

CCBHC-E National Training and Technical Assistance Center

CCBHC New Grantee Learning Community

*Session 3: Establishing a Continuous Quality Improvement
and Data Management Approach as a CCBHC*

January 9, 2024

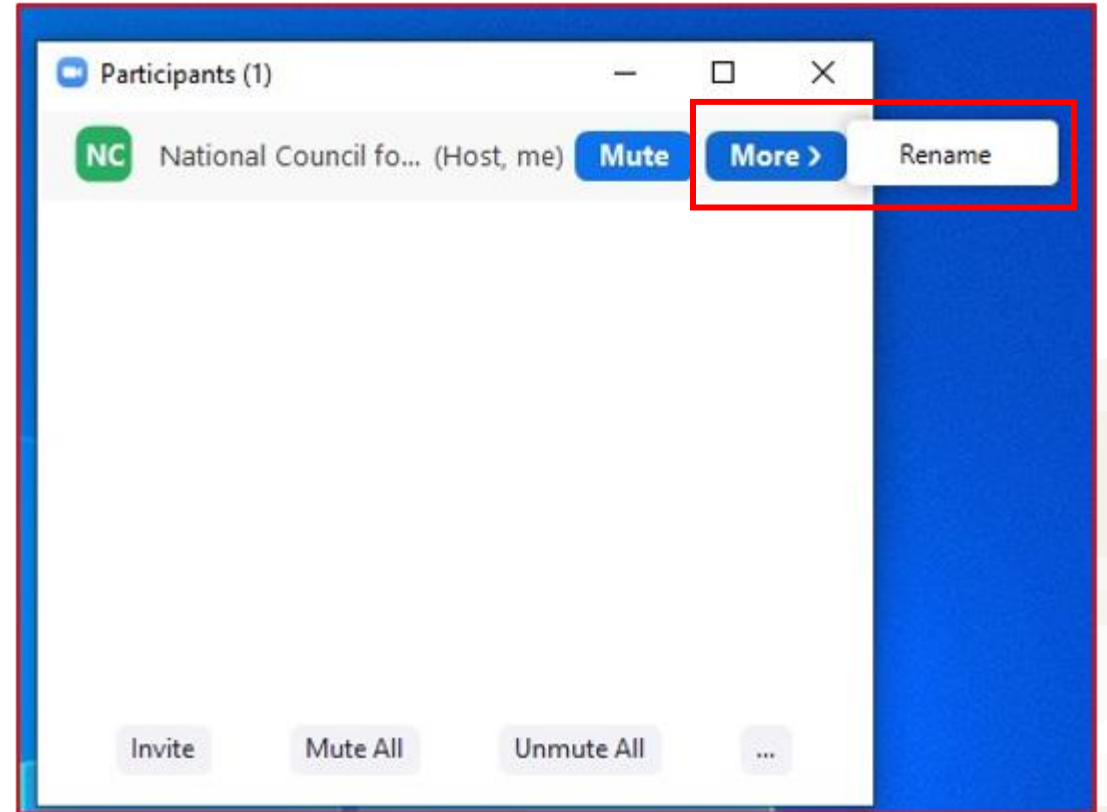
CCBHC-E National Training and Technical Assistance Center

Funded by Substance Abuse and Mental Health Services Administration and operated by the National Council for Mental Wellbeing

