Report (MGR), which is the number of days that occur between a client's prescription refills. Psychotropic medications must be taken regularly to control symptoms of mental illness.

The subjective outcome measure for this program is clients' symptom improvement as a result of psychiatric services provided. Symptom improvement is determined using a client's self-reported assessment of their medications' efficacy via this questionnaire:

<i>How is your medication or medications that you have taken for at least 6 months working to control your symptoms of mental illness?</i>				
1	2	3	4	5
Not working at all, no change in symptoms	Very little improvement, limited change in symptoms	Moderate improvement, some stabilization of symptoms	Good, symptoms managed with some lingering symptoms	Symptoms completely controlled
If you chose 1, 2, or 3 have you been taking your medication as prescribed? Yes/No _____. If no, how many doses of medication have you missed? _____				

ESTIMATED CLIENTS SERVED – UNDUPLICATED PROJECTION:

Fiscal Year	Total Dundee Township Clients	Total Dundee Program Clients	Percentage of Program Dundee Township Clients
End 6/30/22	573	81	14.3

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End 6/30/23 (projected)	630	90	15.0
6/30/24 (projected)	690	97	15.6

Ecker's Therapy Services program's unit of service is an hour of service.

Each unit of service costs \$200/hour for nursing and \$400/hour for psychiatry.

For Fiscal Year-end 2022

Psychiatric Services' outcomes for reporting period of 7/1/21 – 6/30/22 Prescription Filling

MPR ratio - 91% of clients filled their prescriptions on time having an MPR of .91

Maximum Gap Report – 62% of clients who failed to fill their prescriptions were without medications for periods of less than 10 days

Medication Efficacy survey 83% of clients' self- reported moderate to complete symptom control

Expected results you expect the program to have achieved by the end of the funding period (through June 30, 2024).

Prescription Filling 92% will fill consistently as prescribed

Medication Efficacy 92% will report improvement

Maximum Gap Gap will increase to 75% filled, in less than 10 days

These results will help ensure clients to remain asymptomatic.

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Signature

Please Note: by entering data into the next three (3) fields calling for insertion of your Name, Title, and Date, you are representing that you are an officer or agent for Ecker Center for Behavioral Health (Ecker) Family Services Association of Greater Elgin duly authorized to approve the Service, Program, Project Work Plan.

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Authorized Signature:

Printed Name:

Title:

Date:

Mental Health Board Reviewed/Accepted

Authorized Signature:

Printed Name: Marc V. Avelar

Title: **President**

Date: