

Yolo County Health & Human Services Agency



Behavioral Health Services Strategic Plan

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Mission, Vision, Core Values



Mission Statement

To provide high quality, culturally competent services and supports that enhance recovery from substance use disorders, serious mental illness, and serious emotional disturbance.

Vision

To promote the overall wellbeing, recovery and health of individuals and families in our community.

Mission, Vision, Core Values

continued



Core Values

We value a culture of quality in which we:

- Emphasize recovery & wellness, with the goal of maintaining the people we serve in the least restrictive environment.
- Utilize strength-based approaches that promote hope and recovery
- Encourage community inclusion, partnership and collaboration
- Provide services that are holistic and person and family directed
- Develop a well-trained, diverse and culturally competent workforce including consumers and family members
- Incorporate trauma informed services into our continuum of care
- Are trusted to provide partnership and transparency with contractors ,families and our community
- Provide services that are evidence based and innovative, responsive and proactive
- Make fiscally responsible and accountable decisions

Our Goals...



- Goal 1: To Partner with the People we Serve to Improve Satisfaction, Engagement and Health Outcomes
- Goal 2: To Partner with Employees to Improve Satisfaction, Retention and Services to the Individuals we Serve
- Goal 3: To Partner with Contract Providers and the Community to Increase Trust and Improve the Care of Consumers

Our Goals...



Goal 1:

To Partner with the People we Serve to
Consumer Satisfaction
Improve Patient Engagement and
Health Outcomes

Goal 2:

To Partner with Employees to Improve
Employee Satisfaction
Retention and Services to the
Individuals we Serve

Goal 3:

To Partner with Contract Providers and the
Provider/Partner Satisfaction
Community to Increase Trust and Improve
the Care of Consumers

Behavioral Health Services



Consumer Satisfaction

- Increase FSP slots – adult and children (Increase CBS/TBS/WRAP)
- First clinical assessment from 18 to 14 Days
- Hospital discharge appointments from 16 to 7 days
- Urgent care appointments (Baseline)
- Decrease re-hospitalization (<10%/30 days) (<5%/ 7 days)
- Implement Care Teams

Behavioral Health Services

continued



Employee Satisfaction

- Improve moral in the work unit (29% to 50%)
- Employees feel the are treated with fairness and respect (55% to 80%)
- Create interdisciplinary teams for care of consumers
- Increase strategies for supporting professional development
- Clear benchmarks for performance and timely evaluation
- Staff morale events and annual training calendar

Behavioral Health Services

continued



Provider/Partner Satisfaction

- Increase Satisfaction with Services
 - Children/TAY = 40% to 80%
 - Adult/Older Adult = 38% to 80%
 - Contracting = 63% to 80%
 - Hours/Services = 68% to 80%
- Engage in integration implementation
- Continue to evaluate contacted services
- Provide data regarding outcomes

Behavioral Health Services

continued



Financial Sustainability

- *Increase productivity (65%)*
- *Decrease no shows ($\leq 5\%$) Psychiatry (20%)*
- *Decrease disallowances/audit risk*

Quality Management



Quality Assurance (QA)

Identify, monitor, develop, and address QA standards identified by the Department of Health Care Services (DHCS) and the Centers for Medicare and Medicaid Services (CMS) pursuant to the delivery of Specialty Mental Health Services (SMHS) as the Yolo County Mental Health Plan (MHP). This includes, but is not limited to:

- Access
- Authorization
- Beneficiary Protection
- Funding, Reporting and Contracting Requirements
- Target Populations and Array of Services
- Interface with Physical Health Care
- Provider Relations
- Program Integrity
- Quality Improvement
- Mental Health Services Act
- Chart Review—Non-Hospital Services
- Chart Review—SD/MC Hospital Services
- Utilization Review—SD/MC Hospital Services
- Therapeutic Behavioral Services

Quality Management

continued



Quality Improvement/Performance Management (QI/PM)

Identify, monitor, develop, and address QI/PM standards identified by CMS and the California External Quality Review Organization (CalEQRO) for the delivery of SMHS as the Yolo County MHP. *This includes, but is not limited to:*

- Quality
- Access
- Timeliness
- Outcomes

Information Systems

Identify, develop, monitor and address standards related to maintenance of the Electronic Health Record. *This includes, but is not limited to:*

- ICD-10
- Meaningful Use
- Health Information Exchange Expansion of Netsmart and EHR Functionality

Quality Management

continued



Compliance/Privacy/Security

Identify, develop, monitor, and address Compliance standards identified by State and Federal government prevent Fraud, Waste, and Abuse (FWA) and to ensure compliance with State and Federal laws.