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Logistics

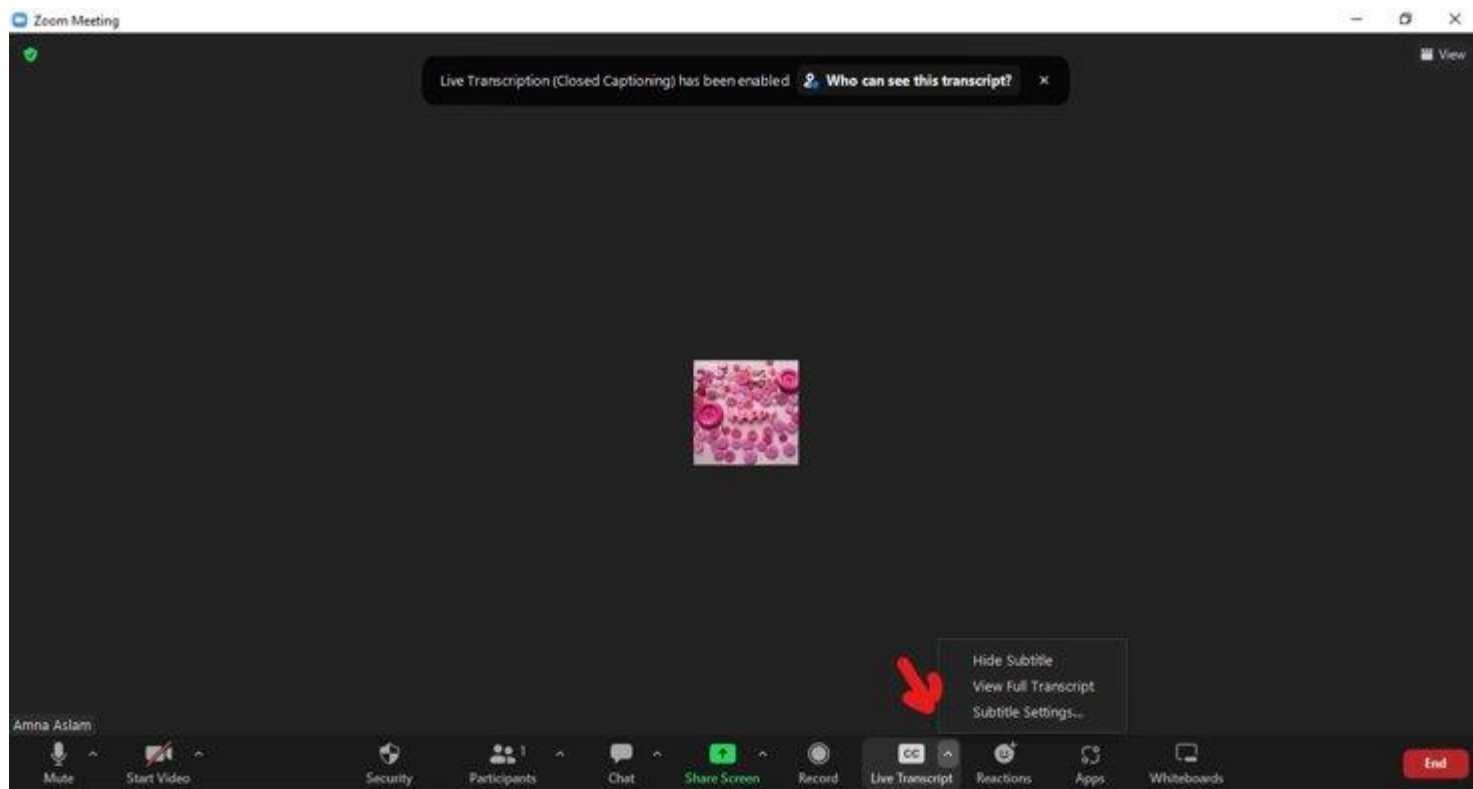
- Please rename yourself so your name includes your organization.
- *For example:*
 - **D'ara Lemon, National Council**
- *To rename yourself:*
 - Click on the **Participants** icon at the bottom of the screen
 - Find your name and hover your mouse over it
 - Click **Rename**
- If you are having any issues, please send a Zoom chat message to **D'ara Lemon, National Council**



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Today's Agenda

1

-----• CCBHC overview

2

-----• Quality and other reporting requirements

3

-----• Best practices for CQI and data management

4

-----• Discussion

5

-----• Breakout discussion

Learning Objectives

- Increase knowledge and understanding of CCBHC criteria CQI section and implications for clinic implementation and organizational changes
- Support clinics in implementation of continuous quality improvement requirements
- Support clinics in translating needs assessment results into population health management using quality reporting



Your Learning Community Team



Renee Boak, MPH
Consultant and Subject
Matter Expert



Mindy Klowden, MNM
Managing Director, Third
Horizon Strategies



Tonya Aultman-Bettridge, PhD
Partner and Chief Information Officer,
TriWest Group



Community Pulse Check

New Grantee Deliverables

CCBHC-E National Training and Technical Assistance Center

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Community Check-In



What is the status of your **needs assessment**?

