



CONTINUOUS QUALITY IMPROVEMENT PLAN

YEAR ENDING 2024

PROGRAM DESCRIPTION

Continuous quality improvement (CQI) is the complete process of identifying, describing, and analyzing strengths and problems and then testing, implementing, learning from, and revising solutions. Through our team approach at Peerstar of Pa, CQI remains proactive and supports continuous learning. The process is dependent upon the active inclusion and participation of staff at all levels in the agency, providers, consumers, and other stakeholders. Peerstar of Pa has monthly leadership meetings, quarterly Compliance Committee meetings, conducts member satisfaction surveys, employee satisfaction surveys and discusses quality improvement methods, including the use of data and information to inform practice and policies and provide feedback to the group leaders.

THE PLAN-DO-CHECK-ACT (PDCA) CYCLE

This four-step process is utilized in the agency to work on eliminating organization, systemic and community barriers through setting up a 1) plan to effect improvement; 2) carry out the plan; 3) observe the effects of the plan; 4) study the results to determine what was learned and what can be predicted and feeds back into another PDCA cycle. This process will be used with the provider, peer specialist and community stakeholders to provide collaboration and control in the improvement and direction of the program.

AUTHORITY AND RESPONSIBILITY

To ensure CQI and regulatory compliance, Peerstar of Pa has created policies and procedures, which include: a) creation of a CQI/Compliance Committee, b) designation of a Director of Compliance, c) initial and annual employee compliance training, d) encouragement of all employees to report instances of actual or suspected waste, fraud and abuse, e) monthly audits of client charts and progress notes, f) employee supervision, and g) monthly compliance and quality assurance surveys of clients to ensure proper delivery of services and accuracy of progress notes and billing.

CQI/Compliance Committee: The Board of Managers of Peerstar of Pa shall appoint a CQI/Compliance Committee tasked with applying the CQI process, preventing and eliminating waste, fraud, and abuse within Peerstar of Pa and implementing these policies and procedures. The CQI/Compliance Committee shall be composed of the following individuals: a) President/CEO, b) Chief Operations Officer, c) the Director of Compliance (who shall serve as Chairperson), and the VP of Operations.

Leadership Team: The Board of Managers of Peerstar of Pa shall appoint a Leadership Team tasked with reviewing and evaluation of quality assurance issues and implementing quality improvement plans.



SCOPE

The scope of the Peerstar of Pa Continuous Quality Improvement Plan covers the full extent of services provided by all staff; peer interactions with non-clinical staff, internal compliance and quality reviews, external interactions and relationships with referral sources and funding sources; timeliness of services; service collaboration and coordination efforts; peer satisfaction; and other factors determined to impact the quality of services provided to peers.

GOALS AND OBJECTIVES

The Continuous Quality Improvement Plan strives to meet the following goals and objectives:

- A. To enhance and maintain the quality Peer Support Services provided by Peerstar of Pa by:
 1. Identifying issues and/or opportunities for improving the quality of services to peers
 2. Developing a plan of action to improve the quality of services to peers.
 3. Evaluate the effectiveness of improvement or correction plans.
- B. To ensure the appropriateness of Peer Support Services in accordance with all DPW and MCO Guidelines provided by Peerstar of Pa staff by:
 1. Conducting monthly self-audits monitoring: the billing process, medical necessity criteria, compliance with Federal guidelines on documentation, and all applicable Peer Support regulations.
 2. Identification and reporting of any Waste, Fraud, Abuse
 3. Implementing improvement plans to address trends found in the internal audits including training modifications or supplemental training, supervision and chart form, billing, and HR improvements, etc.
- C. To achieve efficiency and ensure effectiveness of the CQI Plan by:
 1. Integrating quality management activities into daily operations to ensure efficiency, minimize duplication and maximize effectiveness.
 2. Conduct an annual review of the CQI Plan and update as needed to make it more effective.

PROGRAM EVALUATION

At a minimum, the CQI/Compliance Committee will meet quarterly to discuss Quality Management matters. Changes, when determined to be necessary, can be implemented immediately. All Peerstar of Pa staff are notified of changes via emails, trainings, and other forms of communication.

COMPLAINTS AND INCIDENT REPORTING

Peerstar of Pa is dedicated to the development of a full continuum of care in this community, enabling individuals of all ages and abilities to access an appropriate level of care for their emotional and behavioral needs. Our mission is to provide individualized, comprehensive emotional and behavioral health care services, emphasizing a compassionate team approach to helping clients achieve emotional wellness. It is our policy that all consumers/families involved in services with Peerstar of Pa will have access to a formal grievance/complaint process. All grievances should be filed by calling 1-888-733-7781 (can we look at adding a link on the website, form, or email).



Peerstar of Pa is devoted to the effective and fair resolution of all grievances/complaints.

All grievances/complaints will be thoroughly investigated and responded to by the Executive Director/Management Team within a reasonable time frame.

Peerstar of Pa has a policy and procedure that is available to all staff on incident reporting. Peerstar of Pa follows all MCO rules for reporting incidents as outlined per Provider Manual.

STAFFING RELATED TO QUALITY PLAN

Peerstar of Pa employs a Full-time Director of Compliance (job description available upon request) who is responsible for conducting internal audits to ensure contractual and other compliance initiatives.

QUALITY MONITORS/PERFORMANCE IMPROVEMENT

1. Peerstar of Pa will develop an annual plan with specific target areas for improvement.
2. Peerstar of Pa will track resolution of quality issues with Peers and will report the results monthly.
3. Monitor reports may include:
 - a. Satisfaction survey results
 - b. Outcome studies (length of stay, hospitalization, recidivism)
 - c. Audit results
 - d. Employment satisfaction

INTERNAL REVIEWS

1. Peer chart audits are conducted monthly by the Compliance Department. A sample size of 10% of peer per County are selected. The sample is selected by a Credible report of current peers which is filtered by the County selected for audit in the current month. Then twenty charts are selected by various methods, such as selecting every 5th or 7th chart on the list. The selection number changes each month. In counties with fewer than twenty peers, 10% of available charts are selected for audit. All records were reviewed in accordance with individual MCO audit tools and PA State Licensing On-Site Review Tool.

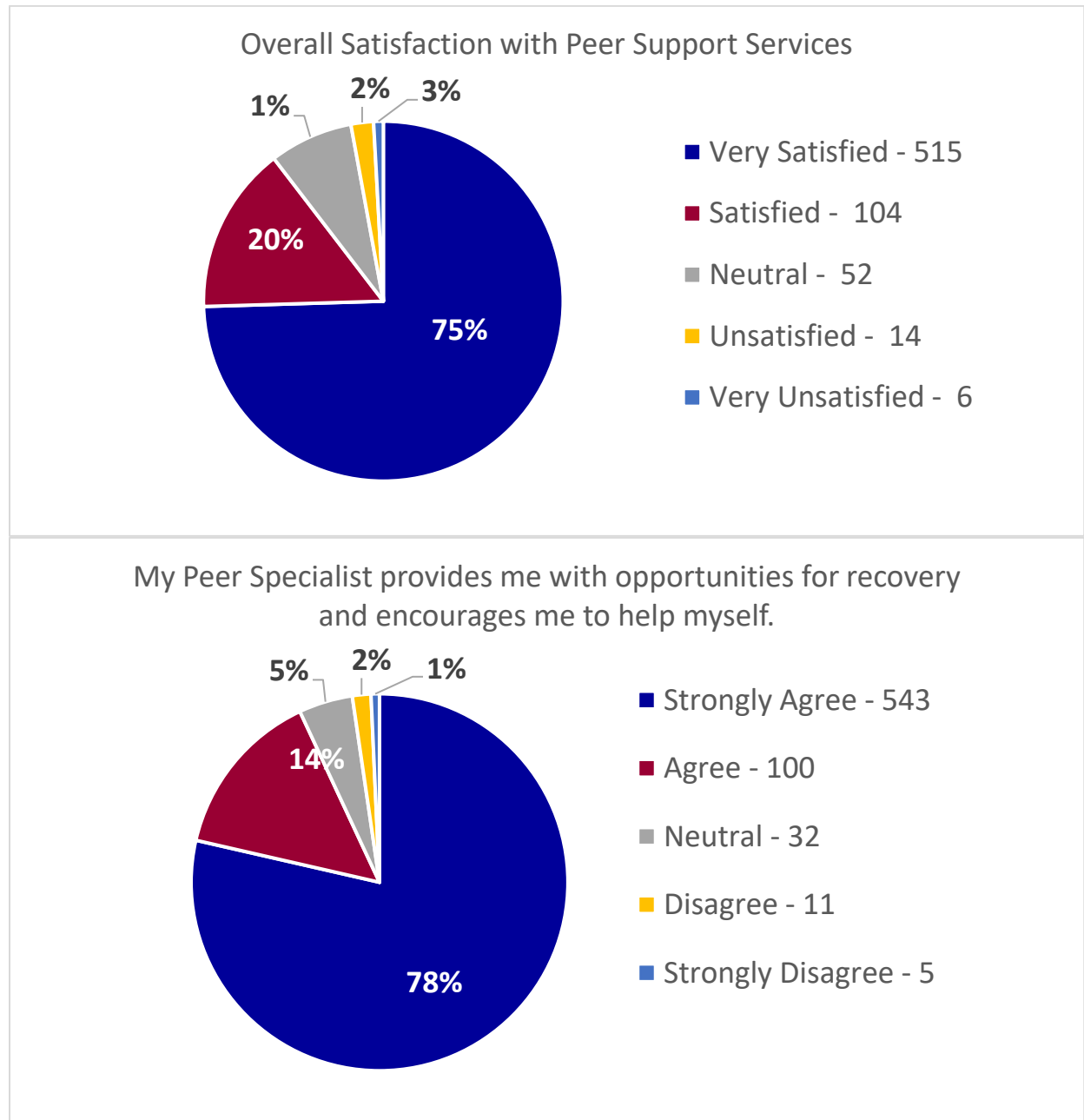
2. Quality Assurance Surveys are conducted monthly by the Compliance Department. Clients are selected by IRP Revision due date. The QA survey is utilized to determine the quality-of-service provision provided by Peerstar of Pa. The goal of the policy is to survey 100% of active peers every 6 months. QA surveys will begin at the peer's admission to the Peer Support Program. Any quality questions found to be unsatisfactory will be forwarded to the Director of Compliance for operational corrective action.

CONTINUOUS QUALITY IMPROVEMENT ANNUAL REVIEW 2024

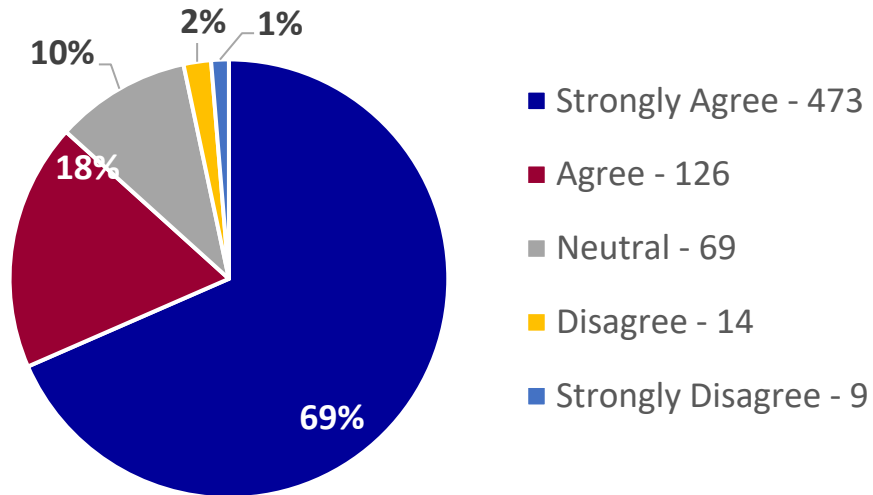
During January 2025, the Director of Compliance reviewed the CQI plan and presented the findings of the annual review to Peer Support Recipients, Certified Peer Specialists and CPS Supervisors. The Peerstar Annual Report will include an analysis of the findings of this review and identify action steps taken to address the annual review findings. The following is a summary of the findings.

SATISFACTION AND OUTCOMES

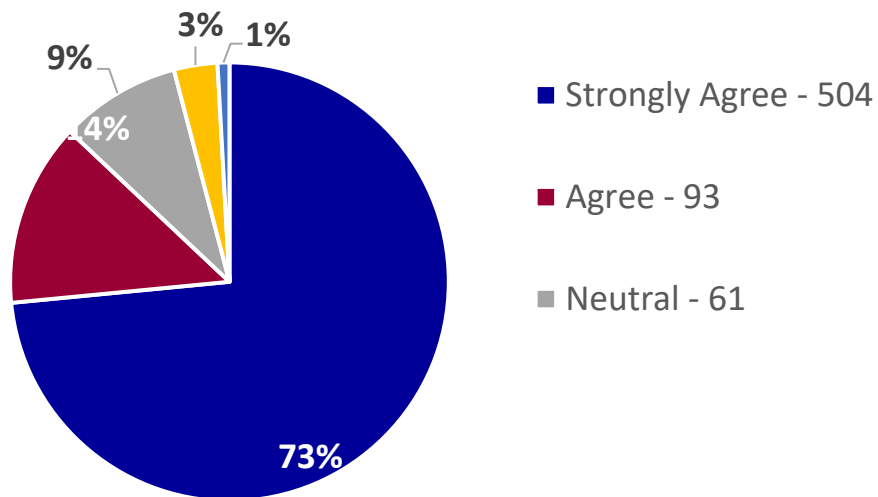
There were 691 peer surveys completed in 2024. No significant deficiency trends were found in quality or satisfaction. Peerstar of Pa utilizes data in the Credible electronic health record to gather more specific and objective outcome data related to overall outcomes and individual outcomes utilizing ANSA scores and daily rating of progress.



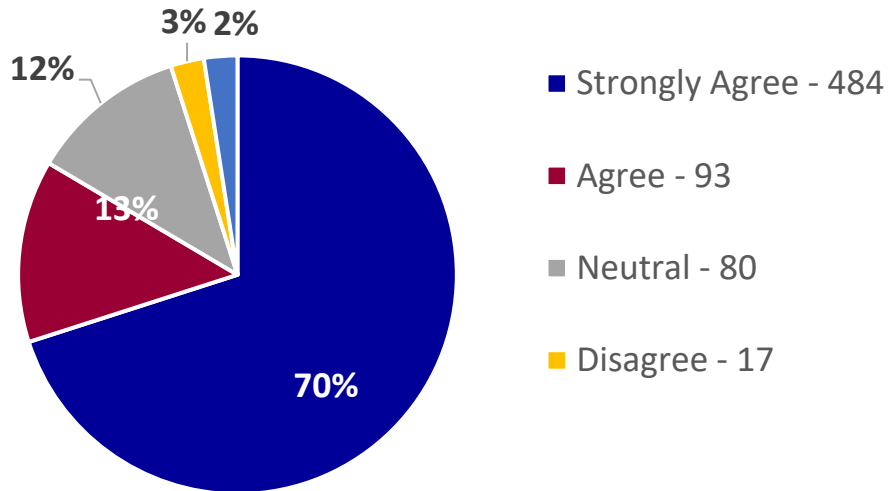
My Peer Specialist teaches me new skills that I use for recovery.



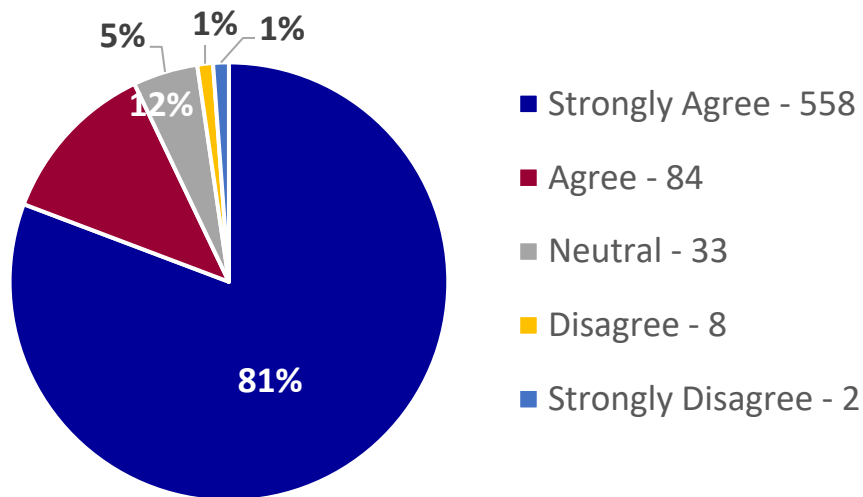
My Peer Specialist helps me find other services that I need.



My Peer Specialist helps me use natural resources for recovery.



My Peer Specialist supports my sense of well-being.



INDIVIDUAL RECORD REVIEWS

In 2024, Compliance Department staff reviewed approximately 1150 individual peer charts with no significant trends noted. The review included the timeliness and appropriateness of service by reviewing medical necessity of service provision. Record reviews verified all services began timely, within one year of LPHA recommendation, as per OMHSAS policy, and as per the individual recovery



plan. Benefits are verified upon referral and through bi-monthly EVS checks. Also, outcomes of individual peers are provided on the home page of the individual's medical chart.

LICENSING INSPECTION RESULTS

No deficiencies or citations were found in any Peerstar or PAA license inspections in 2024.

CULTURAL COMPETENCY:

Peerstar of PA has implemented multiple practices to ensure that we are respecting the cultural needs of our peers while enhancing the cultural competency of our staff. We continue to offer peers opportunities to share their cultural needs through both the intake process as well as the continued IRP process. IRP items specifically address peer needs in regard to cultural/ethnic needs, language needs, sexual orientation needs, gender needs, etc... In addition to providing peers multiple opportunities to discuss their cultural needs, staff are provided with additional opportunities to take a variety of cultural competency trainings as well as build their cultural competency resources through our online staff resource page. Lastly, all staff completed a Cultural Humility and Diversity training in 2024, which provided them with an opportunity to learn more about their own cultural needs as well as supporting individuals with differing cultures than their own.

CERTIFIED PEER SPECIALIST PROGRAM

As Peerstar of Pa continues to grow and enhance the quality of peer support services, the company has set strategic goals for 2025 that focus on improving documentation, strengthening peer engagement, and expanding services into new communities. To ensure high-quality and consistent documentation, Peerstar of Pa will implement a series of workshops focused on improving discharge summaries and their connection to each peer's recovery goals. These trainings will help employees develop clearer, more comprehensive records that reflect the peer's journey and outcomes. Strengthening documentation practices will support compliance, enhance continuity of care, and demonstrate the value of peer support in measurable ways.

Peerstar of Pa's new Quality Improvement (QI) Director has outlined a robust training plan to support staff in increasing engagement with peers. These initiatives will focus on addressing challenges in peer hours. Employees who are struggling to meet peer contact hour expectations will receive targeted support and guidance on improving engagement strategies. Workshops will provide staff with techniques to re-engage peers, address barriers to participation, and develop strategies to maintain consistent peer relationships that will help alleviate peer cancellations.

In alignment with Peerstar of Pa's mission to extend its reach, the company will be expanding into two new counties in 2025. This growth will allow more individuals to access high-quality peer support services while providing employees with new opportunities for professional development and leadership.

By investing in documentation improvements, peer engagement initiatives, and strategic expansion, Peerstar of Pa is committed to strengthening its impact, improving service delivery, and ensuring the success of both peers and staff in 2025 and beyond.



CERTIFIED RECOVERY SPECIALIST PROGRAM

For 2025, Certified Recovery Specialists had additional trainings to enhance peer engagement and documentation. The program increased Certified Recovery Specialist staff and offered specific trainings throughout the year. Questions specific to recognizing an overdose were added to the contact note, and staff have been trained in overdose risk factors to increase awareness of the signs of an overdose. Certified Recovery Specialists continue to communicate and collaborate with the SCA and other substance abuse providers across the state to address multifaceted needs of peers in the program.

PEER SUPPORT SERVICE DESCRIPTION

As of 2024 the Peerstar of Pa PSS service description was reviewed and found to be following state and managed care regulations. The provision of services was reviewed, and all services are found to be delivered in accordance with the Service Description and regulations. As needed, updates to the Services Descriptions will be completed. Also, copies will be sent to the various regional State Licensing offices for review and approval.

PEER INVOLVEMENT

During January 2025, the Director of Compliance presented the findings of the annual review to the Certified Peer Specialists and Supervisors, and Peer Support Recipients.

Peer support recipients commented on how satisfied they were with their services overall. Peers mentioned being happy to have someone help them achieve their goals while helping them through recovery.

When discussing future quality improvements to the peer support program, one peer and peer specialist discussed problems surrounding Westmoreland County's rule of not billing for services during transportation. One peer mentioned how nice it is to for his CPS to take him out into the community. It helps him with social goals, building supports, and avoiding feelings of isolation. One peer commented, "The program has been a life changer for me."

Peers discussed one improvement they would like to see is a decrease in the length of time it takes to complete IRP revisions. It can be difficult for them to sit and stay focused for two hours while going through the plan. One peer stated it would be helpful to discuss more about the progress they were making on goals, rather than going through all the goal statements again. Overall, peers said they were satisfied with the services and had no other suggestions for program improvement.

Peer specialist supervisors discussed how it would be helpful for CPS to have more education on linking peers to other services. They feel there are some CPS who have not had experience in this line of work and are unsure of how to connect their peers to other resources and providers.

In 2024, significant strides were made in enhancing service accessibility, efficiency, and engagement. The continued availability of telehealth has proven to be an invaluable resource for employees, allowing peers to provide timely support during immediate concerns or outside of regular face-to-face sessions. Additionally, there has been notable growth in engagement within nursing homes, empowering older



adults and expanding the organization's impact in senior care. To further improve operational efficiency, the addition of an Office Clerk Manager has streamlined processes, reduced errors and enhanced the accuracy and timeliness of contact notes and time sheets. These achievements have strengthened the organization's ability to provide high-quality, responsive care while optimizing administrative functions.

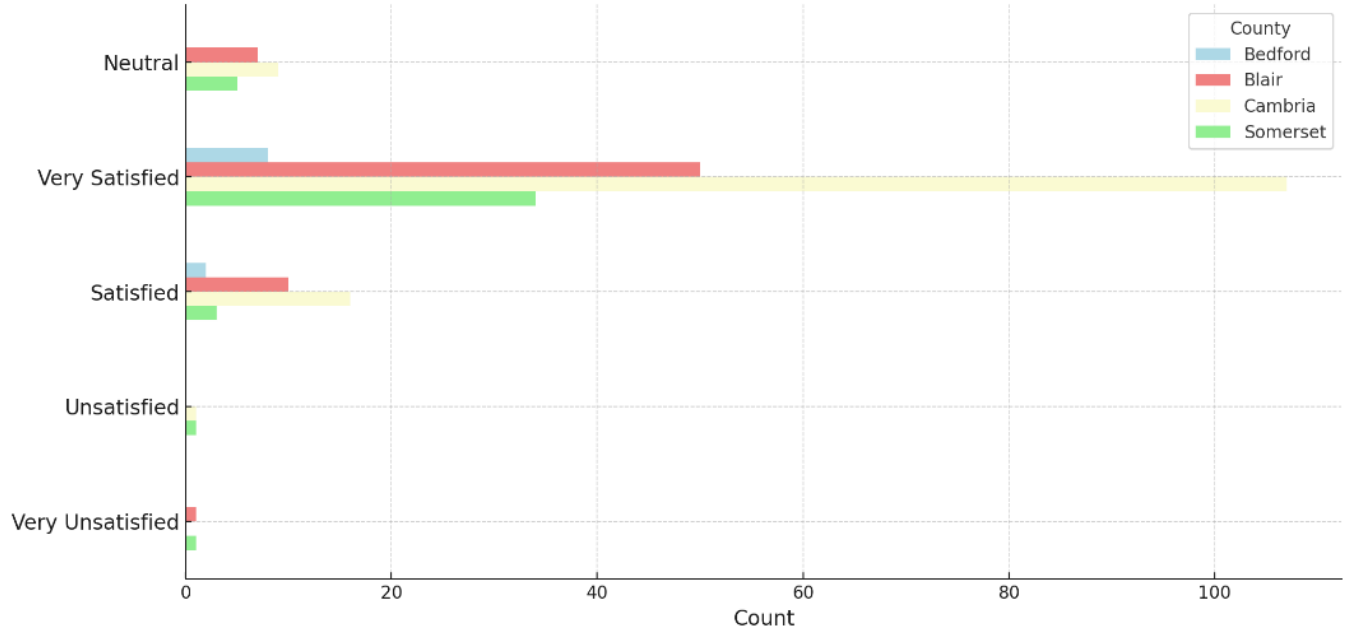
Suggestions for continued quality improvement in 2025:

1. Specialized training and workshops for employees who struggle to write a narrative in their contact notes.
2. Increased education on working with older adults in nursing homes, including working with individuals with dementia.
3. Expand training on Peerstar of Pa's specialty programs, including forensic, co-occurring, and EAPS.
4. Continue to encourage staff and peers to take the opportunity to be a member of Peerstar of Pa's committees, advisory board, community events, and online events.
5. Expand the CRS program as Peerstar of Pa increases the availability of CRS staff.
6. Review and enhance the discharge summary process to include better narratives and connect peer goals throughout services.
7. Offer support to new employees on how to link peers to resources and providers they may need.
8. Offer workshops to assist CPS staff in increasing utilization and meeting peers expected hours.

