

TRANSITION HOUSE, INC. FY'23 GOALS & OUTCOMES

GOAL 1: IMPROVE QUALITY OF LIFE FOR PEOPLE SEEKING RECOVERY THROUGH ENHANCED WELLNESS OPPORTUNITIES.

TRANSITION HOUSE STANDARDS:

- UTILIZE BEST PRACTICES TO DEVELOP AND FACILITATE GROUP CURRICULUM, PLAN MEANINGFUL ACTIVITIES, AND OBTAIN CLIENT FEEDBACK.
- CONTINUE BUILDING AND STRENGTHENING CONNECTIONS WITH COMMUNITY PARTNERS.
- PROVIDE INTENSIVE CASE MANAGEMENT WITH A FOCUS ON DEVELOPING HEALTHY AND MEANINGFUL RELATIONSHIPS, SUPPORT, HOPE, ADVOCACY, AND CONNECTIONS.
- PROVIDE SAFE AND SECURE HOUSING FOR PEOPLE PARTICIPATING IN THE TRANSITIONAL LIVING PROGRAM (TLP).
- PROVIDE AS NEEDED DIVERSE SUPPORT OPPORTUNITIES FOR THOSE SEEKING COMMUNITY OUTREACH PROGRAM (COP) SERVICES.

ACTION STEPS	PROJECTED OUTCOME BY 6/30/23	STATUS – 10/17/22	STATUS – 1/30/2023	FISCAL YEAR END SUMMARY
<ul style="list-style-type: none"> • Acquire additional evidence-based curriculum and materials to support meaningful groups and activities. 	<ul style="list-style-type: none"> • Acquire 1 new set of evidence-based materials. 	<ul style="list-style-type: none"> • New Curriculum materials arrived 10/17/2022 – “Finding Your Best Self” Recovery from Addiction, Trauma or Both (Lisa M. Najavits, PhD – Author of Seeking Safety). 	<ul style="list-style-type: none"> • Acquired a new DSM-V. • Began use of new curriculum – “Finding Your Best Self”. 	<ul style="list-style-type: none"> • Acquired DSM-V TR. • Using “Finding Your Best Self” curriculum. • Purchased materials (workbooks & curriculum) from PESI for groups & individual sessions.
<ul style="list-style-type: none"> • Expand community collaboration and partnerships with local agencies by hosting open houses for network opportunities and engagement in community meetings. 	<ul style="list-style-type: none"> • Host 1 Open House for community providers. • Representatives from the Clinical Team will have 1 on-site visit at COCMHC and GMH. 	<ul style="list-style-type: none"> • Amanda attended a clinical meeting at COCMHC and is working on having GMH clinicians come to TH for a visit. 	<ul style="list-style-type: none"> • Amanda hosted an Open House for GMH Staff. • Connections with both GMH & COCMHC staff have improved. 	<ul style="list-style-type: none"> • 1 Open House at TH. • GMH came to TH for a visit. • 2 visits to COCMHC. • 1 visit to Red Rock Outpatient services. • Amanda is Chair of the Cleveland County Continuum of Care and participates in CCM (Collaborative Case Management) meetings. • Increased collaboration with ODMHSAS Central Office to continue improvements and development of TH programs.
<ul style="list-style-type: none"> • Have COCMHC representative begin attending TH staff meetings 1 time per month to serve as liaison between TH and COCMHC. 	<ul style="list-style-type: none"> • Have a COCMHC representative attend 4 TH Staff meetings. 	<ul style="list-style-type: none"> • Johnna, COCMHC Clinical Director, has attended 2 Staff meetings at TH and has provided increased consultation services for TH. 	<ul style="list-style-type: none"> • COCMHC’s former Clinical Director and now new Interim Clinical Director are routinely attending 1 TH staff meeting/month. 	<ul style="list-style-type: none"> • Had consistent monthly meetings with COCMHC Clinical Director plus as needed meetings to address client issues and expand communication.
<p>Transitional Living Program (TLP):</p> <ul style="list-style-type: none"> • Develop and maintain healthy connections with clients in the TLP. • Determine client needs that cannot be met at TH, and work to advocate and refer for additional support. • Monitor and maintain cleanliness, comfort, and safety at TLP apartments. • Provide supportive counseling. 	<ul style="list-style-type: none"> • 80% of the TLP clients establish and maintain healthy therapeutic relationships with their Recovery Coordinator. • 90% of the TLP clients will have provided a list of needed identification and will be working to secure those documents. • 100% of the TLP clients will be living in safe and secure housing. 	<p>Formal assessment will be done in January.</p> <ul style="list-style-type: none"> • Clients have been establishing and maintaining healthy connections. • Clients are providing ID needs list. • All clients are living in safe and secure housing. • Client quality of life and support system continues to improve. 	<ul style="list-style-type: none"> • 100% of the TLP clients establish and maintain healthy therapeutic relationships with their Recovery Coordinator. • 100% of the TLP clients have provided a list of needed identification and are working to secure those documents. • 100% of the TLP clients are living in safe and secure housing. • 74% of the TLP clients have a better quality of life and support system. 	<ul style="list-style-type: none"> • 100% consistency with establishing healthy therapeutic relationships with TH Recovery Coordinators. • 100% of the TLP clients have provided a list of needed identification and are working to secure those documents. • Staff continue doing an excellent job of advocating for clients and making referrals. • 100% of TLP clients live in safe and secure housing while in TLP. TLP apartments are routinely monitored for cleanliness, comfort, and safety. • 21/91% of the TLP clients have a better quality of life and support system. • Programs Director provided supportive counseling for 5 clients during FY’23. 4 TLP clients and 1 COP client.

