

# ANNUAL REPORT

2022



PENNSYLVANIA  
PSYCHIATRIC INSTITUTE

A Collaboration of Penn State Health & UPMC

EXPLORE OUR  
GROWTH IN 2022



# Table of Contents

A Message from the CEO	4
Access to Care	5-7
Community Engagement: Crisis Intervention and Community Health	8-11
Commitment to Patient Safety & Patient Experience	12-13
PPI's Resilient Approach to Medicaid Unwinding	14-15
Physician Excellence	16-17
Investment in Our Staff	20-21
Financial Summary and Demographic Information	22-23





**KIM FEEMAN**  
Interim CEO

## A Message from the CEO

The journey through 2022 showcased Pennsylvania Psychiatric Institute's (PPI) commitment to adaptability and service in a dynamic health care landscape.

Navigating the Medicaid changes was not without challenges. We took proactive steps to guarantee uninterrupted patient care, regardless of Medicaid adjustments. The future might bring more transformations, but PPI remains committed to our foundational mission and services, regardless of external shifts.

Community ties have always been our strength. Throughout 2022, we've worked diligently to bolster our relationships with local partners. This symbiotic bond played a pivotal role, especially in the smooth transition of patients from surrounding emergency departments during critical times.

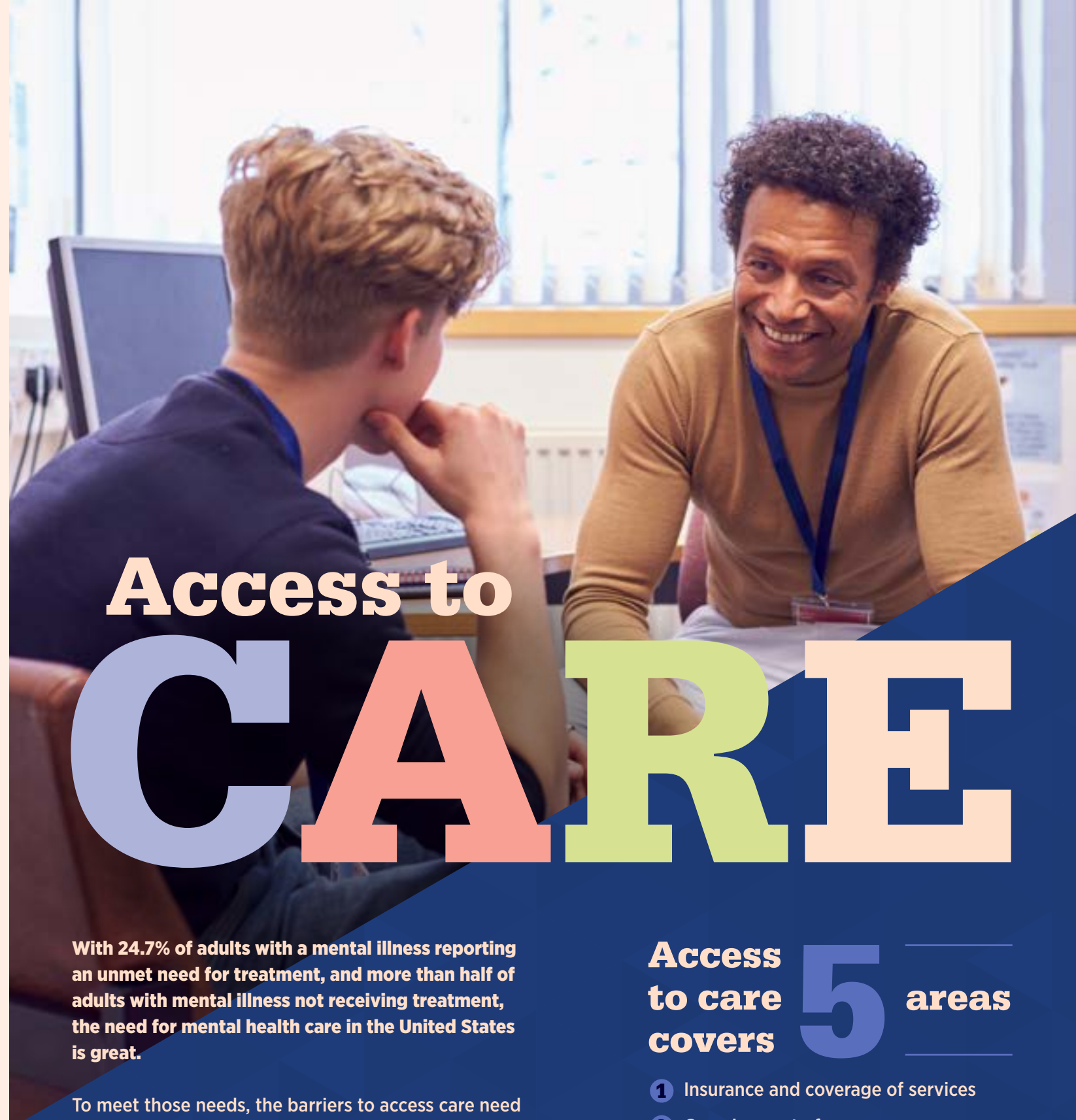
Ensuring consistent and equitable access to care remains at the forefront of our initiatives. With endeavors such as opening all our beds, we've made strides in guaranteeing that our community has the care they need when they need it. This consistency not only improves health outcomes but further cements PPI's reputation as a leader in psychiatric care.