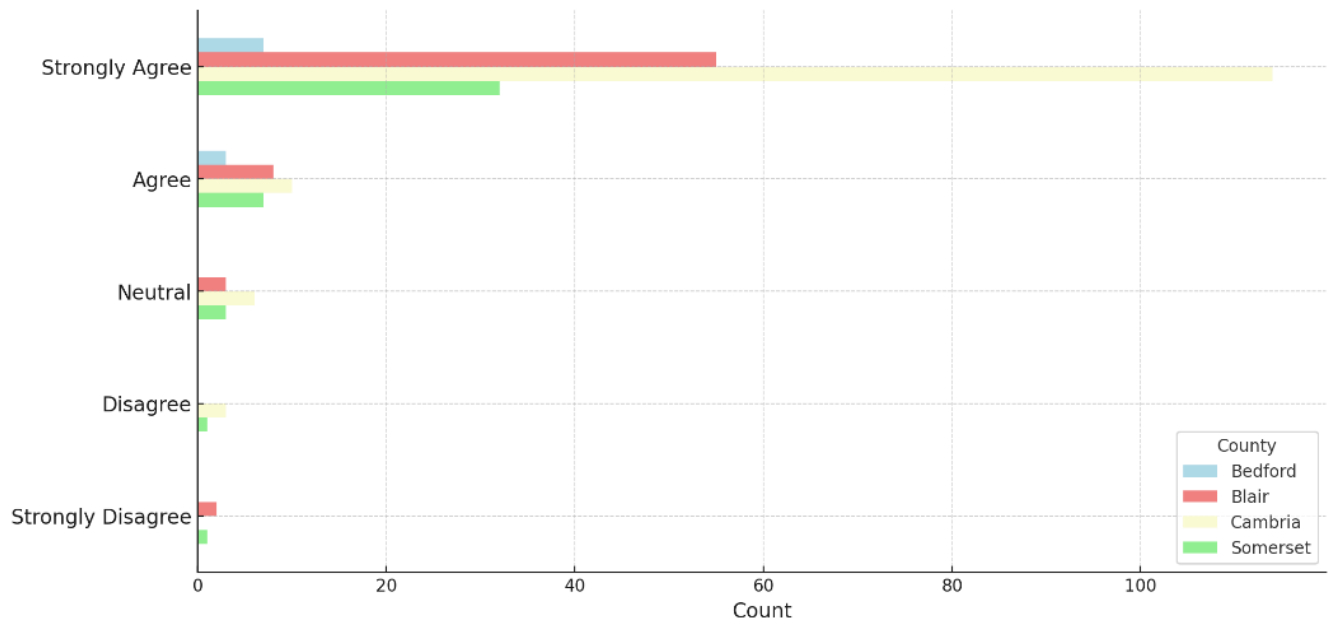
PEER SATISFACTION AND OUTCOMES BY LICENSE

BEDFORD, BLAIR, CAMBRIA, SOMERSET

I'm Satisfied with Peer Support.



My CPS offers me opportunities for recovery and encourages me to help myself.

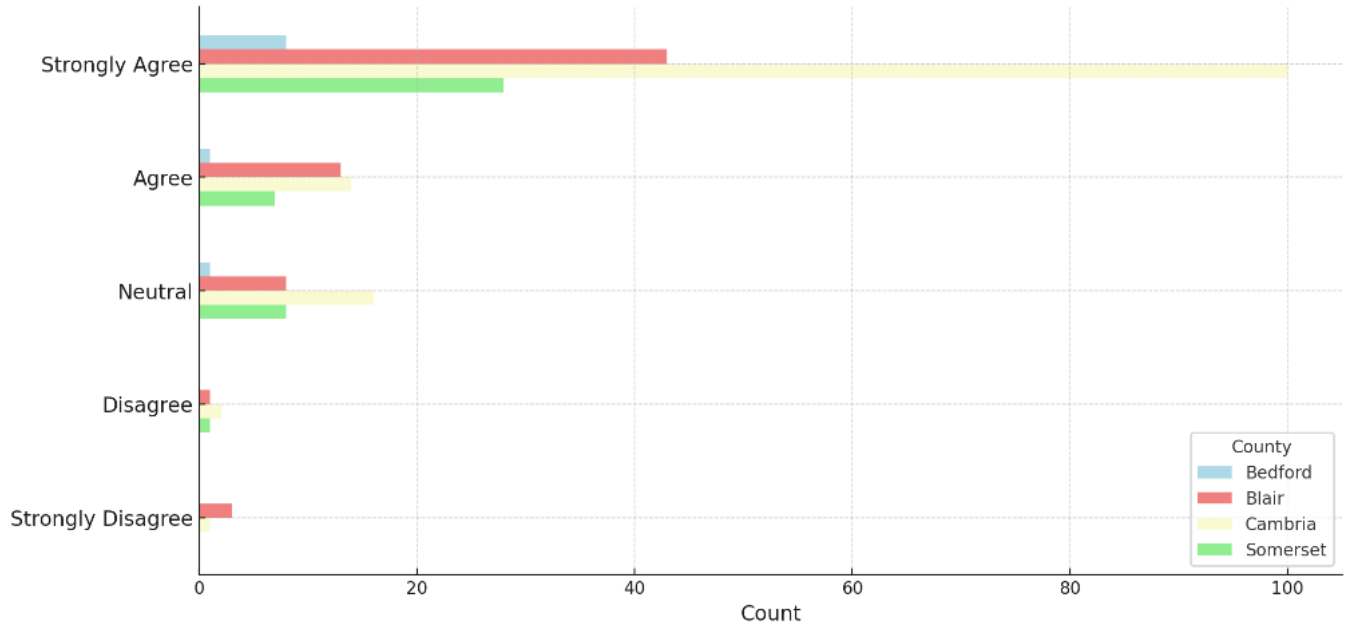




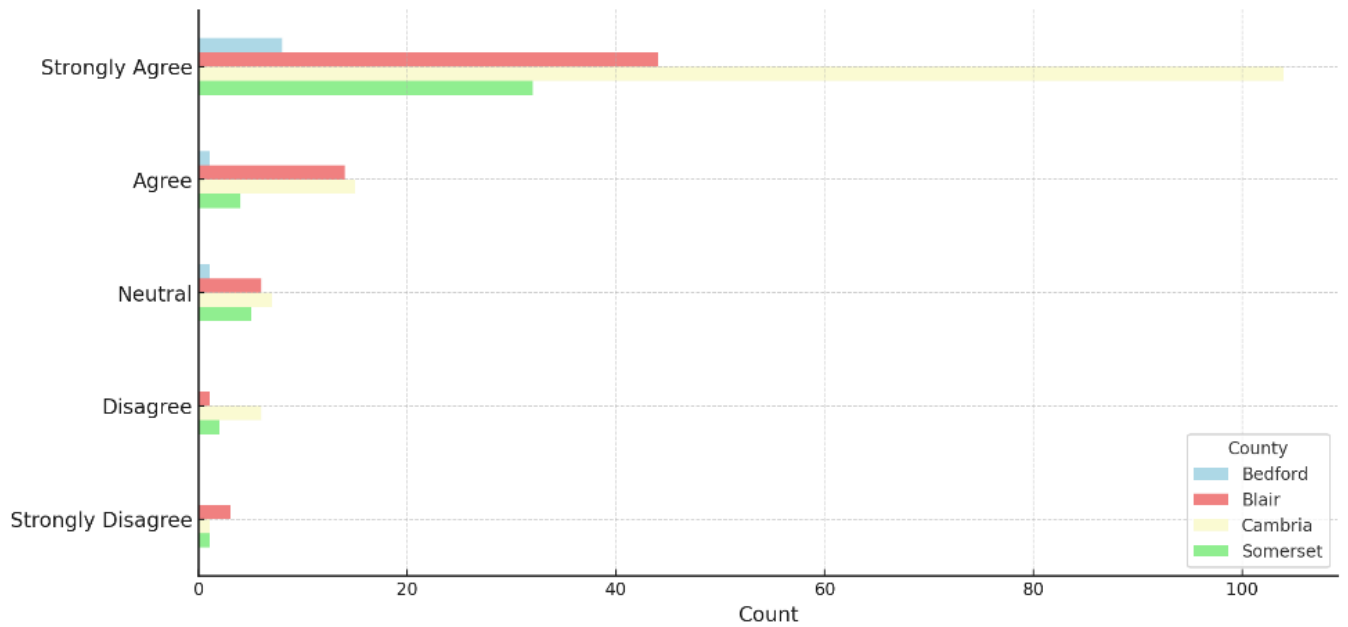
PEER STAR[★] of PA

A COMMUNITY BEHAVIORAL HEALTHCARE SERVICE
WORKING TOWARD RECOVERY AND INTEGRATION

My CPS teaches me new skills that I use for recovery.



My CPS helps me find other services I need.

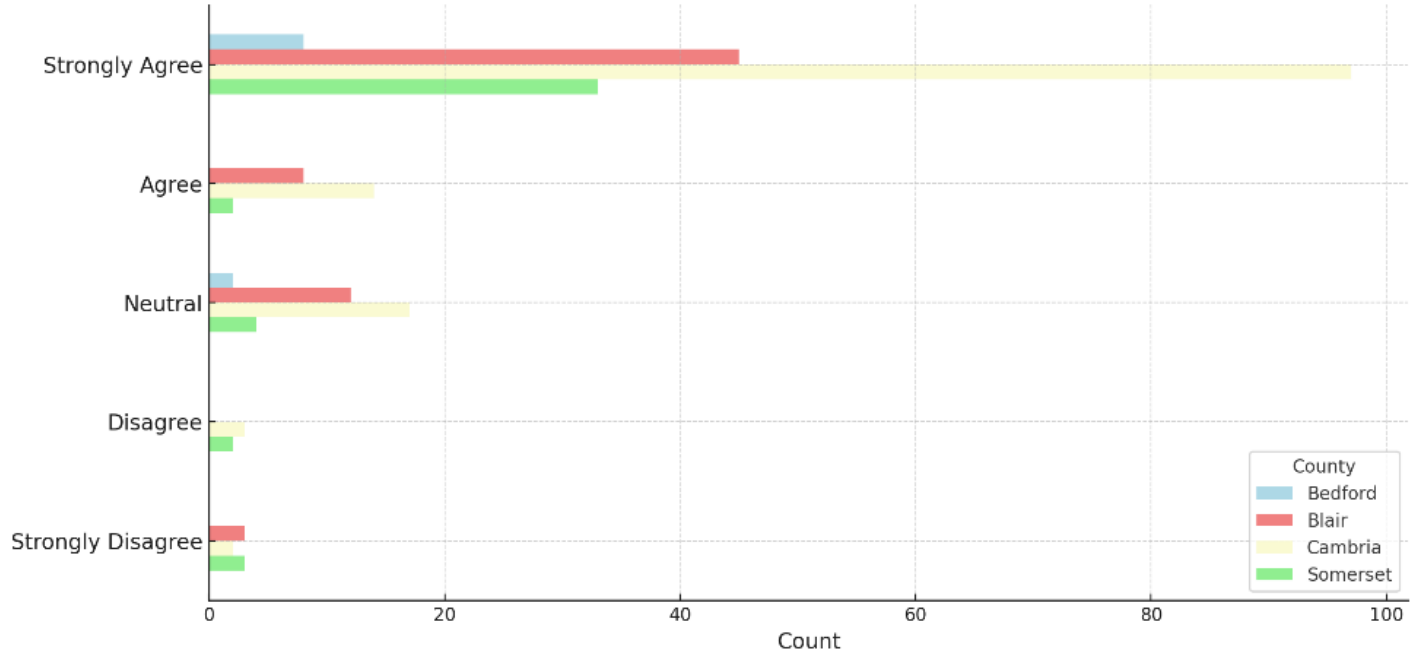




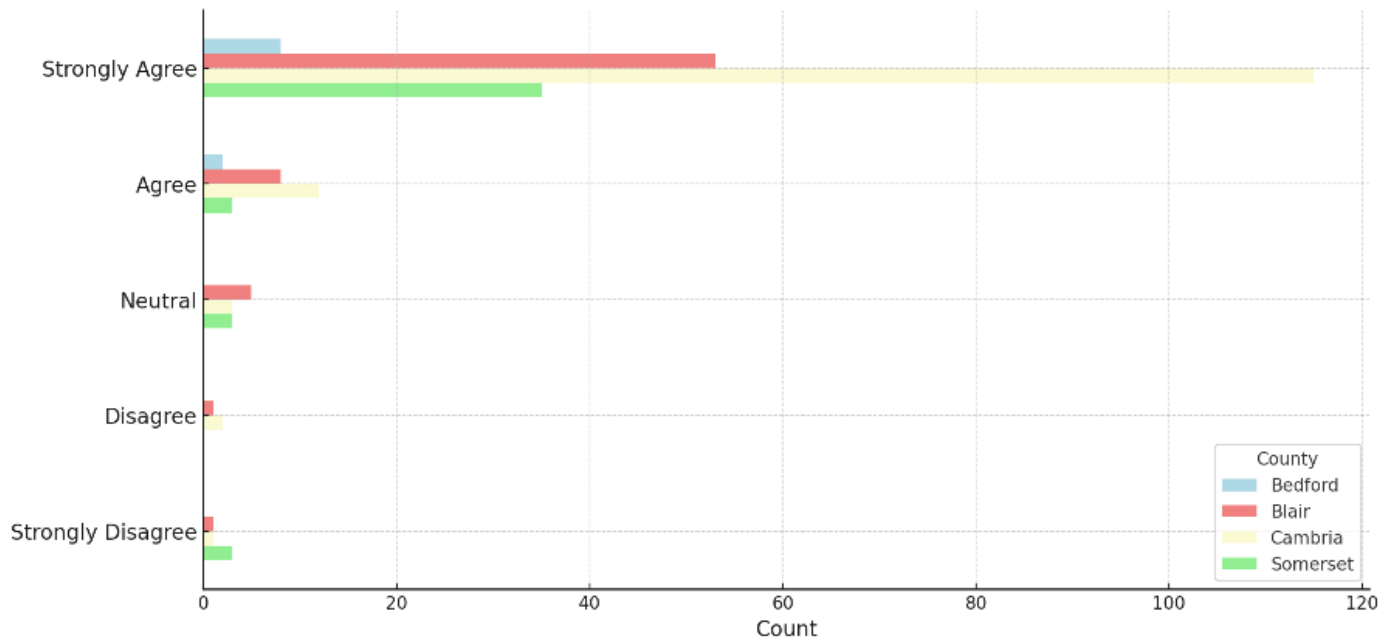
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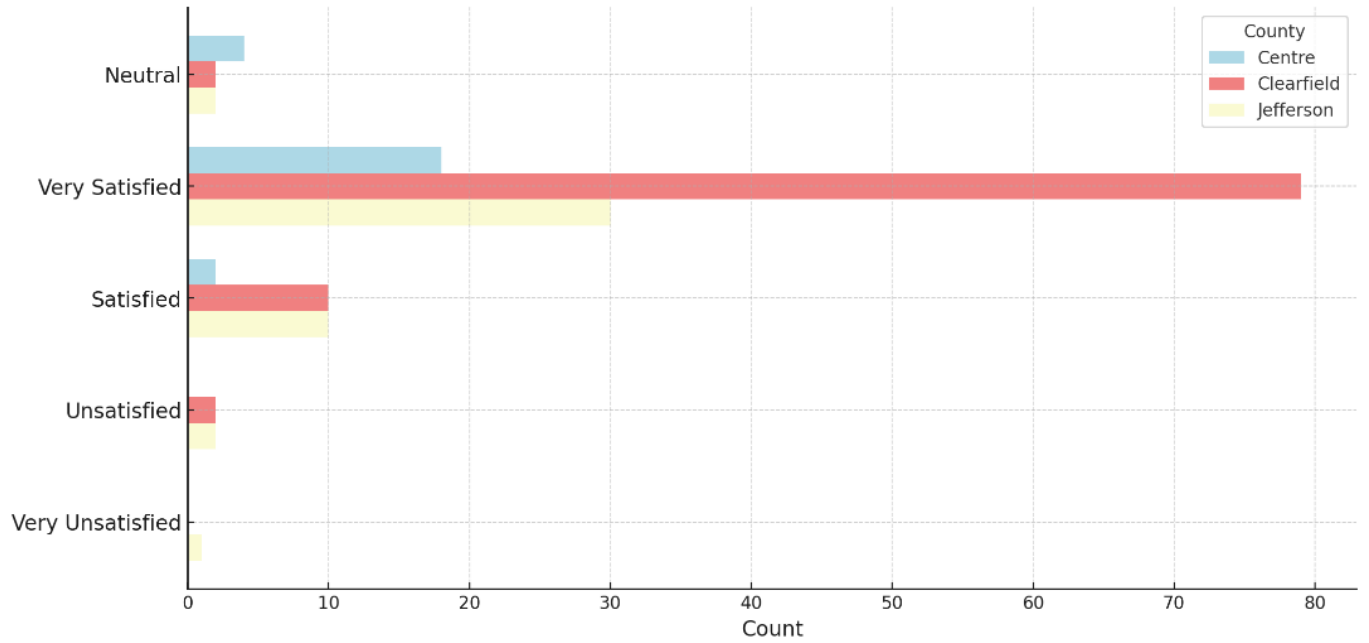


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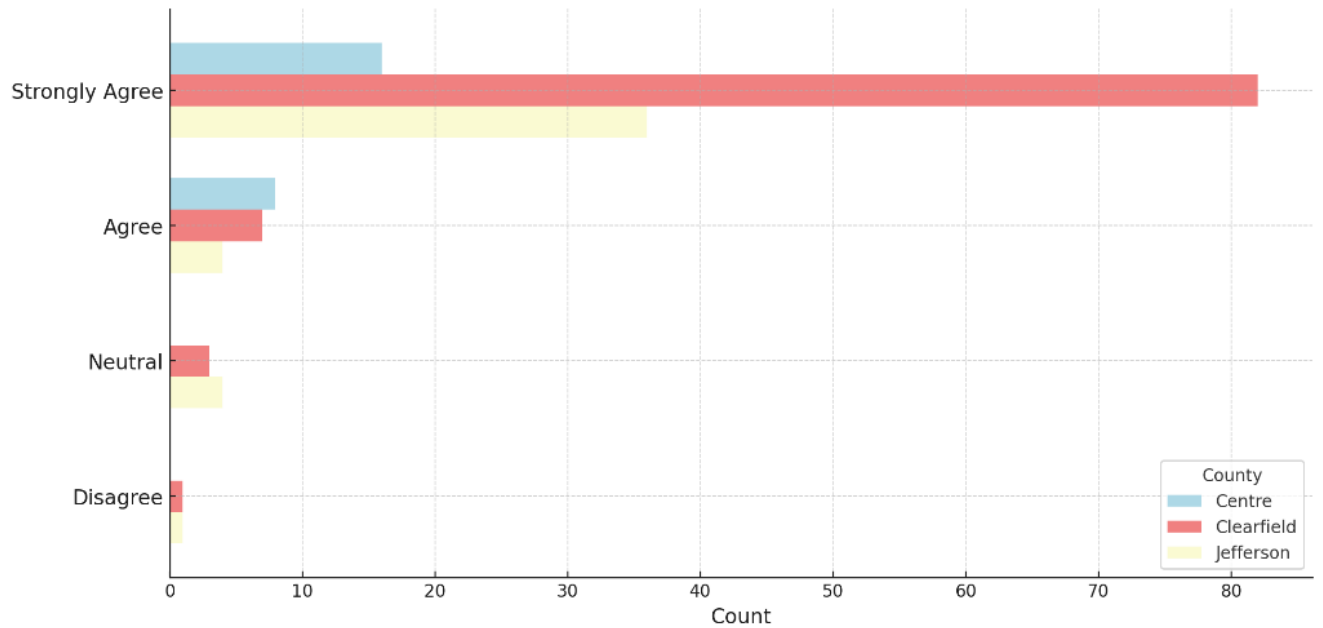


CLEARFIELD, JEFFERSON, CENTRE

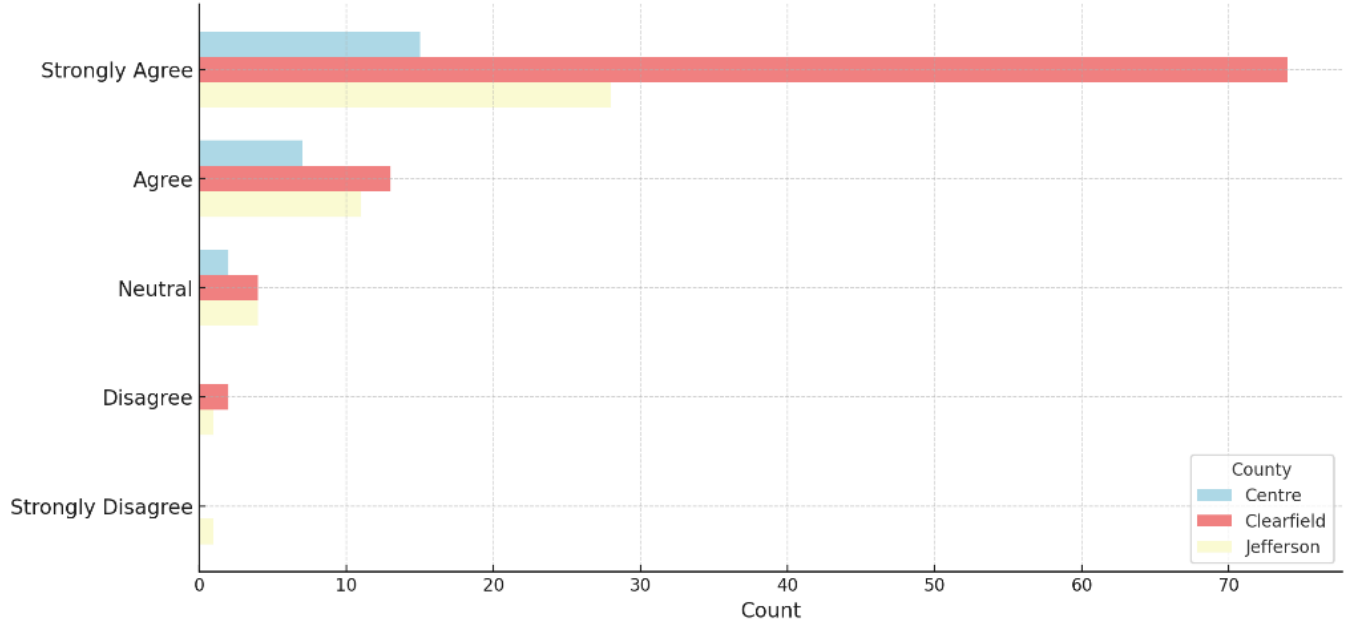
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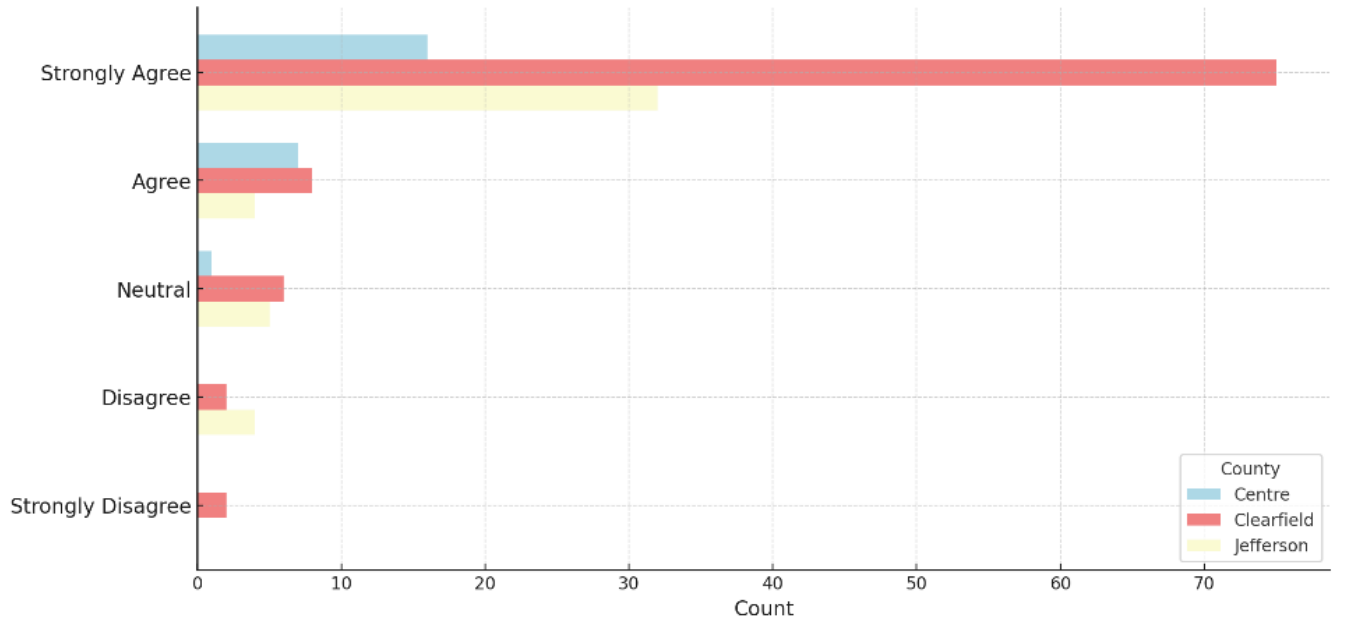
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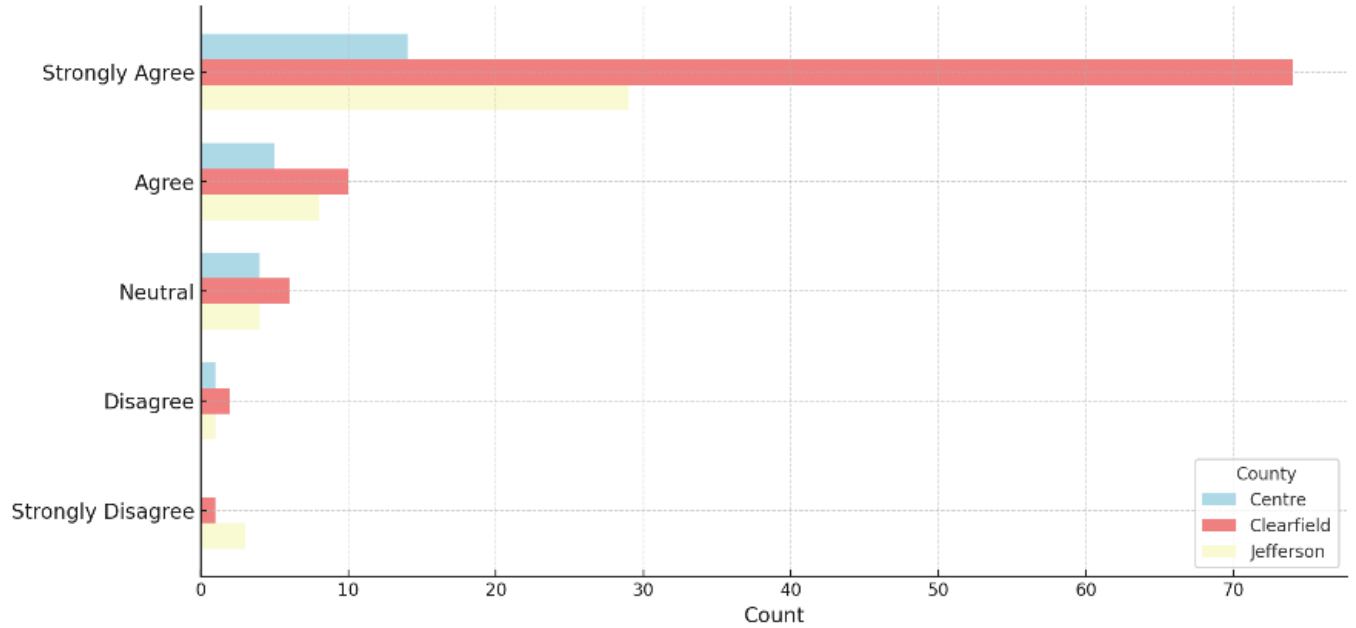