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	<ul style="list-style-type: none"> 75% of the TLP clients have a better quality of life and support system. 	<ul style="list-style-type: none"> Amanda started Supported Counseling with 3 clients Jack started Men's Group. 	<ul style="list-style-type: none"> Need to develop assessment tool(s) for supportive counseling. 	
<p>Community Outreach Program (COP):</p> <ul style="list-style-type: none"> COP clients are welcome to attend TLP groups and activities if approved by the Programs Director. Social/Recreational activities are scheduled to encourage client engagement. Phone calls are answered, and support is given to people seeking assistance and referrals. Affirm and empower client worthiness while sharing hope. 	<ul style="list-style-type: none"> At least 2 social/recreational activities will be scheduled monthly. 75% of COP clients with 6 or more contacts in 6 months will have improvements or maintain adequate social/recreational skills; community living skills; and mental illness management. At least 5 affirming/empowering messages will be shared weekly through social media. 80% of the COP clients have a better quality of life and support system. 	<ul style="list-style-type: none"> Our new COP Recovery Coordinator started with 1 COP social/rec. activity through Sept. In Oct., now has 2 scheduled activities. With our new COP RC, we're seeing increased in quantity and quality of COP connections. Continuing to answer phones & provide support & referrals. Transitionisms are shared routinely on social media – adding posts plus stories now has increased visibility. 	<ul style="list-style-type: none"> At least 2 COP social/recreational activities have been scheduled monthly. 48%(44 of 92) of COP clients with 6 or more contacts in 6 months have improvements or maintain adequate social/recreational skills; community living skills; and mental illness management. The percentage is lower because the total number of COP contacts was higher than anticipated. COP Recovery Coordinator continues to reach out to connect with previous COP clients – many who are doing well and do not need frequent contact. At least 5 affirming/empowering messages – Transitionisms and other positive messaging - are shared weekly through social media. Posting as well as sharing through stories has expanded the reach of messaging. 88% of the COP clients have a better quality of life and support system. 	<ul style="list-style-type: none"> COP Recovery Coordinator schedules at least one, usually 2 activities monthly specifically for COP clients. COP clients are also invited/welcome to attend TLP groups & activities. Of the 111 COP clients, 55/50% had 6 or more contacts in a 6-month period. During the first 6 months, 39/88% had improvements or maintain adequate social/recreational skills; community living skills; and mental illness management. During the second 6 months, numbers were similar, 37/87%. 49/89% of the 55 clients who had 12 or more contacts in FY'23, maintained or had improvements in Quality of Life. 51/93% maintained or had improvements in Support Systems to help with Mental Illness Management. At least 5 affirming/empowering messages – Transitionisms and other positive messaging - are shared weekly through social media. Posting as well as sharing through stories has expanded the reach of messaging. TH Staff responded to 397 inquiries for support, assistance, and/or referrals.

