SAMHSA-HRSA
Center for Integrated Health Solutions

Using Data to Promote Quality Improvement Activities

Community Support & Treatment Services in partnership with Washtenaw Community Health Organization

About the Speakers

Trish Cortes, RN, MS is the Director of Community Support and Treatment Services, which is the Washtenaw County Community Mental Health Provider. Trish has been involved in the project since the beginning.

Brandie Hagaman, MPH is the Disease Management Supervisor. Brandie oversees the PBHCI staff and the everyday details of the Disease Management project.

About the Speakers

Mike Harding is the Chief Information Officer for Community Support and Treatment Services. Mike was also the Principal Investigator on the SAMHSA HIT grant that was awarded to the WCHO in 2012.

Jessica Sahutoglu, MS is a Statistician with the Washtenaw Community Health Organization. Jessica provides the data and analysis for the PBHCI project.

SAMHSA-HRSA
Center for Integrated Health Solutions

Agenda

- Who we are
- A little history
- Our PBHCI model
- How we use data
- Infrastructure keys to success

SAMHSA-HRSA
Center for Integrated Health Solutions

Who are we?

- Community Mental Health Center
- Populations Served:
  - 2,630 Adults with Mental Illness
  - 860 Adults with Intellectual Disability
  - 566 Children with Severe Emotional Disturbance &Intellectual Disabilities

4,056 Total Served

NATIONAL COUNCIL FOR BEHAVIORAL HEALTH
SAMHSA
www.integration.samhsa.gov

SAMHSA-HRSA
Center for Integrated Health Solutions

History

- Implementation of an Electronic Medical Record in 2001
- Vastly enhance our ability to extract data
- Introduced Personal Health Review
  - Self report of overall health
  - Vitals
  - Emergency Department utilization
  - Hospitalization utilization
  - Presence of chronic health condition

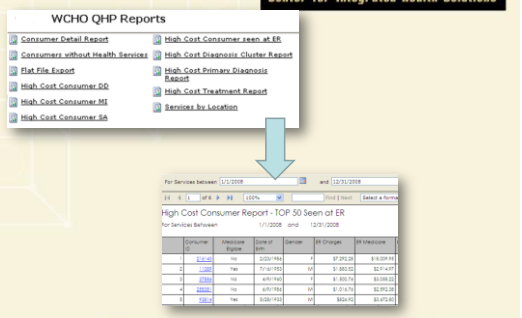
NATIONAL COUNCIL FOR BEHAVIORAL HEALTH
SAMHSA
www.integration.samhsa.gov

SAMHSA-HRSA Center for Integrated Health Solutions

History…(cont)

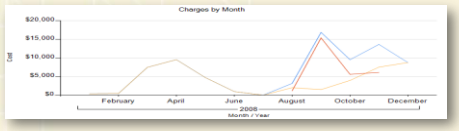
- Pilot Disease Management Grant (MDCH) provided 5 years of Medicaid physical health data
- Joined physical and mental health data in 2009

SAMHSA-HRSA Center for Integrated Health Solutions



NATIONAL COUNCIL FOR BEHAVIORAL HEALTH
SAMHSA
www.integration.samhsa.gov

SAMHSA-HRSA Center for Integrated Health Solutions



Primary Diag.	Diagnosis	Total Raw Charges	Medicare Rates Total	Highest Estimated Charges	Data Source
4739	CHRONIC SINUSITIS NOS	$14.40		$14.40	Physical Health Data
	HX-LATEX ALLERGY	$1,287.32		$1,287.32	Physical Health Data
3229	MENINGITIS NOS	$914.70	$1,600.10	$1,600.10	Physical Health Data
V452	VENTRICULAR SHUNT STATUS	$272.14	$555.42	$555.42	Physical Health Data
78900	ABDOMINAL PAIN UNSPCF SITE	$818.04	$1,704.87	$1,704.87	Physical Health Data
7231	CERVICALGIA	$1.91	$0.00	$1.91	Physical Health Data

