Performance Indicators and Quality Improvement Standards

APPENDIX: ADULT MENTAL HEALTH DATA SOURCES

Adult Health and Well- Survey:
Data Type/Method: Handout Survey
Target Population: All people who receive a Community Integration or Behavioral Health Home
    Service, ACT and Community Rehabilitation Services.
Approximate Sample Size Responses: 1215

The Maine DHHS/SAMHS consumer survey is from a new model *Perception of Care* developed by
the New York Office of Alcoholism and Substance Abuse which replaced the National Mental Health
Statistics Improvement survey. "The NY-OASAS Perception of Care model bases their survey on a
modular survey developed by federal Substance Abuse and Mental Health Services Administration to
assess performance across mental health and substance abuse service system.[1]
[1] Doucette, A. (2008). *Modular Survey: Addressing the Need to Measure Quality.* Rockville, MD: SAMHSA."

The survey was administered in late August. The survey was designed to assess consumer experiences
and satisfaction with their services and support in four primary domains, including: 1) Access to
Services; 2) Quality and Appropriateness; 3) General Satisfaction; and 4) Outcomes. Additional
questions were added regarding employment.

Community Hospital Utilization Review Summary:
Data Type/Method: Service Review/Document Review
Target Population: Individuals admitted to community inpatient psychiatric hospitals on an emergency
    involuntary basis.
Approximate Sample Size: 105 per quarter; FY16 Q2 50

The Regional Utilization Review Nurses perform clinical reviews of all individuals who were
involuntarily admitted who have MaineCare or do not have a payer source. Utilization Review Nurses
review all community discharges for appropriateness of the admission, including: compliance with
active treatment guidelines; whether medical necessity was established; Blue Paper process completed;
and patients rights were maintained, etc. The data collected as part of the clinical review is entered
into EIS. This quarter due to staffing shortages only four (4) hospitals were reviewed.

Community Support Enrollment Data:
Data Type/Method: Demographic, clinical and diagnostic data for all consumers in Adult Mental
    Health Community Support Services (Community Integration, ACT, Community Rehabilitation
    Services and Behavioral Health Homes) maintained and reported from the Department's EIS
    (Enterprise Information System). Data is collected by APS Healthcare as part of its prior
    authorization process and fed into EIS twice a month.
Target Population: Adult Mental Health Consumers receiving Community Support approximately
18,900 with approximately 1200 are class members..

Community Support Services Census/Staffing Data:

Data Type/Method: Provider Completed Survey; Completed by supervisors of Assertive Community Treatment (ACT), Community Integration (CI), Community Rehabilitation Services (CRS) and Behavioral Health Homes (BHH).

Target Population: Consumers receiving CI/ACT/CRS/BHH from DHHS/SAMHS contracted agencies.

Approximate Sample Size: Collected from all providers of these services on a quarterly basis.

OCQI data specialists collect census/staffing data quarterly from contracted agencies that provide ACT, CI, CRS and BHH services. This data source provides a snapshot of case management staff vacancies as well as consumer to worker ratios.

Grievance Tracking Data:

Data Type/Method: Information pertaining to Level II and Level III Grievances.

Target Population: Consumers receiving any community based mental health service licensed, contracted or funded by DHHS and consumers who are patients at Riverview Psychiatric Center or Dorothea Dix Psychiatric Center.

The Data Tracking System contains grievances and rights violations for consumers in Adult Mental Health Services. The data system tracks the type of grievance, remedies, resolution and timeliness.

Class Member Treatment Planning Review:

Data Type/Method: Service Review/Document Review

Target Population: Class Members receiving Community Support Services (ACT, CI, CRS and BHH)

Approximate Sample Size: As of the 3rd quarter FY11, sample size has been decreased to 50 per quarter, utilizing the random sampling methodology as previously developed. This allows the new SAMHS Division of Quality Management the time to assess and develop a new system of document reviews, not solely focused on treatment planning, that can be implemented across program areas and provide data for a wider group of individuals utilizing mental health services.

Two Quality Management Specialists now carry responsibility for this review of class members receiving Community Support Services. Data collected as part of the review is captured regionally and entered into a database within EIS. The Treatment Planning Review focuses on: education and the use of authorizations, assessment of domains, incorporation of strengths and barriers, crisis planning, needed resources including the identification of unmet needs and service agreements.

Individualized Support Plan (ISP) Resource Data Summary (ISP RDS) tracking System:

Data Type/Method: ISP RDS submitted by Community Support providers and collected by APS Healthcare as a component of their authorization process. Data is then fed into EIS twice a month.

Target Population: Adult Mental Health Consumers who receive Community Support Services (ACT, CI, CRS and BHH).

The data is collected in APS Healthcare, sent to SAMHS and reported through the DHHS Enterprise Information System (EIS). The ISP RDS captures ISP completion dates. The ISP RDS also captures data on the current housing/living situation of the person receiving services as well as the current vocational/employment statuses. Needed resources are tracked and include the following categories; Mental Health Services, Peer, Recovery and Support Services, Substance Abuse Services, Housing

Resources, Health Care Resources, Legal Resources, Financial Resources, Educational Resources, Vocational Resources, Living Skills Resources, Transportation Resources, Personal Growth Resources and Other. The ISP RDS calculates unmet needs data by comparing current 90 day reviews to previous 90 days reviews. See Section 6 for other changes to the RDS.

Quarterly Contract Performance Measures Data:

Data Type/Method: Performance Measures
Target Population: All consumers receiving DHHS/SAMHS contracted services.
Approximate Sample Size: All consumers receiving DHHS/SAMHS contracted services.

Performance measures are in all mental health direct services contracts. There are also some performance measures in the indirect services contracts.