GOAL 2: IMPROVE HEALTHY COMMUNITY RE-ENTRY FOR PEOPLE INVOLVED IN AGENCY PROGRAMS.

TRANSITION HOUSE STANDARDS:

- COMMITTED TO BEING MINDFUL OF THE ESSENTIAL PARTNERSHIP BETWEEN AGENCY CLIENTS, WORK, AND THE COMMUNITY.
- EQUIP CLIENTS WITH THE NECESSARY TOOLS TO BE CONTRIBUTING MEMBERS IN THE COMMUNITY WHILE HOLDING THEM ACCOUNTABLE TO SOCIETAL STANDARDS.

ACTION STEPS	PROJECTED OUTCOME BY 6/30/23	STATUS – 10/17/22	STATUS – 1/19/2023	STATUS
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<ul style="list-style-type: none"> Refer and empower clients to seek healthy connections, resources, and services outside of TH as needed. Maintain high quality, recovery focused, consistent services through individual and group meetings with clients. 	<ul style="list-style-type: none"> 80% of the TLP clients will be referred to outside mental health and other providers to receive needed services that TH staff cannot provide. 75% of TLP clients will have improvements in or maintain adequate skill levels in: mental illness management; community living, work related, and social/recreation skills. 	<ul style="list-style-type: none"> Staff works with clients to help them establish outside mental health services including therapy & meds. Majority of clients are working to improve skills. Those not interested in recovery tend to move on out of the TLP. 	<ul style="list-style-type: none"> 100% of the TLP clients are referred to outside mental health and other providers to receive needed services that TH staff cannot provide. 65% of TLP clients had improvements in or maintain adequate skill levels in: mental illness management; community living, work related, and social/recreation skills. 	<ul style="list-style-type: none"> 100% are referred to outside mental health and other providers. 71% of TLP clients had improvements in or maintain adequate skill levels in: mental illness management; community living, work related, and social/recreation skills. Note: 23 of the 26 TLP clients were assessed. The other 3 were not engaged in the TLP and left after a very short time.
<ul style="list-style-type: none"> Hold clients accountable to their recovery and occupancy agreements and recovery plans. 	<ul style="list-style-type: none"> 80% of the TLP clients will be adhering to standards established by the occupancy and recovery agreements. 	<ul style="list-style-type: none"> Staff is consistent in holding clients accountable to their agreements & recovery plans. 	<ul style="list-style-type: none"> 100% of the TLP clients are held accountable to adhering to standards established by the occupancy and recovery agreements. 84% of the TLP clients followed standards established by the occupancy and recovery agreements. 	<ul style="list-style-type: none"> 100% of the TLP clients are held accountable for adhering to standards established by the occupancy and recovery agreements. Monthly average of 10/86% of TLP clients were actively working on recovery and related issues and adhering with occupancy and recovery agreements.
<ul style="list-style-type: none"> Support and hold clients accountable to recovery plans and use monthly assessments to guide plan updates to help clients maintain stable housing and income, thus reducing the risk of reoffending. 	<ul style="list-style-type: none"> 80% of the active TLP clients will actively be working on their mental illness and related issues. 	<ul style="list-style-type: none"> Majority of clients are working their mental illness/substance misuse recovery. Those not interested in recovery tend to move on out of the TLP. 	<ul style="list-style-type: none"> 78% of the active TLP clients are actively working on their mental illness and related issues. 	<ul style="list-style-type: none"> Of the 26 total TLP clients, 3/12% were in the TLP for very short stays and not actively engaged. An additional 5/19% clients had periods of consistency in working on their mental illness and related issues, but other times struggled.
<ul style="list-style-type: none"> Encourage TLP clients to engage with TH staff through COP after leaving TLP. Encourage use of COP for extra support for those living in the community. Be intentionally welcoming and supportive of people seeking COP supports. 	<ul style="list-style-type: none"> 70% of COP clients are former TLP clients. 75% of COP clients will have 6 or more contacts with TH staff. 	<ul style="list-style-type: none"> Majority of COP is former TLP. Seeing increases in clients served and contacts in COP. FY'22, COP averaged 133 contacts/month and 43 people. In August & Sept, average 191 contacts and 48 people. 	<ul style="list-style-type: none"> 86% of COP clients are former TLP clients. 48% of COP clients had 6 or more contacts with TH staff. COP connected with 92 COP clients during the first half of FY'23, so the number of people with 6 or more contacts was 44, which is higher than the past few years, but the percentage was lower. Our new COP Recovery Coordinator reached out to more COP clients who we hadn't had contact with – many reported doing well and didn't require the projected frequency of contact. 	<ul style="list-style-type: none"> 98/88% of COP clients are former TLP clients. 55/50% of the COP clients had 6 or more contacts with TH staff. Staff will be making changes to the definition of “contacts” in FY'24. There were some included in COP contacts that with the more expanded definition will not count in the future because though there was contact, it was not significant enough to impact behavior.

