



# The Haven Executive Director Report

Submitted to the Board of Directors  
By Aimee Graves

FY2022  
(October 1, 2021 – September 30, 2022)

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# I. Mission, Vision, and Values

The Board of Directors re-affirmed The Haven's Vision, Mission, and Values in Summer of 2022. The organization continues to focus on the wellbeing of the whole person. The Board refined these elements as follows:



## **Vision**

We envision healthy communities, without stigma towards those with mental health and substance use challenges.

## **Mission**

To provide professional, holistic services to all women as they unlock their potential while recovering from substance use and while moving towards their best mental health.

## **Values**

We Believe in and are Committed to:

- Recovery with Respect
- Supporting clients in achieving their goals
- Recovery that is possible for all and is limitless in scope
- Assisting our staff with professional and personal development
- Contributing to the health of the Tucson community

## 2. Performance Improvement

### Highlights of FY2022



#### Facilities

- The Duplexes was repaired and re-opened at Residential.
- Completed bedroom remodel on House 2, 3, and 4
- This was a big year for shade & pavers, mini splits
- Architectural plans submitted to the City of Tucson for a ramp to the Nurses clinic at Residential.
- We got a nice new dishwasher!

#### IT

- Expanded the Assistive Technology
- Increased internet speed
- Expanded camera system
- Client documents were translated into Spanish.
- Implemented Information Management in Internet Security in annual Relias trainings

#### Billing

- We got the RBHA settlement for SABG claims dating back to 2018.
- 90% of AR at 90 days or less achieved
- Transitioned from Pandemic coding to Endemic coding



*Volunteers from Eller College of Management painting the outdoor playhouse at residential.*



## Human Resources & Workforce Development

- In June 2022, we requested bids for the following three projects, and preliminary work for these was conducted throughout the remainder of the fiscal year.
  - Assess The Haven's market pricing and conduct a competitive analysis.
  - Conduct an assessment and make recommendations to strengthen The Haven's compensation strategy and design.
  - Conduct an assessment and make recommendations to strengthen The Haven's performance management systems.
- In June, we created and filled a Human Resources Director position to meet the current needs of the organization.
- We updated The Haven's new hire orientation and reworked our onboarding processes and content in Fall 2022.



*Picnic in the park with staff and residential clients.*



*Nati Cano celebrated her 15-year anniversary with The Haven in September 2022.*

## Residential

- We began the Dog Fostering program and have had 3 dogs successfully return to owners or be placed for adoption.
- Had 2 internal Recovery Coach promotions
- Had 1 internal Residential Technician Coordinator promotion
- Had 5 Residential Technicians promote to Residential Technician 1
- Had 1 Residential Technician promote to Residential Technician 2
- Increased PRN pool for staffing
- Increased admits and discharges throughout the whole year
- Had 3 interns successfully complete their internship/practicum
- Completed improvements to Upper Rec infrastructure
- Over 100 clients received Food Handlers certificates
- Increased number of Residential Technicians facilitating groups consistently
- Hired new RN Manager
- May Average Daily Census (ADC) 41 (80% Capacity) June ADC 41 (80% Capacity) July ADC 49 (96% Capacity) Aug ADC 44 (86% Capacity)



*Our first foster dog, Bestie, was with The Haven's Dog Fostering Team for 3 months.*



*Kitchen Manager Carmen Hernandez and some clients who have earned their Food Handler Certificates.*



## Nursing

- The Haven's Nursing Department continued to develop COVID-19 prevention and response to COVID-19 infections.
- Implemented COVID-19 testing procedures for residential clients.
- Implemented program to educate residential clients regarding COVID-19 vaccination and to arrange for clients to get vaccinations in the community.
- Worked with the residential team to ensure rapid testing, quarantine and isolation for residential clients with COVID-19 exposure and/or symptoms.
- Implemented a program to provide seasonal flu vaccinations directly to clients and staff.
- Provided leadership for COVID-19 vaccination and response policies for clients and staff.
- Ensured all clients were educated on community MAT services and how to participate.
- Improved communication with community MAT providers to ensure that clients' MAT needs and side effects are adequately addressed.



*Hiking in the desert*



*Residential staff celebrating the Pride Month.*

## Outreach & Assessment

- Three Outreach Coordinators added in March 2022 funded by Coronavirus Response and Relief Supplemental Appropriations Act (CRRSAA) / Substance Abuse Block Grant (SABG). Two are dedicated to community outreach and screening perspective clients. One is dedicated to The Haven's Alumnae Program.
- The Assessment Team has provided more than 550 admissions assessments this fiscal year. In August, 82 clients were placed in pre-admission status.
- The Outpatient Team has provided over 8000 group participations and began offering the Peer Support Employment Training Program in January.
- In April, we formed a workgroup focused on making it easy to access information, locations, people, and services by taking a deep dive into the time period when people initially reach out to The Haven for help. We came together to focus on this central question: How do we create the best possible experience for our customers from entry point to first service?
  - First we identified probable causes for barriers to realizing our goal. Some of them included:
    - Timeliness
    - Phone tree "labyrinth"
    - Availability/what services and when start them
    - PBX operator needs training on warm transfers or not the right person to respond to need
    - No live person to transfer caller to
    - Script/verbiage may/may not be "known" by front office staff to assure caller their questions/needs will be addressed. (Addressing anxiety of the caller.)
    - Technology (phone and computer)
    - Recording phone greetings may/may not be informative
    - Organizational culture of customer service could be more formalized across the agency
    - Temps are first contact when front office staff is out at Residential
    - Wait list responsiveness interval (1/wk. vs. 1/day)
    - Weekend/afternoons/evenings – live person coverage variability
    - It's not clear where people need to go when entering the Campbell building
    - Written inquiries – Chatbot, email, phone, website not being highly utilized.



*Outreach Coordinator Sandra Torres and Native Ways Coordinator Nati Cano*



- Next, we Identified problems for data collection. Some of these included:
  - No live person to transfer calls to
  - Phone tree
  - Not fully utilizing our technology
  - Assessment, outreach coordinator and office manager staff members' schedules are not staggered to maximize coverage
  - Organizational culture at leadership level has at least 2 competing values re: client needs and customer services vs. staff preferences and roles.
  - Time Study – Outreach, Assessment and Office managers
  - Access to Services Tracking Spreadsheet – Outreach, Assessment and Office Managers will use the same spreadsheet to track incoming requests and outcomes via phone, Chatbot, email, Outreach coordination).
- We then prioritized the barriers and consolidated and refined our data collection tools and reports. The ensuing months were spent addressing each priority area and working our way through the lists. This work is a high priority that will continue into the next fiscal year.