- Haven't begun needs assessment
- Have begun design but have not started data collection
- In the process of collecting data
- Have completed the needs assessment
- Have questions

How many of the **9 required services** are you currently providing either directly or through a Designated Collaborating Organization (DCO)?

- 1-4
- 5-8
- All 9

Where are you on the **staffing and training plans**? *(select all that apply)*

- Waiting for completion of needs assessment
- Have begun the staffing plan
- Making good progress
- Have completed the staffing plan
- Have questions

Where are you on the **delivery of services plan**?

(select all that apply)

- Waiting for the completion of the needs assessment
- Have begun the service plan
- Making good progress
- Have completed the service plan
- Have questions

Where are you on the **sustainability plan**? *(select all that apply)*

- Haven't begun the sustainability plan
- Have begun the sustainability plan
- Making good progress

- Have completed the sustainability plan
- Have questions

Where are you on **attestation**? *(select all that apply)*

- Haven't begun preparing for attestation
- Have begun preparing for attestation
- Making good progress
- Have submitted attestation
- Have questions



What is a Certified Community Behavioral Health Clinic (CCBHC)?

CCBHC is a model of care that aims to improve service quality and accessibility. CCBHCs are required to serve anyone who requests care for mental health or substance use, regardless of their ability to pay, place of residence or age – including developmentally appropriate care for children and youth. CCBHCs do the following:



Provide integrated, evidence-based, trauma-informed, recovery-oriented and person- and family-centered care.



Offer the full array of CCBHC-required mental health, substance use and primary care screening services.



Coordinate care with other behavioral health, physical health, and social services systems in the community.

The primary goal of the CCBHC program is to increase access to mental health and substance use care for underserved communities.

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Quality & Other Reporting Requirements



Quality and Other Reporting 5.A: Data Collection, Reporting and Tracking

- The CCBHC has the capacity to collect, report and track encounter, outcome and quality data, including, but not limited to, data capturing: (1) characteristics of people receiving services, (2) staffing, (3) access to services, (4) use of services, (5) screening, prevention and treatment, (6) care coordination, (7) other processes of care, (8) costs and (9) outcomes of people receiving services.
- CCBHC-Expansion grantees must collect and report the clinic-collected quality measures.
 - Reporting is annual and for all people receiving CCBHC services.
 - CCBHCs are to report quality measures nine months after the end of the measurement year, as that term is defined in the technical specifications.
 - CCBHC-Es that are required to report quality measure data report directly to SAMHSA.



Quality and Other Reporting 5.B: CQI Plan

- In order to maintain a continuous focus on quality improvement, the CCBHC develops, implements and maintains an effective, CCBHC-wide continuous quality improvement (CQI) plan for the services provided.
 - Establishes a critical review process to review CQI outcomes and implement changes to staffing, services and availability that will improve the quality and timeliness of services.
 - Medical Director is involved in the aspects of the CQI plan that apply to the quality of the medical components of care, including coordination and integration with primary care.
- The CQI plan is to be developed by the CCBHC and addresses how the CCBHC will review known significant events including, at a minimum:
 - (1) deaths by suicide or suicide attempts of people receiving services,
 - (2) fatal and non-fatal overdoses,
 - (3) all-cause mortality among people receiving CCBHC services,
 - (4) 30-day hospital readmissions for psychiatric or substance use reasons, and
 - (5) such other events the state or applicable accreditation bodies may deem appropriate for examination and remediation as part of a CQI plan.



Best Practices for Continuous Quality Improvement and Data Management

Tonya Aultman-Bettridge, PhD
Partner and Chief Information Officer
TriWest Group





Why “Continuous Quality Improvement”?

- *Brings focus to improving treatment processes and outcomes for people receiving services **systematically**.*
- *Shifts culture – thinking about improvement at the organizational or program level, not just the person-level.*
- *Routinizes the collection, analysis, and use of data in day-to-day program operations.*



Driving Questions

How can we improve the lives of people seeking services?

How can we create a culture of continuous improvement?