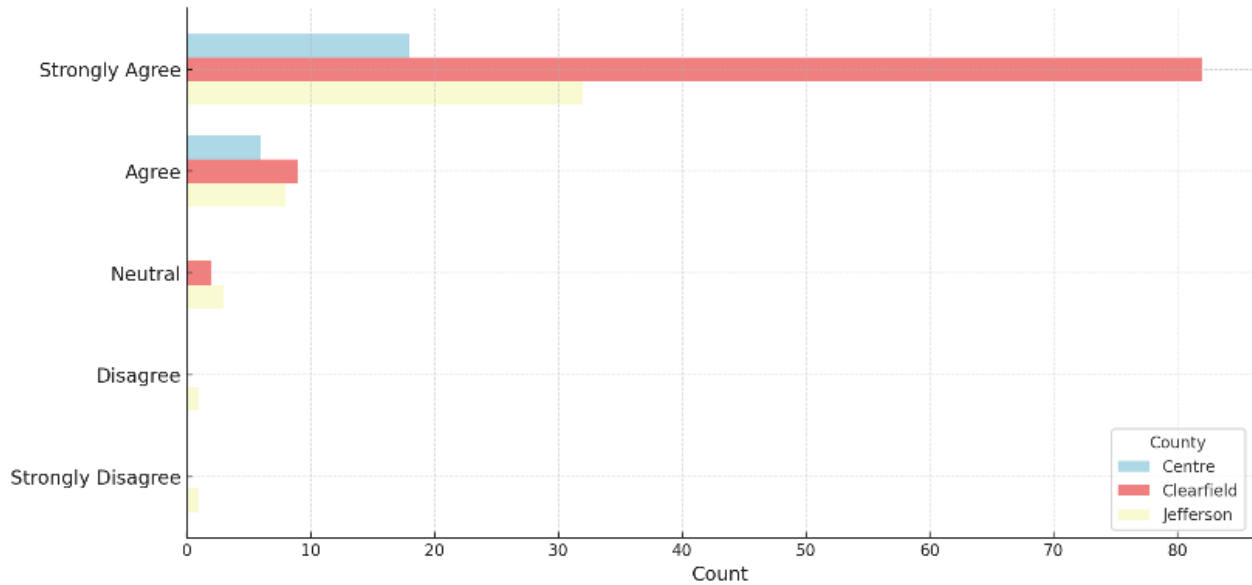
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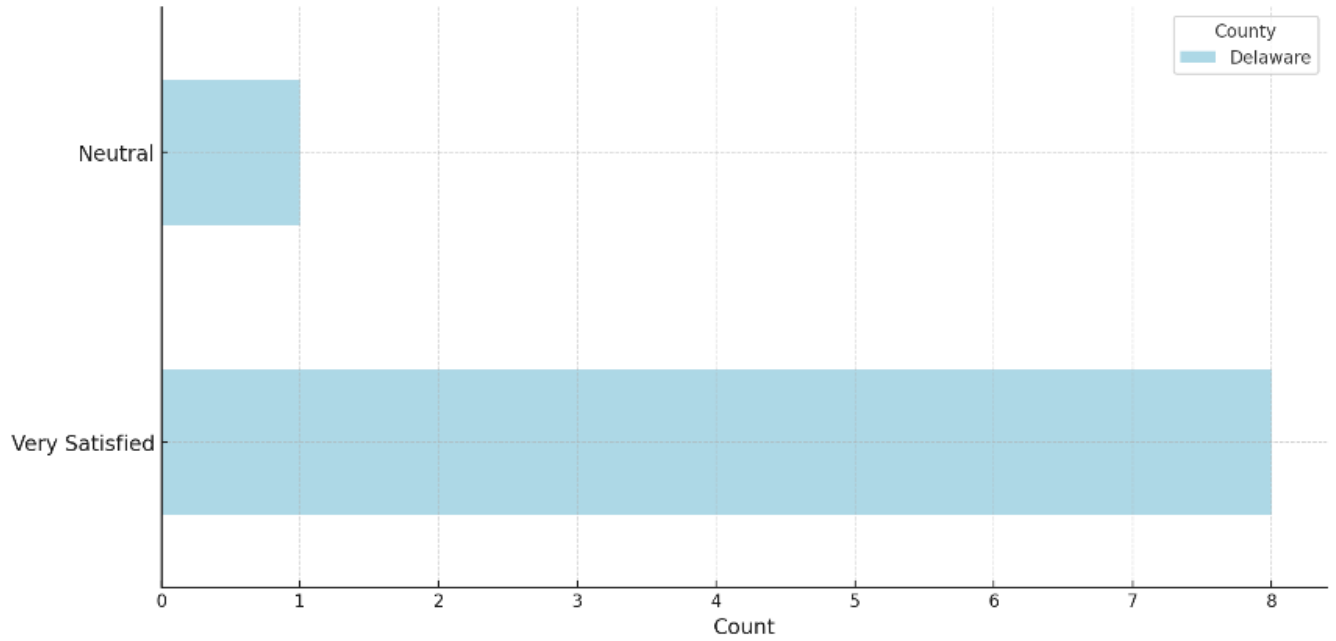


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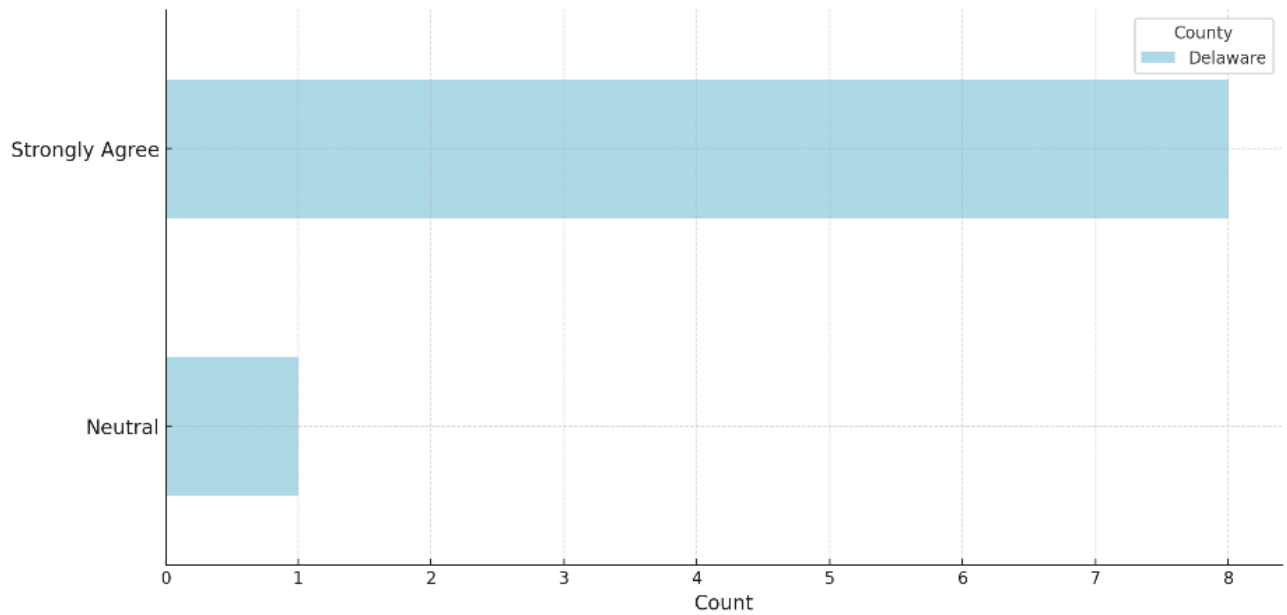


DELAWARE

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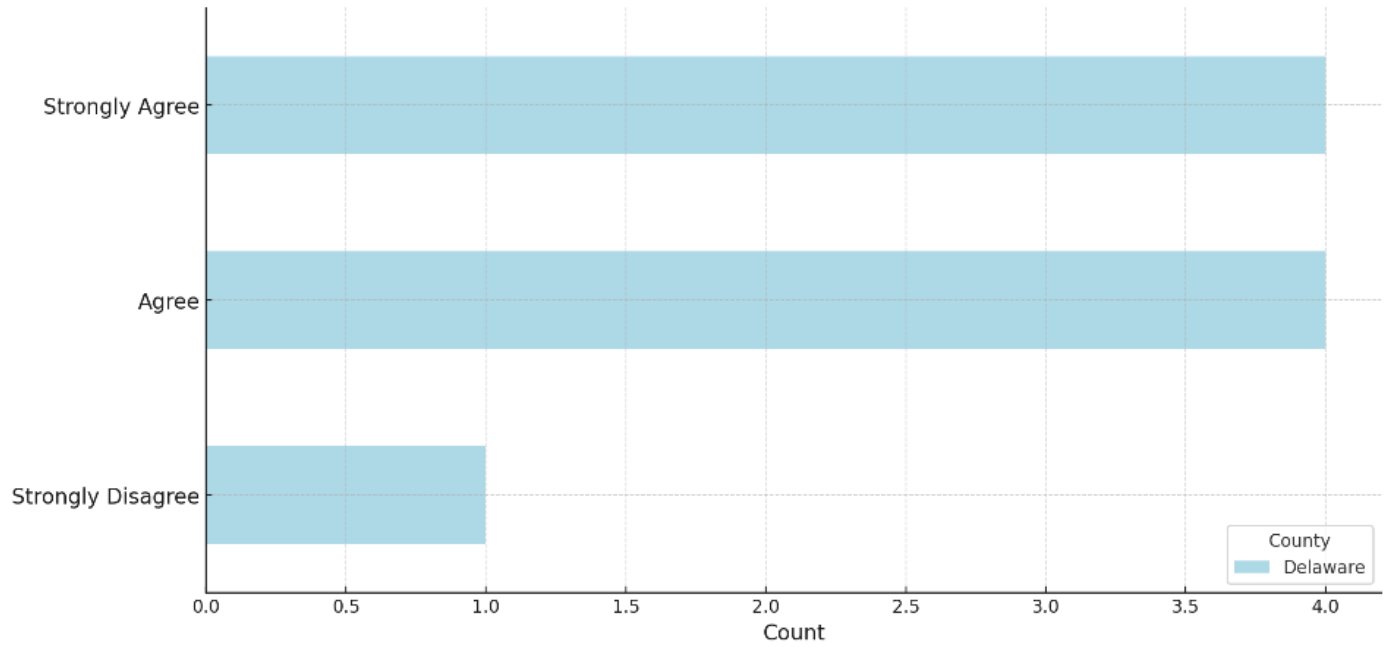




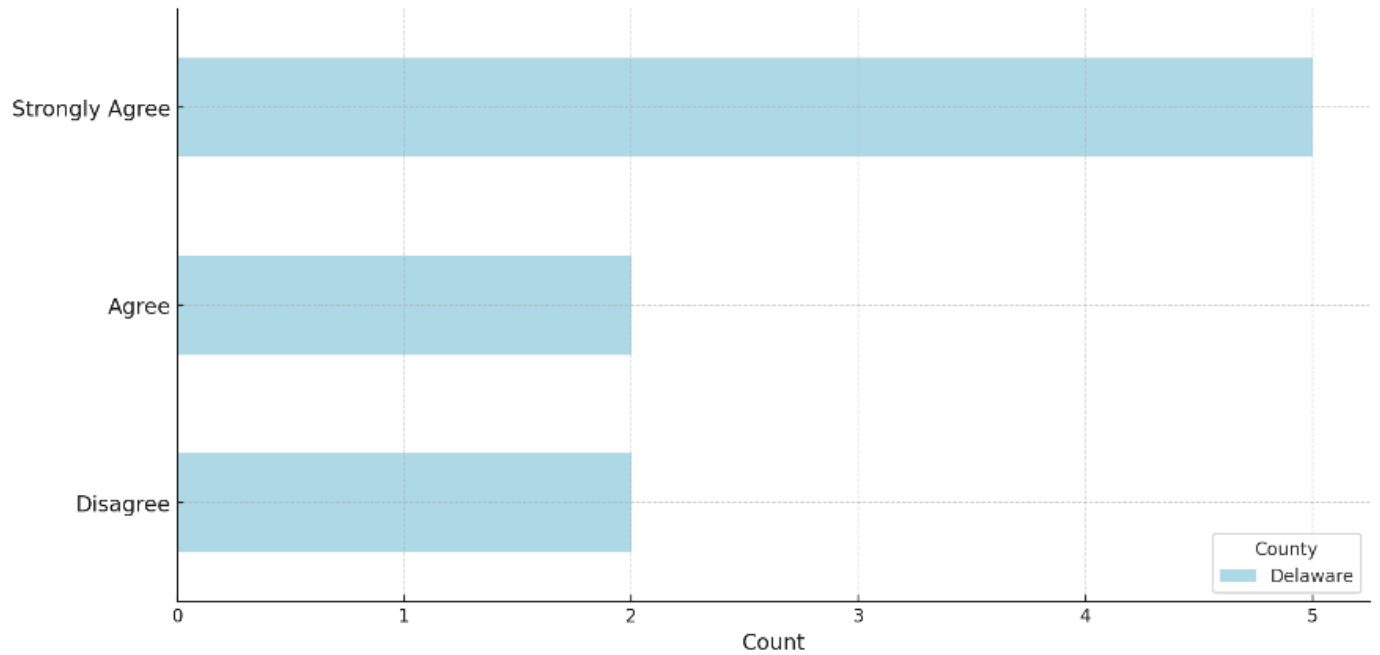
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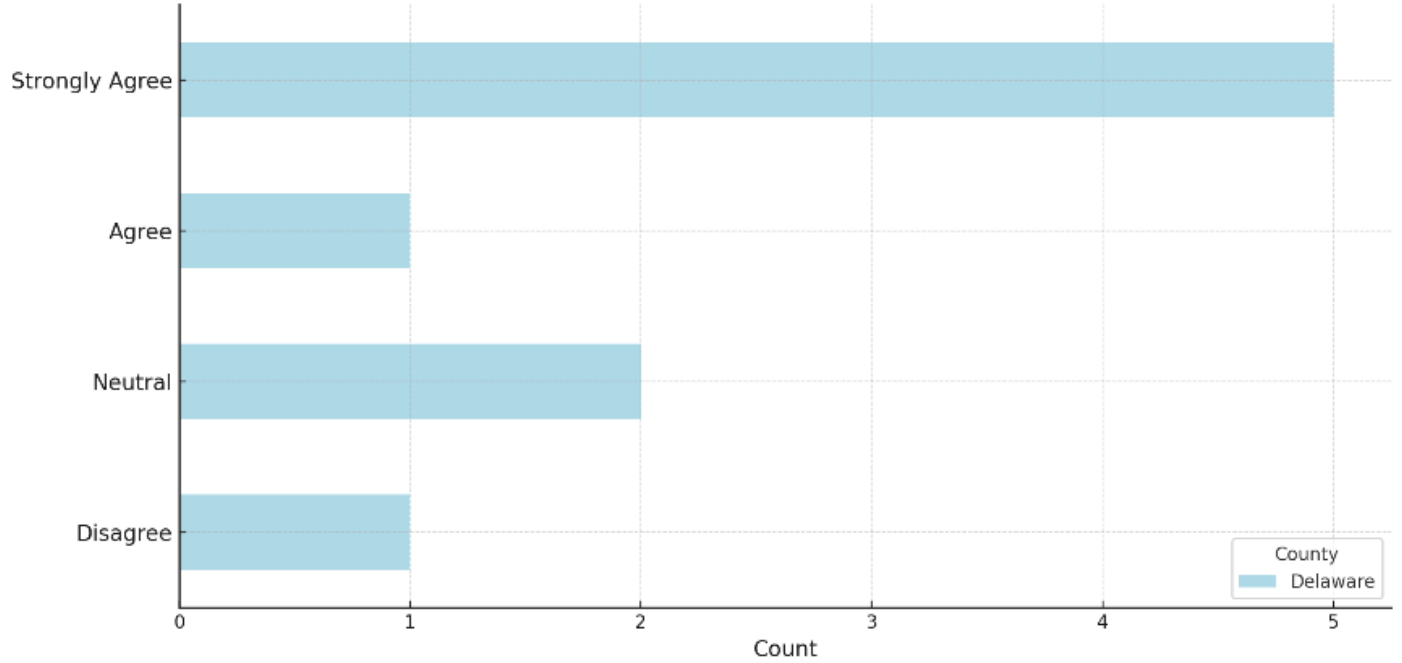




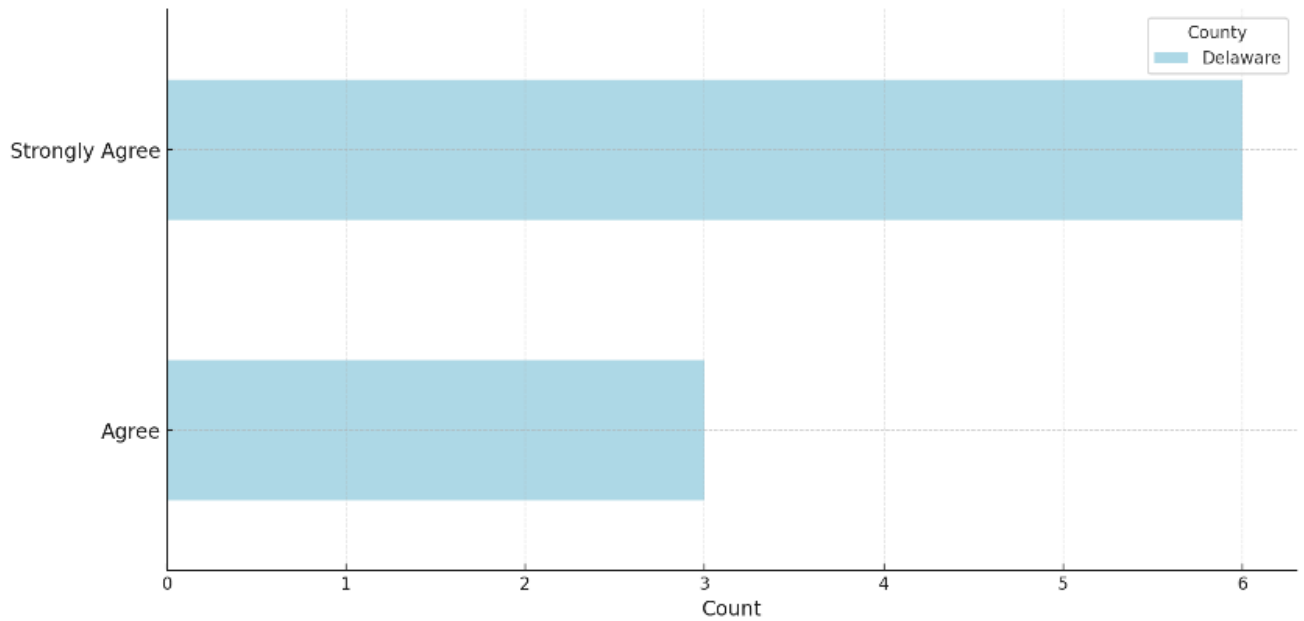
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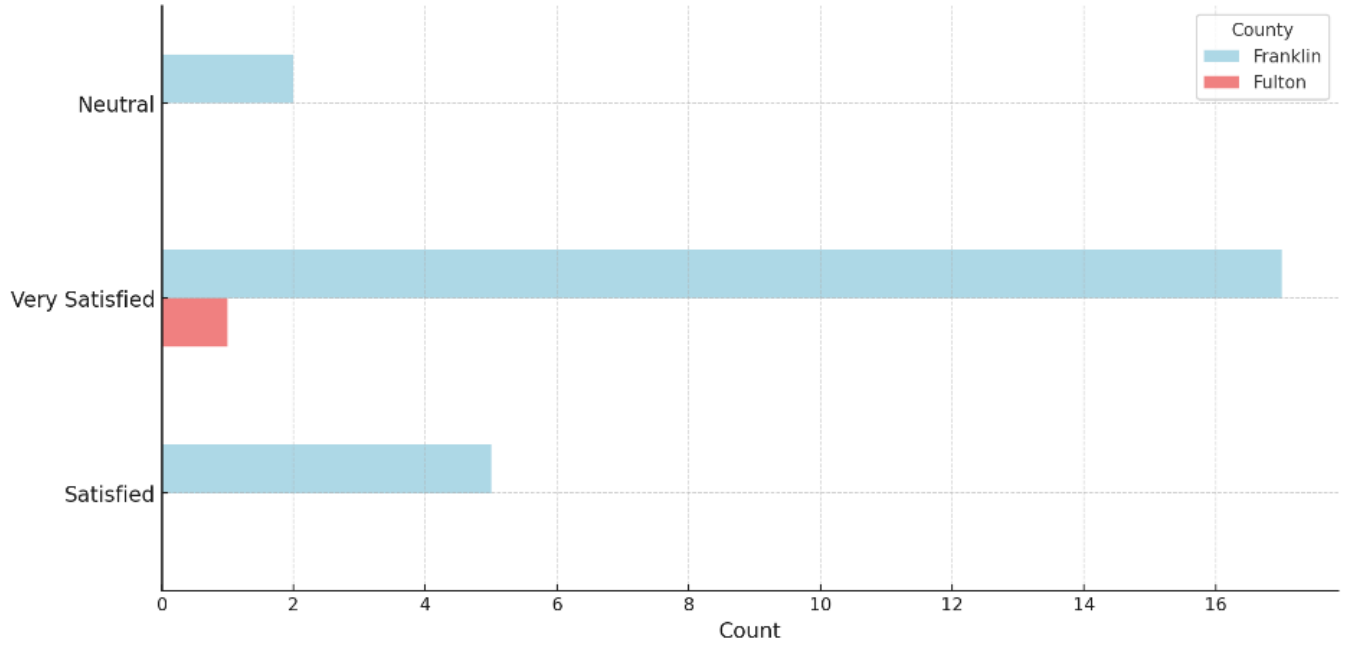