Regarding patient experience, we're proud of our efficient admittance process, which has reduced wait times and provided patients with timely care. Data protection and confidentiality have always been non-negotiable at PPI. Through continuous strategies and updated security measures, we ensure the utmost safety of our patient's information.

The excellence of our physicians and staff has been one of our shining beacons. Through robust support systems and training programs, we've ensured they have the resources they need to excel in their fields. And it's worth noting that such rigorous staff training has been pivotal in refining our patient care standards and outcomes.

The narrative of 2022 is one of growth, learning and relentless commitment. With every challenge came an opportunity, and with every opportunity, we reaffirmed our dedication to our mission.

From my heart, thank you for participating in this journey and believing in our mission.



# Access to CARE

**With 24.7% of adults with a mental illness reporting an unmet need for treatment, and more than half of adults with mental illness not receiving treatment, the need for mental health care in the United States is great.**

To meet those needs, the barriers to access care need to be addressed. Pennsylvania Psychiatric Institute's (PPI) mission is to help people with mental health issues and psychiatric disorders achieve and maintain stability. In doing so, PPI also works on improving the community's access to care.

**Access to care covers 5 areas**

- 1 Insurance and coverage of services
- 2 Covering cost of care
- 3 Availability of treatment
- 4 Connection between primary care and behavioral health systems
- 5 Access to mental health providers

With Patient Financial Services and the Community Health Worker addressing the first two items, Harry Padilla, MSN, RN, Chief Nursing Officer, and Wanda K. Geesey, MBA, PHR, SHRM-CP, Director, Human Resources, focus on the remaining three.

Treatment available at PPI includes outpatient services, partial hospitalization programs and substance dependence clinics. Where acute care and stabilization are the focus, inpatient services are needed, and patients can be referred from PPI's outpatient services or directly admitted.

When it comes to patient admittance, Harry expounds, "Most patients come from the surrounding emergency departments, where those in need of mental health services are referred to PPI's Admissions team. Previously, patients in need would have to wait because our beds were full. Now being able to take patients in has become more manageable as we were able to open all our beds — that is the success story." Due to the fluent relationship PPI has with surrounding emergency departments, barriers have been eliminated to smooth the transition of care.

During the pandemic, because of safety concerns, staffing and patient admittance dwindled. Wanda explains, "Coming out of that, we needed to focus on recruitment to get back up to par. To do so, we worked with our nurse managers to figure out needs and used our advertising agency to help promote the vacancies and benefits of working at PPI."

In order to have access to mental health providers, recruitment plays a part, as proper staffing is

needed to serve patients. "PPI has 89 beds, so many staff are needed to attend to that number of patients, plus the additional needs providing care requires. When we are short-staffed, recruiting needs to step in to fill those vacancies," details Wanda.

When a manager wants to hire someone, there are several items to consider in addition to finding the staff needed to provide patient care. Generally, that entails a competitive salary, sign-on bonus, onboarding, training and education. However, the proper complement of staff also needs to be taken into account. For example, with higher acuity patients, additional staff need to be factored in to provide appropriate care.

"We want to make sure to meet employee needs for retention as well, so we have the ability to re-recruit legacy staff. That means working on employee engagement," explains Harry.

Harry will attend rounds with staff to help understand their needs. He meets with them one on one with the purpose of hearing their ideas. "I want to know what they need. Is it equipment? Or do they want to work on a research project? When they are a part of the process and are involved in projects they are interested in, engagement improves."

Because of the improvements, Wanda illustrates a measure of success, "In 2022, we were able to significantly reduce the turnover rates. Turnover dropped nine percent from 28.6% down to 19.6%. This was due in part to our focus on factors like pay rates, engagement, onboarding, incentives and referral bonuses."



**"... now being able to take patients in has become more manageable as we were able to open all our beds – that is the success story."**

**— Harry Padilla, MSN, RN,  
Chief Nursing Officer**



# COMMUNITY ENGAGEMENT

## Crisis Intervention and Community Health

**As part of PPI's commitment to understanding and addressing the health needs of the communities it serves, PPI has partnered with community organizations and members.**

Since the fall of 2019, PPI has partnered with Dauphin County to provide education to law enforcement and first responders during their Crisis Intervention Team (CIT) training. CIT training helps to increase knowledge for behavioral health calls and awareness of resources that are available in the community. To date, over 50% of law enforcement in Dauphin County has been trained.

Crisis Intervention is the 24-hour emergency mental health service provided by the Dauphin County Mental Health/Intellectual Disabilities Program. Crisis Intervention staff provide supportive counseling, outreach, assessment and referral information to individuals experiencing an emotional crisis or difficulty in coping with a personal problem. Crisis Intervention staff also provide an immediate response to people experiencing a mental health emergency by de-escalating, assessing, supporting and/or referring care for an individual or family in crisis.

Ashley Yinger, PhD, Criminal Justice Programming Administrator and Stepping Up/CIT Coordinator at the Dauphin County District Attorney's Office

explains the program. "On the first day of training, Ruth [Moore] provides the first component necessary: an overview of mental health. She goes over behaviors, signs and symptoms, common medications and medication side effects. This helps officers to better understand mental illness and how it can appear."

In addition to law enforcement, Co-Responders also go through this training. As a caseworker working with a Harrisburg city detective, Tom Denniston saw a growing concern for mental health issues and wondered how he could help, when the Co-Responder position popped up on his radar. Tom now supervises a team of three Co-Responders.

"Co-Responders work through the Harrisburg Police Department, and our main function is to spend time in the passenger seat of a patrol car responding to calls regarding mental illness. Someone we respond to could have suicidal to homicidal thoughts, are committing a criminal act, having a mental illness episode or are under the influence and need treatment. If they have suicidal thoughts and are unmedicated, we help refer them to get support. We can also act as an interim case manager if someone is in between programs."