Principles of Quality Improvement



QI WORK AS
SYSTEMS AND
PROCESSES



FOCUS ON
PATIENTS



FOCUS ON BEING
PART OF THE TEAM



FOCUS ON USE OF
THE DATA

Focus on the Use of Data

- Prepare a list of all the data elements required in your CQI process (based on the criteria)
- Evaluate feasibility of collection of each data element in your current system
- Focus on “low-hanging fruit” as you establish your initial process
- Establish baselines where possible



Criteria 5.A: Data Collection, Reporting, and Tracking

Data Group	Details	Reference Source	Priority & Feasibility	Status/Where collected	Person Responsible CQI Reporting Timing	How is the data used?	Notes
Client Characteristics	Race, ethnicity, gender identity, sexual identity, language spoken	CCBHC criteria 5.a.1	High Priority In Progress	CareLogic, but not all categories Collecting in NOMs	NOMs data reported ongoing; quarterly analysis	Disparity Impact Statement reporting; CQI disparity analysis	HIGH PRIORITY - Need to determine how accurate the data is (there may be a lot of missing values in gender and in race/ethnicity) Rolling out SOGIE into CareLogic for CCBHC clients - for sexual and gender identity (starting halted - now starting in Oct)
Client Characteristics	Diagnosis	5.a.1	High Priority Complete	CareLogic	NOMs data reported ongoing; quarterly analysis	Quarterly NOMs reporting	Data should be accurate
Client Characteristics	Age, income	Internal		CareLogic	same	same	Do we want to do any analysis based on income?
Access to services	Time to services	5.a.1 & Required Clinic- Collected Measures		waiting for specifications; actively working on developing reports	Program Evaluator Quarterly monitoring	Will need to be reported to SAMHSA by 2025 Reporting method TBD	HIGH PRIORITY - use "Time to Services" I-Serv CCBHC Clinic Quality Measure (Required Clinic Collected Measure). Will include sub-measures of average time to: Initial Evaluation, Initial Clinical Services, Crisis This is 70% ready to go, there are still a couple programs that need to be rolled out
Screening, prevention and treatment	Preventive Care and Screening: Unhealthy Alcohol Use: Screening and Brief Counseling (ASC)	5.a.1 & Required Clinic- Collected Measures		waiting for specifications	TBD	TBD	CCBHC Clinical Quality Measure (Required Clinic Quality Measure)
Screening, prevention and treatment	Columbia Suicide Severity Rating Scale (C-SSRS)	Program Goals and Objectives		captured in CareLogic	Program Evaluation Quarterly monitoring	Program goals and objectives	The number and percentage of new clients screened using C-SSRS; working on finalizing some details; mostly already captured



Focus on the Team

- Enlist key staff as “data champions”
- Make sure CQI processes include all levels of the organization
- Determine who/how to prioritize goals for improvement
- Create a robust CQI team comprising data/EHR specialists, leadership, program managers, and staff providing services



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Methodological Frameworks

- **Lean** – seeks to eliminate waste
- **Six Sigma** – reduces variation in quality
- **Plan, Do, Study, Act** - also part of Lean and Six Sigma



Basic Steps

 Identify a program or practice issue needing improvement and a target improvement goal

 Using an interdisciplinary team, analyze the issue and its root causes

 Develop a specific plan with action steps to address the root causes

 Determine how you will know the change is an improvement

 Provide coaching and delegate responsibilities for the action steps

 Analyze data and review the results to check for improvements

 Repeat these steps to test different changes or to address other issues as they arise

Getting Started

- Start small and keep it simple
- Understand that front-line teams know what the problems are and have the best solutions
 - Engage all departments (IT, QI, programs) and emphasize a team approach from the beginning to build and maintain momentum
 - Share responsibility for improving client outcomes across team members and departments
 - Identify "change agents"
- Routinely review data to identify trends and potential training needs
 - Remind others that this is an iterative process!
 - Utilize dashboarding technology
- Find the 'golden nuggets' in the data and use them to create change in processes and practices (e.g., Plan-Do-Study-Act)





Best Practices for Using Data

- Build data collection into existing workflows
- Incorporate interdisciplinary teams, including those with lived experience
- Understand and clearly define each measure – e.g., purpose, timeframe, etc.
- Build alerts into workflows, EHRs
- Focus on improvement, not just compliance
- Stratify data – e.g., demographics, risk-level
- Use visuals to share data – graphs and tables