## Communications & Development

- We created a Communications and Development Director position to elevate The Haven's mission and work to various stakeholders including funders, donors, the general public, board and employees.
- Our brand was refreshed, and a new brand guide created.
- Our website was enhanced and we created a stronger social media presence.
  - The average reach of our Facebook posts increased by over 100%
  - We created an Instagram page for The Haven
- We developed a monthly donor newsletter
- We adapted a new donor management software called eTapestry



*Outreach Coordinators Sandra Torres and Tucker Grace and Board Member Phyllis Howell at different community events.*

## Native Ways Program

- We created an additional Program Manager position to steward the Native Ways Program across all service lines and conduct outreach and education in the wider community.
- We co-authored a proposal with The University of Arizona Southwest Institute on Women and Pima County Health Department that resulted in a 3-year SAMHSA grant award. This grant allows The Haven to enhance its services for indigenous women.



*Missing or Murdered Indigenous Persons Awareness Day*



*Tucson Indian Center Community Healing Event*



## Technology Plan - Summary of Achievements FY 2022

- Increase accessibility with Spanish translation – reported this as a business risk due to contractual compliance issues and got permission to machine translate. Waiting for Spanish proficient staff to review documents.
- ASAM integration to KIPU- there is little that IT can do about what KIPU will or will not integrate and The Haven does not have the budget for designer code. The ASAM issue has been kicked down the road, again, by constituents other than The Haven.
- HIE integration to KIPU – There is virtually nothing that The Haven's IT department can do to get KIPU to integrate this feature. The HIE system itself does not appear to be mature enough to even try.
- Support increasing admits with after-hours staff accessibility – staff do not want to do this.
- Support increased telehealth with better machinery – we did update a lot of machines this year after years of neglect. Staff have largely come to see laptops and docking stations as the norm for equipment now. Sustaining this is economically challenging.
- Increase efficiency of camera systems –This project requires wiring, but there is not enough resources in Facilities to complete this project. We do have an updated software and camera system in the wings.
- Increase speed of data transmission through new fiber optics
- Convert donor database in 2023
- Basic Computer training – We established Relias trainings on using the Office Suite and on basic safety precautions for the use of computer systems.

## Risk Plan - Summary of Achievements FY 2022

- The Risk Committee met Quarterly to track risks and assess potential damage.
- The Risk Committee had key staff conduct a round-table style Business Continuity test.
- The Risk Committee reported to the QMPI Committee, monthly.
- The Risk Committee prepared applications for various insurances.
- The Risk Committee reviewed the potential risks related to Sweat Lodge activity and insurability.
- Most of the issues being tracked require training and compliance activities.



*Holiday fun*



## Accessibility Plan - Summary of Achievements FY 2022

The Clinical Quality and Utilization Team met on a regular basis to discuss accessibility opportunities and accomplishments.

- Architecture: The team did not accomplish the goal of installation on an accessibility ramp to the Residential Program Administration Building. However, architectural plans were completed and submitted to the City of Tucson for a building permit. Also, a contractor has been chosen for construction. This goal will be included in the FY 2022-2023 Plan.
- Environment: Security fencing was added to the Glenn Recovery Housing Campus during May 2022. Staff members provided Nonviolent Crisis Intervention Training and CPR/AED/First Aid classes to all clinical team members.
- Attitudes: Staff Members reaffirmed their commitment to provide “Recovery with Respect” and “Person First” substance use disorder treatment.
- Finances: The Haven accepts all Southern Arizona AHCCCS Plans and offers services to self-pay clients at AHCCCS rates. Self-pay clients seeking outpatient services are encouraged to apply for reduced rates based on income.
- Employment: The Haven began offering a Peer Support Employment Training Program in February 2022. All outpatient clients may participate in an employment group once weekly.
- Communication: As of November 18, 2021, four staff members at the residential location and one staff member at the Campbell location has been certified proficient to provide services in Spanish. As of October 2021, all position postings include a preference for bilingual (Spanish/English) candidates. A Bilingual Recovery Coach started at the Residential Program in November 2021. A Bilingual Outreach Coordinator was hired March 2022.
- Transportation: The Haven ensures that clients have transportation to any needed medical or behavioral health service appointments.



## Cultural Competency Plan - Summary of Achievements FY 2022

The Haven's Key Staff met regularly to set goals and track progress related to Cultural Competency.

- A Welcoming and Sensitivity policy was implemented November 2021.
- As of December 2021, four staff members at the residential location and one staff member at the outpatient location have tested at the proficient level for Spanish. In March 2022, a Spanish proficient outreach coordinator was hired.
- Staff members complete the following trainings within 30 days of hiring and annually:
  - Cultural Competency in Healthcare
  - Building a Multicultural Care Environment
  - Spirituality in Recovery
  - Gender Identity
  - Native Ways Speaker Edward Grijalva
  - Native Ways Speaker Juanita Homer
- Key Leadership Staff and members of The Haven's Board of Directors review local and state plans, along with The Haven's demographics, to ensure that organization is adequately addressing the needs of the Tucson community.
- A project to translate materials into Spanish is ongoing.
- Notices have been posted at all entry points to ensure that clients are aware of available translation services to those with limited English proficiency and deaf and hard of hearing persons.
- Services to assist clients with addressing spiritual needs are available at all levels of care.