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GOAL 3: DEVELOP RESOURCES TO STRENGTHEN TH CORE SERVICES AND AGENCY OPERATIONS.

TRANSITION HOUSE STANDARDS:

- WORK TO FIND EFFICIENT AND EFFECTIVE TOOLS TO UTILIZE IN PROVIDING SERVICES AND MANAGE NECESSARY OPERATIONS OF TH.
- CONTINUE RESOURCE DEVELOPMENT TO SUPPORT THE QUALITY OPERATIONS OF THE AGENCY.
- FOCUS ON IMPROVING CONNECTIONS WITH CURRENT AND PROSPECTIVE FUNDING SOURCES.

ACTION STEPS	PROJECTED OUTCOME BY 6/30/23	STATUS – 10/17/22	STATUS – 1/19/2023	STATUS
<ul style="list-style-type: none"> ● Strengthen staff skill sets by participating in ongoing training and conferences. ● Clinical staff will compile a list of needed books/training materials. 	<ul style="list-style-type: none"> ● Clinical staff will complete required ODMHSAS trainings. ● Programs Director will investigate and recommend trainings as appropriate. ● List of books and training materials will be reviewed, and the acquisition process will begin. 	<ul style="list-style-type: none"> ● Staff is up to date on required ODMHSAS trainings. ● Continuing to investigate other training opportunities – 1 staff member attended a drumming training (no cost). ● List of books & training materials is being developed. 	<ul style="list-style-type: none"> ● Staff is up to date on required ODMHSAS training including First Aid, CPR, Infectious Disease Control, plus housing related trainings ● Upcoming training for Narcan is scheduled. 	<ul style="list-style-type: none"> ● 1 Staff member attended Drumming/Music Wellness training. ● All Staff completed First Aid, CPR, Infectious Disease Control, housing related training, NARCAN training. ● Programs Director and Recovery Coordinator did Motivational interviewing. ● Both Recovery Coordinators have started SOAR training and hope to complete in early FY'24. ● Therapeutic Options training and Fire & Safety are to be completed in early FY'24.
<ul style="list-style-type: none"> ● Create innovative ways to ensure and promote staff wellness and retention. 	<ul style="list-style-type: none"> ● Staff will have participated in at least 3 SWARA's (Staff Wellness and Recovery Activities). 	<ul style="list-style-type: none"> ● Since July, Staff has had 3 SWARA's. 	<ul style="list-style-type: none"> ● Staff had a special Holiday lunch celebration in December. ● Board approved Holiday Bonuses. 	<ul style="list-style-type: none"> ● Improved consistency with SWARA's by the end of FY'23 ● Staff received Holiday Bonuses, plus with additional ARPA funds, staff members received bonuses in the Spring 2023 and were notified of raises for FY'24 and FY'25. ● Staff is finding ways to have fun during the workday to help manage work stress and to strengthen the Team. ● By Spring 2023, we have a full, consistent staff who are committed to working at TH.
<ul style="list-style-type: none"> ● Review TH policies and procedures and determine priorities and next steps in updates. 	<ul style="list-style-type: none"> ● Have the new Employee Handbook approved by TH's Board of Directors. ● Do Staff training on the new Handbook. 	<ul style="list-style-type: none"> ● New Employee Handbook is being presented to the Board Oct. 20 for approval. ● Preparing to begin work on updated Governance Policies, Bylaws & Articles of Incorporation. 	<ul style="list-style-type: none"> ● Employee Handbook was approved Oct. 2022. All staff have reviewed and signed off on new documents. ● Updated Bylaws and Articles of Incorporation were approved by the TH Board in Jan. 2023. Governance Policies will go before the Board by March 2023. ● Some essential updates have started with TH Clinical Policies. 	<ul style="list-style-type: none"> ● New Employee Handbook was approved by the Board in October 2022. ● Bylaws and Articles of Incorporation were approved in January 2023. ● New Governance Policies were approved by the Board in April 2023. ● New Recovery Coordinator Training Manual was completed in March 2023. ● New TLP Application packet was completed in June 2023 . ● Additional work on Clinical Policies and Procedures work continues in FY'24. ● Developed & received Board approval on new Narcan policy and Activities Release.
<ul style="list-style-type: none"> ● Increase public awareness of TH by expanding social media presence and creating a newsletter. ● Encourage and empower client participation in 	<ul style="list-style-type: none"> ● Produce 1 newsletter. ● Assess benefits versus risks of establishing a TikTok. ● 5 new Transitionisms created by clients. 	<ul style="list-style-type: none"> ● Have not done a newsletter yet. We've increased the number of shared client celebrations and events on social media as posts & stories. 	<ul style="list-style-type: none"> ● 1 Holiday newsletter was shared and posted on TH website. ● Over 20 new Transitionisms have been created – influenced by clients. 	<ul style="list-style-type: none"> ● 1 Holiday newsletter was shared and posted on TH website. ● Over 20 new Transitionisms have been created – influenced by clients. ● June Bug Jam videos, based on client experiences, premiered at June Bug Jam 2023 and were shared on YouTube, Facebook & Instagram - providing additional opportunities for increased