Fellow Co-Responder, Jorge Collazo-Gonzalez, is the newest member of the team and comes from a deep background in social work. "I like meeting people where they're at. I am passionate about what I do because I'm able to connect people with the services they need and help them get back up."

Tom and Jorge help those they interact with get connected with services at PPI. "They have the

option to go to the ER, or voluntarily go to an inpatient program, and they often want to go to PPI. In fact, many of those we come across are in therapy at PPI," notes Tom.

Ashley speaks to the impact of the partnership, "Due to the collaboration of criminal justice and human service entities, we can address behavioral health needs and how they intersect the criminal justice system. For example, out of the contacts our Co-Responders have had since implementation in Spring of 2020, less than 10% result in charges because they get the help they need."

Although they don't work together, Co-Responders and Community Health Workers (CHW) both help PPI connect with the community through outreach and facilitating care. A CHW is a peer leader, an individual who isn't a clinical provider, but is someone that can help get things done to help others care for themselves. They work to build relationships with those who may not trust the industry.

Emily Nardella is the Senior Manager for Community Impact and Health for the United Way of the Capital Region, where her passion and previous knowledge of health care led her to manage the Contact to Care initiative which funds CHWs to improve health care access.

Cristel Woodcock was looking to do more work in the community when she met Ruth Moore and became the CHW at PPI. Ruth Moore, the Director of Community Engagement, Diversity and Inclusion at PPI, actualized her ability to motivate and educate on the importance of unique individuals and the connection shifted her to her current position.

In describing how the three work together, Emily begins, “At United Way, we created what we call our core solutions partners — a group of community health care leaders who helped design and now guide the Contact to Care program, and Ruth has always been at the table as a representative of PPI. She has had her hands in this partnership since its start in 2014 when the community assessment determined that health access was a need.”

Dealing with an already underserved population, Ruth reflected on the need she saw at PPI. “Behavioral health services have always had a large area of need. We wanted to find a way to improve access to care and came to the idea of having Contact to Care at PPI.” Although the United Way funds Cristel’s position as the CHW at PPI, Ruth is her direct manager. “We help those in need of mental health services at PPI, but Cristel helps to connect them with services for the other areas they need help in, like treatment for other medical issues.”

“Often, individuals may be scared to start, not understanding how the system works,” explains Emily. “A CHW provides a hand to hold and helps them find a good place to start the process.” Sometimes a CHW can connect through a shared culture, language or lived experience to provide knowledge to help navigate the health care system. This newfound trust enables the CHW to serve as the link between health or social services and the community to facilitate access to and improve the quality and cultural competence of services.

Emily further explains, “The health care system is complicated as is. If you don’t understand English well, medical terms and instructions become even more confusing. A person could become overwhelmed and not follow through on getting the care they need. A CHW gives them aid and empowers them to be able to navigate the system on their own and then teach their family and friends how to do so as well.”

With a grateful heart, Emily notes, “The CHWs are the program. We are so fortunate when we find people like Cristel who want to do this work and help the community. And we’re also very fortunate to find partners like PPI who want to be a part of this.” Due to their work, the joint program has become well known in the community.

“Having Cristel on our team allows us to reach our patients and community members who have the most need. Because of CHWs like her, we can overcome barriers to care, and increase overall wellbeing,” Ruth remarks with appreciation.

**“I want you to know that because of the program, I took back control of my health.”**

**– A program participant who thanked Cristel after working together for several months**



**“At PPI, we help those in need of mental health services, but Cristel helps to connect them with other providers to treat their medical issues and if needed, gain insurance.”**

**— Ruth S. Moore, Director, Community Engagement, Diversity & Inclusion**

# Commitment to PATIENT SAFETY & PATIENT EXPERIENCE

Patient safety and patient satisfaction are critical elements of PPI's quality program. "Our goal is to make PPI as safe as possible for our patients, visitors and staff," notes Jason Kibler, MBA, LPC, Director of Quality Assurance. "That has always been important to the team at PPI, however how we go about doing that has changed."

Safety is part of daily unit huddles and weekly process improvement sessions, where opportunities for improvement are identified and projects aimed at improving safety are initiated. According to the Pennsylvania Patient Safety Authority, every hospital must have an appointed patient safety officer. At PPI, that person is Laurie Talbot, Director of Compliance.

Laurie states, "We have a patient safety committee that discusses all topics related to safety including infection control, employee health, life safety, emergency management and environmental care, making sure PPI is as safe as possible for patients, staff and visitors. We look for any patterns or trends in any events we have. When we find something, we'll review the issue and do a root-cause analysis to see if we can identify why it occurred and implement measures to prevent future incidents." Laurie's office receives all incident reports, and

these reports are also submitted to a database that the Pennsylvania Patient Safety Authority keeps. "Since COVID-19, we have seen an increase in the amount of aggressive behavior from our patients, either toward each other or toward our staff. In response, we've ramped up our workplace violence prevention program, making sure that protocols are in place and the hospital is secure and safe" reveals Laurie about one of the committee's projects.

As with patient safety, patient experience has also evolved. "We have new leadership in nursing, and they are focused on ensuring our patients have a positive experience at PPI. They are driving a lot of the positive changes we are implementing," observes Jason.

On the relationship between patient safety and patient experience, Jason remarks, "It is hard to have a good experience if you don't feel safe. Another thing we look at that correlates closely is staff experience. Patients are more likely to have a good experience at PPI if our staff are having a good experience working here."