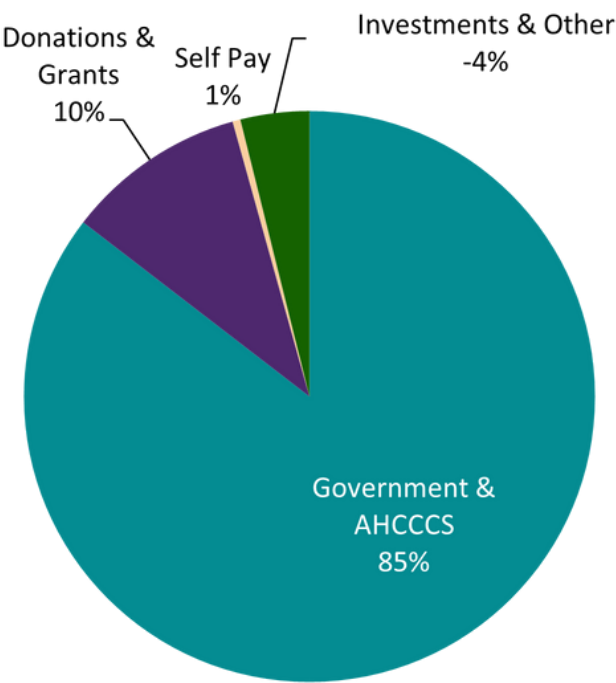


*Making Inside/Outside Masks in the IOP Program*



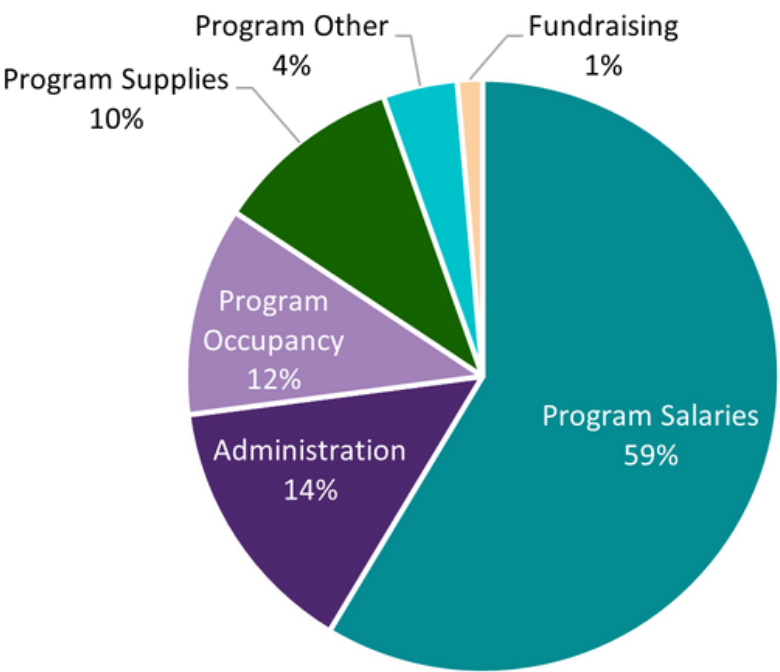
# 3. Financials

Revenue

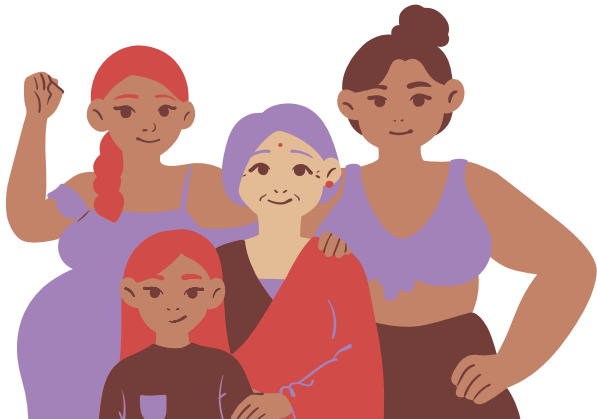


Government & AHCCCS	6,402,701
Donations & Grants	765,612
Self Pay	33,561
Investments & Other	(291,777)
Total	\$6,910,097

Expenses



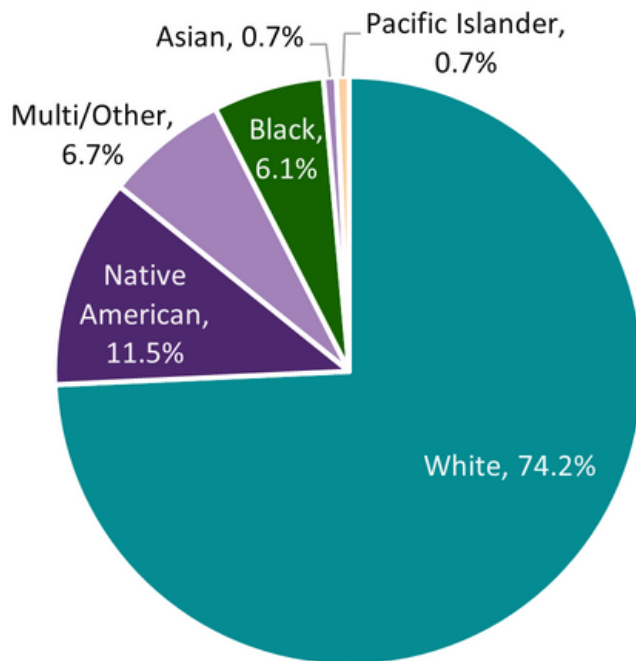
Program salaries	4,115,177
Administration	1,004,802
Program occupancy	799,080
Program supplies	720,122
Program other	284,793
Fundraising	96,075
Total	\$7,020,049



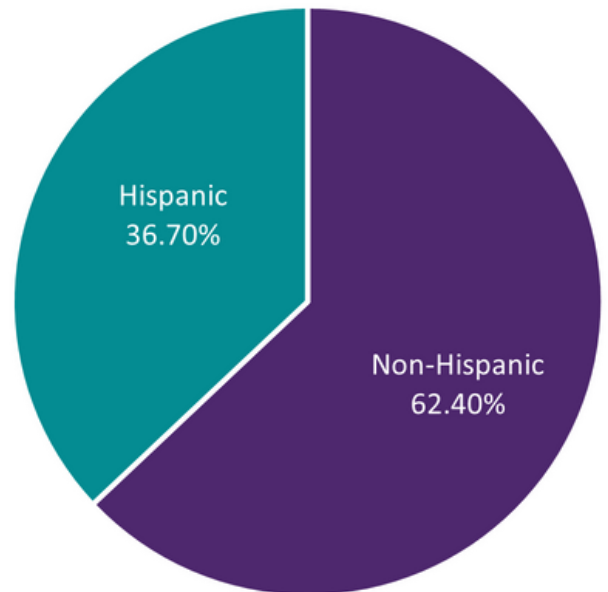


## 4. Client Demographics

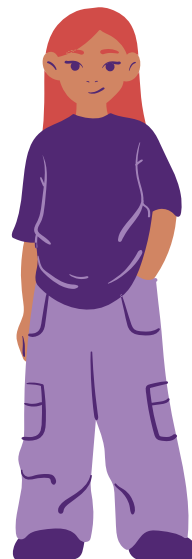
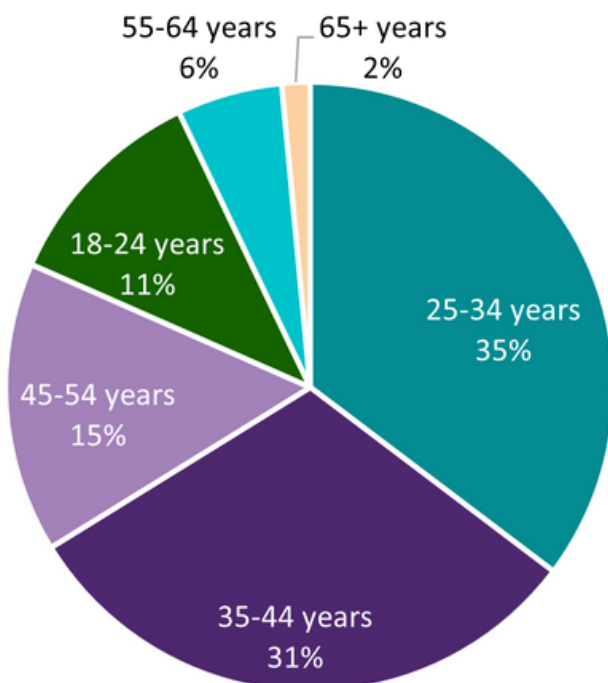
### Race