Displaying Data

- Helpful Tips

- Make graphics self-explanatory and easy to interpret
- Provide self-explanatory symbols
- Limit the size of tables
- Explain how to read and interpret charts
- Avoid abbreviations and jargon

Example

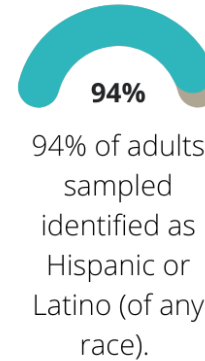
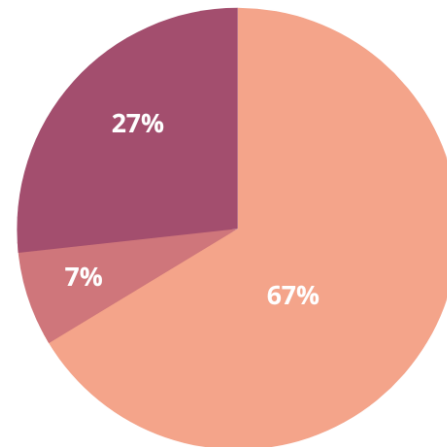
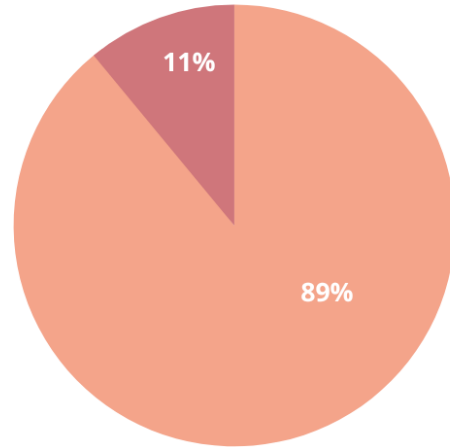
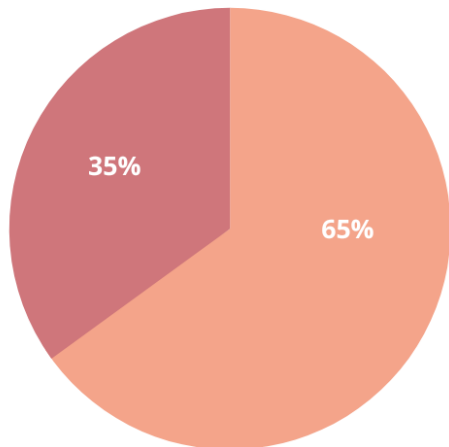
Demographics - Adults

Gender Identity, Sexual Orientation, Race, & Ethnicity

- Female
- Male
- Transgender
- Other Gender Identity

- Heterosexual
- Lesbian or Gay
- Bisexual
- Other Sexual Orientation

- White
- Black or African American
- Other or Multiple Races
- Native American



Employment, Education, & Housing



71% of sampled adults reported that they were not working full- or part-time.