"We collect patient experience information on how well we're doing from a variety of sources. We do a lot of surveying of our patients; we also talk to our

staff about the things they like and don't like, and we collect that information as well." Once Jason and his team collect that information, they can identify the projects needed to make peoples' experiences better.

Jason describes one of the larger projects that resulted from those conversations, "Our inpatient unit had windows that were clouded over. Patients were not able to see out of the windows, which was a dissatisfier. We saw an immediate positive response from patients when we replaced the windows — both staff and patients really responded well to that change."

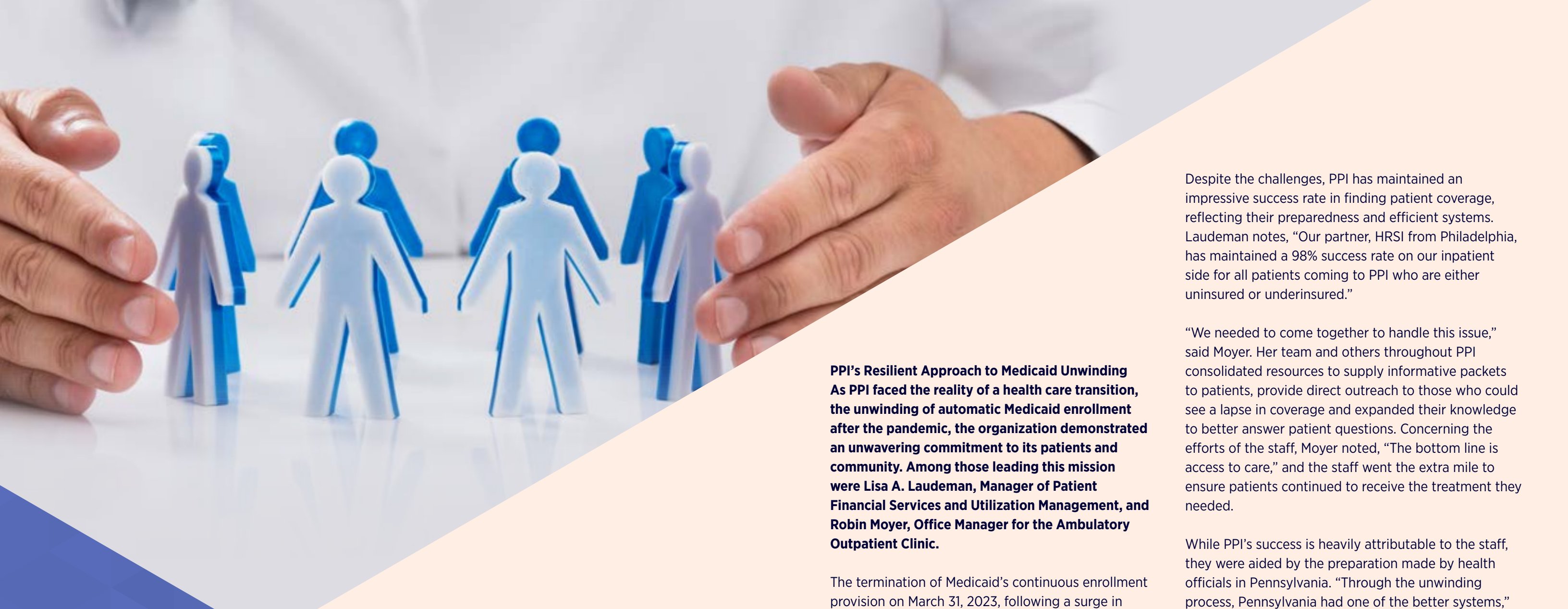
Another item that PPI has been working on for a few years is training on Trauma Informed Care, which incorporates both safety and patient experience. Jason explains, "Trauma Informed Care means being aware of our patients' experience and how their past experiences impact how they feel about things; trying to see it through their eyes. That way, we can better understand and respond to their needs."

With several items planned for the coming year, it is clear there is much to look forward to at PPI when it comes to patient experience and safety.



**"We have a patient safety committee that discusses all topics related to safety including infection control, employee health, life safety, emergency management and environmental care, making sure PPI is as safe as possible for patients, staff and visitors."**

— Laurie Talbot,  
Director of Compliance



# **PPI's Resilient Approach to MEDICAID UNWINDING**

**PPI's Resilient Approach to Medicaid Unwinding**  
As PPI faced the reality of a health care transition, the unwinding of automatic Medicaid enrollment after the pandemic, the organization demonstrated an unwavering commitment to its patients and community. Among those leading this mission were Lisa A. Laudeman, Manager of Patient Financial Services and Utilization Management, and Robin Moyer, Office Manager for the Ambulatory Outpatient Clinic.

The termination of Medicaid's continuous enrollment provision on March 31, 2023, following a surge in enrollments due to COVID-19, had the potential to result in significant coverage loss for mental health care patients in central Pa. Estimates suggest that 8 to 24 million individuals may lose Medicaid coverage nationwide due to resumed disenrollments (10 Things to Know About the Unwinding of the Medicaid Continuous Enrollment Provision, KFF.org, June 2023), reintroducing temporary coverage loss, or "churn." The team at PPI identified the potential issues facing their patient population and swiftly adapted.

In the wake of the unwinding, PPI took the challenge head-on. Laudeman elaborates, "From our perspective, we've always strongly supported patients getting the insurance coverage they need as best as they can."