### Ethnicity

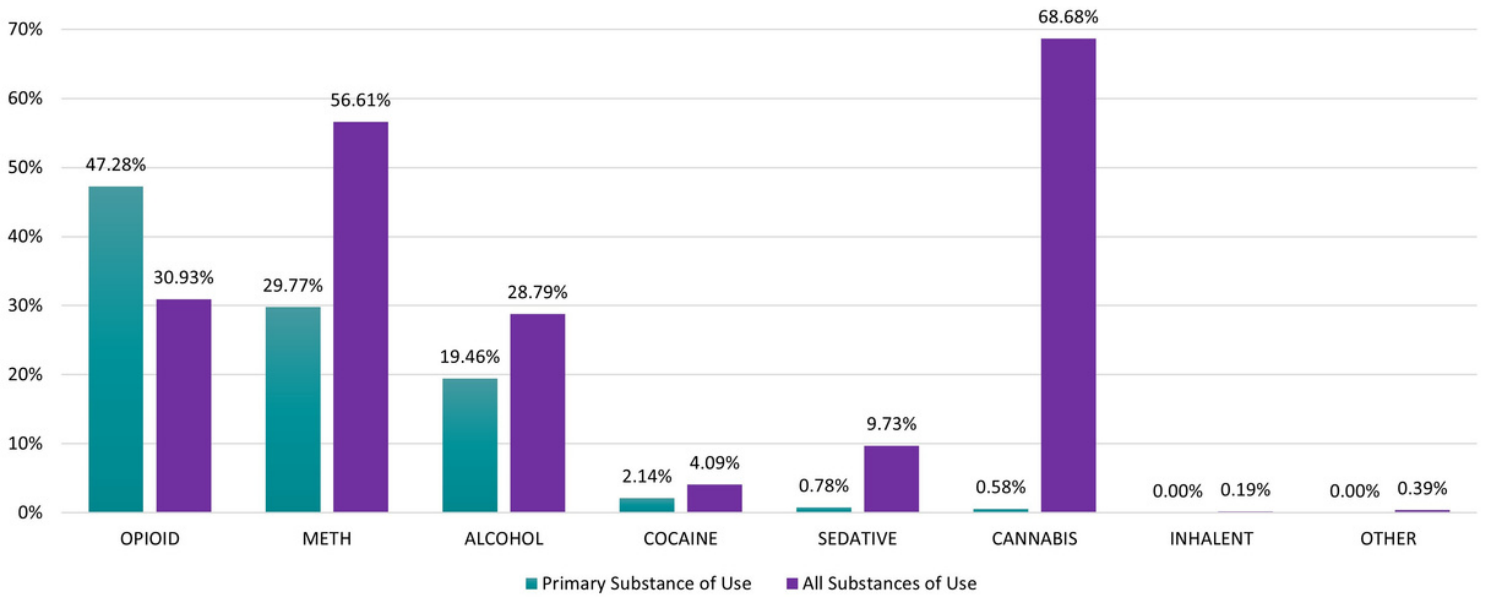


### Age

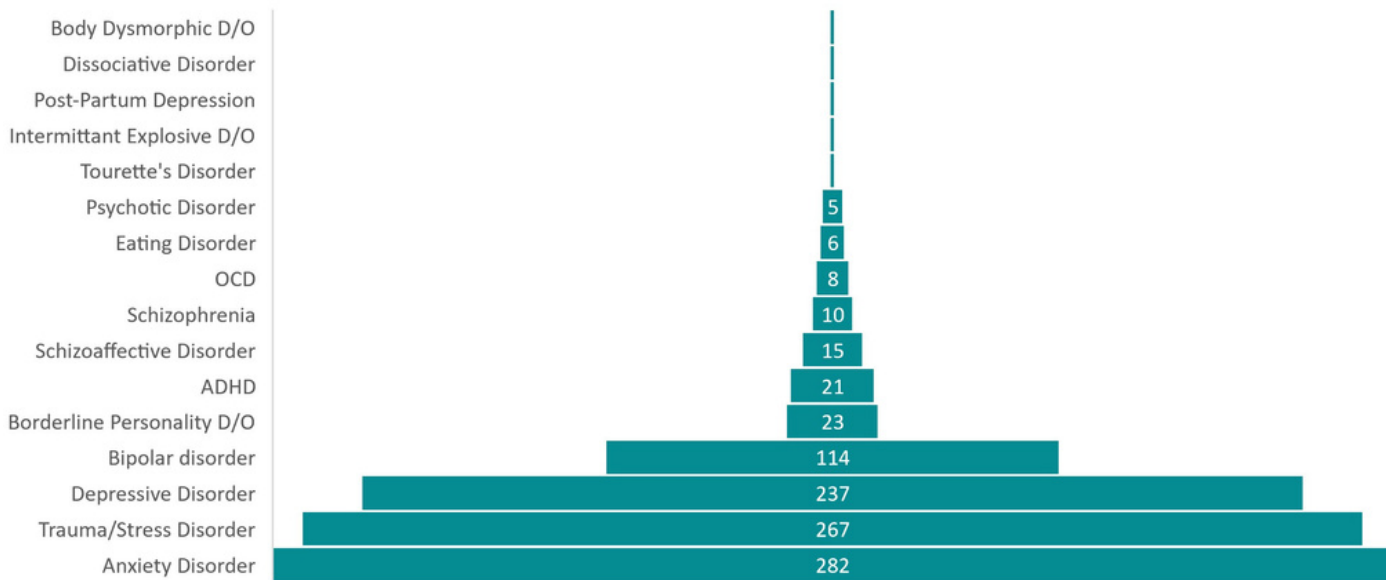


Average Age = 36.5  
Minimum Age = 18  
Maximum Age = 75

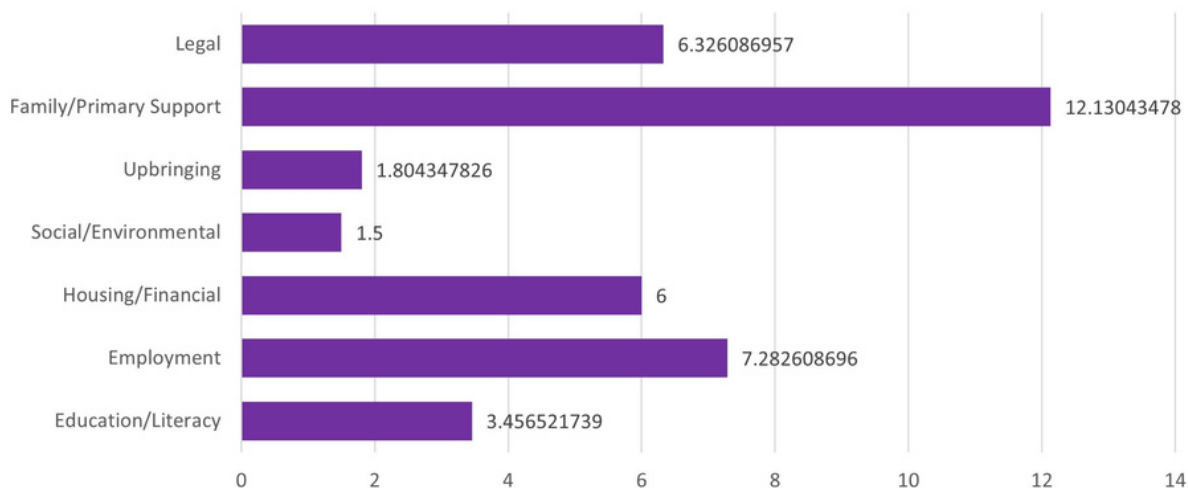
## Substances of Use/Misuse



## Clients' Mental Health Diagnoses

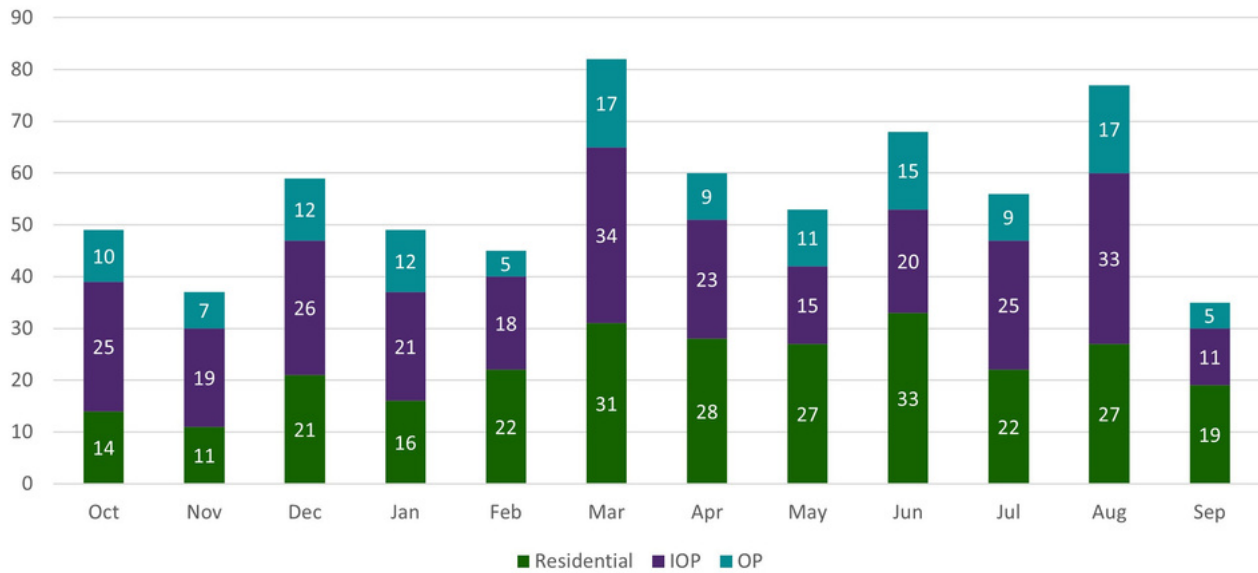


## Prevalence Rates of SDOH Challenges in the Client Population

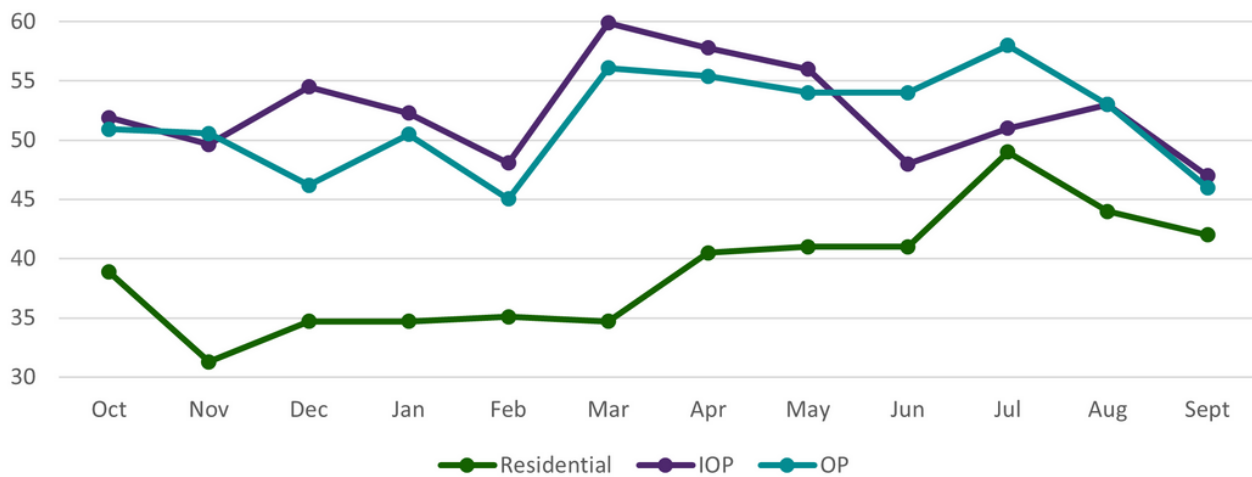


# 5. Utilization

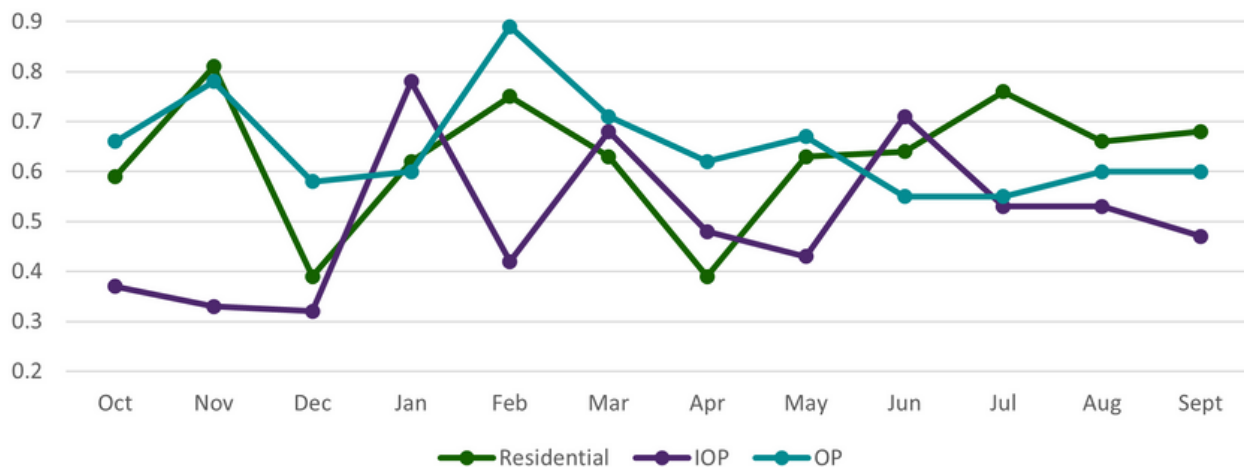