NATIONAL COUNCIL FOR BEHAVIORAL HEALTH
SAMHSA
www.integration.samhsa.gov

SAMHSA-HRSA Center for Integrated Health Solutions

PBHCI Model

- Reverse Co-Location (Primary Care in CMH Setting)
- Target Population:
  - At risk or presence of a chronic condition
  - Inadequate natural supports
- Strong Emphasis on Disease Management Approach
  - Wellness Education
  - Strong Partnerships with Safety Net Clinics

NATIONAL COUNCIL FOR BEHAVIORAL HEALTH · SAMHSA · www.integration.samhsa.gov

SAMHSA-HRSA Center for Integrated Health Solutions

Data Driven Recruitment

Key data elements used for stratification

- Consumer self rated health as "poor" or "fair"
- Presence of disease or clusters of conditions (diabetes, hypertension, cardiovascular disease, asthma/ COPD)
- Utilization of medical hospitalization and ER in last year
- Presence of certain ambulatory sensitive conditions (heart disease symptoms)
- Tobacco use

NATIONAL COUNCIL FOR BEHAVIORAL HEALTH · SAMHSA · www.integration.samhsa.gov

SAMHSA-HRSA Center for Integrated Health Solutions

Basic Clinical Workflow

NATIONAL COUNCIL FOR BEHAVIORAL HEALTH · SAMHSA · www.integration.samhsa.gov

SAMHSA-HRSA
Center for Integrated Health Solutions

Dashboard

- Dashboard is used to monitor the wellbeing of the consumer's health
- Fosters a culture which values integrated health
- Monitor and manage the overall implementation of the PBHCI grant
- Monitor and analyze clinical interventions

SAMHSA-HRSA
Center for Integrated Health Solutions

Dashboard

SAMHSA enrollment and Disease Management (DM) contacts

double click cell counts for consumer detail

Row Labels	1. At least 12 (of any) DM contacts in 12 months	2. Between 6 and 11 (of any) DM contacts in 12 months	3. Between 1 and 5 DM contacts in 12 months	5. At least 4 FTF contacts in 12 months, nothing else	7. No DM services	Grand Total
1.SAMHSA ENROLLEE (NOMS)	64	21	56	32	1	174
Diem, Oryanna	19	2	5	7		29
Gibson, Phyllis	17	3	2	5		27
Hauck, Julie	12	7	7	5		31
Laugavitz, Annie (Gaylene)	8	3	7	4		22
VanHoeck, Maria	9	4	13	11		37
Morrell, Lucina			10			10
Rama, Linda	1	1	11			13
Hershberger, Merton	1	1				2
(blank)	1		1		1	3
2.SAMHSA DISCHARGED (NOMS)	4	5	14	13		36
Bennett, Lorraine	1		2	1		4
Diem, Oryanna				2		2
Gibson, Phyllis		1		1		2
Hauck, Julie	1	3	10	4		18
VanHoeck, Marie	1	1	2	4		8
Morrell, Lucina				1		1
Traxler, Andreea	1					1
Grand Total	68	26	70	45	1	210

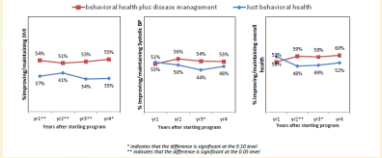
SAMHSA-HRSA
Center for Integrated Health Solutions

VITALS: % improving/maintaining outcomes among active SAMHSA consumers

double click cell counts for consumer detail

Row Labels	current caseload	2+ BMI while in program	maint/ improve BMI	2+ systolic while in program	maint/ improve systolic	2+ diastolic while in program	maint/ improve diastolic
Diem, Oryanna	30	23	61%	27	70%	27	56%
Gibson, Phyllis	27	25	52%	25	60%	25	60%
Hauck, Julie	31	29	59%	29	55%	29	52%
Laugavitz, Annie (Gaylene)	22	17	59%	17	59%	17	59%
VanHoeck, Marie	37	30	56%	32	69%	32	41%
Morrell, Lucina	9	1	100%	3	33%	3	33%
Rama, Linda	11	3	67%	5	60%	5	60%
Hershberger, Merton	2	2	50%	2	50%	2	100%
Grand Total	169	130	58%	140	64%	140	59%

VITALS: Percent improving/maintaining outcomes, disease management vs. CMH population