Despite the challenges, PPI has maintained an impressive success rate in finding patient coverage, reflecting their preparedness and efficient systems. Laudeman notes, "Our partner, HRSI from Philadelphia, has maintained a 98% success rate on our inpatient side for all patients coming to PPI who are either uninsured or underinsured."

"We needed to come together to handle this issue," said Moyer. Her team and others throughout PPI consolidated resources to supply informative packets to patients, provide direct outreach to those who could see a lapse in coverage and expanded their knowledge to better answer patient questions. Concerning the efforts of the staff, Moyer noted, "The bottom line is access to care," and the staff went the extra mile to ensure patients continued to receive the treatment they needed.

While PPI's success is heavily attributable to the staff, they were aided by the preparation made by health officials in Pennsylvania. "Through the unwinding process, Pennsylvania had one of the better systems," said Laudeman. "The state took the time and effort to start early, to make the process easier than other states."

Throughout this challenging period, PPI continues to prioritize the well-being of the community, underlining the relevance of its work. "PPI's services are needed more and more on an everyday basis," said Moyer, indicating the importance of PPI's mental health services.

As PPI moves forward, the lessons learned from the unwinding of Medicaid Managed Care will continue to inform their approach. The organization's successful navigation through a year of transition is an inspiration, underscoring the importance of mental health services in our society.



# PHYSICIAN EXCELLENCE



**There are four spheres of physician excellence: administration, clinical, education and research.**

**At PPI, we strive for excellence in all four categories, and thanks to our expert team who help us excel in these spheres, we can provide the best care for our patients. We spoke with Elisabeth Kunkel, MD, PPI's Chief Medical Officer, to shed some light on the advancements of PPI's providers in each of these spheres of excellence.**

## Sphere 1: Administration

The administrative team not only oversees daily clinical operations, but also looks at the quality of care long-term. Under Kim Feeman, Interim CEO, and department leader Erika Saunders, MD, Dr. Kunkel is the Chief Medical Officer for the administration sphere for physicians at PPI, along with Charles Mormando, DO, Medical Director, and Michael Faschan, MD, Assistant Medical Director. Drs. Mormando and Faschan are superb communicators and talk to their peers and to those under them with respect and diplomacy. "They make the physician and provider team feel heard and comfortable understanding their needs will be met," observes Dr. Kunkel of the duo.

Andrew Francis, MD, PhD, runs the neuro modulation service and administers Electroconvulsive therapy (ECT) to patients. Dr. Francis' administration style puts his patients first and his team works well together while they provide quality care.

Sarah Kawasaki, MD, is the Medical Director of the Advancement in Recovery (AIR) program and sees patients who have opioid use disorders. She coordinates with the providers on her team and has successfully engaged community agencies to provide patient services. Dr. Kunkel remarks, "What's new and refreshing is that she brings empathy and excitement to the field. Patients seen in other settings are treated with the stigma addiction brings, but this is not the case in her clinic. Patients seek out her program for good, optimistic and empathetic care."

Richard Prensner, MD, Medical Director of the medical and hospitalist team, provides clinical care to the inpatients at PPI. Dr. Kunkel explains, "Those that are admitted are ill with medical, psychiatric and/or drug and alcohol problems. Dr. Prensner's team can address their physical health needs and work with the psychiatric team to manage complicated health needs."

## Sphere 2: Clinical

The second sphere is clinical excellence, further exemplified by significantly increased patient satisfaction scores for the providers this year. "Clinical care is as much an art as it is a science. We have a superb provider team that provides highly competent, holistic care and who are respected by their patients. They are exactly who you would want to care for your family," Dr. Kunkel remarks with pride.

What makes PPI a great place is the various levels of care for the patient. From inpatient care with three adult units (one for seniors 55+), one child unit and one adolescent unit, partial hospitalization programs, to several sub-specialties in outpatient providers, PPI has a service that can help meet every patient's needs.

## Sphere 3: Education

PPI is a host to a variety of learners. On campus you can find medical and physician assistant students, overseen by Usman Hameed, MD. We also host social work and nursing students. The physician learners on campus include adult psychiatry and community/public psychiatry residents, fellows in child psychiatry, who are overseen by Ahmad Hameed, MD, the Program Director of the residency program and Vice Chair for Education. His team also includes Dr. Francis, the Associate Program Director, and Julie Graziane, MD, the Assistant Program Director.

Clinicians with an interest in international education on global mental health are Jasmin Lagman, MD, with her contributions to child and adolescent mental health in the Philippines, and Yassir Mahgoub, MD in the Sudan, educating Sudanese psychiatrists remotely.

Education happens all the time, everywhere, from being taught during patient appointments to evidence-based medical lectures. Many faculty members have received kudos from their students on the skills they learned as students and multiple clinical and education awards.

## Awards that went out at graduation 2023:

Edward Bixler Outstanding Contributions to Research Award (adult):

**Lauren Forrest, PhD**

Outstanding Contributions to Medical Education Award (adult):

**Kathy Dougherty, MD**

Outstanding Contributions to Medical Education Award (child):

**Jasmin Lagman, MD**

Ling Tan Outstanding Contributions to Clinical Services Award (adult):

**Yassir Mahgoub, MD, and Charles Mormando, MD**

Ling Tan Outstanding Contributions to Clinical Services Award (child):

**Felix Matos Padilla, MD**

### Education Award Recipients:

- Child Faculty Teaching Excellence Award:  
**Ramnarine Boodoo, MD**
- Medical Student Faculty Teacher of the Year:  
**Alfredo Bellon, MD**

## Sphere 4: Research

PPI is still a novice when it comes to research, though some faculty members have gotten research grants. Three providers are getting funding for their research: Dr. Kawasaki for health services addiction research, Dr. Bellon for bench research in schizophrenia and Dr. Forrest for suicide and eating disorders.