Program Admissions by Month - FY2022



Average Daily Census by Program



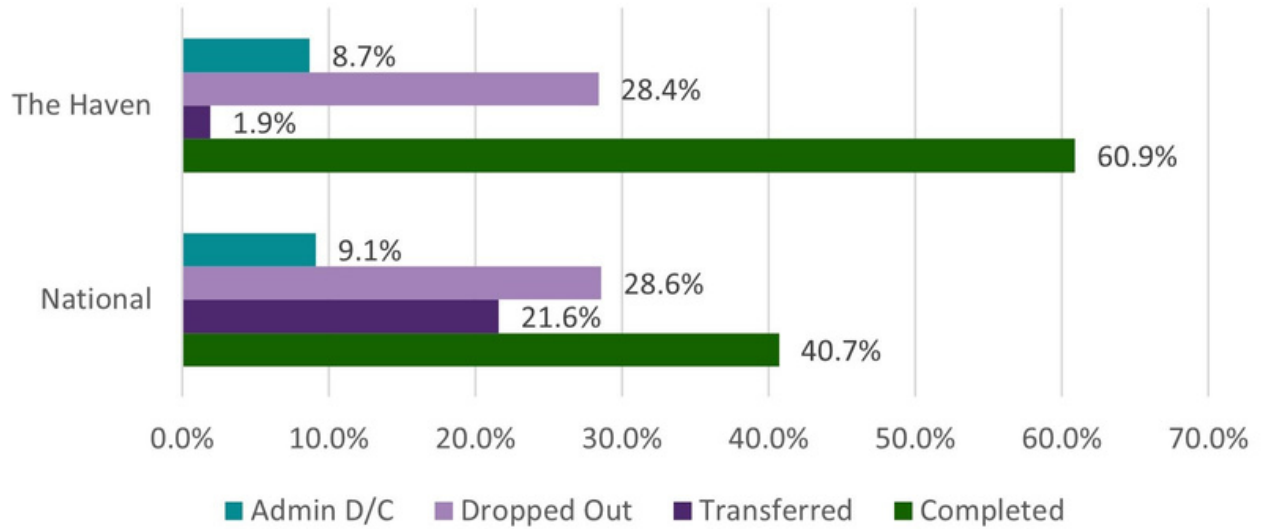
% of Positive Discharges by Program



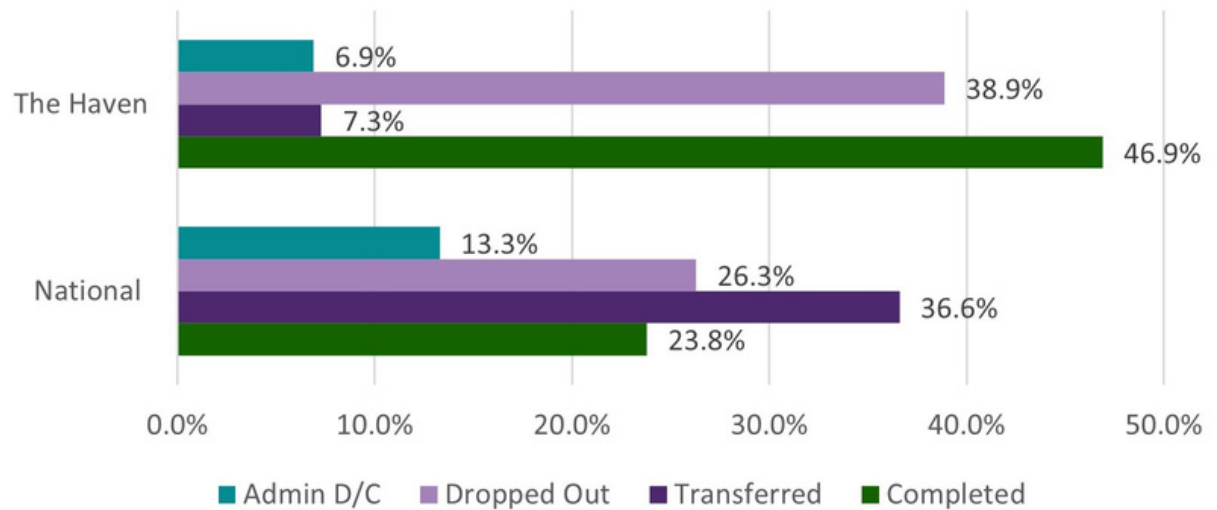


## 6. Treatment Outcomes

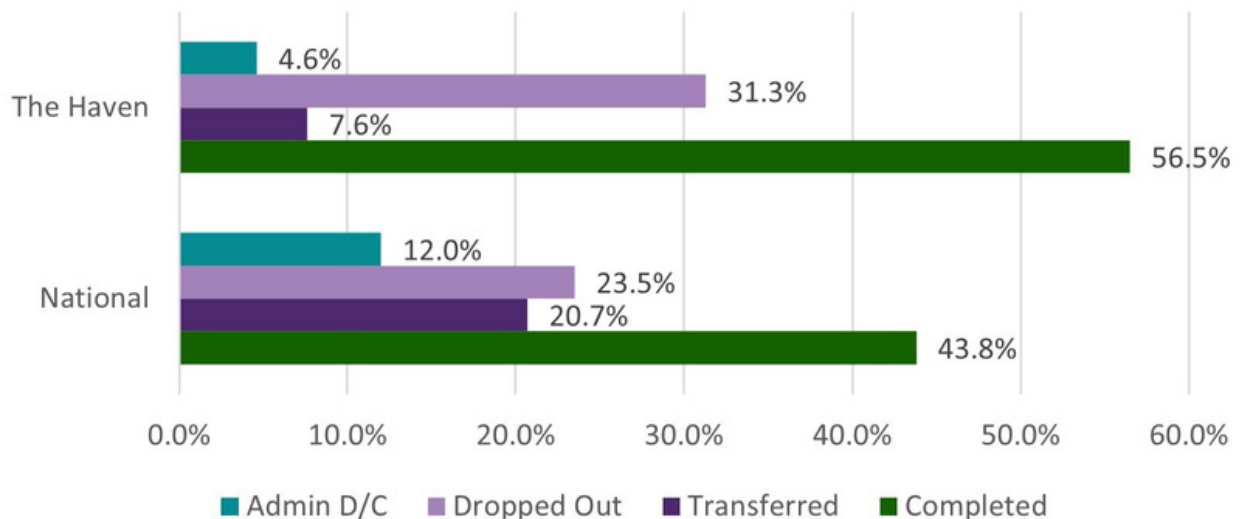
### Residential



### IOP



### OP



Note: The TEDS report and The Haven calculate Transfers in a different way which causes the significant differences noted between national and Haven outcomes. The Haven defines Transfers as those clients who need to move to a different level of care or other type of facility to meet their needs. The TEDS report includes these types of clients and also includes those clients who successfully complete a level of care and move to a lower level of care. To best interpret this data, it is suggested to combine the two treatment outcomes "Transferred" and "Completed" into one group.

