

Department of Health and Human Services (DHHS)  
Office of Substance Abuse and Mental Health Services (SAMHS)  
Report on Unmet Needs and Quality Improvement Initiatives  
May, 2015

Attached Report:

Statewide Report of Unmet Resource Needs for Fiscal Year 2015 Quarter 2

Population Covered:

- Persons receiving Community Integration (CI), Community Rehabilitation Services (CRS), Assertive Community Treatment (ACT) and Behavioral Health Homes (BHH)
- Class and non-class members

Data Sources:

Enrollment data and RDS (resource data summary) data collected by APS Healthcare, with data fed into and reported from the DHHS EIS data system

Unmet Resource Need Definition

Unmet resource needs are defined by 'Table 1. Response Times and Unmet Resource Needs' found on page 17 of the approved DHHS/OAMHS Adult Mental Health Services Plan of October 13, 2006. Unmet resource needs noted in the tables were found to be 'unmet' at some point within the quarter and may have been met at the time of the report.

Quality Improvement Measures

The Office of Substance Abuse and Mental Health Services is undertaking a series of quality improvement measures to address unmet needs among the covered population for the Consent Decree.

The improvement measures are designed to address both specific and generic unmet needs of consumers using the established array of needs:

- |                                  |                              |
|----------------------------------|------------------------------|
| A. Mental Health Services        | H. Financial Security        |
| B. Mental Health Crisis Planning | I. Education                 |
| C. Peer, Recovery and Support    | J. Vocational/Employment     |
| D. Substance Abuse Services      | K. Living Skills             |
| E. Housing                       | L. Transportation            |
| F. Health Care                   | M. Personal Growth/Community |
| G. Legal                         |                              |

## **Ongoing Quality Improvement Initiatives**

**SAMHS Website – Redesign.** A taskforce has been formed to design and implement a new SAMHS website. SAMHS currently has the legacy websites for Adult Mental Health Services and Office of Substance Abuse. Changes to the website will be incremental based on a schedule that is being developed. The redesign will assist the public in accessing information regarding unmet needs. All aspects of the new site should be rolled-out in July 2016.

Identified Need: A, B, C, D, E, F, G, H, I, J, K, L, M

**Contract Performance Measures.** SAMHS has instituted contract performance measures for fourteen service areas for FY15 contracts. The service areas are Community Integration, Assertive Community Treatment, Community Rehabilitation Services, Community Residential Treatment, Crisis Intervention and Mobile Response Services, Crisis Stabilization Services, Daily Living Support Services, Day Support Services, Gero-Psychiatric Nursing Home, Long-Term Supported Employment, PATH Services, Skills Development, Shelter Plus Care and Bridging Rental Subsidies. Where appropriate, the measures are in alignment with standards under the Consent Decree Plan. The DHHS Office of Quality Management and SAMHS have worked out a three year schedule for full implementation of measures; year one will be to validate the measures, year two to establish baselines, year three to test full implementation. All consumer based contracts will have performance measures starting FY16.

Identified Need: A, B, C, D

**Contract Review Initiative.** The Data/Quality Management staff worked with field service teams to ensure they have up-to-date, accurate service encounter data when they review progress toward meeting contract goals and establishing benchmarks for new contracts. SAMHS has built an easy query tool to help office staff identify service utilization patterns across three sources of funding. Also, a tool was built to assist providers in sending their data to SAMHS. This entire project has been completed, but Data/Quality Management staff will continue to monitor to assure providers' data is being sent successfully.

Identified Need: A, B, D, E, I, J, L

**Mental Health Rehabilitation/Crisis Service Provider Review.** The Mental Health Rehabilitation/ Crisis Service Provider (MHRT/CSP) certification was developed by the crisis providers (Maine Crisis Network) over the past several years in collaboration with DHHS (adult mental health and children's behavioral health) and the Muskie School. The MHRT/CSP is now ready to be implemented with providers. A review team consisting of two representatives from the Maine Crisis Network, two representatives from Children's Behavioral Health and two representatives from SAMHS worked together to conduct reviews at contracted agencies. Muskie staff collected the data, produced a summary report and made recommendations with plans to implement those recommendations.

Identified Need: B

**Mental Health Rehabilitation Technician-** SAMHS, Muskie School, providers and consumers have formed a group to redesign the certification of the Mental Health Rehabilitation Technician/Community. The group has come up with recommendations that will be sent to SAMHS to review this quarter.

Identified Need: A, B, C, D, E, F, G, H, I, J, K, L, M

## **Consent Decree Process Improvement Quality Improvement Initiative**

- Agencies will soon be getting their Waitlists directly from APS Healthcare. The Field Service Managers and Field Service Specialist will still be following up weekly with the agencies regarding their Waitlists.
- SAMHS staff called all consumers who have been on the Waitlist for 30 days or longer, and if they were unable to reach the consumer then the consumer was sent a letter. SAMHS staff waited for 14 days, and if there was no response APS Healthcare was asked to administratively close them. There was little response from those waiting 30 days or longer so SAMHS staff called and/or sent letters to those on the Waitlist for 15 days or longer. Staff was able to reach a few more but still there were many who could not be reached either by phone or letter. If SAMHS staff is able to reach the consumer, the consumer has the option of having SAMHS staff assist them in getting services immediately or they can stay on the agency's Waitlist. Individuals unable to be reached will be discharged from the APS Waitlist.
- Staff will follow up to see that those individuals are either in service or were discharged.

Identified Need: A, B

**SAMHS Quality Management Plan 2015-2020-** The **DRAFT** Quality Management Plan has been completed. The Plan has been given to Disability Rights Center, the Attorney General's office and the Court Master for review. The Plan will go out to others after comment from the DRC, the Attorney General's office and the Court Master. Identified Need: A,B,C,D,E,F,G,H,I,J,K,L,M

**AMHI Consent Decree-History, Requirements and Related Topics-** A new Power Point was developed to provide in depth assistance to agencies regarding the history, the requirements and other related topics. This Power Point can be found at the link below along with other relevant topics. <http://www.maine.gov/dhhs/samhs/resources.shtml>

Identified Need: A, B, C, E, G, I, J

**Adult Needs and Strengths Assessment (ANSA)-** The ANSA is currently being used by the residential providers and the data is being submitted through a portal in Enterprise Information Systems (EIS). The ANSA has a field for intake, discharge, annual and 90 day review. There is a field that distinguishes between forensic and non-forensic clients. SAMHS will be starting a pilot across services in the near future. This pilot is to help SAMHS determine the correct level of care of each consumer.

A, B, C, D, E, F, G, H, I, J, K, L, M

**Resource Data Summary-** A combined project with SAMHS, APS Healthcare and providers to assess what would be helpful for providers in entering and discharging unmet needs in APS Healthcare. APS Healthcare is still working with their technical staff to determine the best approach. They will be reporting back to SAMHS regarding the recommendations.

A, B, C, D, E, F, G, H, I, J, K, L, M

