

Sieda Behavioral Health and Treatment Services

Performance Analysis 2025

History

Sieda Behavioral Health and Treatment Services, an Iowa based non-profit agency (under section 501 (c) (3) of the Internal Revenue Code), is licensed to provide substance abuse treatment for Adult and Adolescent services by the State of Iowa. The alcohol and drug treatment program were conceived as the Sieda Alcohol Project in September 1976, under the auspices of the Southern Iowa Economic Development Association. A project director was hired in September 1976. A data coordinator secretary was hired to assist the director. In November 1976, a senior counselor was taken on board. In December 1976, two additional counselors were employed as outreach counselors: one counselor to serve the central Ottumwa office and one in Centerville to serve Appanoose, Lucas, and Wayne Counties. In January 1977, a third counselor was hired to serve Jefferson and Van Buren Counties. Offices were established in Centerville and in Fairfield for those areas. In the fall of 1977, a contract was entered into between the Project and St. Joseph Hospital in Ottumwa, to provide therapy treatment in an inpatient basis at that hospital.

From the onset, the Sieda organization was to be the administrative vehicle to get the program started. When the time arrived and financing was arranged, the program was to "spin off" from Sieda control and become a separate nonprofit corporation with its own governing authority to administer the program.

Articles of Incorporation were filed with the state of Iowa and on November 7, 1977 the South Central

The Council on Alcoholism and Drug Abuse assumed legal responsibility for the management of the project. The project director was named Executive Director, the hospital program continued, and additional staff was hired to take care of administrative work, as well as expansion of services to all counties on to permanent basis. Therefore, two more counselors were added as directed by the new Governing Authority of the Corporation.

In July 1978, the Board of Directors requested an on-site survey by the Department of Substance Abuse for the purpose of giving the board some idea of how the agency was progressing. The Board accepted the resignation of the Director on July 25, 1978 and appointed an Acting Director until a new one could be hired. A new Executive Director was hired on October 23, 1979. In the interim period, new quarters were secured and the central office of the agency moved from 211 East Second to Suite 302 at 106 North Market Street in Ottumwa.

On January 22, 1980 the Executive Director submitted his resignation to the Board of Directors. The Agency was reorganized and on June 24, 1980 the Board of Directors voted to change the agency name to Drug and Alcohol Services, Incorporated; however, this name was unacceptable due to its

similarity to another agency. The word "Incorporated" was dropped and after filing the change with the Secretary of State, the agency official became known as "Drug and Alcohol Services, Corporation".

Following the resignation of the current Director in March 1981, the Board of Directors of Drug and Alcohol Services Corporation approached Southern Iowa Economic Development Association (the original "parent" organization of the program) with a proposal to reestablish the program under the Sieda Corporate structure. Following discussions with both Boards and the Iowa Department of Substance Abuse, Drug and Alcohol Services Corporation entered a management contract with Sieda to manage the program until the completion of the current contract year, effective April 1, 1981. An Interim Director was appointed from the Sieda staff. An application to administer the program was submitted to and subsequently approved by the Iowa Department of Substance Abuse for Fiscal Year 1982.

Effective July 1, 1981 Articles of Dissolution were filed with the Secretary of State on behalf of Drug and Alcohol Services Corporation and Southern Iowa Economic Development Association became the legal entity responsible for the management of Sieda Drug and Alcohol Services. A permanent Program Director was appointed on August 1, 1981. On October 4, 1982 the central Drug and Alcohol Services office was relocated to 226 West Main Street in Ottumwa, to join the central administrative complex of Sieda. The program continues to function under the auspices of Sieda and its Board of Directors.

In January 1999, the Division Director left Sieda. The organization subsequently entered into a management contract with the Mid-Eastern Council on Chemical Abuse (MECCA) to provide management of the Drug and Alcohol Division of Sieda. In March 2006, Sieda Substance Abuse Services ended their management contract with Mecca and has returned to employing a full-time Director. In September 2013, the Board approved changing the name to Sieda Behavioral Health and Treatment Services.

Locations

Sieda Behavioral Health and Treatment Services operates out of ten locations in southeast Iowa. Our home office is located at 310 West Main in Ottumwa, Iowa 641-683-6747. Sieda Behavioral Health and Treatment Services operates at the following locations:

Centerville: 111 North 13th Street (641-683-6747)

Fairfield: 2200 West Jefferson Street (641-683-6747)

Fairfield Pence Elementary (641-683-6747)

Fairfield Washington Elementary (641-683-6747)

Fairfield High School (641-683-6747)

Oskaloosa (owned): 114 North Market Street (641-683-6747)

Albia: 1117 Benton Ave at Trinity United Methodist Church (641-683-6747)

Chariton: 111 South Grand (641-683-6747)

Corydon: 203 North Franklin (641-683-6747)

Keosauqua: 902 4th Street (641-683-6747)

Sigourney: 114 West Washington, PO Box 228 (641-683-6747)

Bloomfield: 203 South Madison Street (641-683-6747)

Philosophy (Theories) and Approach (Staff Training and Supervision)

It is the philosophy of this agency that substance uses and multi-occurring disorders entail psycho/social/behavioral aspects of persons served' lives and our services must therefore address each of the persons served with establishing goals for each aspect of their lives. Furthermore, it is the philosophy of this agency that the needs of our community in the area of substance abuse treatment and multi- occurring disorders, prevention and education can best be met by utilizing a diversified approach that encompasses, but is not limited to, Assessment/Evaluation, OWI evaluation, Continuing Care, Individual

Outpatient Treatment (English and Spanish), Outpatient Group Treatment at the IOP and EOP level, Problem Gambling Service (Mahaska and Keokuk offices, Multi-occurring, Seeking Safety Group, Access to Recovery Services, Mental Health Services and Medication Assisted Treatment (MAT).

Sieda Behavioral Health and Treatment Services encourages persons served to voice their choices regarding their care and referrals to linked resources that sustain their recovery. All professional staff have training in evidence-based practices along with annual training in cultural competence, health and safety, critical incident prevention and reporting and remedial actions, non-violent safety training, rights of persons served, person and family centered services, confidentiality and expectations regarding professional conduct.

Services Offered

Over the past year Sieda Behavioral Health and Treatment Services as provided services to approximately 1500 individuals for addiction, and mental health co-occurring conditions. Services provided include assessment, treatment planning and individual and group therapies.

We offer services in each county within our 10-county area. All of our offices are located with regard to persons served accessibility. We also attempt to make appointments for people served in a timely manner. We have a walk-in evaluation/assessment day in Ottumwa to enhance our accessibility. Persons served are evaluated and placed in treatment at the least restrictive ASAM level of care (efficiency). Clients are monitored weekly in IOP and every 30 days in EOP to assess their on-going appropriate placement (efficiency). Within each ASAM level of care services are offered to target the persons served needs with the minimum amount of time spent in that level of care. Effective services

are shown when clients meet treatment goals and are either able to transition to a lower level of care or discharge from the program. Effectiveness is also shown through updated ASAMS as level of risk and level of care numbers decrease. Transition/discharge plans also document the effectiveness of services. Further person-served surveys are used to obtain information from clients about effectiveness, efficiency and accessibility of services. We continuously seek to improve our services in these areas. In addition to substance abuse treatment, we offer mental health services in the Ottumwa office and MAT in all 10 counties, although medication (dosing) is offered in the Ottumwa office.

Our staff is comprised of 23 employees. We have a Unit Director who holds a LMHC, LMSW and IADC, a Clinical Supervisor who holds a LMHC, LMSW, an IADC, an Assistant Clinical Supervisor with an IADC, and a counseling staff with a LMHC. All our counselors hold either a mental health or social work license, are certified alcohol or drug counselors or are in training to become certified alcohol and drug counselors. We have 4 prevention staff. There are Certified Prevention Specialists. We have access to Recovery staff and 2 support staff, a Financial/Support Specialist, and a Billing Support Specialist. We all work well together to ensure best practices and philosophies and tailor and effective plan for each individual client as well as family members in certain cases. Sieda Behavioral Health and Treatment Services provides intensive, extended, and continuing care outpatient services.

Sieda Behavioral Health and Treatment Services programs are designed for substance abusers, mental health clients and their families to receive treatment services in the least restrictive environment. No person served is denied admission based on gender, race, creed, religion, sexual orientation, physical or psychological disability and level of literacy, nation of origin, education level, or socioeconomic status.

Sieda Behavioral Health and Treatment Services obtained CARF accreditation and provide the following services:

Intensive Outpatient Treatment: Integrated: AOD/MH

Outpatient Treatment: Integrated: AOD/MH (Adults, Children and Adolescent)

Prevention: Alcohol and other Drugs/Addictions (Children and Adolescents).

Below are descriptions of the programs Sieda Behavioral Health and Treatment Services offers.

Intensive Outpatient Treatment (ASAM Level 11.1)

The people served must meet ASAM criteria for Level 11.1. Persons served appropriate for this level of care meet diagnostic criteria for substance abuse or dependence, have significant histories of substance use, have multiple need areas related to their substance use, but demonstrate sufficient motivation and environmental support to suggest they can remain abstinent during their involvement with treatment. All persons served will also be screened for potential problem gambling, mental health symptoms, physical health symptoms or other multi-occurring disorders. This program includes individual counseling, group counseling, family counseling as needed, referrals as needed, treatment planning and review and discharge planning.

Hours of programming: At least nine hours per week. Normally 12 hours of group services per week and weekly individual or family sessions.

Length of Stay: Normally 21 days of IOP services followed by 91 days of EOP and up to one year of Continuing Care.

Treatment plan review schedule: Every seven days.

Outpatient Treatment (ASAM Level I):

Persons served meet diagnostic criteria for abuse or dependency but have limited histories of substance use and report sufficient environmental support to believe the persons served can remain abstinent while involved in treatment services. All persons served will also be screened for potential problem gambling, mental health symptoms, physical health symptoms or other multi-occurring disorders. This program includes individual counseling, group counseling, family counseling as needed, referrals as needed, treatment planning/reviews, discharge planning.

Hours of Programming: Less than nine hours of services per week.

Length of stay: Normal length of stay is 91 days.

Treatment plan review schedule: Every 30 days.

Continuing Care Admission (ASAM Level I)

Persons served must meet ASAM criteria for Level I and have completed primary treatment in one of Sieda's treatment programs or be referred from another treatment resource following completion of primary treatment. All persons served will also be screened for potential problem gambling, mental health symptoms, physical health symptoms or other multi-occurring disorders. This program includes individual counseling, group counseling, family counseling as needed, referrals as needed, treatment planning/ reviews, discharge planning.

Hours of programming: weekly group meeting and for a minimum of monthly individual sessions

Length of stay: Normal length of stay is up to one year

Treatment plan review schedule: Every 30 days

Within our Intensive Outpatient Treatment and Outpatient Treatment, we also offer specialty groups. They are the following:

Co-Occurring Group

This group educates on both substance abuse and mental health issues and deals with problems specific to those suffering from both conditions. Education, individual and group therapy are available. Any persons served who have a mental health diagnosis and/or who meet criteria based on MHSF-III is eligible.

We also offer a second Co-occurring Group for those persons served with substance abuse and chronic mental health issues.

Hours of Programming: 1.5 hours/week

Length of stay: Normal length of stay is 3-6 months

Treatment plan review schedule: Based on current of care (see above).

Seeking Safety Group

This group educates on both substance abuse and past trauma and deals with problems specific to those suffering from both conditions. Any persons served who have experienced trauma are eligible.

Hours of Programming: 1.5 hour weekly

Length of stay: Normal length of stay is 3-6 months

Treatment plan review schedule: Based on current level of care (see above)

Prevention Services

Sieda Substance Abuse Prevention Services views substance abuse as a health problem and utilizes the conceptual foundation of the Public Health model that recognizes the Host, the Agent and the Environment as three distinct factors that are impacted by our prevention efforts. The host is the individual using the substance, the agent is the substance itself and the environment is the influences that affect decisions regarding use of substances. It is important to address all three factors (Host, Agent, and Environment) in an effective, comprehensive substance abuse prevention strategy.

Prevention services will be coordinated with other levels of care on the continuum of substance abuse services. These substance abuse services range from primary prevention, early intervention, treatment, and aftercare. Services must be provided in multiple settings that access community members of all ages. Schools, churches, business/employment fairs, community meetings, workplace settings and health fairs are all appropriate locations to deliver the prevention message. Sieda Behavioral Health and Treatment Services promotes low risk choices regarding the use of alcohol and other drugs in our prevention programming. The result is that the clients first exposed to Sieda in a prevention program then those who subsequently access treatment service will recognize messages that they have encountered in other settings.

Sieda's prevention program will include the Public Health model for disease prevention, multi-strategic approach, risk and protective factors developed to influence substance use, and emphasize abstinence and low risk choices in our prevention program. Sieda will outline specific community-based goals and objectives involving each county plan and involving all community stakeholders.

Early Intervention (ASAM Level 0.5/Prevention)

The person served must meet ASAM criteria for level 0.5. Persons served appropriate for this level of care include those individuals who have limited history of substance use problem gambling, mental health symptoms, physical health symptoms or other multi-occurring disorders, combined

with significant risk factors that place them at high risk for development of substance abuse/multi-occurring related difficulties in the future.

Hours of Programming: Twice monthly

Length of stay: Two 1.5-hour groups

Treatment Plan Review Schedule: NA

Children and Adolescents

The people served must meet ASAM criteria for Level I and Level 11.1. The clients served meet diagnostic criteria for abuse or dependency but have limited histories of substance use and report sufficient environmental support to believe the persons served can remain abstinent while involved in treatment services. All persons served will also be screened for potential problem gambling, mental health symptoms, physical health symptoms or other multi-occurring disorders. This program includes individual counseling, group counseling, family counseling as needed, referrals as needed, treatment planning/reviews, discharge planning.

Hours of Programming: Level I: Less than 9 hours of service weekly

Length of stay: Normal length of stay is 91 days

Treatment plan review schedule: Every 30 days

Hours of Programming: Level 11.1: At least nine hours per week.

Length of stay: Normally 21 days of IOP services followed by 91 days of EOP and up to one year of Continuing Care.

Treatment plan review schedule: Every 7 days.

Mission, Vision and Values

Sieda Behavioral Health and Treatment Services performed the yearly review of the Mission, Vision, and Values. This is conducted for the purpose of improving the quality of programs and services.

Mission: Sieda Behavioral Health and Treatment Services mission is to improve mental health and reduce substance abuse and multi-occurring issues within the communities we serve by providing quality comprehensive prevention and treatment services that encompass all aspects of persons served life.

Vision: Sieda Behavioral Health and Treatment Services will be a preferred provider of prevention and treatment services. We are dedicated to improving the quality of life of individuals, families, and communities in Southern Iowa affected by substance abuse, gambling, mental and physical health concerns through a recovery-oriented system of care, including strengths, needs, abilities, and preferences of persons served.

Values: Sieda Behavioral Health and Treatment Services values include:

- Continuously provide a welcoming, hopeful, and empathic environment
- Treating everyone with dignity, honesty, and respect
- Promoting a team environment
- Promoting a culture of change
- Promoting professional development and personal growth of our staff
- Responsive to the needs of our community
- Continuously improving all aspects of our unit

Strategic Plan

The Strategic Plan is posted on Sieda.org

ACCESSIBILITY PLAN FY 2025

Architectural

Goal A: Improve the safety of staff and clients when entering our offices.

Positives Identified: Sieda puts salt on sidewalks that are owned and rented.

Barriers Identified: All offices can be slippery outside the front door.

Goal: Keep salt by the entry door in order to have easy access to the salt to put on the sidewalk.

Responsible Party: All Employees

Target Date: On-going

Completion Date:

Results of Target Date:

Action Plan:

Environmental

Goal A: Improve safety

Positives Identified:

Barriers Identified: Staff using space heaters

Goal: Staff will be trained on space heaters at orientation and bi-annually

Responsible Party: Assistant Clinical Supervisor and Medical Director

Target Date: N/A

Completion Date: on going

Results of Target Date: N/A

Action Plan: N/A

Attitudinal

Goal A: Need to survey clients again on their experience at Sieda

Positives Identified:

Barriers Identified: Consumer input is needed on the clinical side.

Responsible Party: Management Team

Target Date: on-going

Completion Date: N/A

Results of Target Date: on-going

Action Plan: N/A

Financial

Goal A: Receive payments from HHS on a regular basis. Medical Billing/Support Specialist will continue to work closely with Insync (EHR and Clearinghouse) and to make sure billing SNMIS is correct and Sieda receives payment from HHS

Positives Identified: Medical Biller stays on top of billing and works with Insync and clearinghouse and bills SNMIS and Sieda receives payment from HHS.

Barriers Identified: SNMIS denies claims and do not pay claims or pay incorrectly.

Responsible Party: Medical Billing/Support Specialist

Target Date: ongoing

Completion Date: ongoing

Results of Target Date: This is ongoing.

Goal A: Receive payments from MCOs and IME on regular basis. Medical Billing/Support Specialist will continue to bill, review and dispute denials, and continue to hold MCOs accountable per our contracts

Positives Identified: Medical Biller stays on top of billing and works with MCOs and IME regarding payments.

Barriers Identified: MCOs and IME pay incorrectly and Medical Biller spends a lot of time trying to correct payments.

Responsible Party: Medical Billing/Support Specialist

Target Date: ongoing

Completion Date: ongoing

Results of Target Date: This is on-going.

Action Plan: N/A

Employment: No goal at this time.

Communication: No goal at this time.

Transportation

Goal A: Behavioral Health and Treatment Services will provide options for persons served with transportation barriers for our MAT clients

Positives Identified: We distribute bus passes and gas cards to clients.

Negatives Identified: Transportation continues to be an issue for clients in counties that don't offer taxi's or busses.

Responsible Party: Clinical Supervisor and Assistant Clinical Supervisor and front desk person

Target Date: ongoing

Completion Date: ongoing

Results of Target Date: This will be on-going.

Action Plan: Will continue to look at options.

Goal B: Increase service provisions in areas of greatest need such as homeless shelters, jails, hospitals, etc.

Positives Identified: We provide evaluations at the jails. We are working with Ottumwa Crisis Center.

Negative Identified: Hospitals are hesitant for Sieda.

Responsible Party: Clinical Supervisor, Assistant Clinical Supervisor

Target Date: ongoing

Completion Date: ongoing

Results of Target Date: This will be ongoing.

Action Plan: We will continue to work on this.

Community Integration:

Goal A: Expectation is all clients will have a family session and/or collaboration phone session while the client is in treatment

Positives Identified:

Negatives Identified: Family participation should occur with all clients

Responsible Party: Assistant Director, Assistant Clinical Supervisor

Target Date: Monitor on an ongoing basis

Completion Date: Ongoing

Results of Target Date: This will be ongoing

Action Plan: We will continue to work on this.

Staff Recruitment and Retention:

Goal A: Hire and retain qualified staff who are dedicated to upholding our Unit's mission, vision, and values

Positives Identified: Maintain competitive salaries and benefit package

Barriers Identified: No barriers identified.

Responsible Party: Unit Director, Clinical Supervisor, Prevention Supervisor, and hiring committee

Target Date: Ongoing

Completion Date: Ongoing

Results of Target Date: Ongoing

Action Plan: Ongoing

Policy Review:

Goal A: Keep up to date policy and procedures regarding accessibility

Positives Identified: We continue to review and revise policies and procedures as needed.

Barriers Identified: No barriers identified

Responsible Party: Unit Director, Assistance Director

Target Date: Annually/ongoing

Completion Date: Annually/ongoing

Results of Target Date: Ongoing

Action Plan: Ongoing

Cultural Competency and Diversity Plan

Cultural Competency and Diversity Plan – 2025 Sieda Community Action Behavioral Health & Treatment Services

Culturally Competent Organization

A culturally competent organization is characterized by:

- 1) Acceptance and respect for difference
- 2) Careful attention to the dynamics of cultural differences
- 3) Continuous expansion of cultural knowledge and resources

4) Adaptation of service practices to meet the needs of diverse populations

Sieda Behavioral Health & Treatment strives to manifest its cultural competence in valuing diversity, having the capacity for regular self-assessment, being conscious of the dynamics among different cultures, institutionalizing cultural knowledge, and adapting practices to cultural diversity. We practice inclusion by making each employee and family we serve feel welcomed, respected, supported, and valued as a team member. Because inclusion is a two-way accountability, we expect every employee to grant and accept inclusion from others when communicating and collaborating at work by being sensitive to different cultural backgrounds.

Sieda Behavioral Health and Treatment Services serve clients in the following counties: Appanoose, Davis, Jefferson, Keokuk, Lucas, Mahaska, Monroe, Van Vuren, Wapello and Wayne. The target population will be the Hispanic/Latino population in all ten counties listed above.

Sieda spoke with clients, stakeholders, family members, concerned persons, and employees. The consensus is that the Hispanic population is overrepresented in arrest and poverty rates. Feedback from our Hispanic clients and providers report a significant service gap of Spanish speaking providers and/or interpreters. Hispanic clients seeking services in our communities are often asked to bring their own interpreter and that family members are often used as interpreters for services.

At Sieda Behavioral Health & Treatment Services, we view cultural competence as a core value and firmly believe diversity is a source of strength and vitality. Substance use does not discriminate, and can impact anyone, therefore, it is essential the Sieda actively welcomes and extends services to all individuals.

Our plan is to provide a cultural diversity training for new employees at orientation and two in-house trainings within a year to employees relevant to cultural competency and diversity, specifically Spanish speaking clients. We will work with the Diversity Planning Committee on obtaining speakers how can provide training at Sieda. Sieda is also, working on employing a Spanish speaking substance use disorder counselor and Spanish speaking interpreter. We are having employees attend the Diversity Conference in Ottumwa and other outside Cultural Diversity trainings.

Risk Management Plan

Risk management is a continuous process aimed at minimizing the adverse financial consequences caused by but not limited to financial uncertainty, legal liabilities, strategic management errors, accidents, and natural disasters. Risk management practices will encompass managerial process, systematic processes and continuously evaluate for threats of loss.

The focus of Sieda Behavioral Health & Treatment Services Risk Management Program is to preserve financial assets by assisting in implementing and utilizing sound risk reduction principals. Established duties of responsibilities, segregation of duties, and avenues of communication on risk management throughout Sieda has been identified in job descriptions of staff members. Sieda will reduce the concern of malpractice by ensuring appropriately credentialing of staff and adopt only industry supported evidence-based practices. Sieda will annually review and train employees on risk management and ensure employees are able to perform duties on fidelity. Sieda furthermore will maintain professional liability insurance to further protect from loss or wrongdoing. Risk management concerns and corrective action plans will be provided to the board of directors which will provide continued support and guidance.

The most effective way to reduce losses is for Sieda employees to make every effort to create a safe workplace environment, identify potential hazards, and take corrective action to prevent injuries and losses from happening. (re: Safety Policy)

- **Liability Loss Exposures.**

Sieda Behavioral Health & Treatment Services ensures there is current and adequate business insurance policies to address liability loss exposures which may stem from accidents, whether intentional or accidental or civil or criminal. General liability insurance, professional liability insurance, employee practices liability insurance.

- **Income Loss Exposures.**

The most common types of income loss exposures business insurance policies are loss of income insurance, loss of income extra expense insurance, life insurance, business interruption insurance and disability insurance. Income loss exposures affects the financial cash flow of a small business. For instance, claims or losses of income may be from loss of sales, or may be due to an injury, sickness, disability, or loss of employment. Management will annually review all insurance policies and internal practices to ensure they are adequate, sufficient, and sustainable. These policies will be maintained by the CFO and/or Executive Director.

Internal fiscal audits will occur regularly and on-going and will review for productivity standards, fraud, claim submissions, billing errors, and waste. The internal audits will ensure evidence-based accounting practices are being utilized. Internal audit reviews will be conducted by QI, Management team and as part of the strategic planning. These internal audits will be reported to the director upon completion.

Sieda Behavioral Health & Treatment Services will annually contract for the completion of an external audit to verify organizational fiscal practices and will actively address any concerns of risk from the external audit.

- **Property Loss Exposures.**

Property loss exposures claims may arise from loss of a Sieda buildings, automobile, inventory, tools and equipment and furniture due to fire, lightening, vandalism or malicious mischief, hail, tornado, flood, explosion, theft, water damage including flood, earthquake, or any other destructive event. Additionally, property loss exposures can include intellectual property, accounts receivables and accounts payable. Sieda maintains current and adequate insurance coverage for these events.

- **People Loss Exposures.**

Sieda Behavioral Health & Treatment Services provides Group Medical Insurance Coverage to employees, Workers Compensation Insurance to assist with exposure to injuries, and life insurance. To further support maintain a qualified workforce the agency will provide on-going training, assistance with professional licensure, and tuition reimbursement.

- **Emergency/Safety Procedures:**

Numerous emergency procedures have been developed to ensure the safety of staff, patients and visitors which include:

- Bomb Threat Emergency
- Critical Incident
- Emergency Communications
- Fire/Tornado Procedures
- First Aid Procedures
- After Hour Access
- Controlled Drugs

Rules and Regulations
Weapons
Work related Injuries

Refer to the Emergency/Safety Policies for further detail.

- **Financial Loss**

Processes are identified in the Fiscal Management Policies on procedures to ensure positive financial status of Sieda.

Segregation of duties is a priority to allow for safeguarding the organization from fraudulent practices.

- **Exclusion**

Sieda Behavioral Health & Treatment Services will not directly or indirectly contract or sub-contract for services with individuals or entities that have been deemed excluded from federally funded healthcare programs. Additionally, Sieda will be diligent in verifying exclusion with all individuals, entities, and stakeholders prior to formalizing any MOU or BAA.

Sieda Behavioral Health & Treatment Services Board of Directors annually reviews and approves all insurance policies for the organization.

Analysis of Critical Incidents

Analysis of Critical Incidents in Behavioral Health and Treatment FY 2025

Causes:

During the past year no Critical Incidents have occurred in Behavioral Health and Treatment to our persons served or staff while in our care.

We have not had any critical incidents of staff during the last year.

Trends:

We have not noticed any trends. We have recognized that we have prevented accidents happening through training, supervision, consultation with working with an outside health and safety inspector. In addition, many staff have been working from home, which Sieda believes have helped with not having any critical incidents.

Actions for Improvement:

We will continue to provide the following:

- 1) Staff receive training on critical incidents.
- 2) Emergency drills are provided at all 10 locations biannually.
- 3) The Emergency Phone call numbers was developed and will be updated as necessary.
- 4) Fire safety and fire extinguisher training is provided to staff by the Ottumwa fire department annually.
- 5) A self-assessment has been developed for safety and is conducted biannually.
- 6) Blood borne Pathogen training is provided to staff annually.

- 7) An outside agency conducts a safety inspections at all sites and provides recommendations for improvements of the facility to reduce the risk of critical incidents. Deputy Director was given the areas of improvements that were suggested to be improved with collocated Sieda units. Deputy Director has followed up with the recommendations at each site.
- 8) Clinical staff are trained annually regarding clinical critical incidents.
- 9) Clinical staff attend case staffing and clinical supervision to discuss suicidal ideation, etc.
- 10) Written procedures concerning hazardous materials is documented in Behavioral Health and Treatments Service's Policy and Procedure Manual.

Results of Performance Improvement Plans:

The continuation of Actions for Improvement is working. All incidents that have appear over the last couple of years have been handled appropriately with supervision and peer supervision being utilized to generate the appropriate handling of critical incidents.

Necessary Education and Training of Personnel:

We have yearly trainings in the following: Reduce Identified Physical Risks, Health and Safety Practices, Identification of unsafe Environmental Factors, Emergency Procedures, Evacuation Procedures, Identification of Critical Incidents, Reporting of Critical Incidents, Reducing Physical Risks, Infections, and Communicable Diseases. Our plan is to add more trainings if needed and appropriate.

Prevention of Recurrence:

We will continue to do what we are doing, monitor our plans and make necessary changes to our plans.

Internal Reporting Requirements:

"Our Policy" When a perceived crisis situation occurs at Sieda staff must adhere to the following plan of action:

1. If an individual is experiencing a personal crisis situation (emotional, medical, substance, etc.) staff will work with the person served to develop a personal safety plan and ensure that the person served is stable before supporting allowing them to leave the facility or send them to seek another referral service.
2. If a crisis occurs that involves other people in the office/community (injury, death, other act of violence/violation, etc.) staff will arrange for a Critical Incident Stress Debriefing (CISD) to be conducted in a timely manner. The CISD will be available to any person impacted the crisis event and will allow for individual processing of traumatic experiences.
3. If a natural/community disaster occurs (flooding, tornado, fire, etc.), staff will work with the administration to arrange for needed disaster recovery services (debriefing, counseling, referral, etc.) for all persons affected.

Sieda Community Action has its own form for critical incidents. See attachment. Sieda states "an incident is any happening which is not consistent with the operations of a facility." Sieda staff are instructed to fill out Sieda's critical incident form for persons served, staff and others who are in our premises. The form is given to the Fiscal office when an accident is an employee. The form is given to our Deputy Director when the accident is a non-staff member.

Precautions will be taken to avoid the occurrence of critical incidents.

External Reporting Requirements:

Amerigroup of Iowa has a "Critical Incident Report" form. Sieda staff complete the form and fax the form to Amerigroup within 24 hours of incident. See attachment.

Analysis of Formal Complaints

Analysis of Formal Complaints FY25

Trends:

During the past years no Formal Complaints have occurred in Behavioral Health and Treatment Services. We have noticed that we have avoided complaints by having updated rights of clients served, and employees and make them known.

Areas needing Performance Improvement:

At this time there are no areas for improvement, although we believe it is important that we continue to monitor this area.

Actions to Be Taken:

We will continue to provide the following:

- 1) Update Policies and Procedures as needed.
- 2) Gathered and keep documentation of formal complaints received.
- 3) Update our Personnel Policies and Procedure manual, orientation materials, and information regarding rights.
- 4) Update policies addressing the rights of the persons served.
- 5) Complete a yearly Analysis of Formal Complaints

Technology and Systems Plan

Technology and Systems Plan (TSP) – FY 2025

Sieda Community Action Behavioral Health and Treatment Services

Ottumwa, Iowa

This Technology and Information Systems Plan was developed in response to a national accreditation standard that requires accredited organizations to formally document their plans regarding technology and information systems. For clarification, the formal plan was developed as an “after the fact” initiative; since Sieda Community Action Behavioral Health and Treatment Services has been involved in installing, maintaining and upgrading its electronic information management system for several years prior to the CARF requirement to have a formal TSP.

The plan was developed to reflect ongoing initiatives as well as future projections regarding both hardware and software acquisitions and installation and, has been approved by the leadership of Sieda Community Action Behavioral Health and Treatment Services. The TSP serves as an information and planning document for technological improvement but does not represent a commitment for funding. Funding will be incorporated into the organization’s normal budgeting process. It is emphasized that the plan may be modified at any time as a result of other corporate needs, changes in client population, emerging business trends or changes in the general economy. The following describes the organization's current and future planning initiatives relative to technology and information systems:

PHILOSOPHY: The leadership of Sieda Community Action Behavioral Health and Treatment Services recognizes that staff productivity can be enhanced through the use of technology for information management and

record keeping. The organization is committed to maintaining a state of the art computer system to enhance record keeping and improve both the quality and speed of client-related documentation. The Executive Director is in charge of all technology services at Sieda. The organization utilizes contracted computer/management information services through Citizens Mutual Telephone.

HARDWARE: The organization utilizes an internal network that consists of a dedicated server and individual, workstations (desktop PCs) throughout the organization. A new file server, and terminal server were installed in Fall of 2019. The agency maintains hardware VPN connections to each of its locations to allow for access to internal staff resources.

SOFTWARE: Sieda Community Action Behavioral Health and Treatment Services uses Microsoft Office and Windows 11 for individual workstations. All software is installed by the organization's computer consultant and no other software can be installed without their permission. Strict management control and oversight of software installation is viewed as a critical element of the organization's efforts to maintain confidentiality of all stored information. Sieda's current EMR is InSync, a web based server. Several substance abuse agencies purchased InSync together in order to save costs. All security and maintenance of this system falls to them.

SECURITY: Security is provided through (1) password protection for each individual PC/workstation, (2) password protection for the server itself, and (3) "need to know" access to system documents and files based solely on job title and individual responsibilities. When employees leave the organization, their accounts – and accessibility to the system – is immediately terminated by the computer consultant. Each agency staff member has a user identifications and passwords in accordance with the state procedure for these.

CONFIDENTIALITY: The system contains protected health information as defined by HIPAA. Confidentiality of information is maintained through the security provisions identified above and by the fact that all workstations are password protected. EMR, itself, is also password protected. More important, those PCs used by clinical staff are located in a secure area where clients must be escorted by a staff member. The agency's email service is through Google Apps for Nonprofits. The agency also maintains a BAA with Google to stay HIPAA compliant. Each staff member also has a confidentiality statement included in their outgoing email.

BACK-UP POLICIES: Sieda Community Action uses a Barracuda system to back-up the servers on a nightly basis. This back-up is housed off site.

ASSISTIVE TECHNOLOGY: At present, the organization has had no requests for accommodations relative to assistive technology. However, a number of bigger, flat screen monitors have already been purchased and installed to enhance the "readability" of computer generated data. In the event that employees need special accommodations such as glare screens, voice recognition software, etc., the organization's leadership will consider and fund such requests on a case by case basis and as organizational finances allow.

DISASTER RECOVERY PREPARATIONS: Prevention is the cornerstone of the organization's disaster recovery preparations. Our internal back-up is housed off site. Our EMR is also housed off site. Precautions would be taken if any impending disaster were predicted.

VIRUS PROTECTION: The organization utilizes has virus protection software which is kept updated and current.

USE OF THIS PLAN: This plan will be reviewed annually by the Executive Director or designee to insure that the plan and all system resources are used to support information management and performance improvement activities. On a day to day basis, staff provides feedback regarding the utility of the organization's computer system to support clinical documentation and billing procedures.

By my signature below, I affirm that this plan has been approved by the management authority of Sieda Community Action Behavioral Health and Treatment Services and will remain in effect until revised and or cancelled in writing.

Revenue

Behavioral Health and Treatment Services is a financially sound unit. Total support and revenues in fiscal year FY24 for treatment totaled \$1,076,631. These dollars consist of state and federal funds and client fees.

Client fees are charged on a sliding fee scale as individual programs dictate. Programming expenses were 898,753 for a net increase in net assets of \$227,681. The Prevention program's total support and revenues in fiscal year 24 was \$177,058 and programming expenses were \$177,058. Under accounting standards published by the United States Office of Management and Budget in Circular 133, Sieda Behavioral Health and Treatment Services is rated as a "low risk" auditee.

Data Collection (IBHRS)

Sieda Behavioral Health and Treatment Services currently collects data on clients as part of the Iowa Behavioral Health Reporting System (IBHRS). The State, HHS uses IBHRS to collect outcome data regarding substance abuse treatment services in the state. The IBHRS instrument is used to collect data to determine outcomes related to health, employment, mental health, physical health and criminal justice status. IBHRS also includes multiple data management capabilities. Data obtained from the IBHRS includes: client data regarding screening and assessment, treatment length and types of modalities; admission and discharge (outcome data); cost data, and agency data (Le., number of eligible clients screened, assessed and treated). The Sieda Behavioral Health and Treatment Services staff access and obtain data from IBHRS on an ongoing basis to allow timely feedback regarding activities and services related to all projects.

We also collect data from MCO's and Person Served Satisfaction Surveys.

Performance Goals and Measure Indicators and Results

Successful Treatment

Objective: Increase the number of persons served successfully completing treatment.

Indicator: Percentage of successful discharges

Person(s) responsible for collecting the data: Clinical Supervisor/Assistant Director, and Assistant Clinical Supervisor

Source from which data will be collected: InSync

Performance Target: Sieda Behavioral Health & Treatment Goal of >50%

We remain diligent about encouraging clients to successfully complete treatment. We initially explain to clients the expectations for successful completion. We also attempt to re-engage clients who are missing either group sessions or individual appointments. We also attempt to notify their referral sources, if there is a release of information. Often referral sources have the necessary leverage to assist clients with their attendance. The more consistent their attendance, the better outcome with gaining appropriate knowledge for recovery and also for successful completion. Counselors remain diligent about attempting to re-engage clients whose attendance has slipped. Clinical Supervisor reminds counselors about the importance of client re-engagement during in-service trainings and regular ongoing supervision. We have reached our goal this year, but would like to see it further increased and will continue with same procedures and also using our stakeholders to assist clients with treatment motivation.