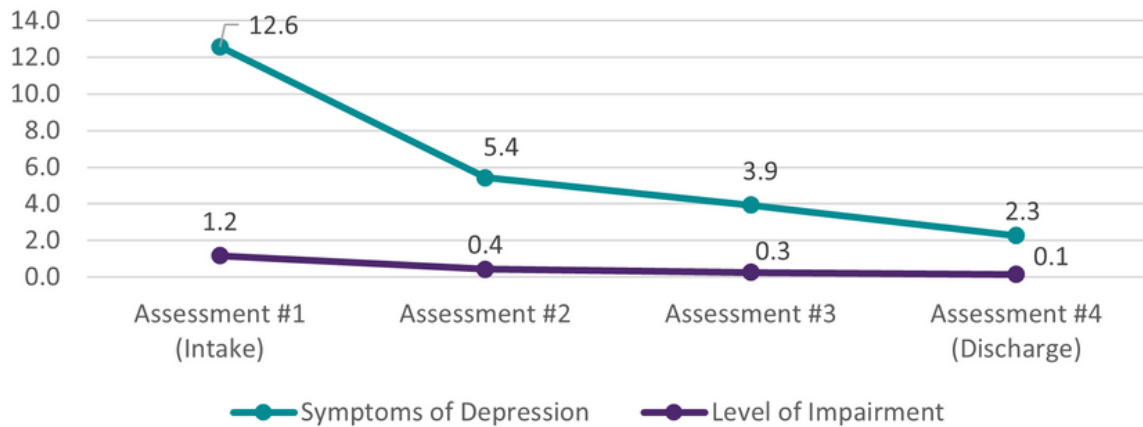
# Treatment Outcomes in Residential



## Depression Scores Throughout Treatment (PHQ-9)

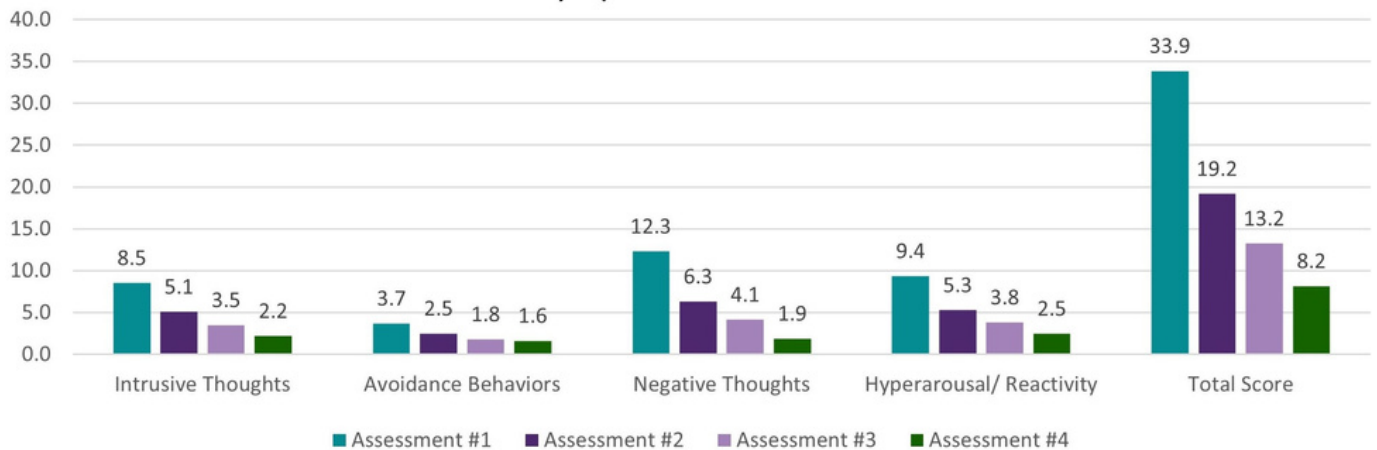
82% decrease in Depression Score

88% decrease in Impairment Level in Res



## Anxiety/Trauma Scores Throughout Treatment (PCL-5)

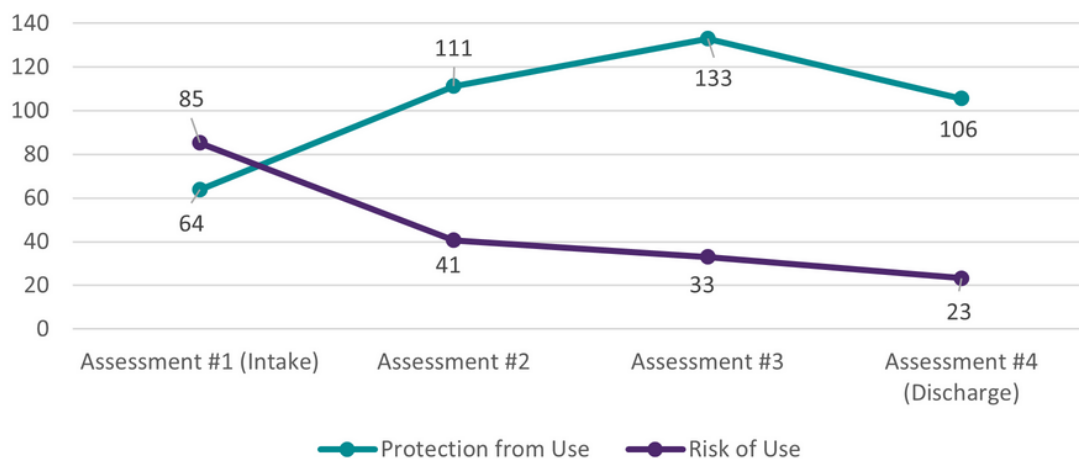
76% reduction in symptoms - RES



## Substance Use Factors Throughout Treatment (BAM-R)

77% increase in protective factors

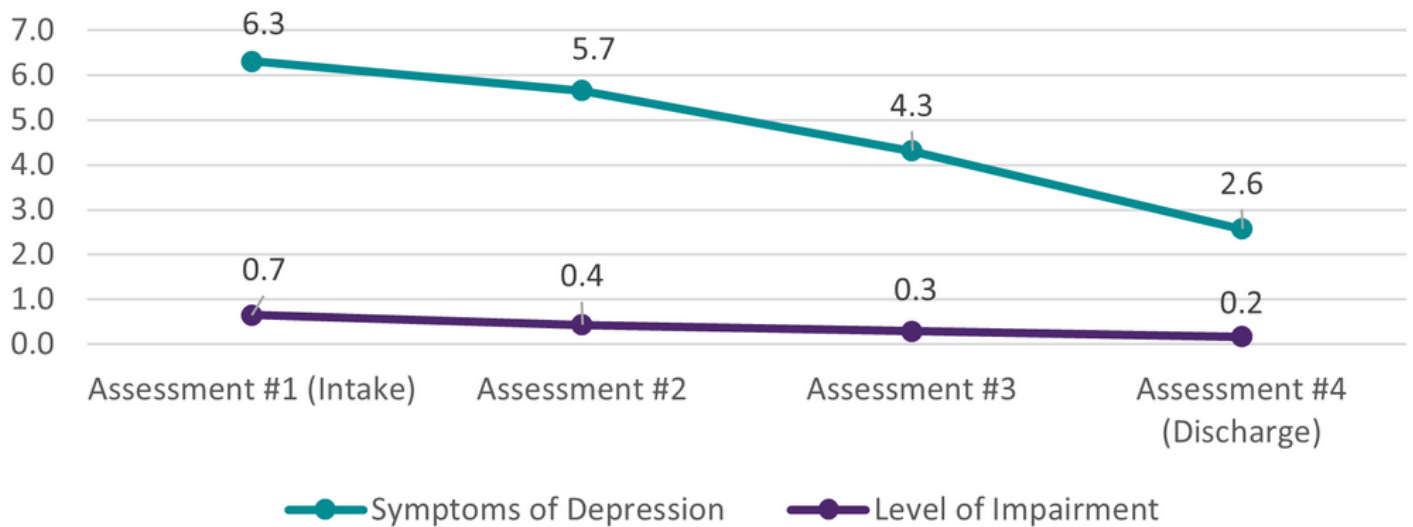
73% decrease in risk factors