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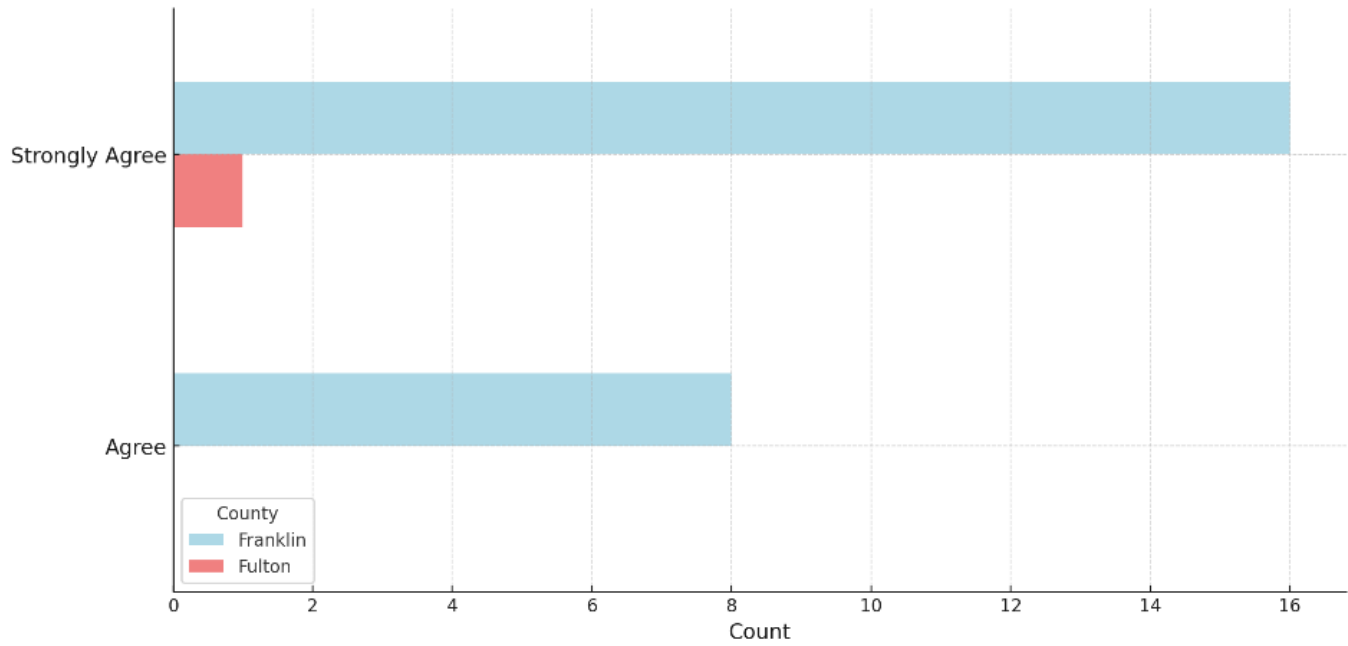


FRANKLIN, FULTON

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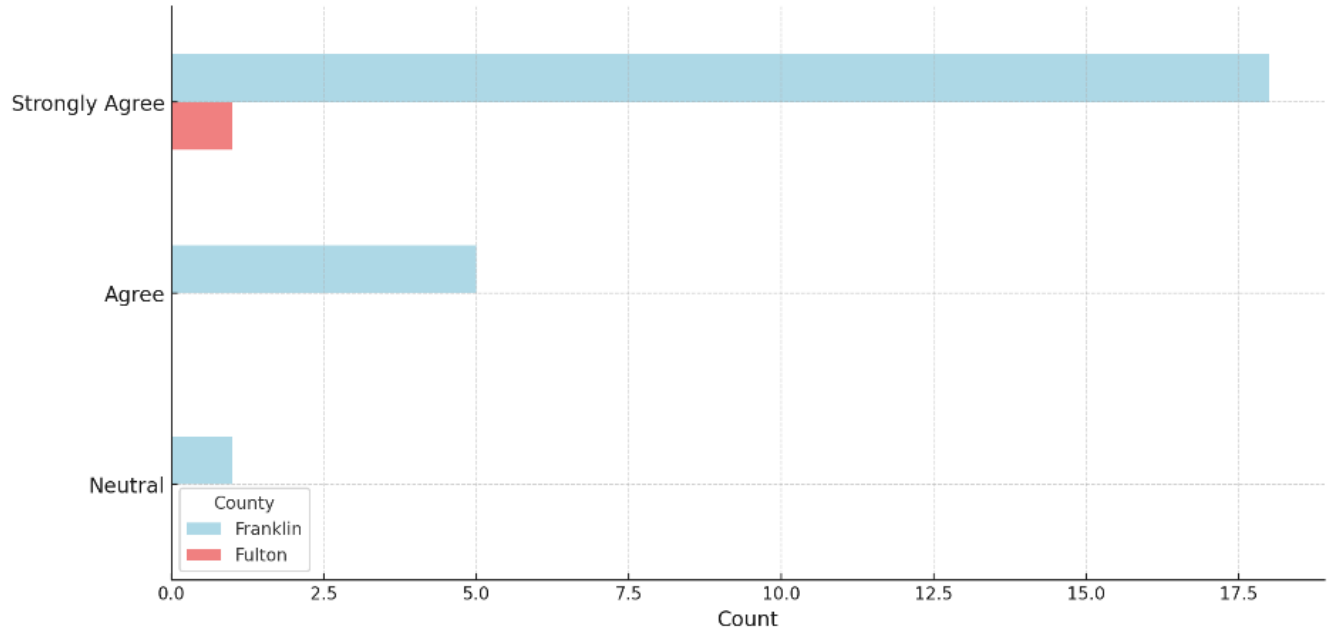




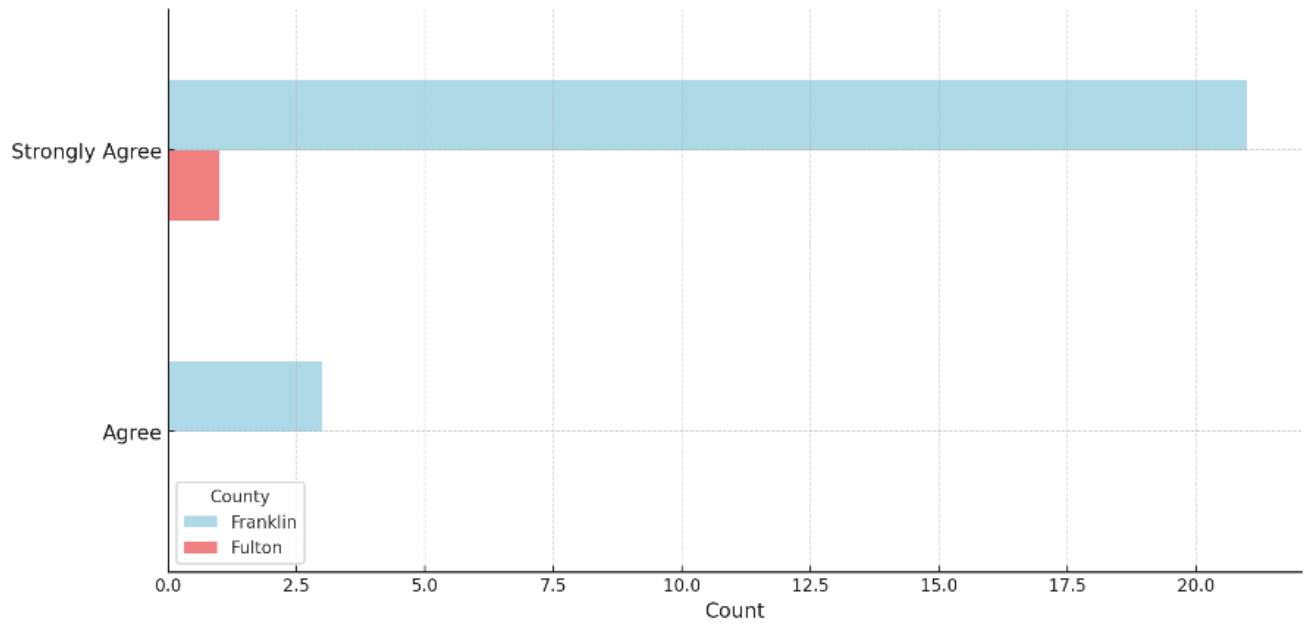
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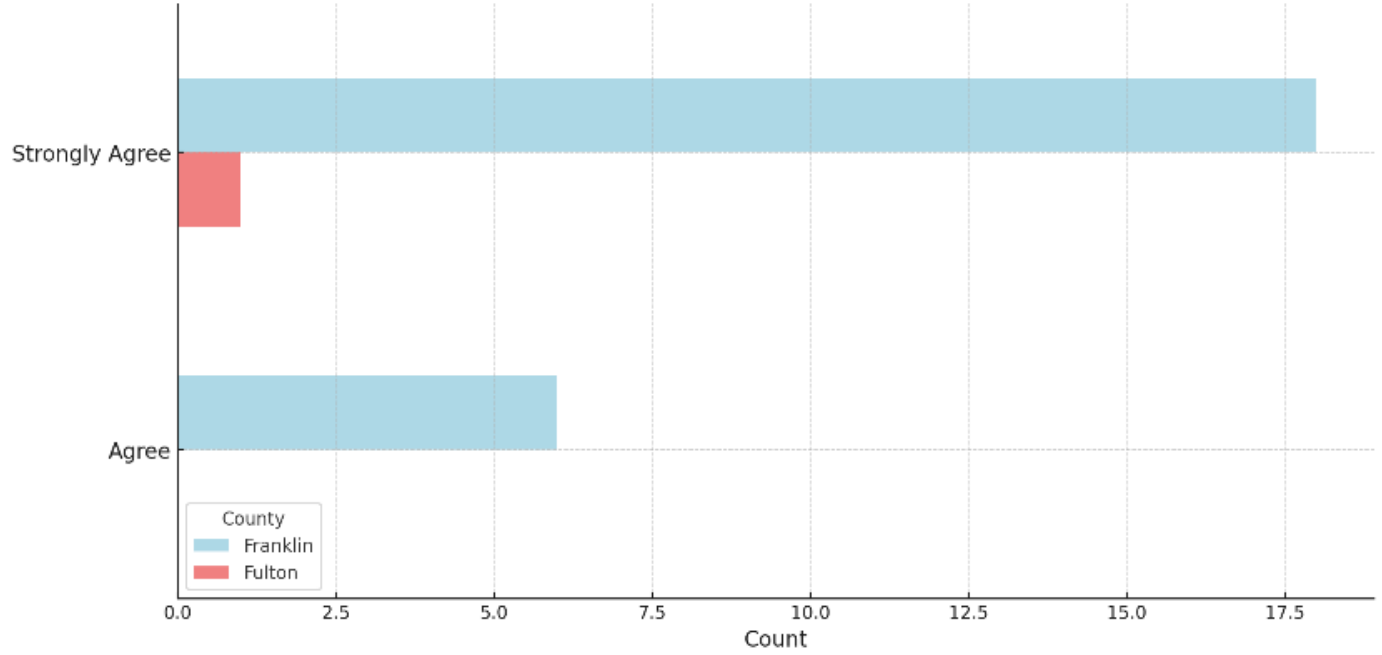




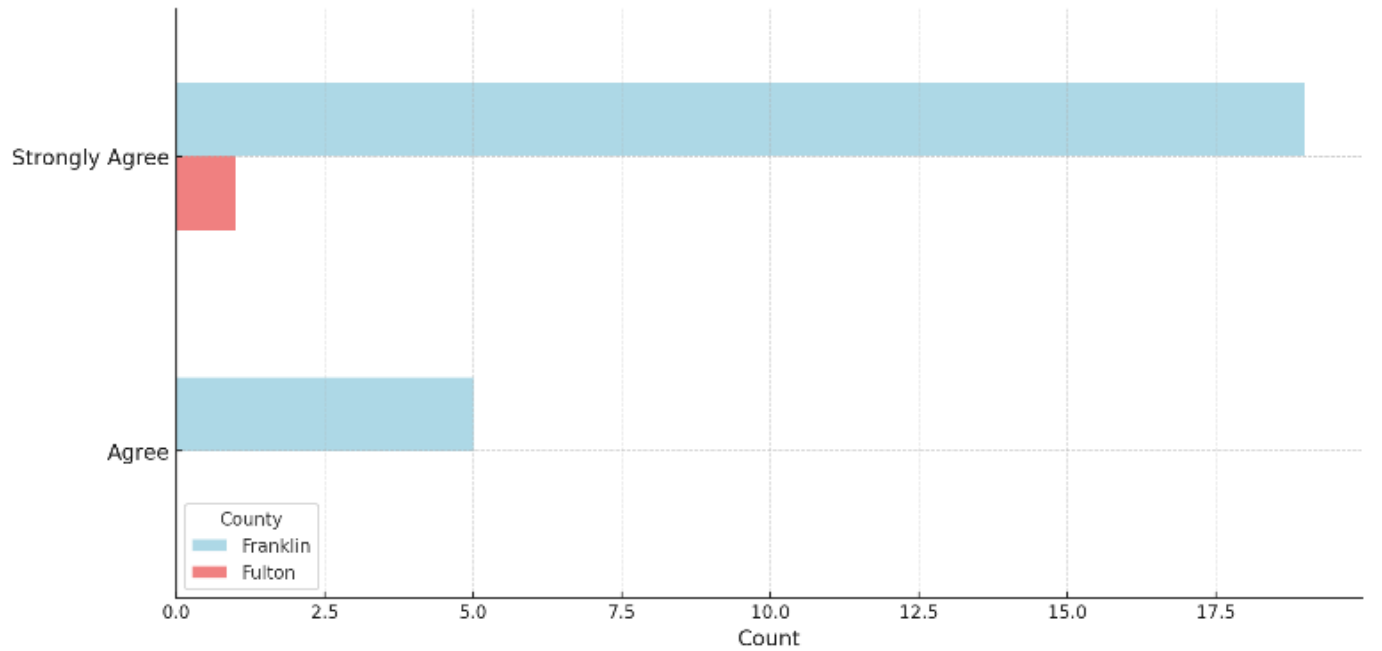
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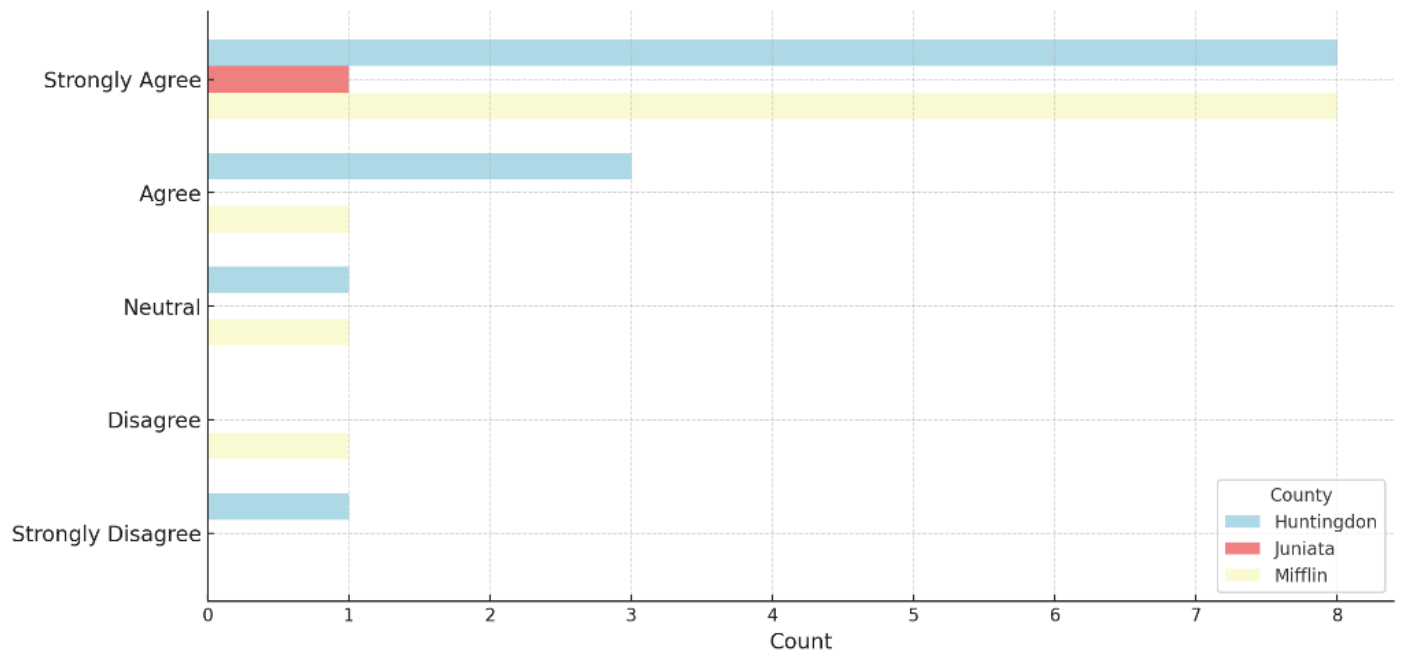


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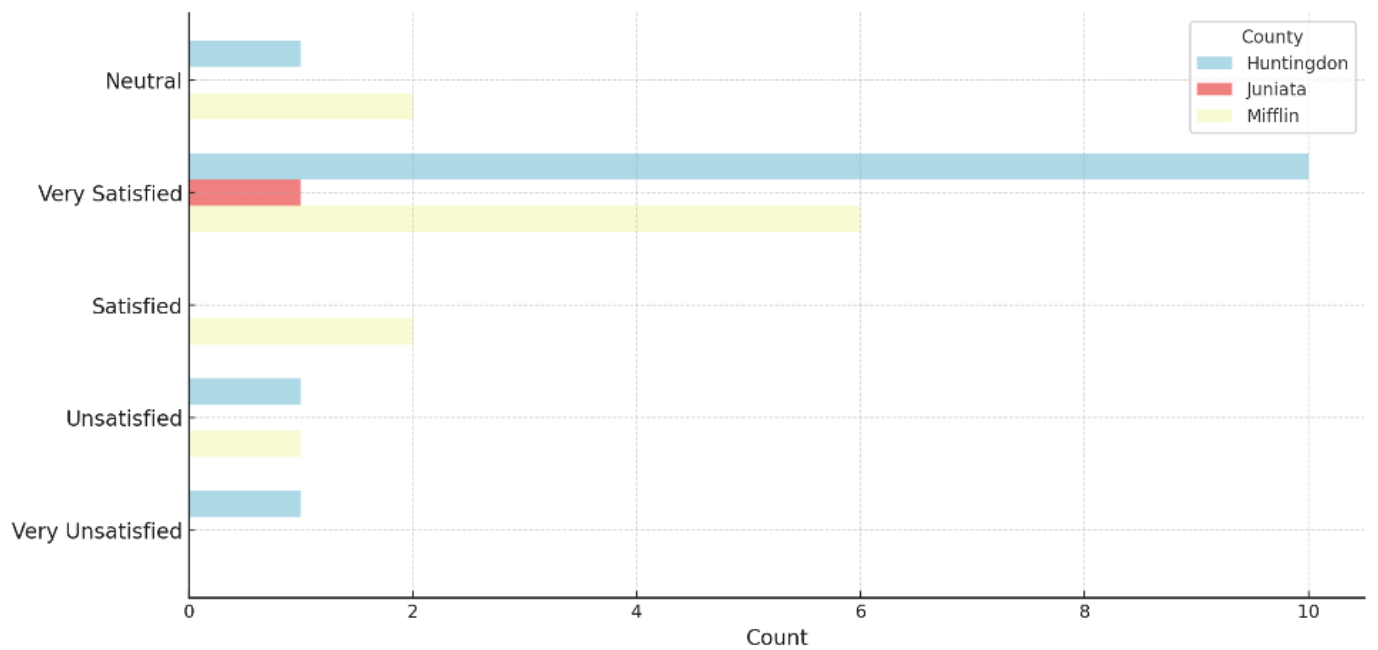