Satisfaction Surveys

Objective: Increase/maintain person served satisfaction with treatment services

Indicator: Increase/maintain person served satisfaction >85

Target: >85 person served satisfaction

To Whom the Indicator will be applied: Person Served

Person(s) responsible for collecting the data: Clinical Supervisor/Assistant Director

Source from which data will be collected: Person Served surveys

Our goal for client responses on client surveys is 85% for all questions, and this goal was met.

Wait time getting into treatment

Objective: Decrease wait time <14 days for clients who inject.

Indicator: < 14 for IV drug users

Target: 90% client served IV drug use will be served within <14 days

To Whom the Indicator will be applied: Person Served

Person(s) responsible for collecting the data: Unit Director, Clinical Supervisor and Assistant Clinical Supervisor

Source from which data will be collected: InSync Report

Performance Target: InSync Report Goal of <90% of IV drug use clients will be served within 14 days.

We have met this goal. All clients are scheduled for an evaluation and program admission within 14 days of contact. The only time this doesn't occur is if clients reschedule appointments or no show. So, within our ability, this goal is met.

Pregnant Women Wait Time <48 hours: Goal 90% Actual: Lower than 90%

Objective: Decrease wait time <48 hours for Pregnant Women

Indicator: <48 hours wait time for pregnant women

Target: 90 person served pregnant women will be served within <48 hours

To Whom the Indicator will be applied: Person Served

Person(s) responsible for collecting the data: Clinical Supervisor/Assistant Director and Assistant Clinical Supervisor

Source from which data will be collected: InSync Resport

Performance Target: InSync report of 90%

Results: 100% of persons served who were pregnant with IV drug use were served within 48 hours (unless client refused).

Sieda Behavioral Health and Treatment Services has relatively few pregnant clients. Our plan is to continue asking female persons served if they are pregnant, both when they call to schedule their appointments, and at the time of their evaluations. At the time of scheduling the evaluation, we will do our best to encourage any pregnant client to schedule immediately and provide education about the urgency for the client and their pregnancy. We offer appointments within the 48-hour timeframe and the appointments are sometimes declined by the persons served.

Improve or maintain perception of harm and risk in the pre and post survey

Indicator: Persons served who participate in the Brain Power Curriculum will improve or maintain their perception of harm and risk in the pre and post survey

Target: 175 or greater persons served report on pre and post survey

To Whom the Indicator will be applied: Persons Served

Person(s) responsible for collecting the data: Prevention Specialist staff and Iowa Consortium for Substance Abuse Research and Evaluation

Performance Target: Iowa Consortium for Substance Abuse Research and Evaluation report Goal of 82% or Greater.

The management committee was unable to review and analyze this goal, as the Iowa Consortium for Substance Abuse Research and Evaluation has not generated reports. We were informed by the Consortium, due to the change in contract dates they will be running the report in the fall of 2018. The new data will come from the Qualtrics Data System.

Stakeholders Survey

Sieda Behavioral Health and Treatment Services sent out electronically a stakeholder's survey. The surveys that were sent out are regarding the awareness and quality of services Sieda offers. The results of the surveys were not plentiful, although those who did reply provided mostly positive results. Sieda will continue to send out the surveys yearly and hopefully they will be more plentiful.

Improvements

Throughout the year Behavioral Health and Treatment Services' management team has recognized, analyzed and made improvements. Below are the areas of improvement that were made and that were identified in our Accessibility Plan, Strategic Plan, Risk Management Plan, Technology and Systems Plan, Cultural Competency and Diversity Plan, Analysis of Critical Incidents, and Analysis of Formal Complaints, Results of Results of Persons Served Survey, and Results of Stakeholders Survey. Sieda Behavioral Health & Treatment has maintained CARF Accreditation since July of 2013. CARF Accreditation signals a service provider's commitment to continually improving services, encouraging feedback and serving the community.

Sieda Behavioral Health & Treatment is working in partnership with UCS Healthcare and providing Medication Assisted Treatment (MAT). Sieda providing treatment and UCS Healthcare providing the medication. Treatment is offered in all ten counties and medication is provided in our Ottumwa office. The InSync business relationship is working out well. We have on-going conference calls and discuss what is going well and areas that need improvement. Sieda is currently using the mental health modular in InSync.

Sieda Behavioral Health & Treatment continues to have very little staff turnover. We believe this is due to increasing wages, staff having a flexible schedule and now the agency is paying for licenses, certifications, and continued education conferences.

Relationships with MCOs has improved. We are beginning to receive payments regularly. Sieda's Medical Billing Specialist continues to develop good working relationships with the MCOs.

Sieda's Prevention staff has remained constant and attended training to ensure knowledge gain. Prevention Specialists continue to assess programming to meet the identified needs of each target population. The Prevention Specialists educates each target audience by providing current, accurate, relevant, and appropriate information regarding alcohol, tobacco, and other drug related consequences to encourage health lifestyles. Each Comprehensive Prevention contract outcome was achieved by collaboration between Prevention Specialists and each community.