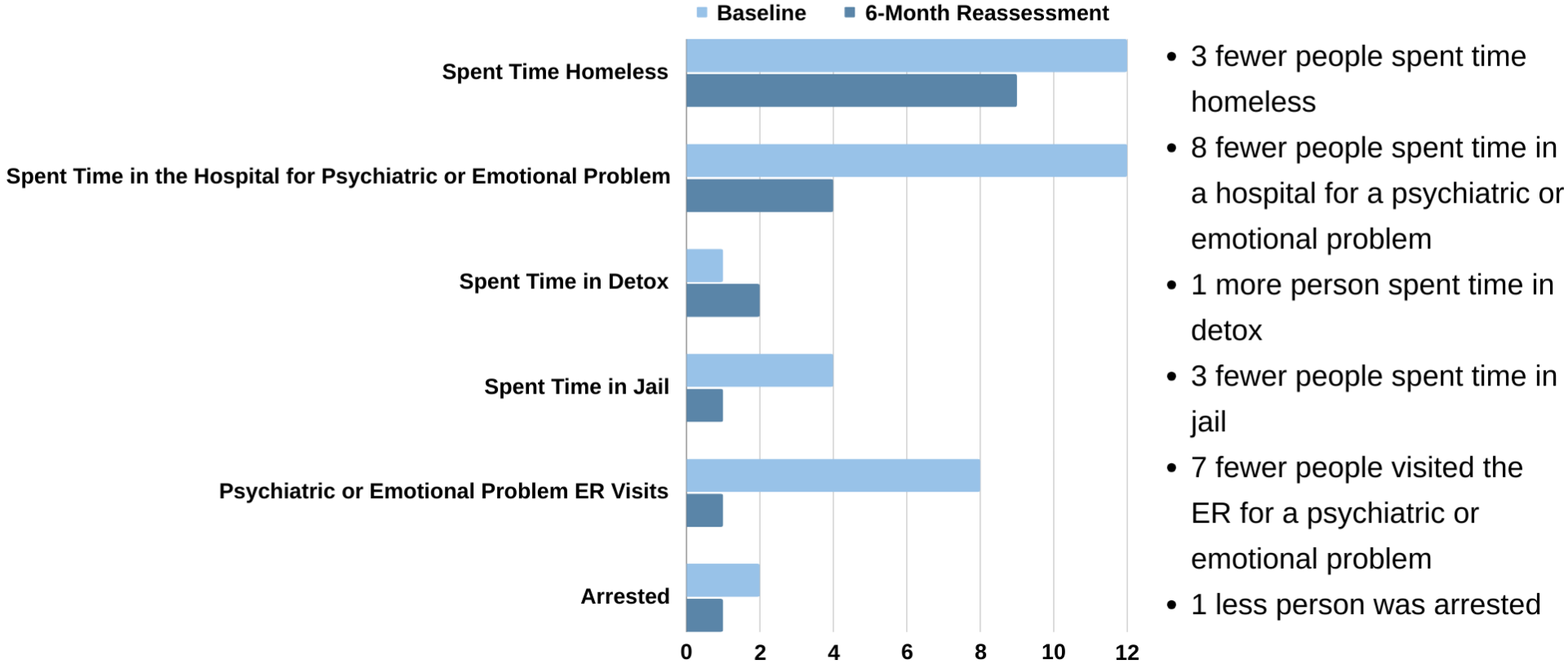
71% of sampled adults achieved a high school diploma (or equivalent) or higher.



96% of sampled adults lived in their own or someone else's private residence.

Example

Change in Troubled Nights and Events Baseline to Reassessment



Discussion



Quality Improvement Considerations

- Which staffing roles, or skillsets, support data collection and analysis efforts?
- How does the evaluation of outcomes and utilization of services inform continuous quality improvement (CQI) activities?
- How can CCBHCs best use data to guide targeted strategies to reach priority populations as defined by their needs assessment and disparities impact statement?
- What are some strategies to instill the CQI mindset among staff?



Breakout Discussion



Breakout Discussion



- Share the members of your CCBHC CQI team and their role in supporting continuous quality improvement.
- Discuss the data and/or workflow challenges in monitoring for CQI efforts.

During the breakout room, assign someone to take note of all **questions**. Upon returning to the large group, these questions can then be entered into the chat and become part of the question log.



Closing: Sharing and Preparing



Brave Volunteers: What did you hear from others in terms of questions and needs?

QUESTION LOG: Take 2-3 minutes to put any questions you generated in the chat to continue to add to our question log

Next Session: February 13
Topic: Service Array



CQI and Data Management

- [CCBHC ODW: Quality and Other Reporting](#)
- [Quality Improvement Toolit](#)
- [Toolkit for Designing and Implementing Care Pathways](#)
- [Health Equity and Racial Justice Toolkit](#)

CCBHC-Expansion Grantee National Training and Technical Assistance Center

We offer CCBHC grantees...



Virtual Learning Communities, Webinars and Office Hours

Regular monthly offerings that are determined based on grantees expressed needs.



Opportunities for Collaboration with Other Grantees

Monthly Peer Cohort Calls for CCBHC Program Directors, Executives, Evaluators and Medical Directors.



Direct Consultation

Request individual support through our website requesting system and receive 1:1 consultation.



On-demand Resource Library

Includes toolkits, guidance documents, and on-demand learning modules.

Access our website to register for upcoming events, submit a consultation request or scan our on-demand resource library:

 <https://www.thenationalcouncil.org/program/ccbhc-e-national-training-and-technical-assistance-center/>

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