HUNTINGDON, MIFFLIN, JUNIATA

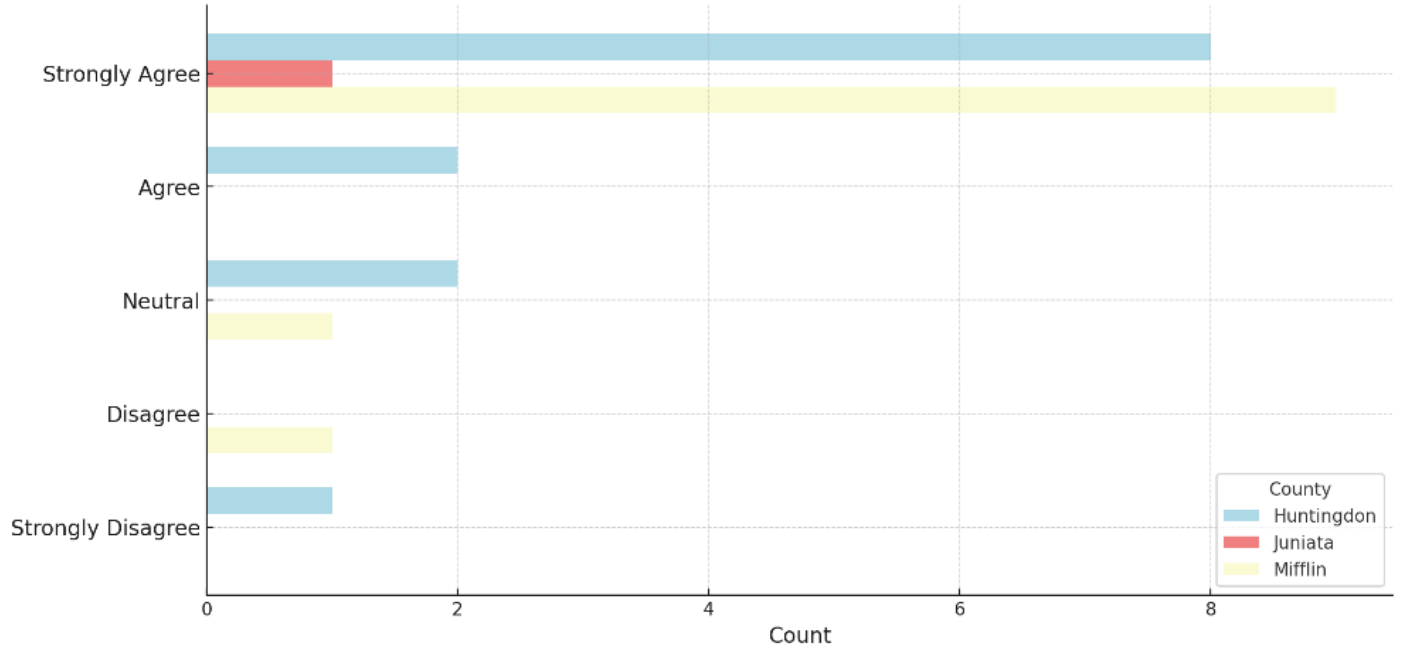
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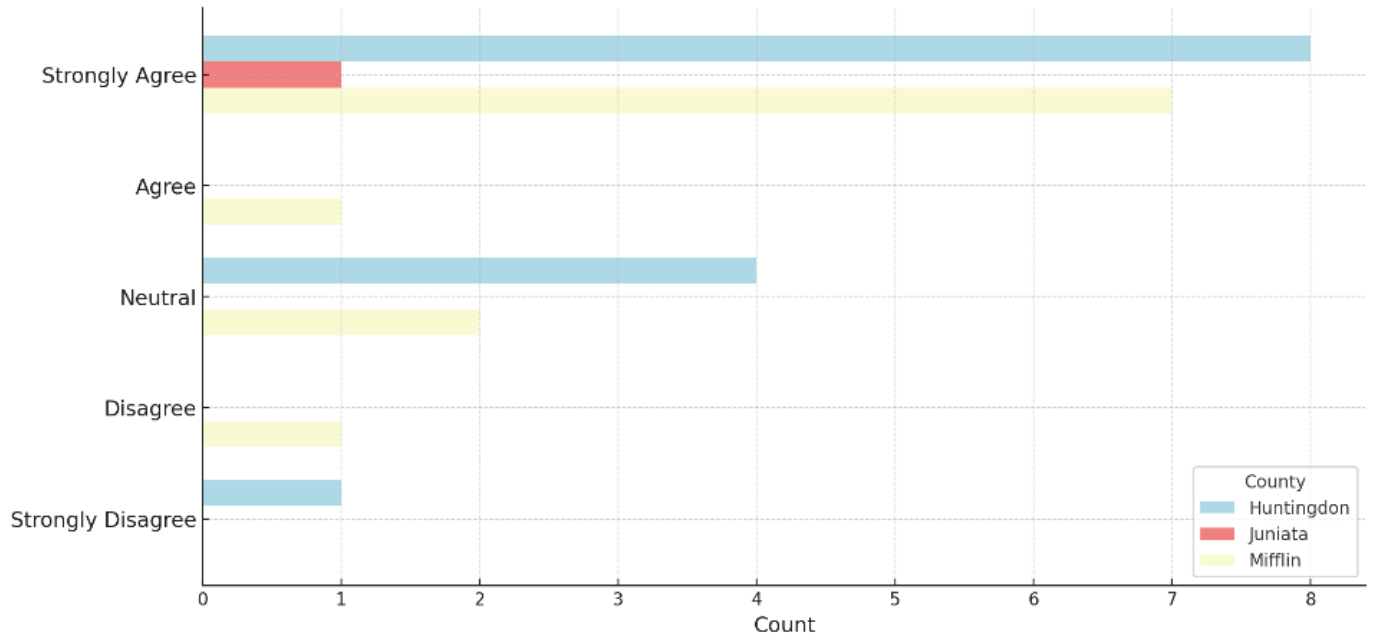
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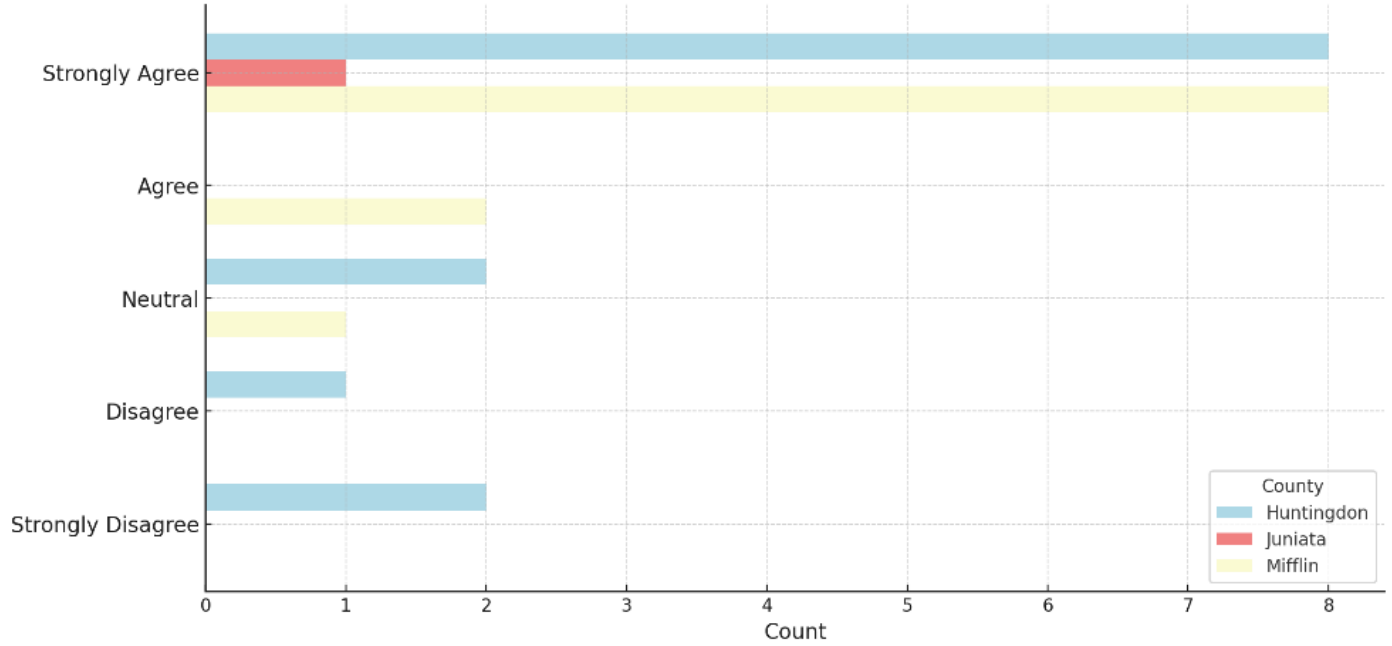
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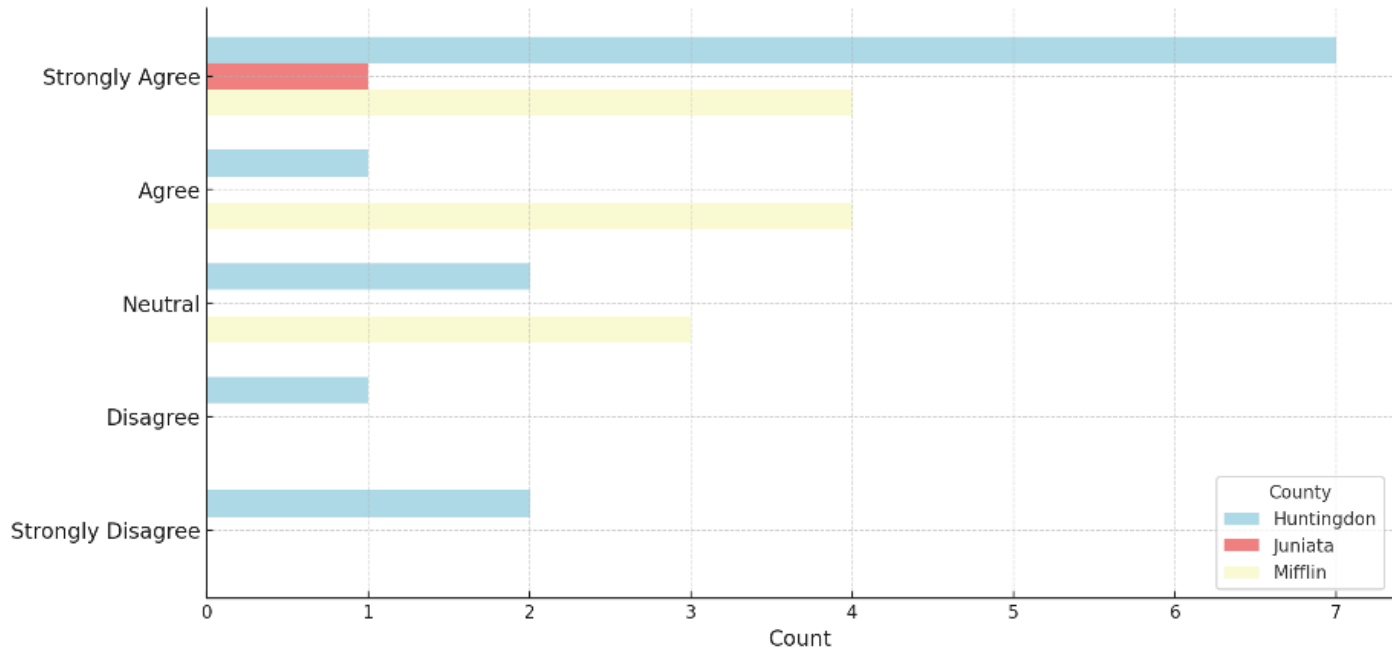
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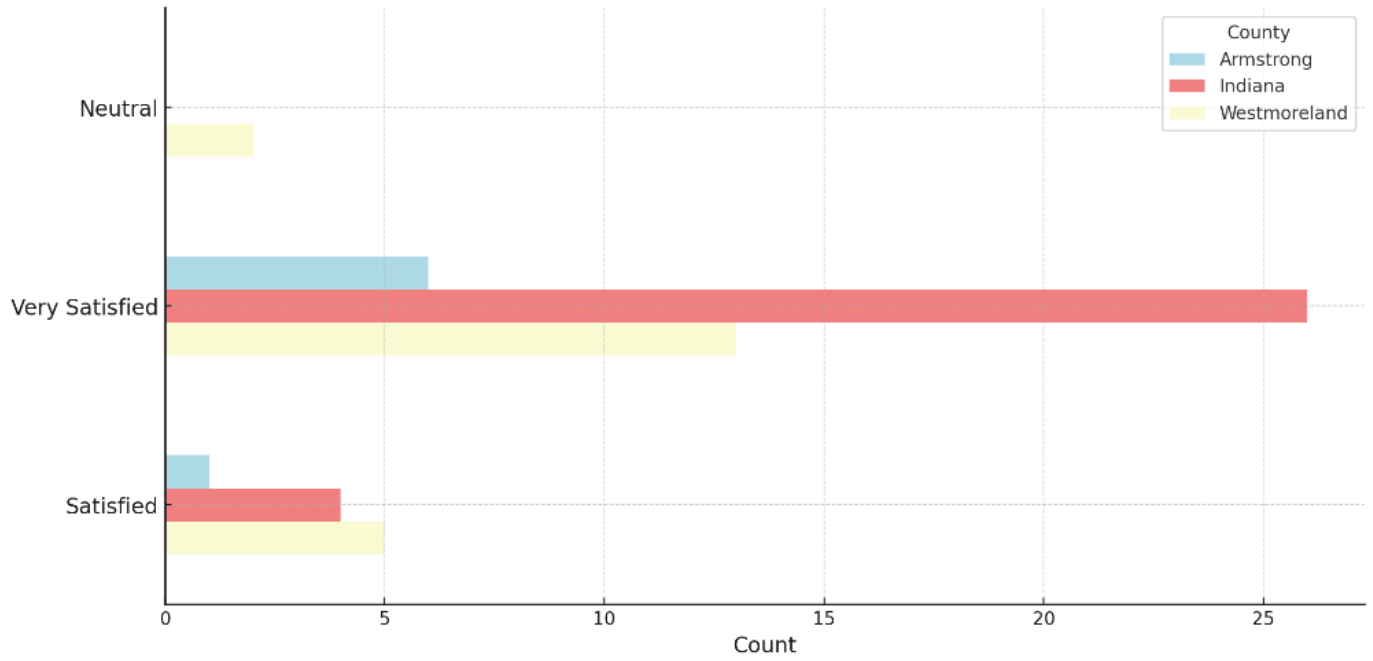


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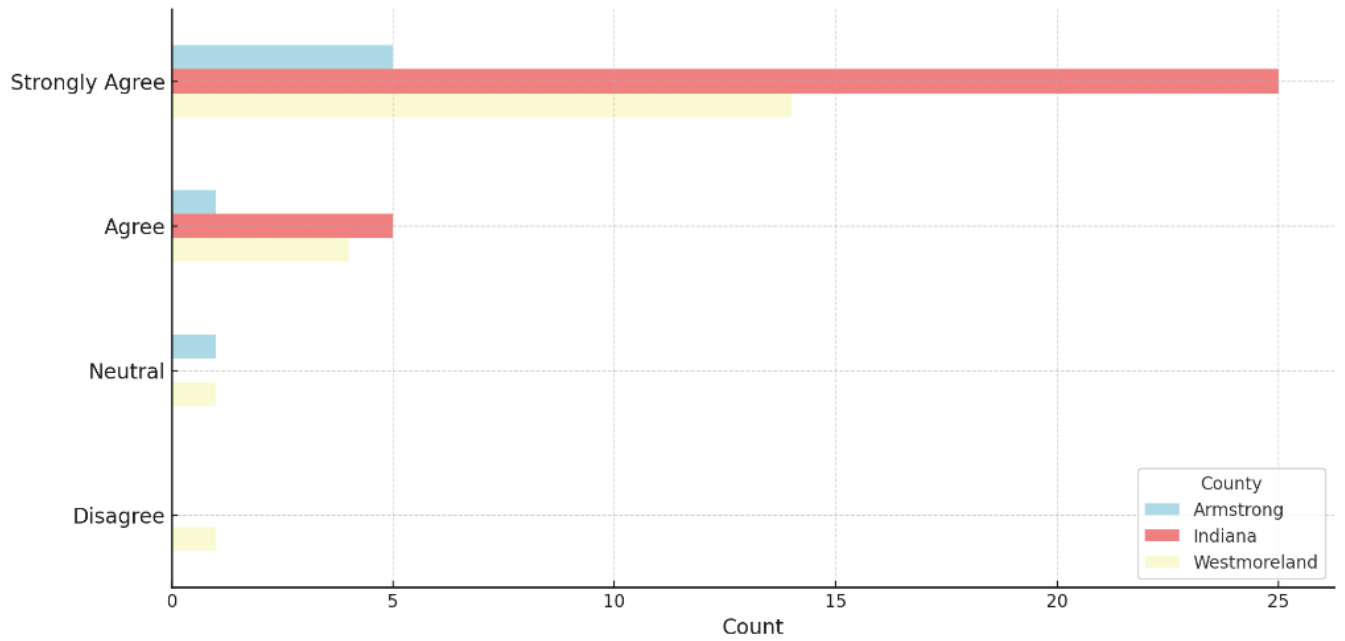


INDIANA, ARMSTRONG, WESTMORELAND

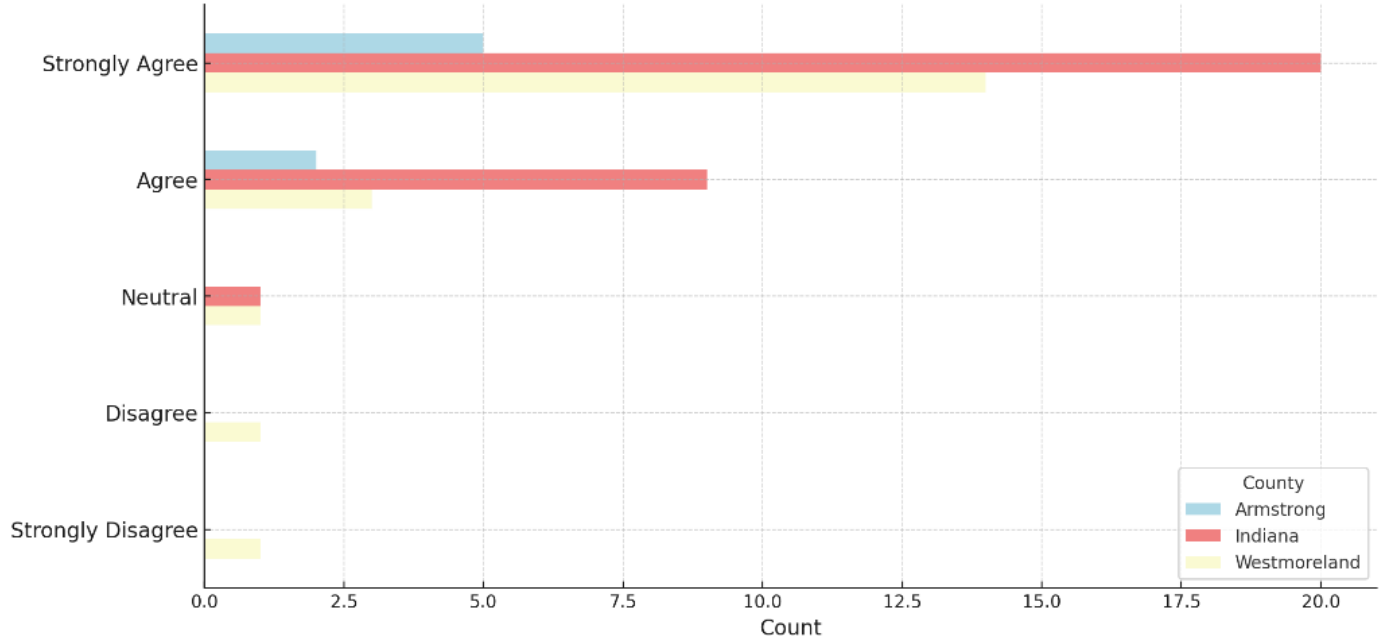
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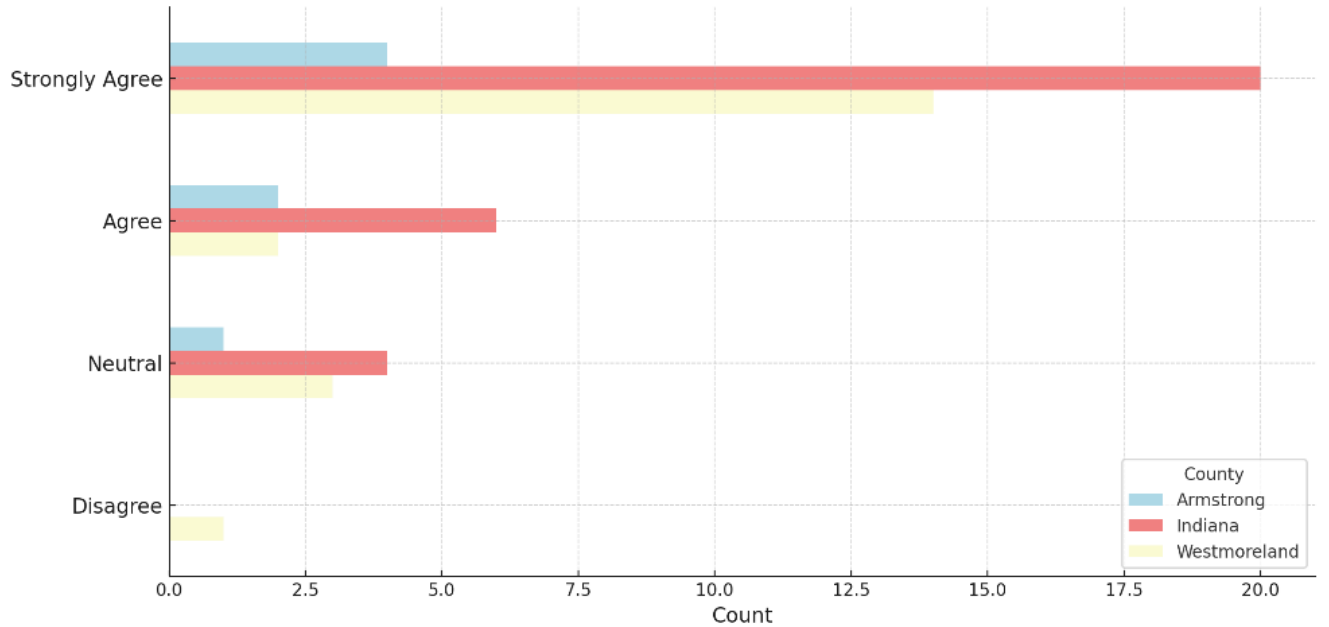
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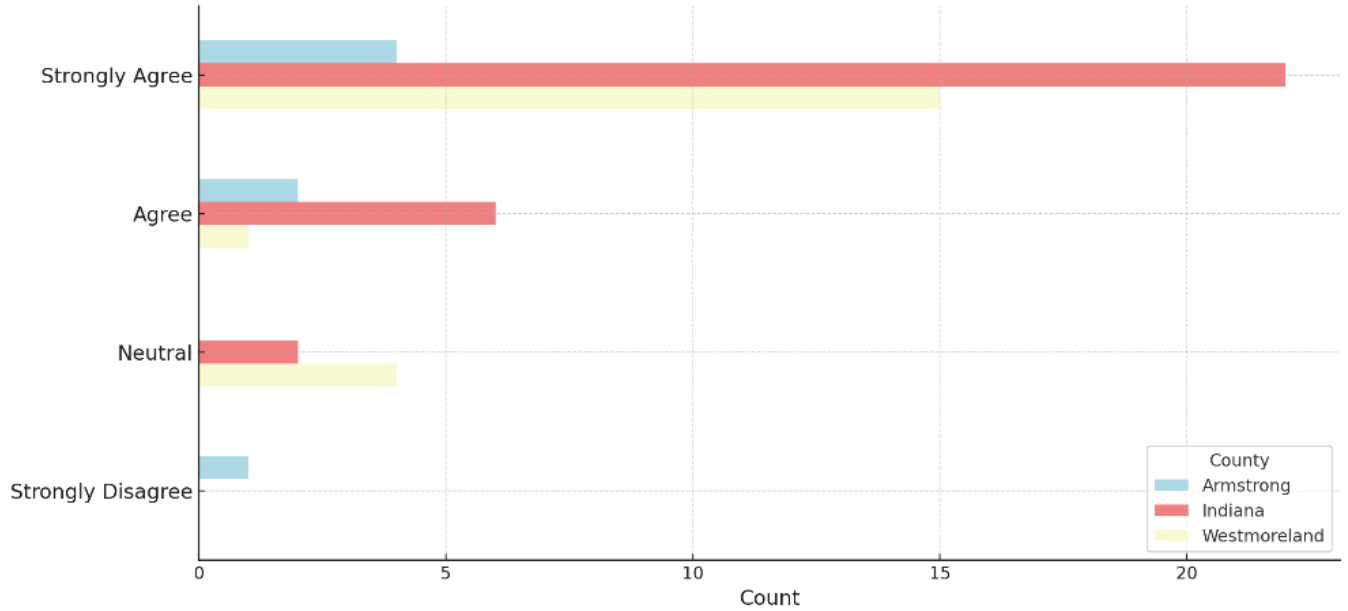
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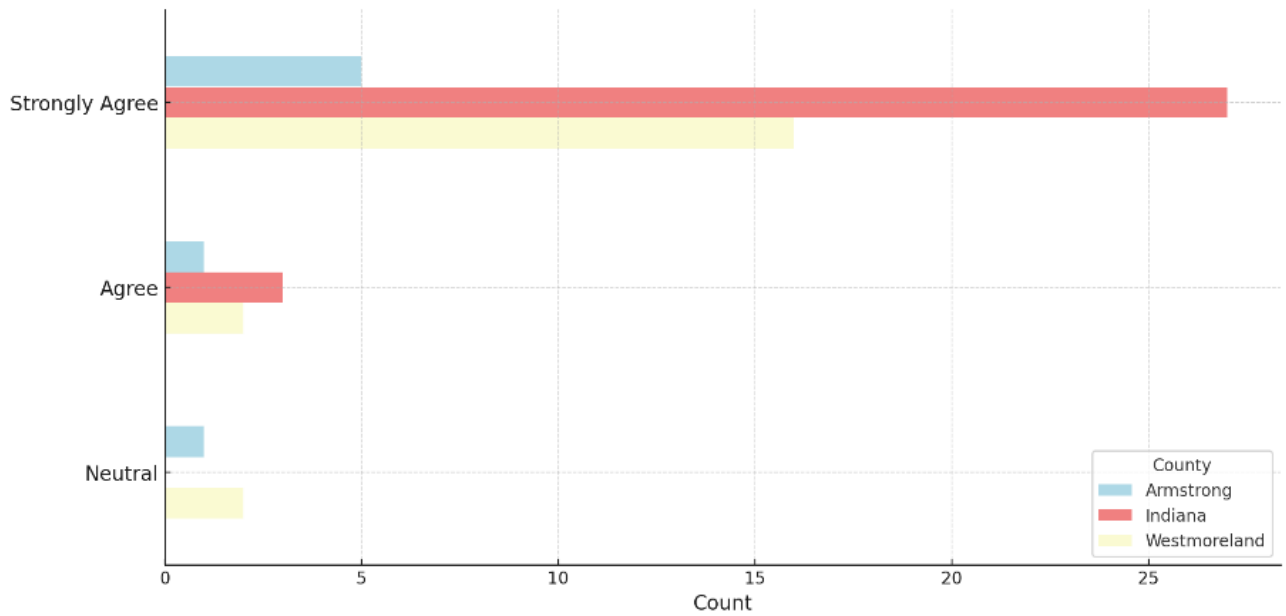
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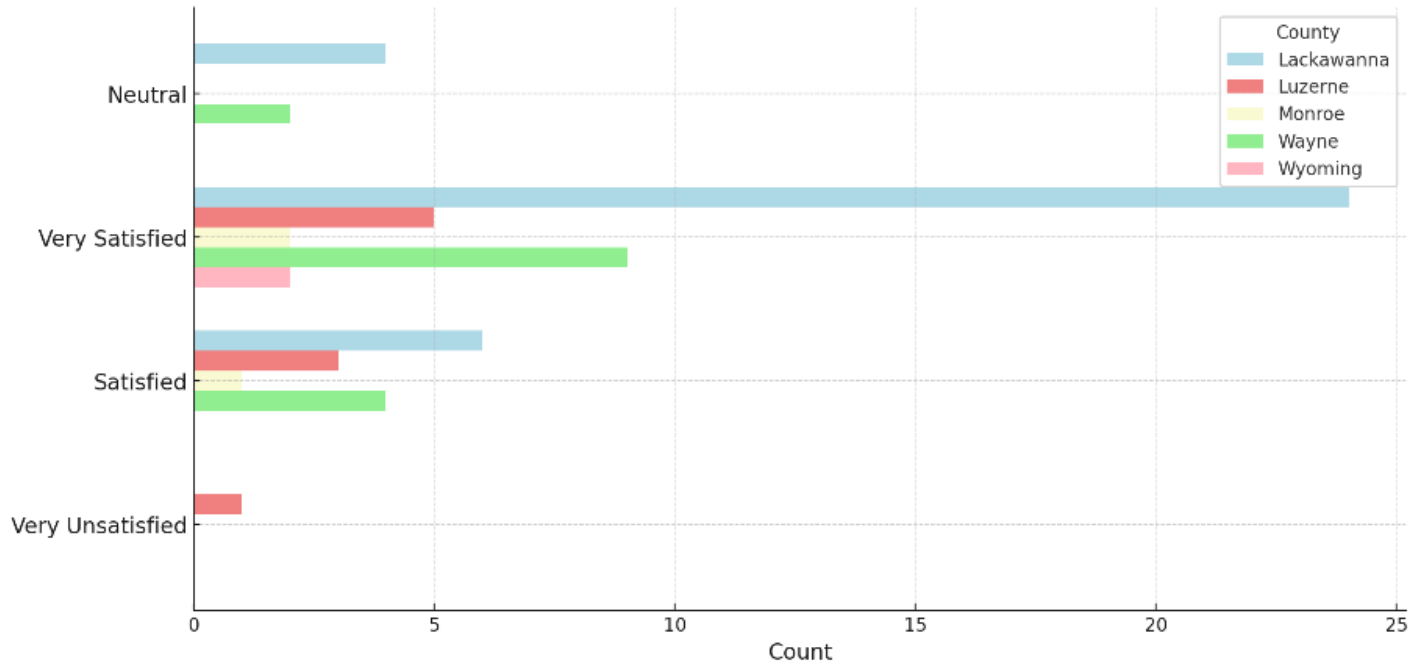
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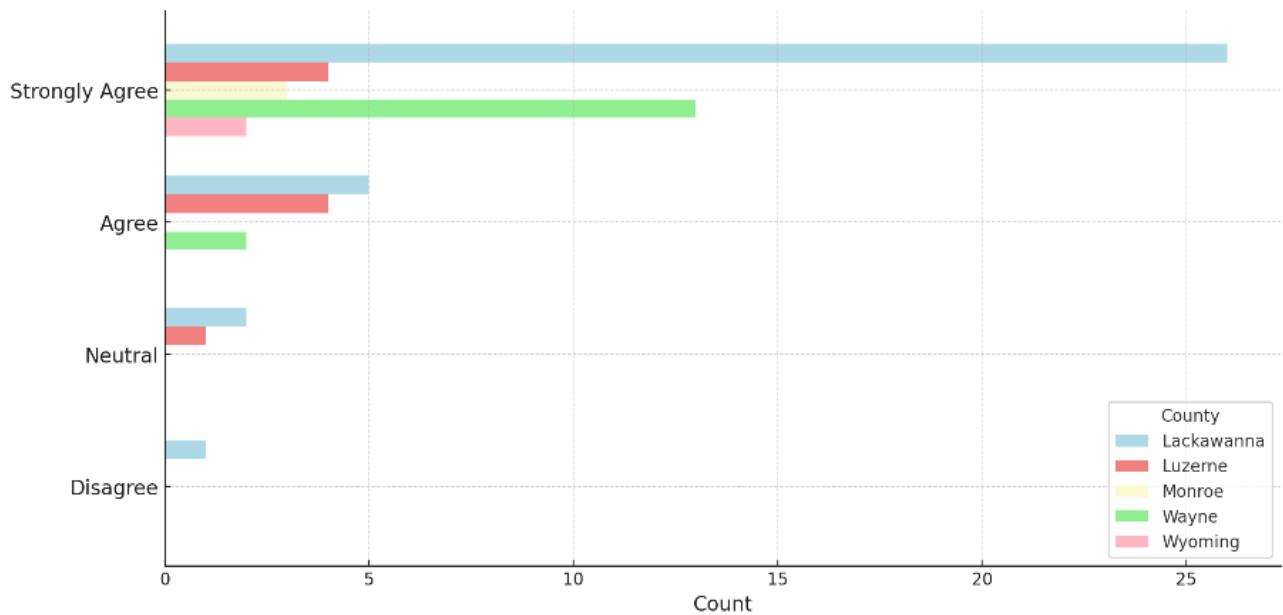
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LACKAWANNA, WAYNE, SUSQUEHANNA, LUZERNE, WYOMING, CARBON, MONROE, PIKE
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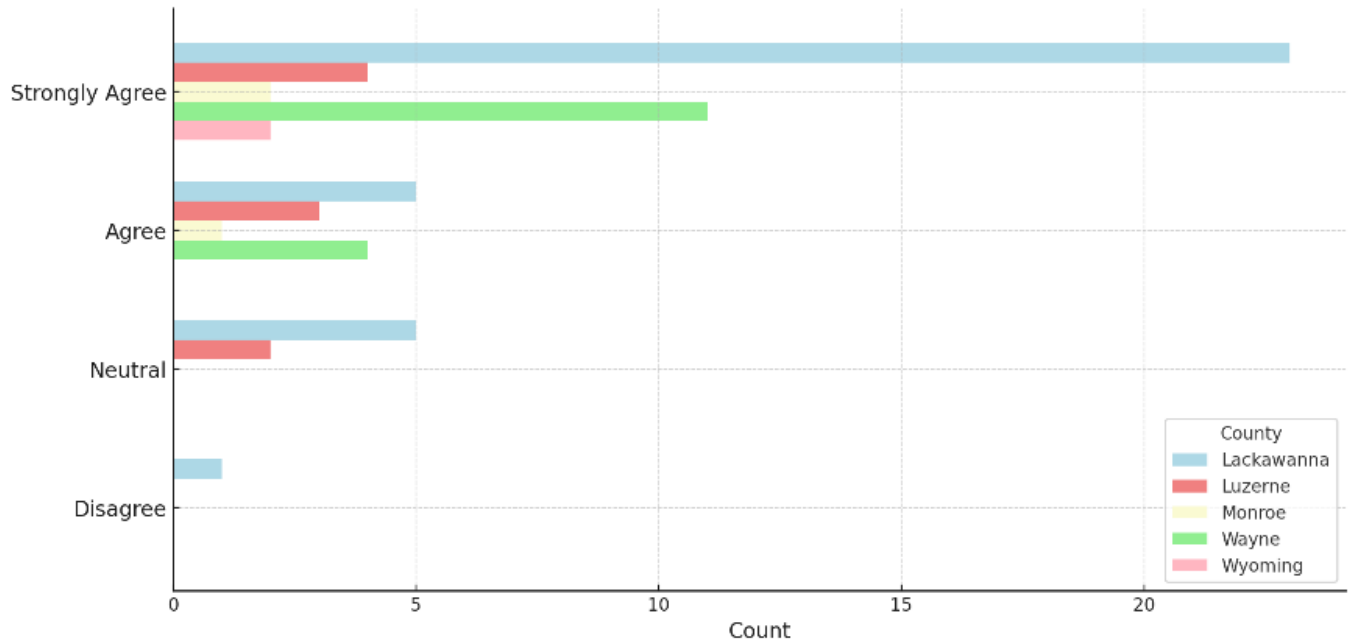