SAMHSA-HRSA Center for Integrated Health Solutions

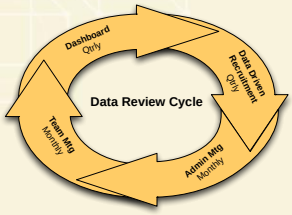
Improvements as percent of group

	0-6 mo	6-12 mo	12-18 mo	18-24 mo	24-30 mo	Grand Total
improvements in OverallHealth		42%	50%	48%	40%	46%
improvements in HandlingDailyLife		72%	77%	41%	50%	65%
improvements in ControlLife		68%	64%	36%	40%	57%
improvements in Symptoms		45%	61%	50%	60%	53%
improvements in Hopeless		80%	54%	45%	50%	59%
improvements in Depressed		83%	59%	38%	50%	61%
improvements in EverythingEffort		87%	51%	41%	20%	56%
improvements in Tobacco_Use		69%	59%	41%	50%	57%
improvements in Recover			86%	50%	30%	65%
improvements in Responsibility			83%	61%	50%	70%
improvements in SideEffects			64%	61%	60%	63%
improvements in InformationNeeded			86%	67%	50%	74%
improvements in ConsumerRunPrograms			71%	61%	60%	66%
improvements in Likeservices			93%	67%	40%	75%
improvements in BelongInCommunity		75%	64%	32%	70%	61%
improvements in SupportFromFamily		91%	72%	45%	40%	69%

NATIONAL COUNCIL FOR BEHAVIORAL HEALTH · SAMHSA · www.integration.samhsa.gov

SAMHSA-HRSA Center for Integrated Health Solutions

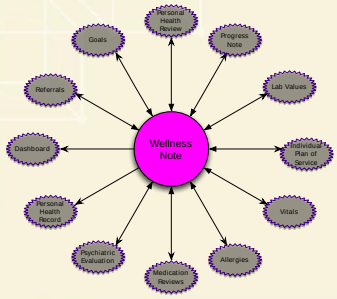
Quality Improvement



By having the information in front of us, we continue to use the data to change and influence the way we deliver services.

NATIONAL COUNCIL FOR BEHAVIORAL HEALTH · SAMHSA · www.integration.samhsa.gov

SAMHSA-HRSA Center for Integrated Health Solutions



NATIONAL COUNCIL FOR BEHAVIORAL HEALTH · SAMHSA · www.integration.samhsa.gov

SAMHSA-HRSA
Center for Integrated Health Solutions

Infrastructure

- NOMS dates
- Overall Health
- Handling Daily Life
- Control Life
- Symptoms
- Hopeless
- Depressed
- Everything Effort
- Tobacco Use
- Enrolled
- employment
- Recover
- Responsibility
- Side Effects
- Information Needed
- Consumer Run Programs
- Like Services
- Belong In Community
- Support From Family

Data Analysis

- Smoking Status
- Vitals
- Hospitalizations
- Referrals
- Primary Care Physician
- Services Utilization
- Goals
- Overall Health
- Labs

NATIONAL COUNCIL FOR BEHAVIORAL HEALTH | SAMHSA | www.integration.samhsa.gov

SAMHSA-HRSA
Center for Integrated Health Solutions

Basic Infrastructure Keys to Success

- Staffing Collaboration
  - Tech
  - Data
  - Clinical
  - Leadership
- EMR Must Match Clinical Workflow
  - Multitude of Meetings
  - "Shadowing"
  - Access Database to Start
  - Over 20 Different Design Iterations
- Tools (need at least one)
  - Excel
  - Access
  - Data Analytical Software (SPSS, SAS, etc.)

NATIONAL COUNCIL FOR BEHAVIORAL HEALTH | SAMHSA | www.integration.samhsa.gov

SAMHSA-HRSA
Center for Integrated Health Solutions

Enhanced Infrastructure Keys to Success

- Mobile Technology
- Data/Dashboard
- Provide consumer access to Personal Health Record

NATIONAL COUNCIL FOR BEHAVIORAL HEALTH | SAMHSA | www.integration.samhsa.gov

SAMHSA-HRSA
Center for Integrated Health Solutions

Questions?

NATIONAL COUNCIL FOR BEHAVIORAL HEALTH
SAMHSA
www.integration.samhsa.gov