

Report to the Operations Sub-Committee November 16, 2007

## **Clinical Operations**

# Efficiency Endeavors Web-Based Concurrent Reviews

- Effective November 15, 2007, additional field added for providers requesting 90801 Evaluation only
- Effective November 15, 2007, web registration will allow users to enter concurrent review and receive additional outpatient visits.
- Effective December1, 2007, web registration will allow users to perform concurrent reviews for Methadone Maintenance
- Effective December 1, 2007, web registration will allow users to perform concurrent reviews for Family Support Team (FST).

## Efficiency Endeavors Cont'd.

- Pre-cert average call time: 19.5 minutes
- Concurrent Review average call time: 17 minutes
- AIS Enhancements implemented (elimination of several sub forms) to decrease length of time for telephonic reviews
- 3 Clinical Care Managers hired in October
- Adjustments to authorization timelines for IOP/EDT services
- Further adjustments to authorization timelines for other services are under review

# ICM Program

- New ICM Director: Cheryl Sims Coleman
- Continuing to hire and train Intensive Care Managers.
- 2 additional ICM's to begin late fall.
- Training program for clinical staff has been further formalized to enhance the experience and preparedness of staff prior to external activities

## **CCMC ED Plan for Autumn Volume**

- On call coverage continues as increase in ED visits has begun
- CAREs Unit "go live" successful October 15, 2007
- Clinicians available 24 hours for assistance to ED
- Consultation on site 7 days a week
- Peer/Family Specialist consultation for family support
- Emphasis on EMPS inclusion and collaboration
- Emphasis on diversion from inpatient units utilizing community based services and supports
- Maintaining support of *all* Emergency Departments for assistance with disposition
- Training complete for Interactive Enhanced daily and monthly Reporting for Members in ED's Statewide as well as the CARES Unit at IOL.

Systems Management Operations

# **System Managers**

### **Examples of Activities Conducted in October:**

- Conducted focus group in conjunction with CT BHP Quality Management Department with foster parents on foster care disruption
- Appeared on cable access TV show "Families in the Making", produced by Norwich DCF FASU, to help recruit foster parents
- Initiated a meeting with a local area hospital Administrative Director of Behavioral Health regarding their interface with community providers and DCF, that resulted in discussion of the possibility of their housing a crisis stabilization unit
- Analyzing Quarterly Reports to collect data that support state-wide LADP recommendations for program expansion

# Activities, cont'd

- Working with a local provider to enhance capacity by creating an IOP program for sexually reactive children
- Developing a user-friendly educational tool, in conjunction with the LADP Workgroup, that will provide an overview of "relevant service systems" (behavioral health service system, family advocacy, schools, DCF, DDS, DMHAS and CSSD) based on a child's point of entry into the system
- Conducting, in conjunction with DCF, a two part training on the service system as a whole and the service system by level of care, for various audiences including inpatient, emergency department, and child guidance clinic staff

# Activities, cont'd

- Participating in various community groups including Mayor's Early Childhood Task Force, FWSN Implementation group, and a school system Department of Social Work Strategic Planning Process Committee.
- Chairing the Community Collaborative Data Collection Sub-Committee that is quantifying the level of cultural competency in the area from the perspective of behavioral health providers and parents of children receiving the services from community providers, through a survey and family focus groups, being conducted in conjunction with a research consultant.

# Activities, cont'd

- Final meeting with Area Offices held November 7, 2007
- Next Steps regarding LADPs to be formulated
- Initiating focus on Provider Analysis and Reporting

Quality Management Operations Quality Improvement Activity: Discharge Delay

### Goal: Identify Best Practices in Discharge Planning to Decrease Discharge Delay

### Importance:

- Transition period immediately following inpatient stay associated with more frequent adverse incidents
- Medication issues most frequent

Decreasing Discharge Delay and Improving Communication

### **Activities:**

- Focus groups with family members and providers involved in discharge process
  - Family Involvement in discharge planning process
  - Communication between outpatient and inpatient providers on admission, during stay, and discharge
  - Disseminate Discharge Summary to outpatient providers
  - Members discharged on medications that are nonformulary (Multiple formularies of MCOs)

# Activities Cont'd

### Literature Review

- Joint Commission Patient Safety Standards on:
  - "Hand-off" between levels of care and
  - "Medication Reconciliation" on admission to the hospital to gain knowledge of current medication regimen
- Increasing focus on issues associated with patient education regarding medications and need to involve family in this process
- Team approach to discharge planning
- Best Practices in Discharge Planning Seminars to be held with largest child/adolescent facilities in November- December 2007

## Peer and Family Support

# Peer Support Unit

➢Peer and Family Peer Specialists attended 39 community meetings, examples include:

- > Home Visits with Members
- > Child Specific Team, Discharge Planning or Treatment Team Meetings with Family and Providers
- School PPT Meetings
- Support Member/Family at Court
- Community Collaboratives
- Community Meetings
- ➢ Conferences

210 Consultations in October 2007
New Manager to Begin December 2007
Fully Staffed, December 2007

# Peer Support Unit Referrals

- Food
- Operation Hope
- Roosevelt School Family Resource Center
- Serve Food Co-op
- Sterling House Community Center
- The Town That Cares Fund-Thanksgiving/Christmas Baskets
- Legal Services
- CT Legal Aid
- Mentoring
- Nutmeg Big Brothers

# Peer Support Unit Referrals

#### **Care Coordination**

System of Care Community Collaboratives

#### Clothing

Warm Coats for Winter

#### Family Organizations

- > AFCAMP
- FAVOR
- Families United for Children's Mental Health
- Tri-County Support Network for Families Raising Children with Bipolar The Connecticut Group

#### Food

- Cesar Batalla Family Resource Center
- Cornerstone in New Haven
- CT Association for Human Services
- Family Matters Community Center
- New Horizons

### Examples of Referrals, con't.d

#### Faith-Based Organizations

#### (for basic needs- food, clothing, and financial)

- Catholic Charities-Capitol Region Office
- Christian Revival Church Food Pantry  $\geq$
- Daughters of Charity of the Most Precious Blood Rescue Mission  $\triangleright$
- House of God Outreach & Deliverance
- Jesus Saves Ministries/JSM Development Corp.
- King's Pantry
- Light on the Hill Food Pantry at Summerfield United Methodist Church
- Loaves and Fishes Ministries
- Mercy Housing & Shelter-St. Elizabeth House
- Mt. Olive Church Ministries Emergency Food Pantry
- New Life Worship Center
- Salvation Army-Hartford North End Corps Worship & Community Center
- San Juan Center
- Shiloh Baptist Soup Kitchen & Food Pantry
- St. Ambrose Church Food Pantry
- St. Augustine Cathedral Food Pantry
- St. Charles Church Urban House
- St. Luke/St Paul's Episcopal Church Food Center
- St. Mary's Church Clothing Bank
- St. Monica's Church Food Pantry & Soup Kitchen
- $\triangleright$ St. Peter's Church Clothing Closet
- $\triangleright$ St. Vincent De Paul Food Pantry
- Thomas Merton Center
- $\triangleright$ Walk in the Light Outreach Center

## "Unmasking Mental Illness" CT BHP Presentation

In honor of *Mental Illness Awareness Week* 

CT BHP the Dept. outreached to the faith-based community. Information was presented and resource packets shared with the Ministerial Alliance and the Cross Street AME Zion Church both in Middletown.

**Outcome**: increased awareness and additional requests to repeat the presentations in New Haven and Hartford.

# Customer and Provider Relations

## CT BHP Call Center Call Volume



## CT BHP Call Center % Answered in < 30 Seconds



• During mid 3<sup>rd</sup> Quarter 2007, the CT BHP Call Center Average Speed of Answer was compromised due to a National initiative in calculating productivity rate.

 Rationale for excluding CT from this initiative was provided to National in that the CT Call Center has a unique arrangement with multiple layers of phone coverage to ensure rapid speed of answer by live agents for all inbound calls.

• By the end of 3<sup>rd</sup> Quarter 2007, Average Speed of Answer targets had been restored.

### **CT BHP Web Registration Services**

### 90801: Evaluation Only

*Effective November 15, 2007,* an additional inquiry field will be added to the current service registration screens to provide a registration in which an initial evaluation was performed, but continuing outpatient services will not be required or requested.

### **Outpatient Concurrent Reviews**

*Effective November 15, 2007,* the web registration system will allow users to perform an on-line concurrent review after an initial registration/authorization of outpatient services has been obtained.

### OTP Concurrent Web Registration Provider Training Schedule

All trainings to be conducted at the CT BHP Rocky Hill Office 500 Enterprise Drive, Suite 4D Rocky Hill, CT 06067

#### Wednesday, November 14, 2007

10:00 – 11:30 a.m. 3:00 – 4:30 p.m.

#### Thursday, November 15, 2007

10:00 – 11:30 a.m. 3:00 – 4:30 p.m.

#### Wednesday, December 5, 2007

10:00 – 11:30 a.m. 3:00 – 4:30 p.m.

#### Thursday, December 6, 2007

10:00 – 11:30 a.m. 3:00 – 4:30 p.m.

Tuesday, December 11, 2007

10:00 – 11:30 a.m. 3:00 – 4:30 p.m.