Drug Medi-Cal

Identify, develop, monitor and address standards identified by DHCS for Substance Use Disorder (SUD) treatment pursuant to Drug Medi-Cal (DMC); implement DMC program pursuant to State and Federal regulations.

Mental Health Medical Services



Consumer Satisfaction

- Improve access to care by starting a daily Walk-in Clinic
- Improve access to care for first Psychiatrist assessment within 30 days of request of service
- Improve access to care for post hospital discharge appointments from 16 days to 7 days
- Provide timely psychiatrist follow up appointment within 1-3 months
- Improve access and efficiency by reducing the No Show rate by 5% every quarter



Employee Satisfaction

- Support the transition of staff and consumers to Care Team to improve coordination of care
- Develop a system for equitable caseload and new clients distribution
- Promote continuing education, ongoing training and support professional development
- Improve the quality and accuracy of progress notes by doing peer reviews every quarter.
- Develop a staff retention/recruitment plan in collaboration with Management team and the County for mitigating primary reasons for employees leaving the department

Mental Health Medical Services

continued



Provider/Partner Satisfaction

- Develop an MOU with all Primary Care group and hospital partners
- Develop partnership with UCD Psychiatry Department
- Develop ongoing collaboration with CSOC community providers for medication support services

Children, Youth, & TAY Services



Consumer Satisfaction

- Improve access to care
- Improve identification of treatment needs, services, progress and outcomes
- Increase client's voice in developing and structuring services/programs
- Improve services to foster care youth and families
- Use of Universal Assessments by EPSDT Providers
- Implementation of CANS, ANSA and LOCUS

Children, Youth, & TAY Services

continued



Employee Satisfaction

- Provide needed training to serve clients and meet job expectations
- Support professional development and improve morale
- Ensure open communication, transparency and voice
- Provide clear performance measures and support
- Improve delivery of coordinated, culturally competent services

Children, Youth, & TAY Services

continued



Provider/Partner Satisfaction

- Improve information –sharing and collaboration
- Ensure open communication, transparency and voice
- Provide excellent customer service
- Improve coordination and communication for medication support services
- Improve delivery of coordinated, culturally competent services

Recovery Services



Consumer Satisfaction

- Improve the consumer's experience at the front door by streamlining processes from first call to first service or referral
- Develop the Moderate Intensity Service Team
- Improve access to care by reducing wait time to first assessment
- Provide timely re-assessments in accordance with department policy
- Identify barriers to appointment attendance to reduce no-show rates
- Implementation of the LOCUS to better match service level to consumer need
- Improve identification of consumers who have met treatment goals and are ready to be discharged to a lower level of care

Recovery Services

continued



Employee Satisfaction

- Improve access to and participation in trainings to support staff development
- Foster a safe environment for open communication and staff feedback
- Strengthen communication practices regarding department changes throughout the integration
- Provide clear performance measures for staff and support in achieving those measures

Recovery Services

continued



Provider/Partner Satisfaction

- Strengthen relationships with low intensity providers & PCP's to improve the "back door" process for consumers no longer requires our level of care
- Request and encourage feedback from community partners
- Transparency regarding changes, successes, and challenges