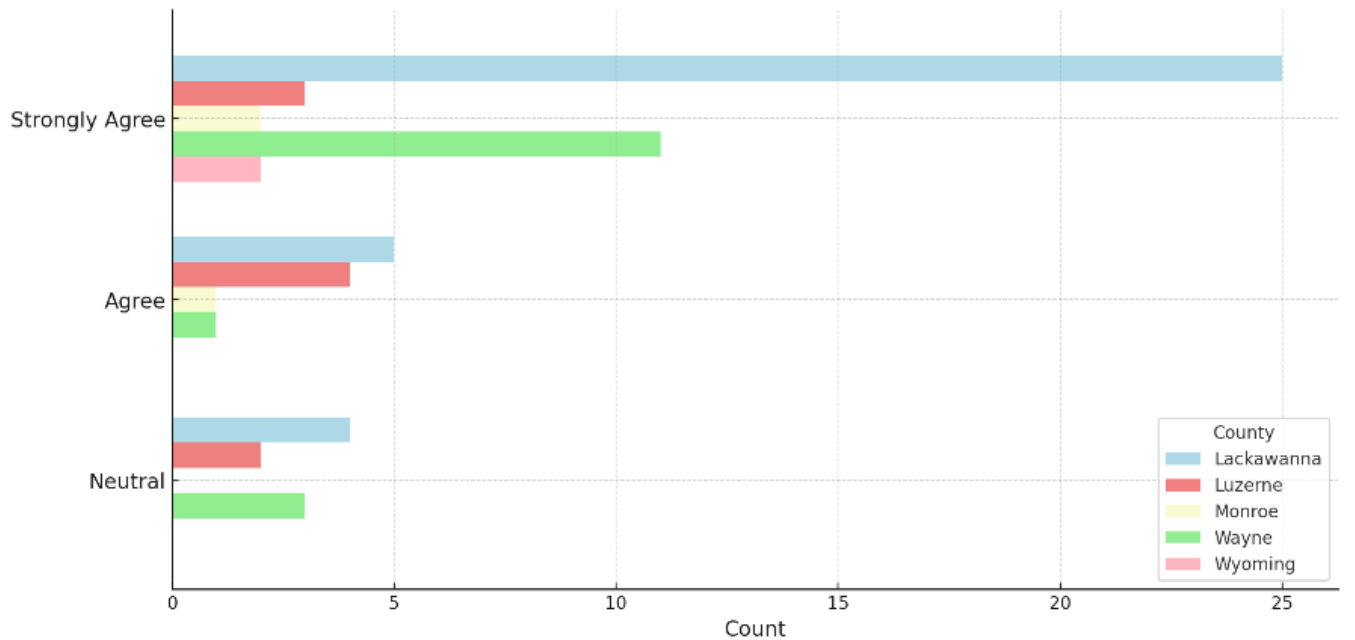
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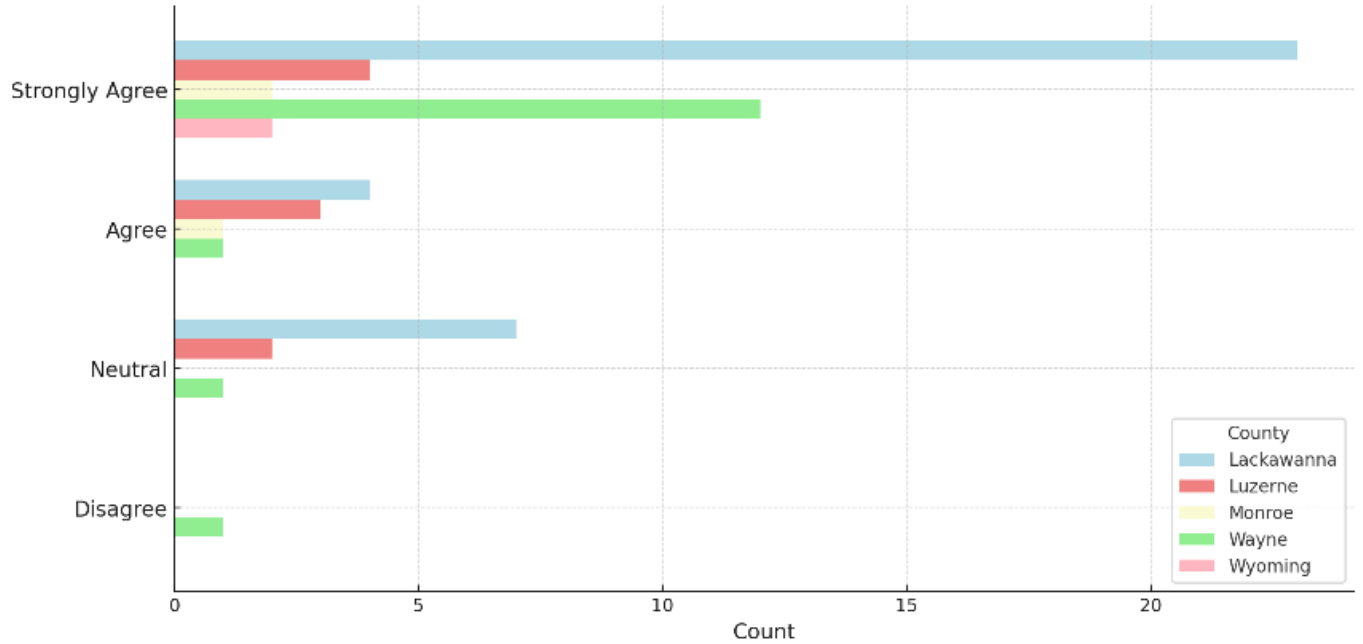




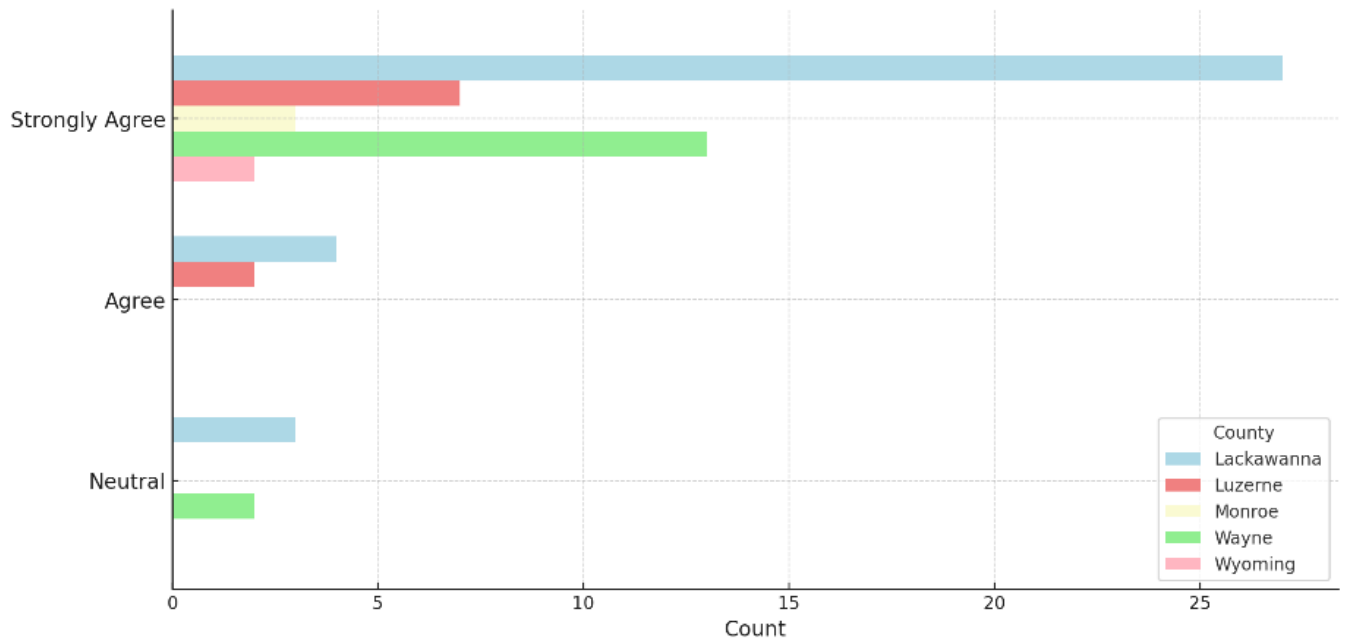
PEER STAR[®] of PA

A COMMUNITY BEHAVIORAL HEALTHCARE SERVICE
WORKING TOWARD RECOVERY AND INTEGRATION

My CPS helps me use natural resources for recovery.

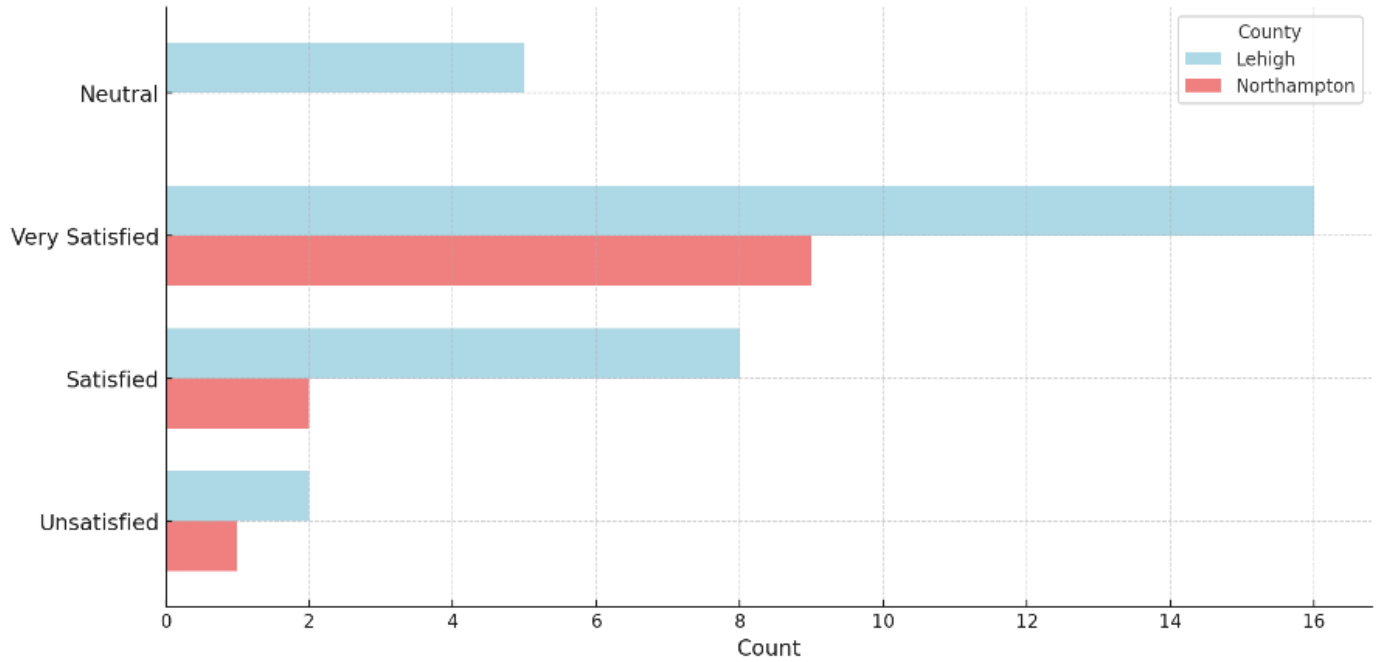


My Peer Specialist supports my sense of well being.

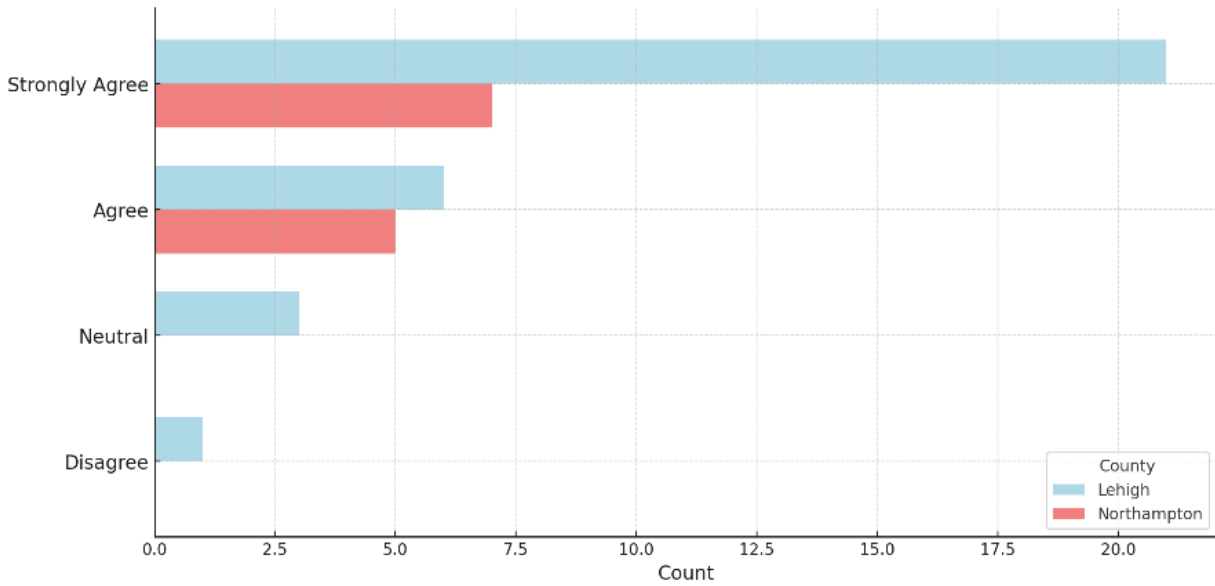


LEHIGH, NORTHAMPTON

I'm Satisfied with Peer Support.



My CPS offers me opportunities for recovery and encourages me to help myself.

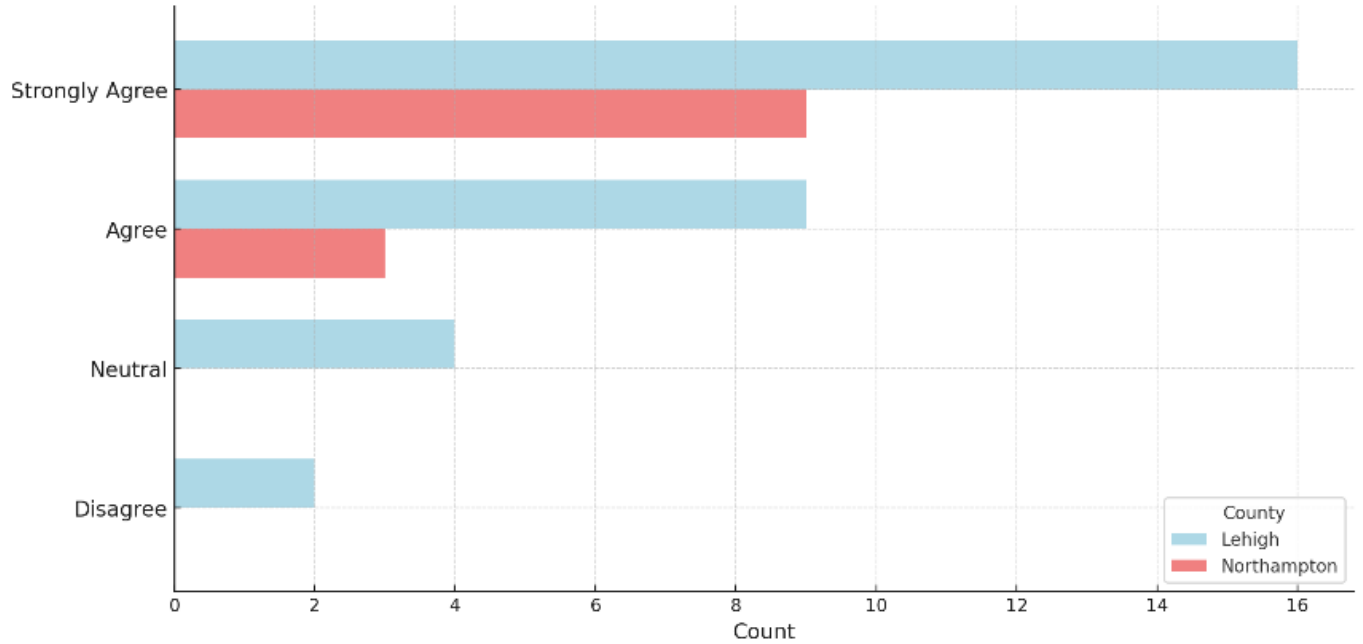




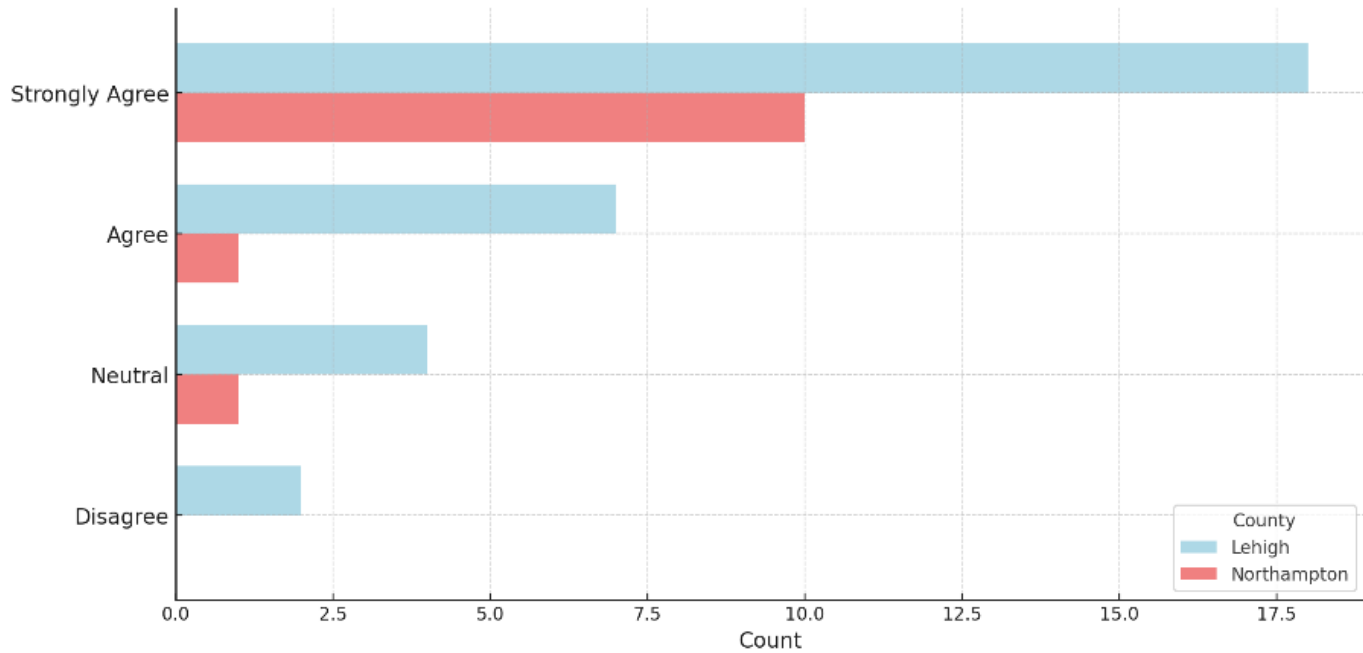
PEER STAR[★] of PA

A COMMUNITY BEHAVIORAL HEALTHCARE SERVICE
WORKING TOWARD RECOVERY AND INTEGRATION

My CPS teaches me new skills that I use for recovery.



My CPS helps me find other services I need.