During the 2020 presidential election, after realizing that psychiatric patients are often not registered to vote, PPI initiated voter support activity and has continued such efforts every year since, spearheaded by Dr. Graziane. Dr. Graziane found that this social/political determinant of health helps empower patients and makes them feel good. The team has been published twice on this topic.

During the pandemic, PPI saw high-acuity patients and providers realized that there was not much written on measuring acuity, or how to define it. The team at PPI did a tremendous amount of data collection and has a paper currently in revision for publication. Dr Mahgoub is leading this team. There is also research being done on catatonia, social determinants of health and severe and persistent mental illness.

Reflecting, Dr. Kunkel notes, "When I came [to PPI] in 2017, I saw numerous faculty members who were great clinicians but weren't presenting or publishing. Now, our faculty present regionally, nationally and internationally, and their publications are appearing in a variety of highly prestigious journals."



# TRAINING, FINANCIAL & DEMOGRAPHIC INFORMATION

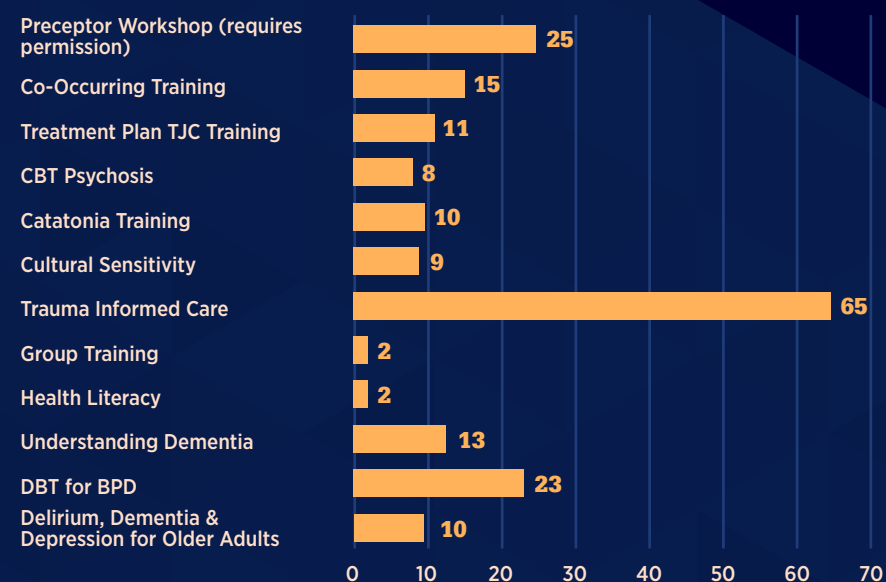


# Investment in **OUR STAFF**

PPI is committed to providing training opportunities that allow for the growth of staff members and the organization. Ongoing training helps provide a stronger staff, which in turn provides better service and care to our patients. Here's a look at the training provided:

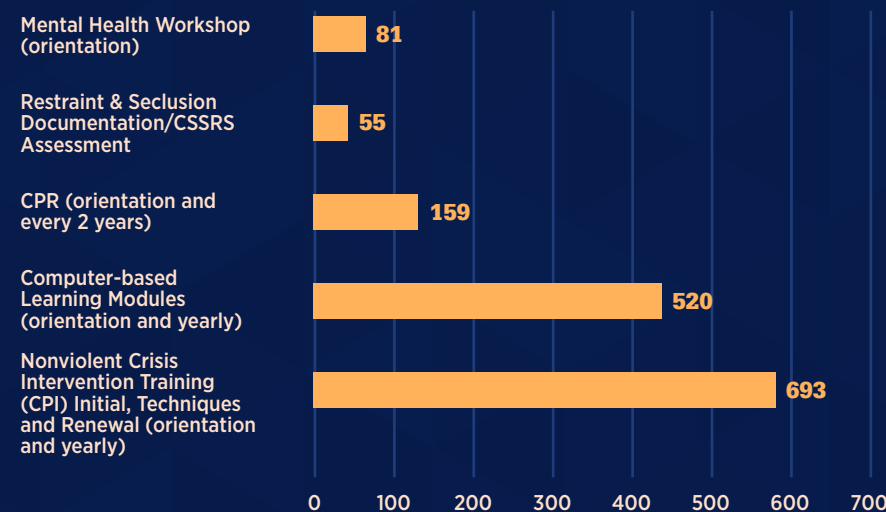
## Optional Trainings

Number of attendees



## Mandatory Trainings

Number of attendees



## Continuing Education

PPI continues to be an approved provider Unit for CEUs through Pennsylvania State Nursing Association. PPI provided CEUs for 71% of the internal trainings that were held. These CEUs were available to RNs as well as staff who are licensed through the State Board of Social Workers, Marriage and Family Therapists and Professional Counselors.

In addition to the trainings offered internally, staff members used Continuing Education funds to attend external trainings. Staff members also used funds available through our Education Assistance Program to further their education.

