Department of Health and Human Services (DHHS)
Office of Adult Mental Health Services (OAMHS)
Unmet Resource Needs Cover Document
January 2011

Attached Report:
    Statewide Report of Unmet Resource Needs for Fiscal Year 2011 Quarter 1 (July, August, and
    September 2010)

Population Covered:
- Persons receiving Community Integration (CI), Intensive Case Management (ICM),
  Community Rehabilitation (CRS) and Assertive Community Treatment (ACT) services
- 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.

Data Issues

OAMHS staff continues to work with providers and APS Healthcare to assure that accurate data is
entered and reported in a timely fashion. This includes:
- monthly QA reports for providers
- offering and providing one-on-one training and other training as needed.
- addressing data issues through communication between APS Healthcare and EIS/OAMHS
  staffs on an as needed basis

Other Unmet Need Reporting

Riverview Psychiatric Center (RPC) and Dorothea Dix Psychiatric Center (DDPC)
- RPC:
  o 1 unmet resource need: Residential Treatment Facility (met within quarter)
  o 1 unmet resource need: Out of State Placement near Family (met within quarter)
  o 2 unmet resource needs: Assisted Living or Community Residential Facility (both met
    within quarter)
  o 1 unmet resource need: Community Residential Facility (met within quarter)
  o 1 unmet resource need: Nursing Home (met within quarter)
  o 1 unmet resource need: BRAP approved apartment (met within quarter)

- DDPC:
  - 7 unmet resource needs: Residential Treatment (5 met within the quarter)

Paragraph 74 Reporting (class members not in services): The paragraph 74 reporting system identified 0 unmet resource needs for this quarter.

Contact for Service Notification Data/APS Healthcare

Contact for Service Notifications (CFSNs) are submitted to APS Healthcare by agencies when a request for community integration (CI), assertive community treatment (ACT) or daily living support services (DLSS) is made and the agency cannot meet the request at the time. CDCs also complete Contact for Service Notifications when a consumer calls and requests one of these services as part of their referral process for the service. Agencies are instructed to close contacts if the individual is removed from the agency's waiting list without receiving service due to withdrawal of request, inability to locate the client, the client not being eligible, etc.

APS Healthcare developed wait list reports for CI, DLSS and ACT. These aggregate, public reports are available on the APS Healthcare website (www.qualitycareforme.com). These reports are available in current time (updated daily) and can be sorted by CSN, and within CSNs by provider. The spreadsheets include, by agency, # waiting, average time waiting, longest time waiting and the # of individuals who need grant funding or have MaineCare. APS Healthcare also has detailed versions of all reports available to agencies and OAMHS with client names and provider detail.

APS Healthcare produces a quarterly, aggregate report for OAMHS that is sorted by service (CI, ACT, DLSS), wait time, CSN, payer source (MaineCare, non-MaineCare), and class member status.

As of 12/30/10:
- 264 persons were waiting for CI Services, up 19 individuals from last quarter's 245
  - 33 class members (down 15 individuals from 48) and 221 non-class members (up 24 individuals from 197)
  - 130 individuals with MaineCare (down 7 individuals from137) and 134 needing to access grant funds (up 26 individuals from 108)
  - There were individuals waiting in all CSNs with the greatest numbers in CSN 2 (49), CSN 7 (44) and CSN 6 (79), approximately 65% of all individuals waiting statewide.
  - CSN 6 had the most people waiting for grant funding (39) as it did last quarter.
- 38 persons were waiting for ACT Services, up 4 individuals from last quarter's 34
  - 10 class members (up 1 individual from 9) and 25 non-class members (up 3 individuals from 25)
  - 29 with MaineCare (up 2 individuals from 27) and 9 needing to access grant funds (up 2 individuals from 7)
  - No individuals were reported waiting in CSNs 1 and 2
  - CSNs 6 and 7 each had 6 persons waiting.
- 17 persons were waiting for DLSS Services, up 4 individuals from last quarter's 13
  - 4 class member (same number as last quarter) and 13 non-class members (up 4 individuals from 9)
  - 10 with MaineCare (up 4 individuals from 6) and 7 needing to access grant funds (same as last quarter)

       o   As in the previous 2 quarters, no individuals were reported waiting in CSNs 1 and 7

Mental health team leaders routinely use the CFSN data in their discussions with providers and to assist consumers in accessing services.