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<p>increased advocacy and awareness efforts.</p>				<p>awareness of TH services and client experiences and outcomes. Segments of some of these videos have been used to create reels that are shared on social media.</p> <ul style="list-style-type: none"> • COP Recovery Coordinator post COP activities on Facebook. • More active involvement with OKCNP Oklahoma Center for Non-Profits) – resulted in TH being a finalist for the ONE Award. • 6 TH clients participated in a study by OU’s E-Team. The following is the conclusion statement from this study: “With forty-one years of experience, Transition House has built a robust network dedicated to serving its clients. In interviewing six of Transition House’s success stories, we have identified some of the systems, attitudes, and approaches that allow Transition House to change lives.”
<ul style="list-style-type: none"> • Research and select a donor database tool for TH. 	<ul style="list-style-type: none"> • Have the new database tool selected and operational. 	<ul style="list-style-type: none"> • At the end of Sept. 2022, began work with Bloomerang to develop a TH donor database. Hope to launch Jan. 2023. 	<ul style="list-style-type: none"> • Making progress with the development of the Bloomerang donor database. Launch is now projected in late Spring. 	<ul style="list-style-type: none"> • Progress has been made on setting up Bloomerang as a donor database, but it is still not fully functional.
<ul style="list-style-type: none"> • Select and empower Board and Volunteers for the FY'23 Fund Raising Committee. • Coordinate efforts between Executive Director, Board and Volunteers to reach out to potential new funding sources. 	<ul style="list-style-type: none"> • Have Fund Raising Committee established. • Have at least 3 Fund Raising Committee meetings that will establish the fund raising plan and begin work on the plan. 	<ul style="list-style-type: none"> • Fund Raising Committee Chair is in place and will begin recruiting for the committee. • Will be applying for Non-Profit ARPA funds as soon as the portal opens (hopefully Oct. 2022) 	<ul style="list-style-type: none"> • Fund Raising Committee Chair has been selected. • TH received \$70,000 City of Norman ARPA grant and is awaiting news on the State ARPA grant. 	<ul style="list-style-type: none"> • TH’s Board Fund Raising Committee was active and engaged during FY'23. • JBJ fund raising gross = \$20,353 (including Facebook Drives for JBJ) with a net = \$18,967. • Donor Drive raised \$21, 409. • TH received 2 ARPA grants: \$70,000 City of Norman and \$50,000 through Department of Commerce. Those funds will be expended from FY'23-FY'25 • TH received a \$5,000 grant as a ONE Award Finalist.