## Professional Developmental Pathways Lead the Way

To further staff development, PPI developed three discipline-specific Professional Development Pathways (PDP) with tracks for:

- Registered Nurses
- Licensed Practical Nurses, Certified Nursing Assistants, and Behavioral Health Specialists
- Therapists, Mental Health Clinicians and Social Workers
- Intake Coordinators

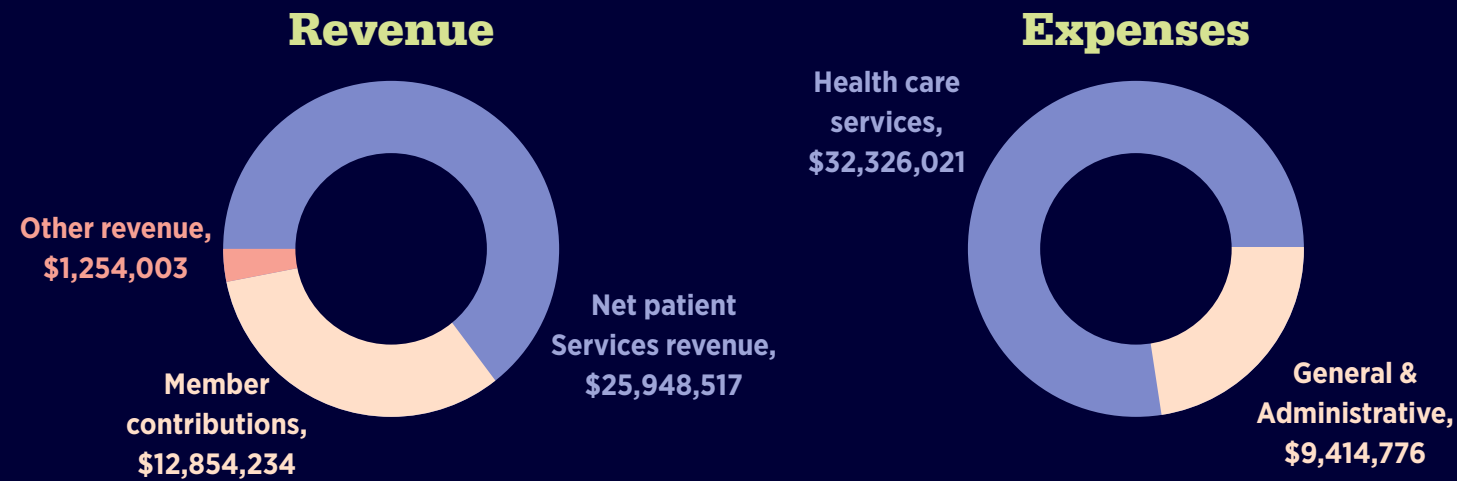
Staff members must apply and be accepted into the yearlong PDP program and achieve the following:

- Complete exemplars or narratives for seven domains associated with their field:
  - » Clinical Practice
  - » Caring Role
  - » Milieu Management
  - » Patient and Family Education
  - » Clinical Knowledge Development
  - » Monitoring and Ensuring Quality Health Care Practices
  - » Professional Collaboration and Leadership
- Attend specific internal workshops/trainings
- Attend outside seminar/conferences
- Complete case studies
- Conduct education programs both within PPI and in the community
- Obtain/maintain the discipline-specific certification

Upon successful completion, the staff members earn recognition of their achievement plus a monetary bonus of up to \$4,000 per year.

# FINANCIAL SUMMARY

Statement of Operations for the year ended June 30, 2022

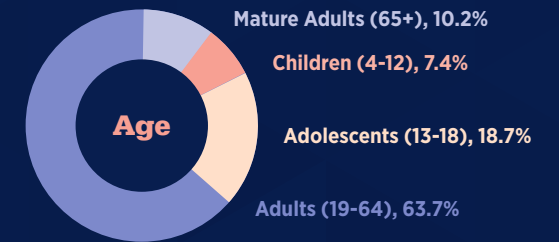
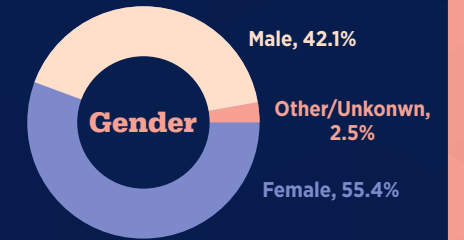
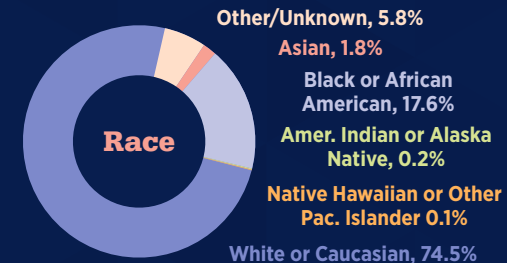


# WHO WE SERVE

Patient Demographics for the year ended June 30, 2022

## Age Groups by Program

Program	Adult (18+)	Youth (5-17)
CAPSTONE	88.9%	11.1%
DBT	99.6%	0.4%
ECT	96.6%	3.4%
Inpatient	72.7%	27.3%
OTP	98.9%	1.1%
Outpatient	78.9%	21.1%
Partial	14.1%	85.9%