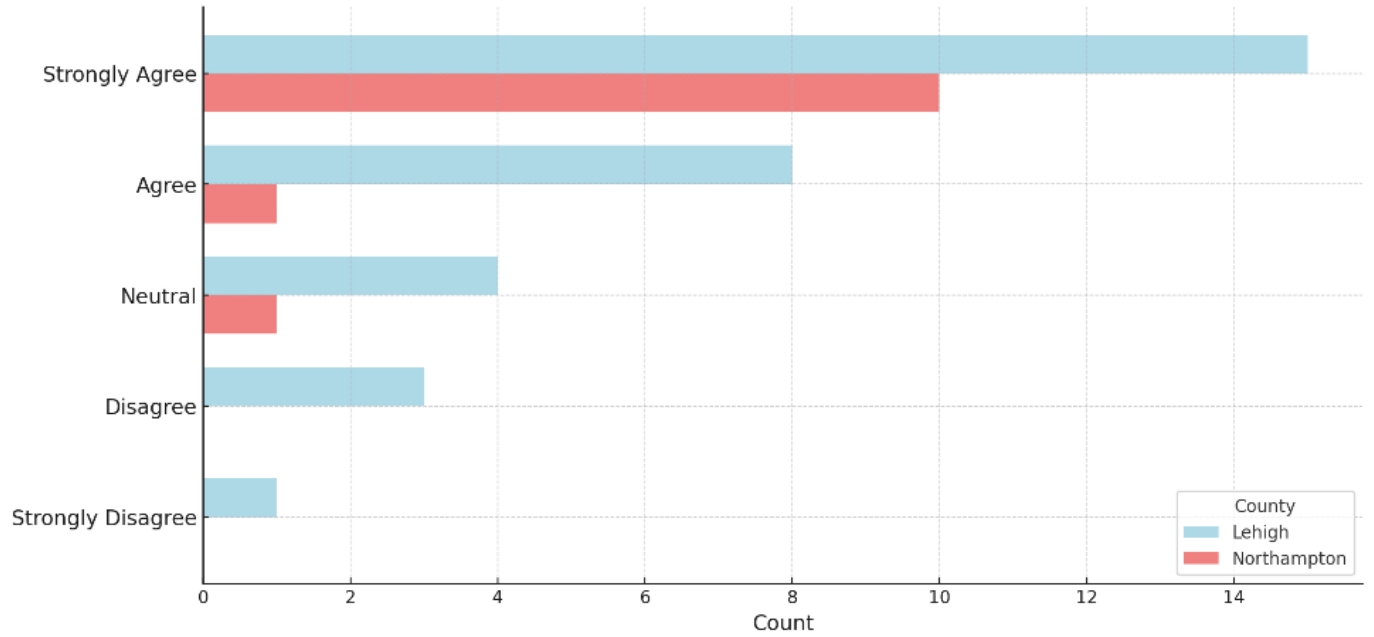




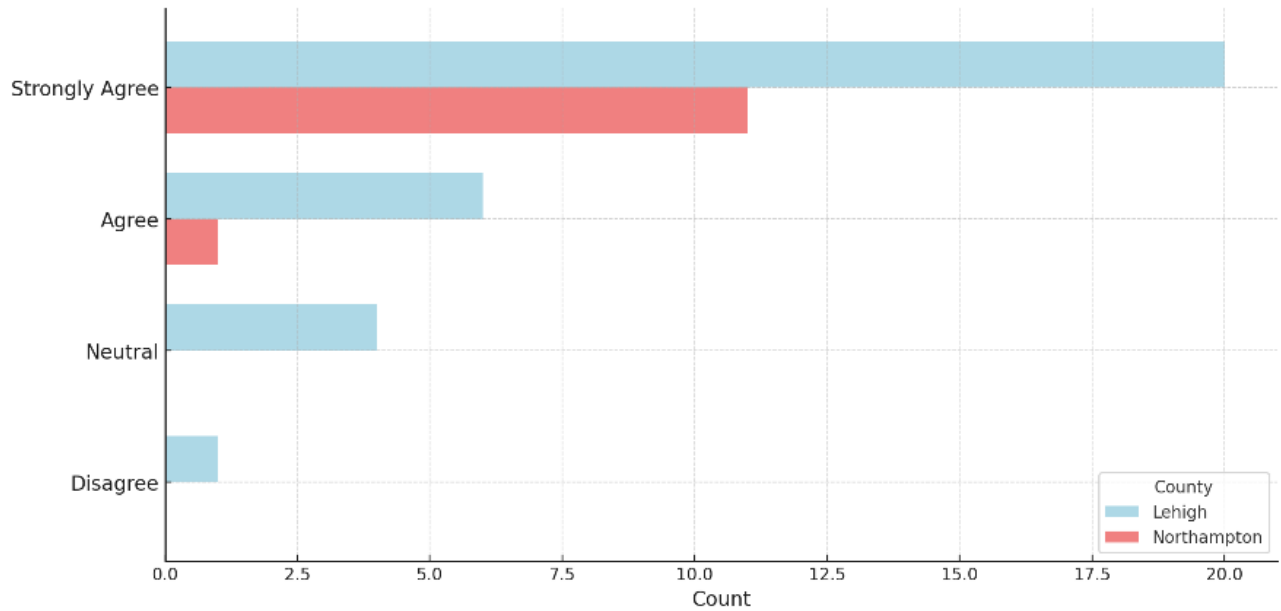
PEER STAR[★] of PA

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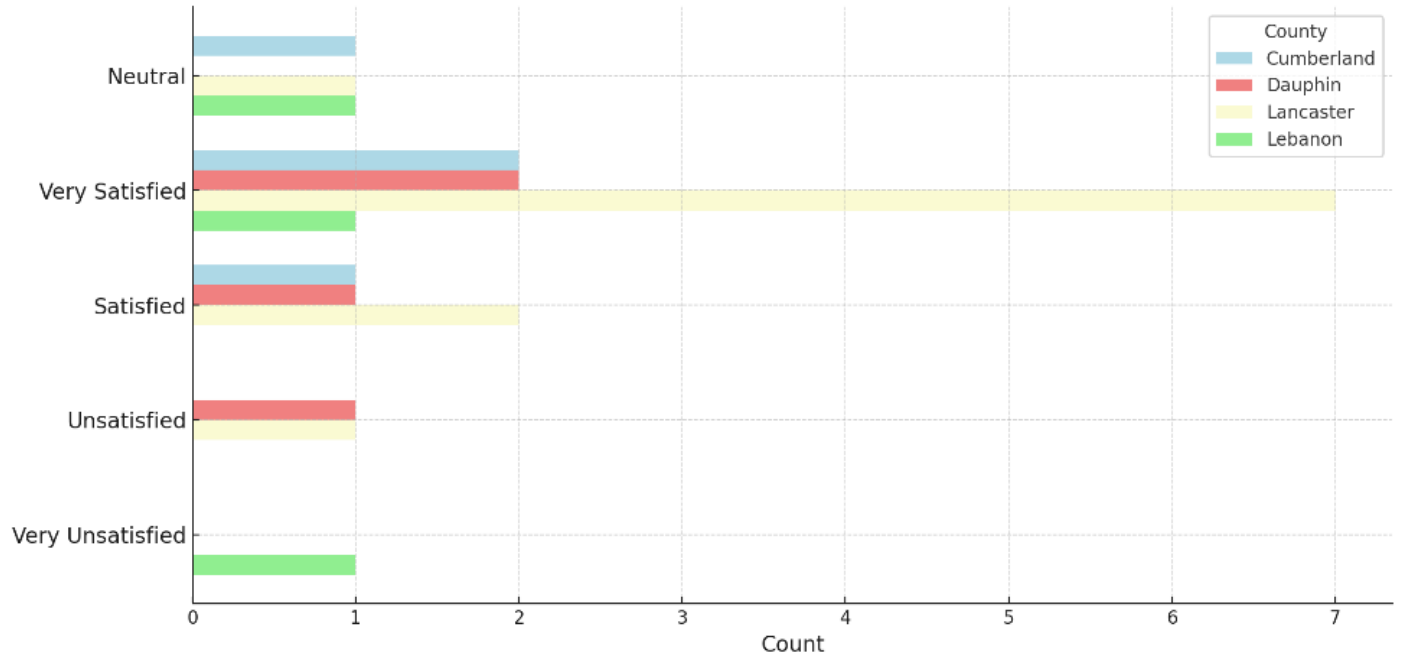


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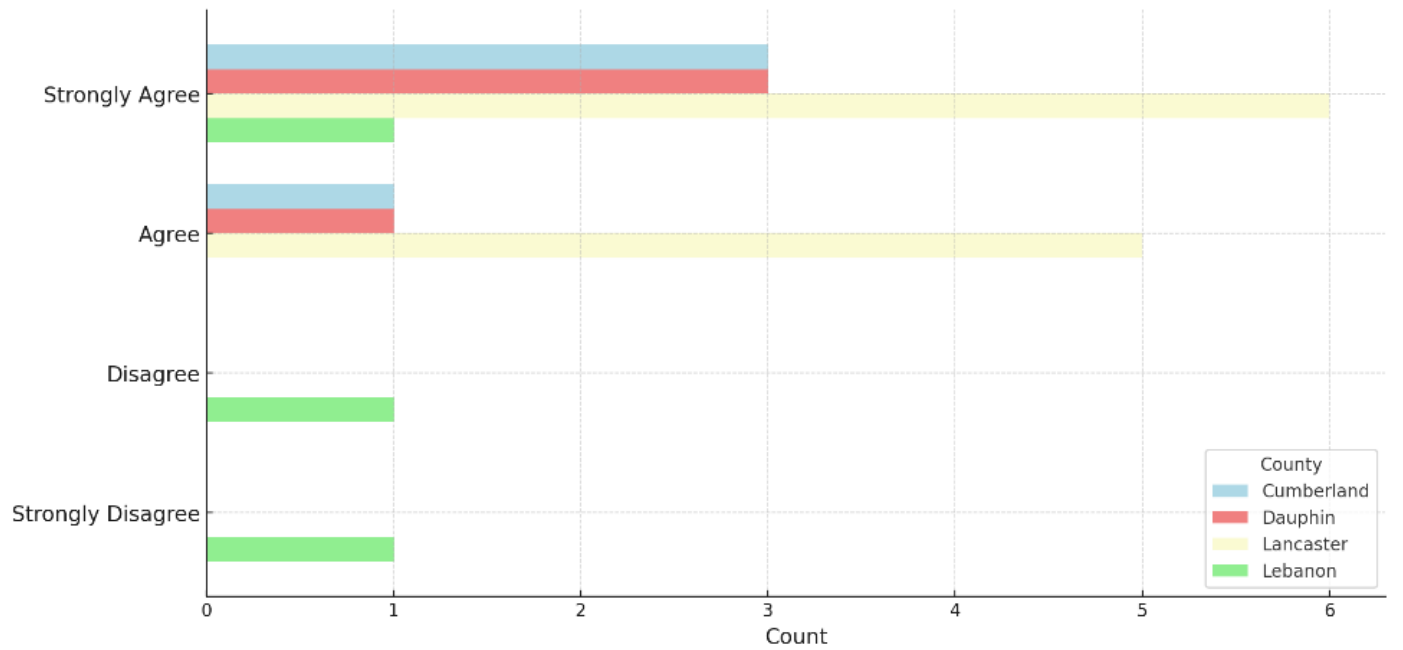


LANCASTER, LEBANON, CUMBERLAND, DAUPHIN, PERRY

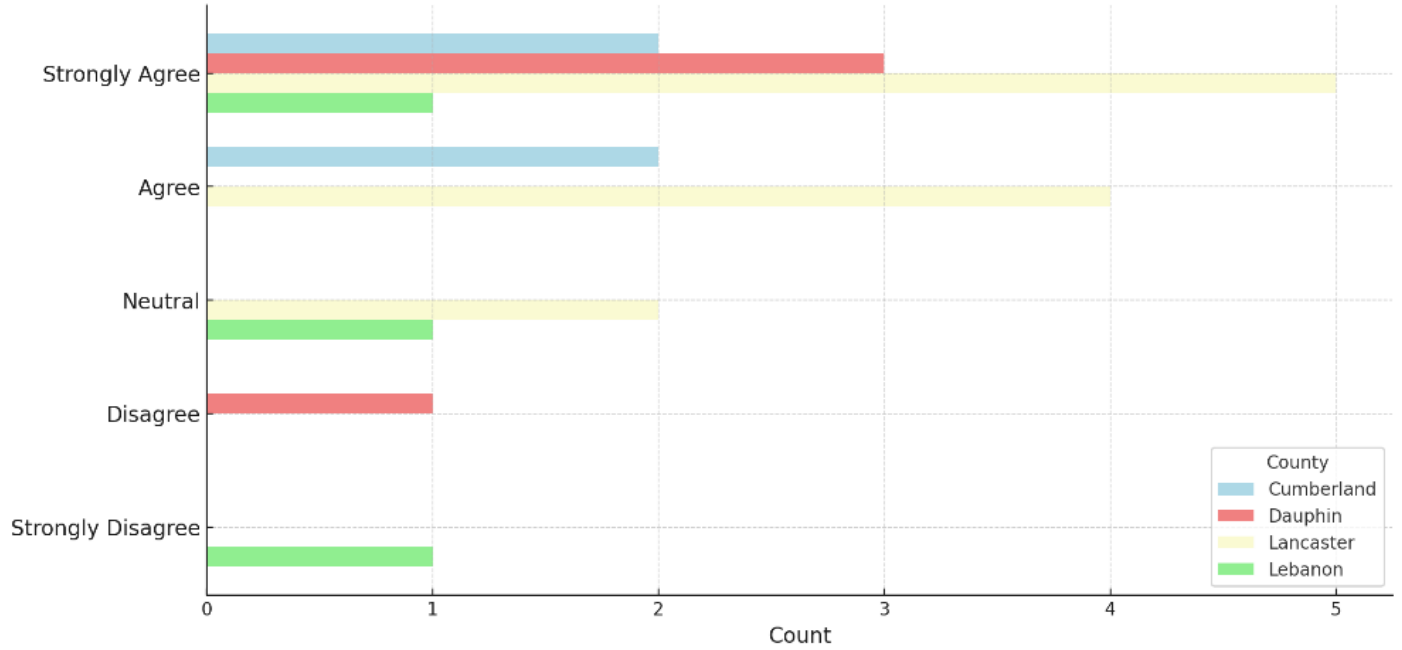
I'm Satisfied with Peer Support.



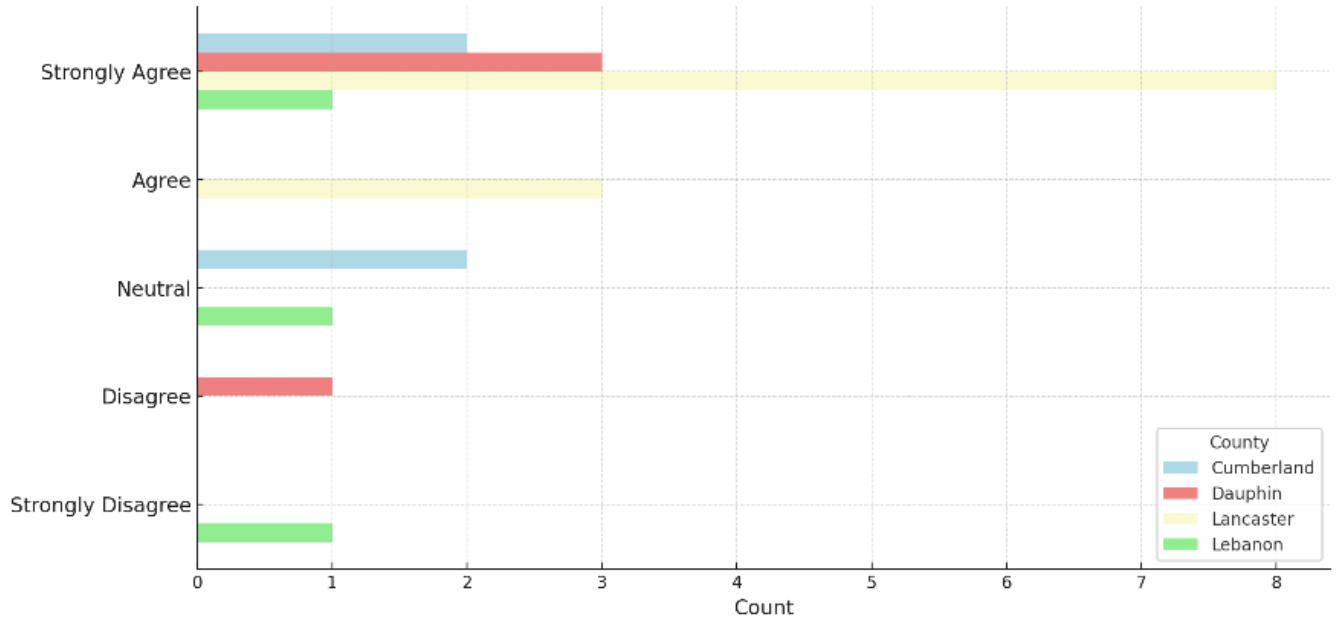
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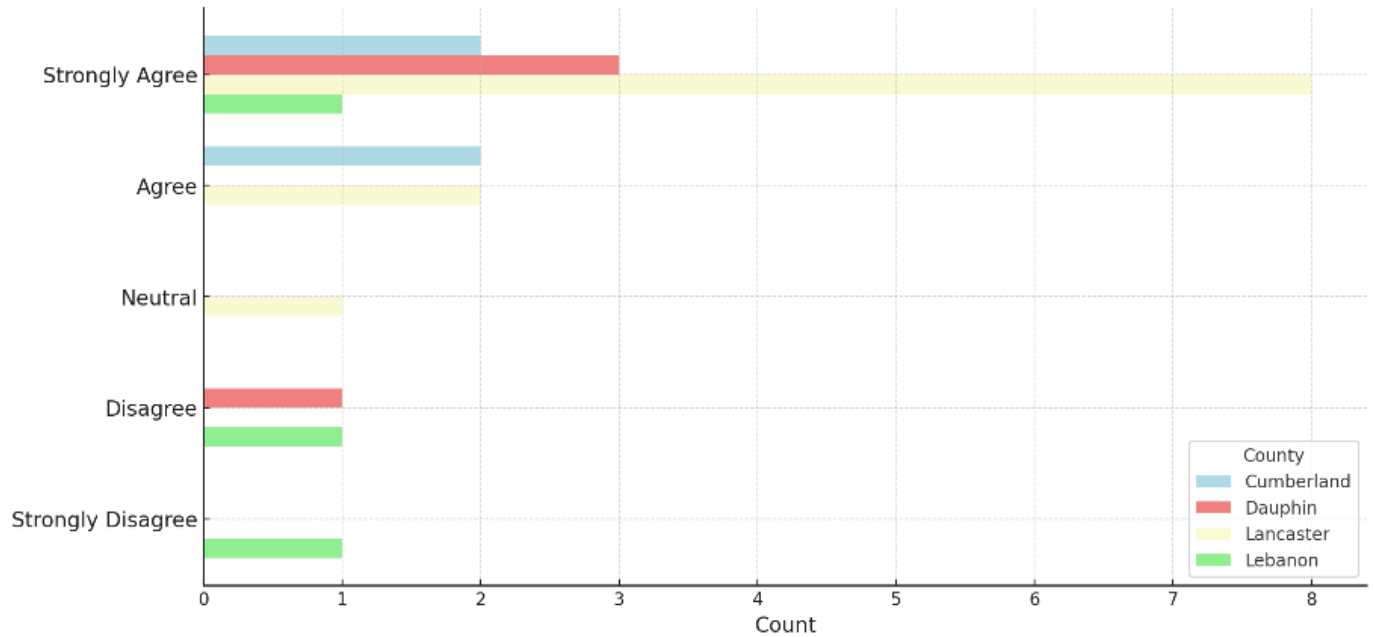




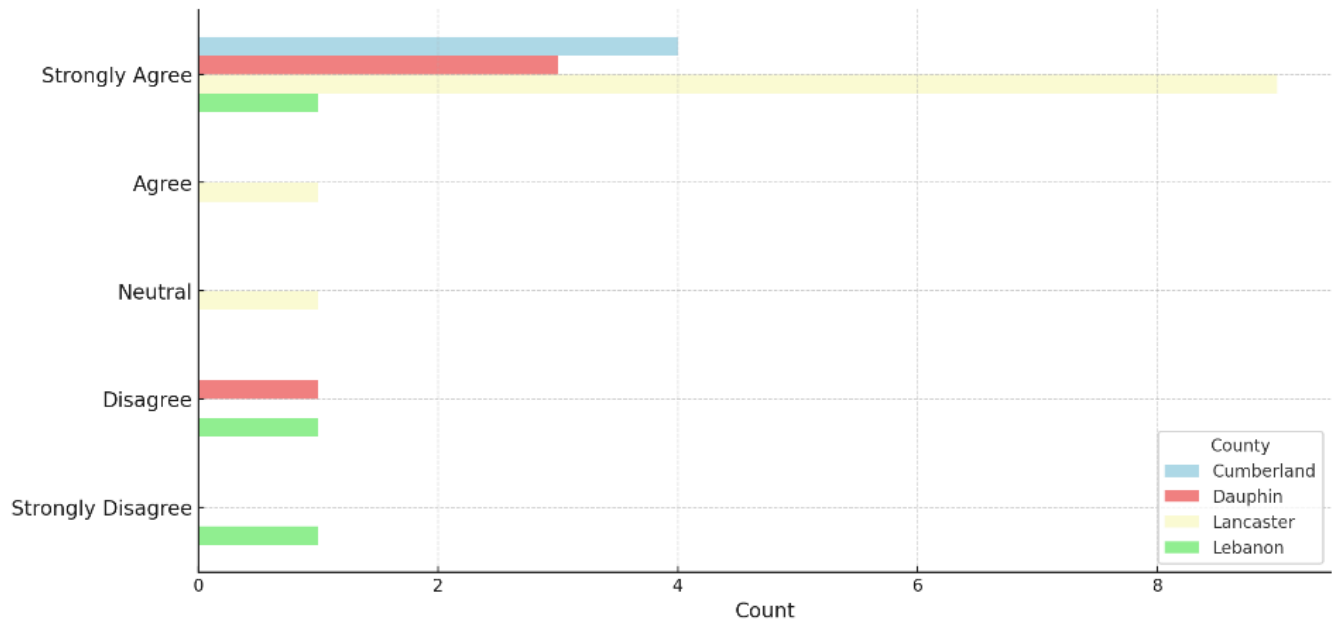
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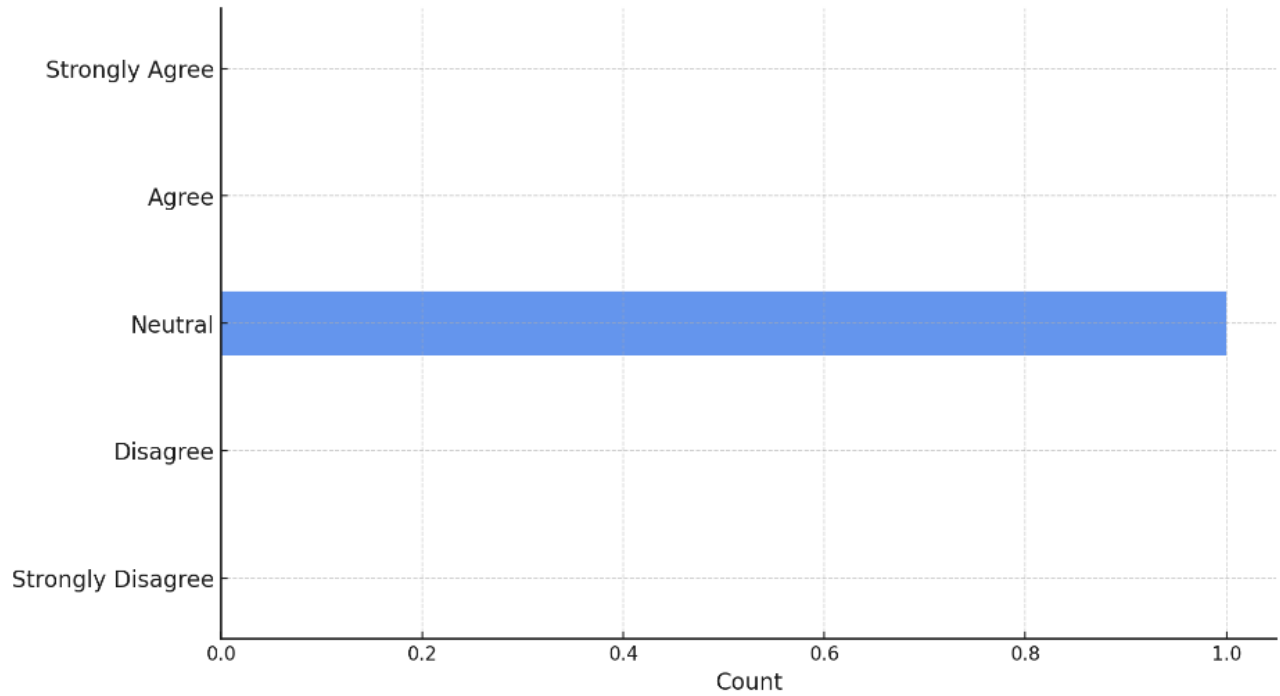


My Peer Specialist supports my sense of well being.