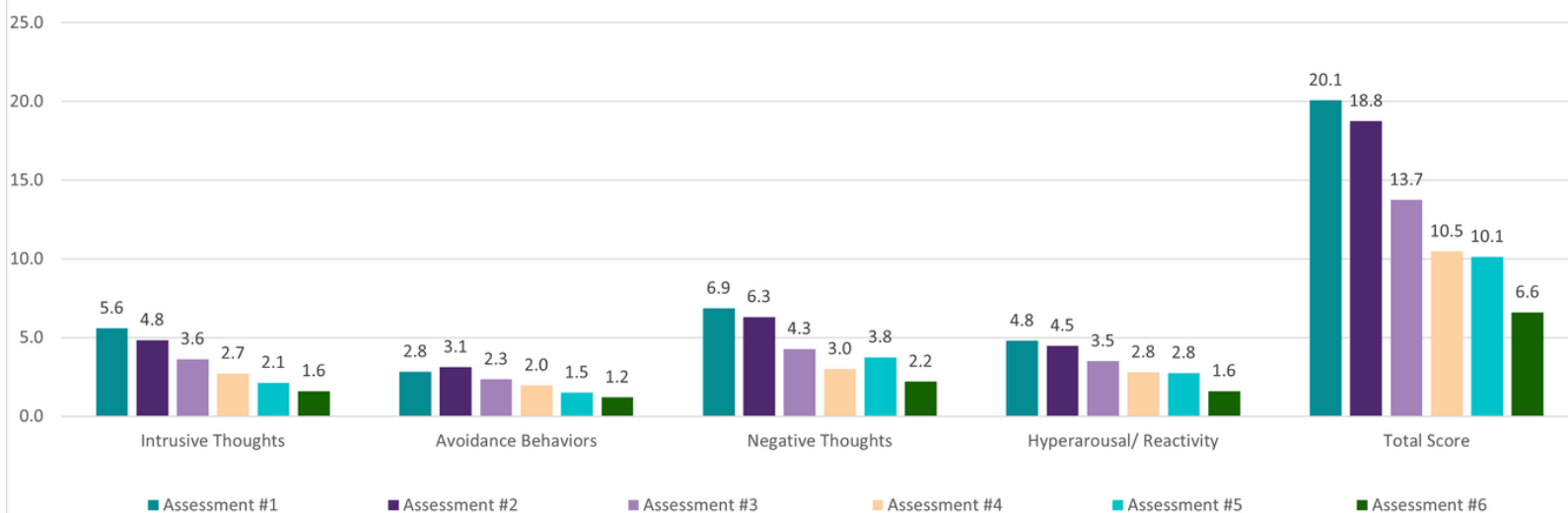
# Treatment Outcomes in IOP



Depression Scores Throughout Treatment (PHQ-9) -  
59% decrease in Depression Score  
74% decrease in Impairment level in IOP



Anxiety/Trauma Scores Throughout Treatment (PCL-5)  
67% reduction in symptoms - IOP





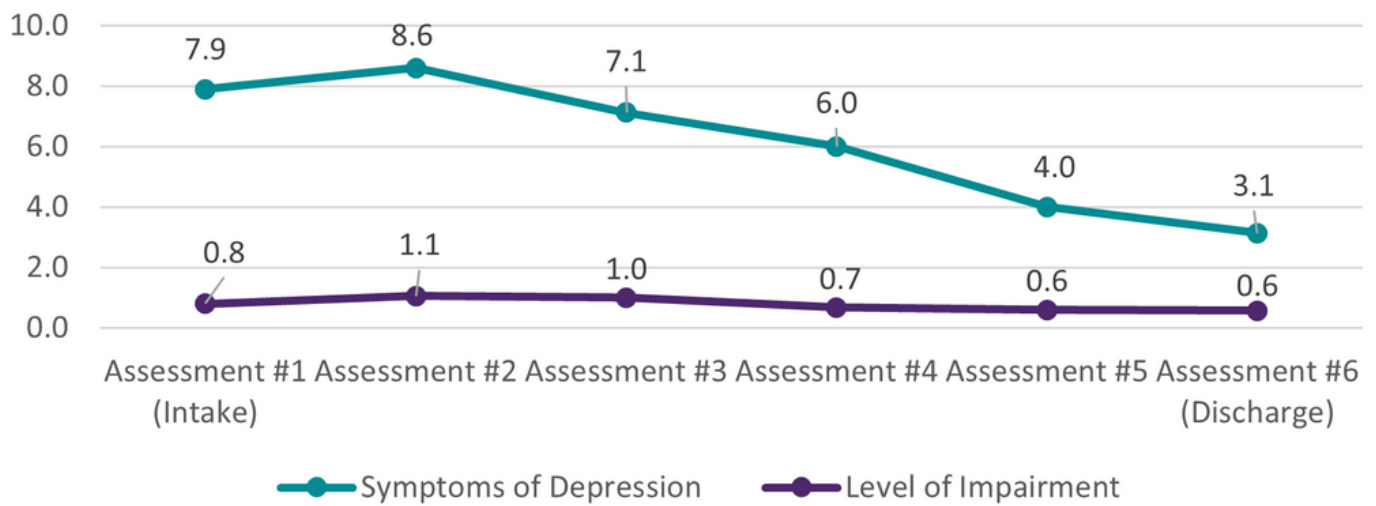
# Client Outcomes in OP



## Depression Scores Throughout Treatment (PHQ-9)

60% decrease in Depression Score

29% decrease in Impairment level in OP



## Anxiety/Trauma Scores Throughout Treatment (PCL-5)

47% reduction in symptoms - OP