## Other Demographic Information

**Ethnicity**

Hispanic or Latino	11.8%
Not Hispanic or Latino	86.5%
Unknown	1.7%

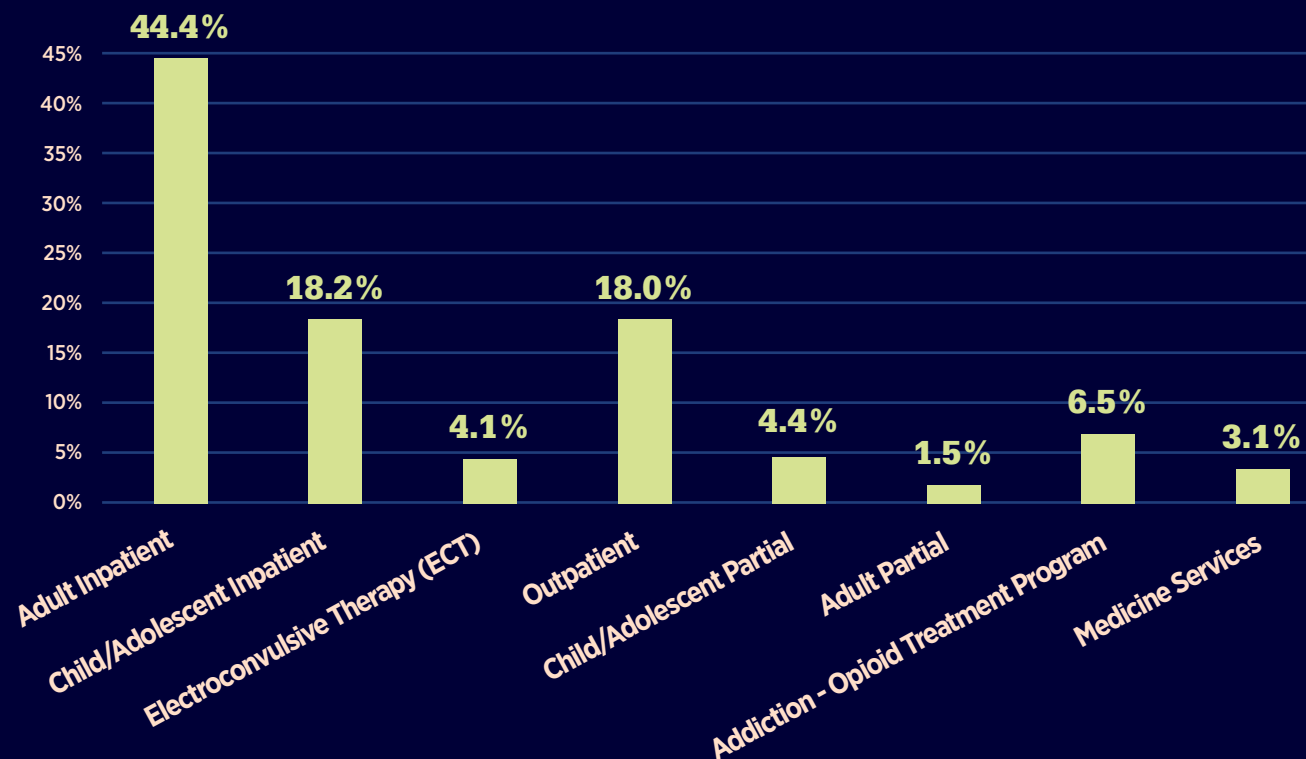
**Sex**

Female	58.22%
Male	41.73%
Unknown	0.05%

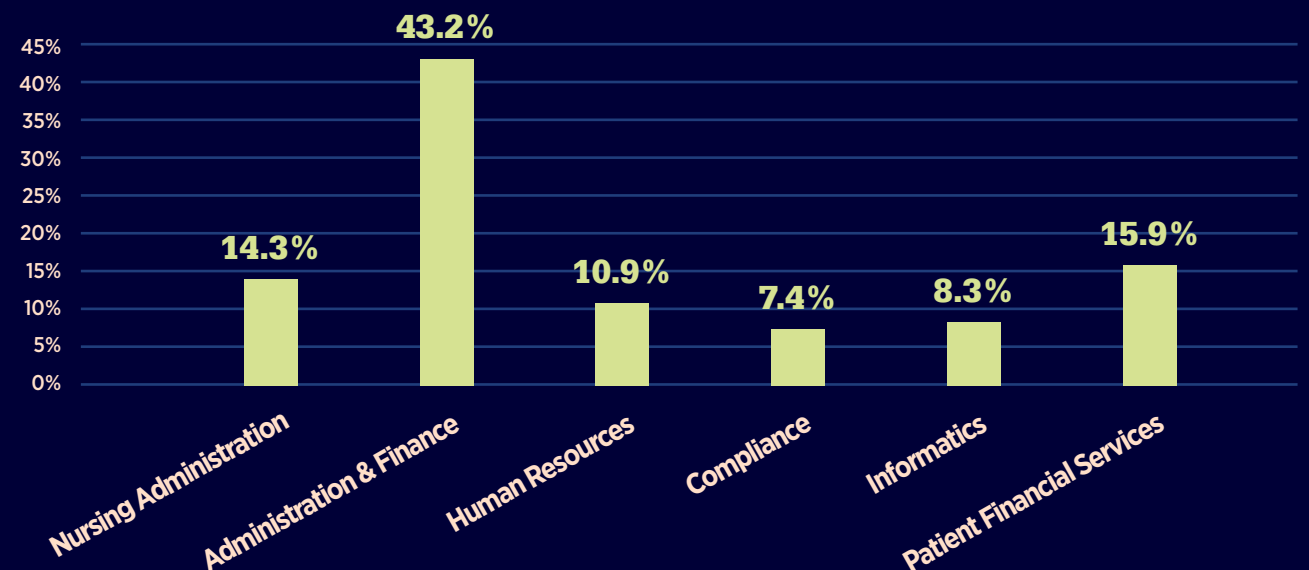
**Age**

Adult (18+)	76.8%
Youth (5-17)	23.2%

## Health Care Services Expenses



## General and Administrative Expenses





PENNSYLVANIA  
PSYCHIATRIC INSTITUTE

A Collaboration of Penn State Health & UPMC