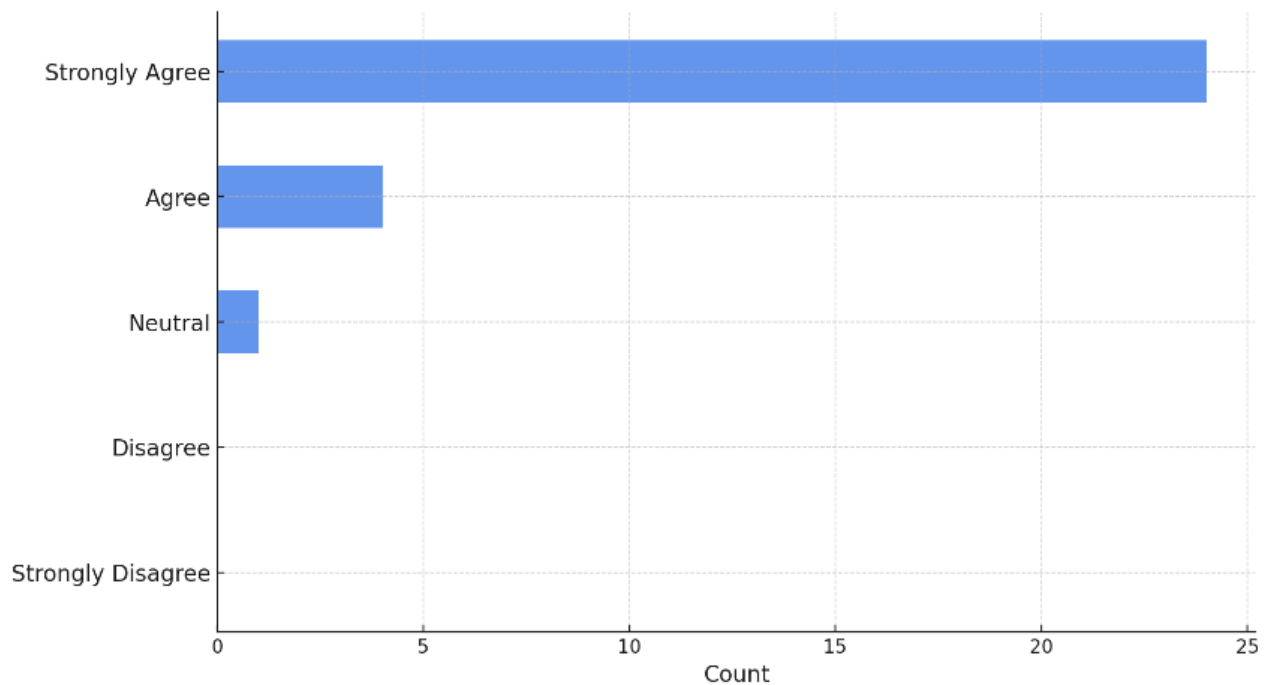


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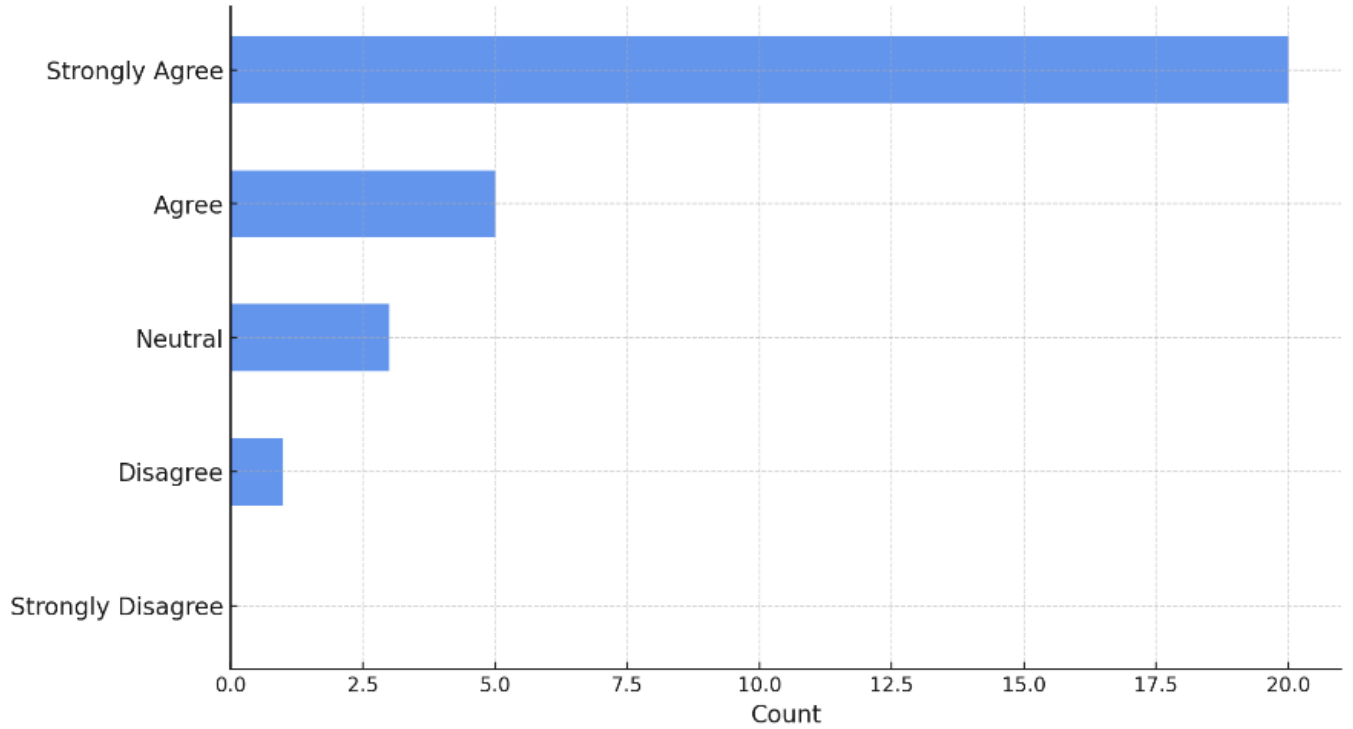




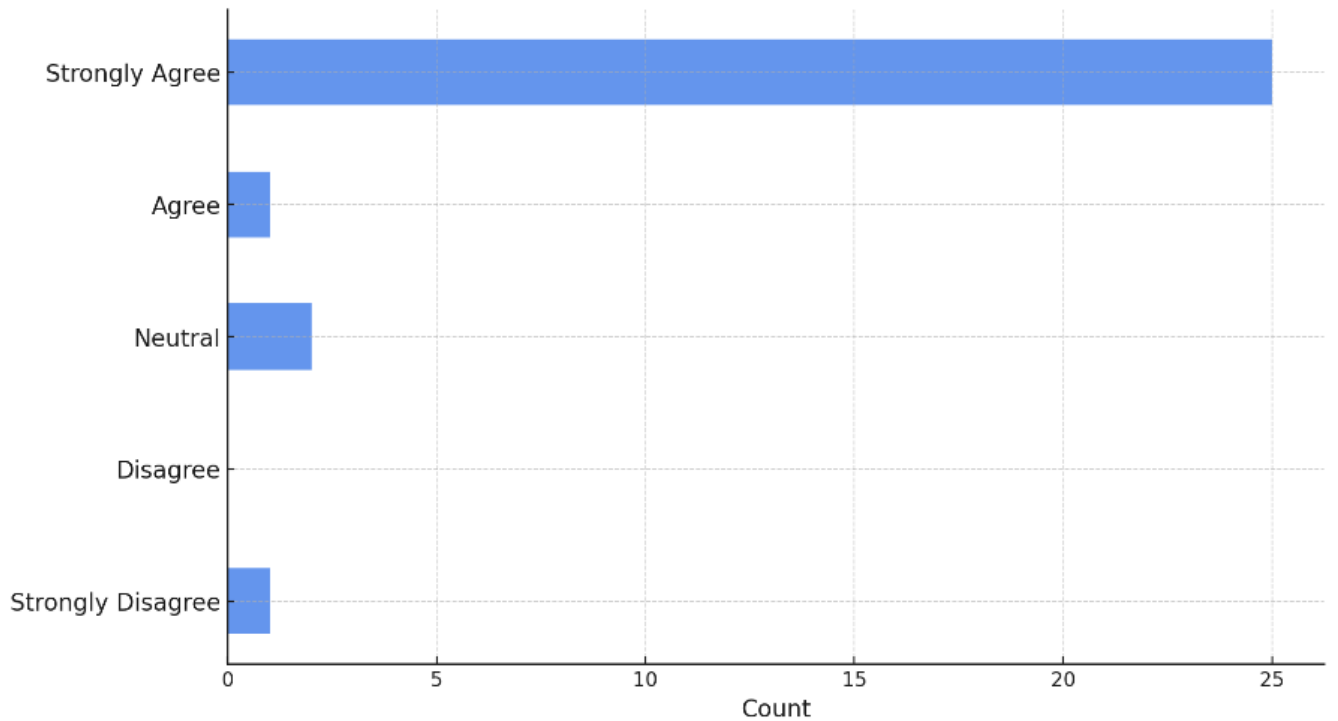
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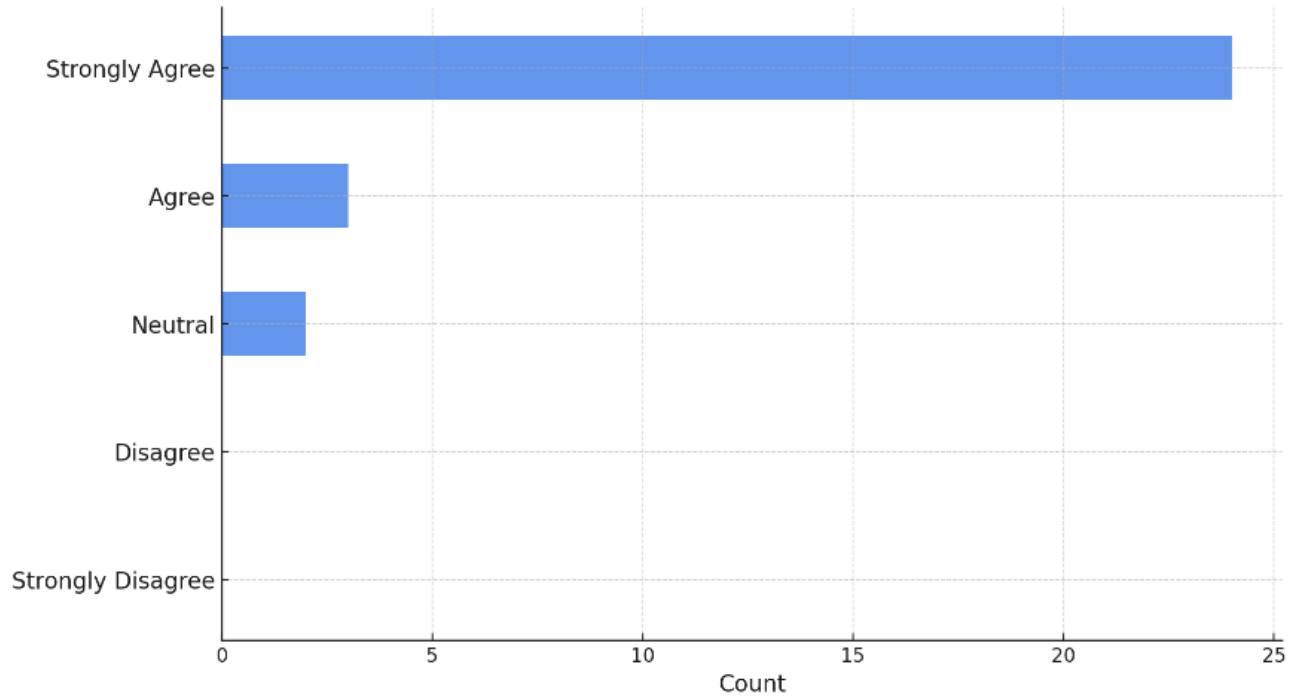




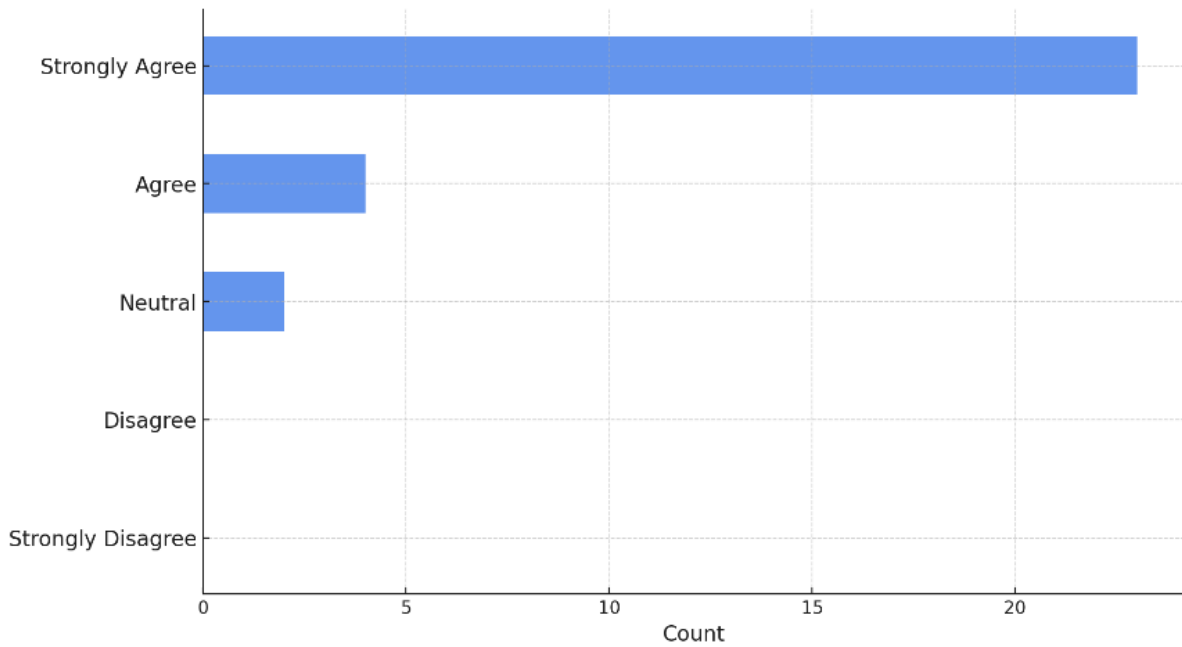
PEER STAR of PA

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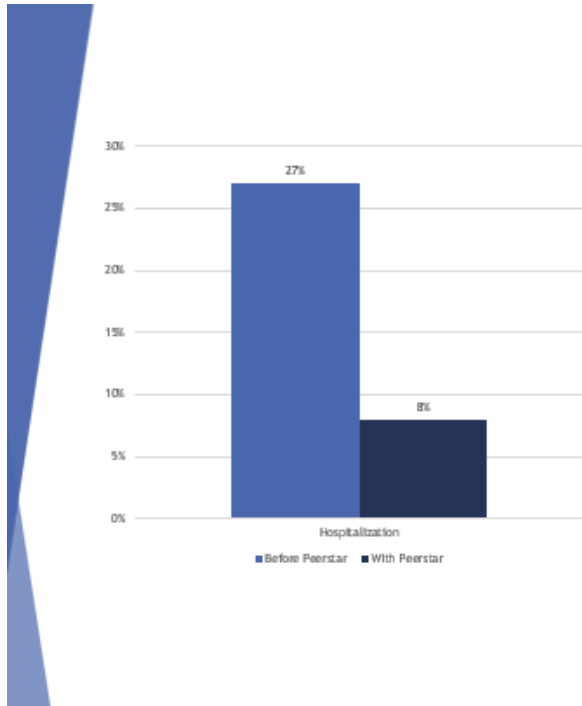
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My Peer Specialist supports my sense of well being.



PEER HOSPITALIZATIONS BY LICENSE



47/172 individuals starting peer support in 2024 reported having a hospitalization within the 6 months before their Initial IRP.

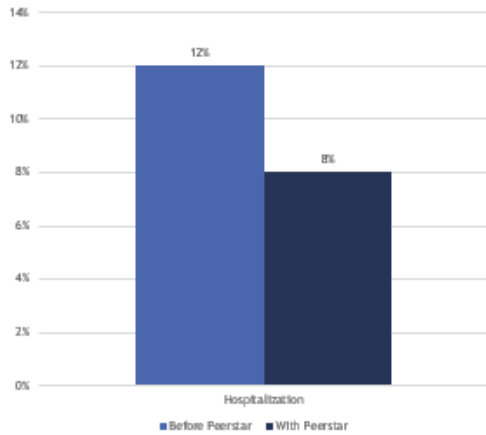
17/221 individuals who were already receiving peer support in 2024 reported having a hospitalization within the 6 months before their most recent IRP

Hospitalizations:
Blair/Bedford/
Cambria/Somerset



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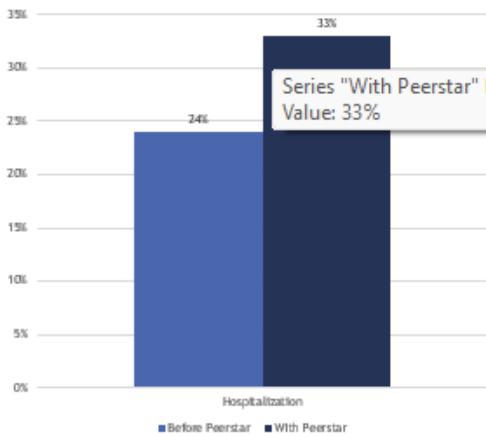
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13 of 107 individuals starting peer support in 2024 reported having a hospitalization within the 6 months before their Initial IRP.

15/198 individuals who were already receiving peer support in 2024 reported having a hospitalization within the 6 months before their most recent IRP

Hospitalizations: Clearfield/Jefferson/ Centre Counties



5/21 individuals starting peer support in 2024 reported having a hospitalization within the 6 months before their Initial IRP.

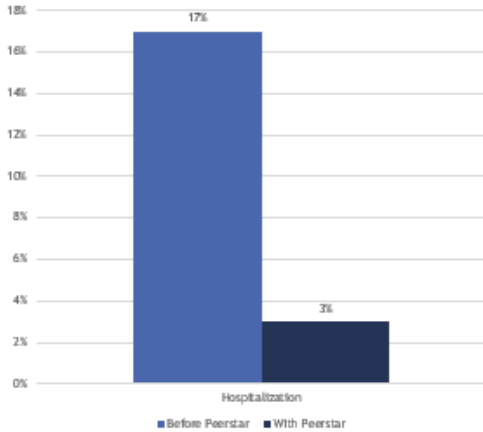
1/3 individuals who were already receiving peer support in 2024 reported having a hospitalization within the 6 months before their most recent IRP

Hospitalizations: Delaware County



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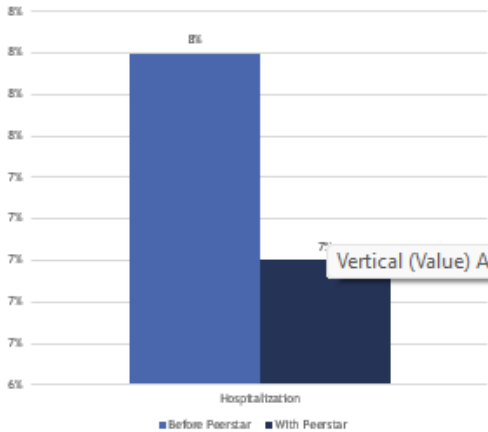
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4/24 individuals starting peer support in 2024 reported having a hospitalization within the 6 months before their Initial IRP.

1/39 individuals who were already receiving peer support in 2024 reported having a hospitalization within the 6 months before their most recent IRP

Hospitalizations: Franklin/Fulton Counties



1/12 individuals starting peer support in 2024 reported having a hospitalization within the 6 months before their Initial IRP.

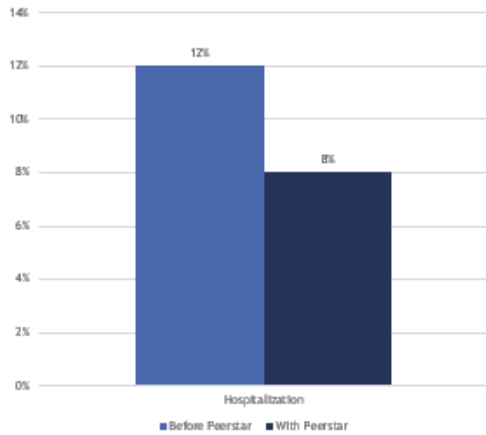
2/28 individuals who were already receiving peer support in 2024 reported having a hospitalization within the 6 months before their most recent IRP

Hospitalizations: Huntington/Mifflin/ Juniata Counties



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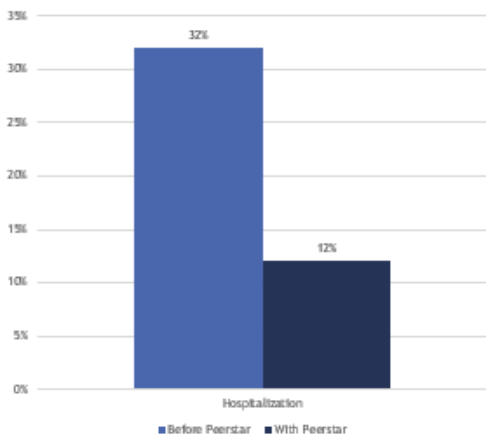
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5/42 individuals starting peer support in 2024 reported having a hospitalization within the 6 months before their Initial IRP.

5/66 individuals who were already receiving peer support in 2024 reported having a hospitalization within the 6 months before their most recent IRP

Hospitalizations: Indiana/Armstrong/ West Moreland Counties



12/38 individuals starting peer support in 2024 reported having a hospitalization within the 6 months before their Initial IRP.

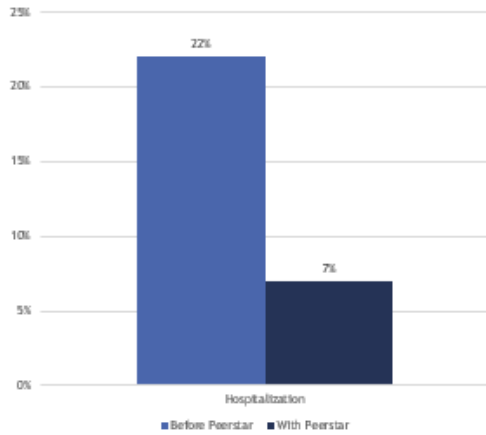
8/67 individuals who were already receiving peer support in 2024 reported having a hospitalization within the 6 months before their most recent IRP

Hospitalizations: Lackawanna/Luzerne/ Susquehanna/Wayne/ Wyoming/Carbon Monroe/Pike Counties



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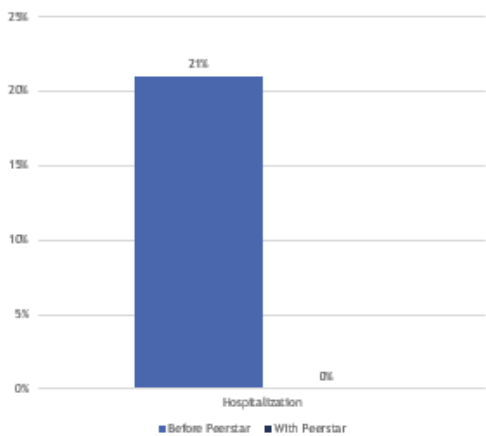
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11/49 individuals starting peer support in 2024 reported having a hospitalization within the 6 months before their Initial IRP.

3/41 individuals who were already receiving peer support in 2024 reported having a hospitalization within the 6 months before their most recent IRP

Hospitalizations: Lehigh/Northampton Counties



9/43 individuals starting peer support in 2024 reported having a hospitalization within the 6 months before their Initial IRP.

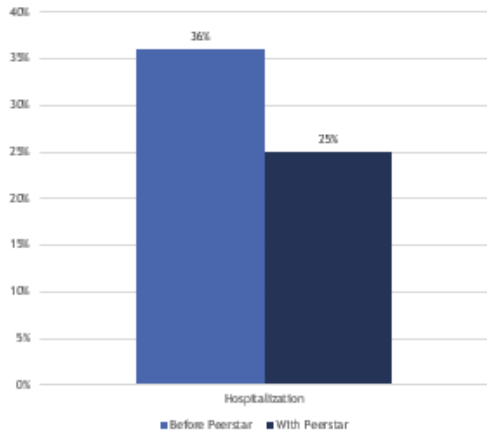
0/18 individuals who were already receiving peer support in 2024 reported having a hospitalization within the 6 months before their most recent IRP

Hospitalizations: Cumberland/Perry/ Dauphin/Lebanon/ Lancaster Counties



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26/73 individuals starting peer support in 2024 reported having a hospitalization within the 6 months before their Initial IRP.

8/32 individuals who were already receiving peer support in 2024 reported having a hospitalization within the 6 months before their most recent IRP.

Hospitalizations: Philadelphia County