Intensive Recovery Services



Consumer Satisfaction

- Increase availability of more intensive community based services such as Full Service Partnership and Community Based Services to decrease need for higher levels of care
 - APS/Older Adult Teams: Formalize APS and Older Adult Team collaboration by 7/31/2015
 - Forensic Team: Implement Neighborhood Homeless Court by 9/30/2015
- Establish clear benchmarks for improvement in consumer satisfaction
 - Decrease Older Adult Client acute psychiatric hospitalization days by at least 5% quarterly
 - Increase case management services for MHC clients, effective 7/1/2015
 - Implement LOCUS and ANSA for all current FSP clients by 9/15/2015
- Track and trend data regarding urgent conditions and develop system to improve access
 - Incorporate physical health care goal and objectives into all Adult, Older Adult and Forensic FSP Client Plans by 3/31/16

Intensive Recovery Services

continued



Employee Satisfaction

- Establish care teams to foster interdisciplinary approach and care of consumers
 - Hire 3 new MH Specialists to work on the Adult FSP Team, a MH Clinician to work on the APS team, and a Homeless Coordinator to supervise Homeless Services by 10/15/2015
 - Provide all Intensive Recovery Teams staff with training on Assertive Community Treatment by 10/31/2015
- Ensure open communication with management team and line staff throughout the integration implementation process
 - Incorporate Plus/Delta in Team Meetings by 7/31/2015
- Establish clear benchmarks for performance and complete performance reviews on time
 - Quarterly review of individual staff productivity numbers and implement support plan as needed to meet standard
 - Documentation question box -- incorporate staff documentation questions into monthly training
- Increase strategies for supporting professional development
 - Coordinate CSUS Social Work Department Faculty in-service on professional development by 2/15/2016
 - Implement Strengths Finder Training and follow-up sessions for all Intensive Recovery Services Staff by 3/31/2016

Intensive Recovery Services

continued



Provider/Partner Satisfaction

- Ensure open communication with contract providers throughout the integration implementation process
 - Incorporate Intensive Recovery Services Updates into PSWG standing meeting agenda
- Improve provider satisfaction with Adult/Older Adult System of Care services from 37.5% to 80% indicating that services usually or always meet consumer needs
 - Include providers in trainings specific to system change: LOCUS and ANSA by 8/31/2015
- Improve provider satisfaction with ADMH hours from 68.42% to 80% usually or always meeting the needs of consumers
 - Implement CIP coverage on weekends; collaborate with Intensive Recovery On Call, by 12/31/2015

MHSA Services



Community Services and Supports: Consumer Satisfaction

- Implement an advance schedule of groups, both clinical and non-clinical, so that our doctors and clinical staff will know what's coming up and they can refer/recommend clients to participate.
- Remodel Woodland Wellness Center
- Establish a weekly TAY Wellness Program at a satellite site in Davis (Cesar Chavez plaza).
- Re-establish a Wellness Program at West Sacramento MH Center

Prevention and Early Intervention: Consumer Satisfaction

- Expand and continue Children's resiliency building programs, including more early intervention strategies.

Innovation: Provider/Partner Satisfaction

- Begin work on a new Innovation plan that will meet the new state requirements and continue to provide opportunities for local providers to introduce new and innovative programs.



Workforce Education and Training: Employee Satisfaction

- Develop a more complete opportunity ladder for Peer Support Workers (CL/FM)
- Establish tuition reimbursement program for staff and providers

Capital Facilities and Information Technology: Employee Satisfaction and Consumer Satisfaction

- Remodel Wellness Center/Woodland
- Support IT efficiencies/updates

MHSA Housing: Consumer Satisfaction

- Progress with development of 17 MHSA apartment units on the old Yolo General Hospital site

MHSA Services

continued



MHSA Administration:

- Improve satisfaction among staff by producing 100% on time staff performance evaluations.
- Improve satisfaction among staff by implementing the new vehicle check-out system.
- Improve satisfaction among staff and providers by providing support for improved FSP tracking methods

Cultural Competency:

- Improve satisfaction among clients, providers and staff by reestablishing regular Quarterly Meetings of the Cultural Competency Committee.
- Improve satisfaction among clients, providers and staff by completing a new CC Plan, in accordance with the existing regulations.
- Improve satisfaction among clients, providers and staff by developing more and better training opportunities relating to cultural competency.

Questions & Comments