<u>'Other' Resource Need Categories</u>

This quarter 'other' resource needs made up approximately 18% (1159 resource needs out of 6382 statewide) of the total unmet resource needs statewide, down from the percentages reported in the last 3 quarters: 20%, FY'10 Q4; 22.5%, FY'10 Q3; and 20% FY'10 Q2. Unmet resource needs as a whole went down from 7532 statewide last quarter to 6382 this quarter, a decrease of 15%. 'Other' unmet resource needs also showed a reduction from 1514 last quarter to 1159. That said, only approximately 60% of the 'other' unmet resource needs (693) met the definition of an unmet resource need. When an 'other' category is used within the RDS (available within each major need category and as a stand alone category), a brief narrative specifying the need is required. The 'other' report for the 1st quarter (agency, need category, client number, need narratives, the length of time that the need had been identified) continues to show that approximately 40% of 'other needs' are goals, client descriptions, needs (not resource needs), needs listed as 'none' or 'other' and resource needs that fit within an existing category. However, having 60% meet the definition continues a trend upward with 55% meeting the definition in Q4 FY'10 and 38% meeting the definition in Q3 FY'10. The reductions in the overall numbers of 'other' unmet resource needs and an increase in the number of 'other' unmet resource needs meeting the definition may be attributable in part to OAMHS quality assurance efforts, reported in prior quarterly reports, to improve RDS unmet resource need reporting.

Some consistent unmet resource needs reported (though in small numbers) within 'other' unmet resource need categories are:
- Support Groups for gender issues, grief, trauma survivors, eating disorders, cancer survivors, parenting, health issues, domestic abuse survivors, peer support
- DBT, Eating Disorders Treatment, Psychological Exams
- Lower rent/income, affordable, safe housing
- Money for home repairs and weatherization
- Specialty medical care (neurology and diabetes for examples), dental care/dentures, nutritional needs
- Legal assistance for obtaining SSI/SSDI benefits, for family/custody issues (divorce, child custody, child visitation), immigration issues
- SSI and SSD
- Budgeting/money management
- Volunteer work or employment
- Homemaker services/help with housework
- Car repair, 'reliable' vehicle
- Transportation to other than medical appointments, shopping, etc.

These are similar to prior quarters' reporting.

The 'other' report has been, and will continue to be, shared with each agency to assist them in 'cleaning' their 'other' category data.

- When reports are forwarded to agencies, they are instructed to contact our data specialists for a discussion of their reports and training on resource needs
- Unmet 'other' needs without a narrative describing the need are deleted from EIS.
- Reports will be run quarterly until OAMHS is comfortable that the category is providing accurate data as to resource needs.
- Data specialists will remain available to providers to assist in training and answering questions regarding RDS data.

RDS Data/Unmet Resource Needs for Community Integration (CI)

The 1st quarter's report continues to show unmet resource needs for CI (320 unmet resource needs). This is a training issue, as RDS data by definition comes only from persons already receiving CI or ACT. OAMHS is addressing this in several ways. First, OAMHS continues to review the reported unmet resource needs for community integration services quarterly and to identify the individuals (by agency) with the reported unmet CI needs. Each agency's list is forwarded to the agency with the request that the agency, at the next ISP review and continued stay review with APS Healthcare, review the CI need in the RDS section of the continued stay review and update, change or mark the unmet need as 'no longer needed'. Instructions are given to check CI as a resource need only when the individual is on a waiting list (has been referred) for community integration services. Our quality assurance efforts and the CDCs' training this past summer to help address this issue has not made a difference in the data to date. OAMHS will continue its quality assurance efforts and monitor the 2nd quarter's data to see if there is an improvement.

OAMHS also uses the Contact for Service Notification data from APS Healthcare in order to gain a more accurate picture of the need for community integration and ACT.

Instructions for completing the RDS are available on the APS Healthcare website at: http://www.qualitycareforme.com/MaineProvider_ProviderManual.htm. The instructions will be revised as needed.

Unmet Needs for Housing Resources

Over the past 4 quarters, the number of unmet resource needs in the rent subsidy (Section 8, BRAP, Shelter Plus Care) category has been: FY'10 Q2, 531; FY'10 Q3, 580; FY'10 Q4, 597; and FY'11 Q1, 594. This is an increase of approximately 12% over the past year, with the last 3 quarters showing a fairly consistent level of unmet resource need.

While the BRAP waitlist was cleared in July 2010 as the result of additional funding, the list has been growing since that time. The BRAP wait list report shows the number waiting for BRAP at 209 persons, up 73% from last quarter (57 persons).

269 of the 1063 unmet housing resource needs reported (25.3%) are in the category of 'other'; with only approximately 49% of those (131 of 269) meeting the definition of an unmet resource need, making it difficult to quantify the specific needs. Unmet resource needs listed for a Section 8, BRAP and Shelter Plus Care within the 'other' category for housing is approximately 60, all of which should have been listed in the Section 8, BRAP, Shelter Plus Care category.