

Report to the Operations Sub-Committee July 18, 2008

Clinical Operations

Clinical Efficiency Endeavors

- Pre-cert average call time: 16 minutes (decreased from 18 minutes in April '08)
- Concurrent Review average call time: 15
 minutes (remains static since beginning of the
 year 2008)
- Recently hired RCT staff has begun training this now completes the ICM frontline team
- On-site reviews for PRTF are now in progress
- On-site reviews for Residential are being scheduled for late July/early Aug

ICM Program

- ICM Director resigned for another opportunity in June, Director of Peer/Family Services acting as interim
- This position to be filled, interviews are underway; ICM frontline staff remain at full capacity
- An additional ICM has been assigned to participate in weekly Discharge Delay meetings at Hallbrooke Hospital to assist with discharge planning and gridlock
- New ICM's have completed site visits to their assigned area Emergency Departments to assist in discharge planning

ED Update

- Total Days in ED June = 23 days (significant decrease from 82 total days in ED in April '08; excludes CARES Unit)
- 23 ED Cases were identified resulting in the 23 days noted above (excludes CARES Unit)
- ALOS in ED in June was 1.0 days (a decrease from 1.86 days in April '08; excludes CARES Unit)
- In June, 11 CARES cases were identified,
- In June, 9 of the total 23 cases were identified as DCF involved

ED Impact



ED Impact (con't)

Average ED Length of Stay for Children In ED Delay Status



Inpatient Impact Inpt Discharge Delay Days



Source: D/C Delay #8066 run dates: 5/30/08 and 7/14/08

Quality Management Operations

Foster Care Study 2008

- Completed review of the literature to identify recommendations regarding interventions/ treatments that have been shown to decrease disruptions
- Strong evidence in the literature that behavioral health issues influence disruption rates BUT also that frequent disruptions/ moves have a negative impact on mental health of foster care population
- Working with DCF on pilot projects to decrease disruption rates

2008 Performance Targets

- Five (5) performance target topics for 2008
 - Eligibility Information Accuracy and Timeliness
 - Member Satisfaction
 - Foster Care/ Disruption
 - Decreasing Discharge Delay
 - High Utilizers

Regional Network Management

RNM Activity Updates

- Focus on Discharge Delay with Facilities and Programs within their assigned region
 - RNM management and staff continuing on-going meetings with DCF area office leadership to identify discharge barriers and local network problems
 - Continuation of prioritizing data that is needed to form Quality Improvement Plans that address discharge delay issues in Residential Treatment Centers
 - Completed draft of new DCF Area Dashboard Reports to focus on discharge delay and utilization trends
- Brokering meetings between providers to help improve working relationships
- Continued participation in local Collaborative meetings

Level of Care Projects

(Psychiatric Residential Treatment Facilities (PRTFs), Inpatient Adult Facilities, Inpatient Child and Adolescent Facilities)

- RNMs have now completed all Inpatient Child and Adolescent facility visits; goal: sharing 1st quarter 2008 ALOS and acute & discharge delay performance data, including case mix information
- Ongoing meetings being held with PRTF facilities to discuss Quality Improvement goals:
 - Distribution of both statewide and facility specific ALOS acute/discharge delay data
 - Follow up meetings planned to formulate project goals (refinement of LOC criteria, LOS targets, Focal Treatment Planning, on-site CCR, enhanced discharge planning)



- ECC Provider Work/advisory group was formed and met June 25, 2008 (focus: to further discuss questions/concerns and recommendations raised in the April ECC meetings)
- Program challenges were identified/discussed and are currently being reviewed by CT BHP Senior Management and RNM's
- RNM's continue to follow up on individual provider concerns

Peer Support and Family Specialists

Peer Support Unit

Peer and Family Peer Specialists attended 38 community meetings in June, examples include:

- •Home Visits with Members
- •Child Specific Team meetings
- •Discharge Planning Meetings
- •Support Member/Family at Court
- Community Collaboratives
- •NAMI Annual Conference Orlando Florida
- •Conferences on Parents With Cognitive Limitations, Special Education Law, Child Sexual Abuse Prevention, Suicidal and Self injurious Youth, Juvenile Justice Conference
- MSS
- •Emergency Room visits with Family

Peer Support Unit (cont'd)

- 235 Consultations occurred in June. This is 54 more consultations than occurred in April '08. Peer referrals continue to come from Emergency Departments, Pediatrician offices, Community collaboratives and DCF Area Offices
- Continued involvement in organizing and facilitating the Consumer and Family Advisory Committee
- Continued attendance at community collaborative meetings, MSS, DCF Area Advisory Council meetings and coordination of care meetings for members that are co-managed

Peer Support Unit (cont'd)

- Peer /Family Peer Specialist attended the annual national NAMI conference. Local staff, along with national ValueOptions supported and staffed the NAMI Welcome Center
- Peer/ Family Peer Specialist are currently involved in two work groups focusing on Post Partum depression and resources for Foster Families
- Peer/ Family Peer Specialist continue to work in conjunction with the Intensive Care Managers to improve discharge delay by including Family members in the discharge planning process

Provider and Customer Relations

Provider Data Verification Forms

•Provider Data Verification/PDV forms were mailed out 2nd Quarter 2008 to the Provider Network to obtain updated/new provider information

 This additional information will be utilized to provide our membership with more comprehensive and updated referral information, including provider specialty and expertise CT BHP Provider Training Workshops 3rd Quarter 2008 Workshops

- <u>Tuesday, July 15th</u>, CT BHP Web Registration – *Robert Urban, Provider Relations*
- Tuesday, August 19th, Provider Analysis and Reporting/P.A.R. – Clark Hansen
- Tuesday, September 16th, Medication
 Reconciliation Steven Kant, MD

Call Volume Data

- Customer Service call volume the past 3 months (April, May & June) has been higher than same months in '07
- June '08, % calls answered in less than 30 seconds was significantly higher than % of calls answered in less than 30 seconds in June '07

CT BHP Customer Service Call Volume 2006, 2007, and 2008 Data



CT BHP Call Center % Answered in < 30 Seconds 2006, 2007, and 2008 Data

