



# Designated and Specialized Service Agencies

Quality, Accountability and Outcomes

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Simone Rueschemeyer, Executive Director and  
Melissa Bailey, Quality Director - VT Care Network

# Agenda

## Today Vermont Care Partners (VCP) will review:

- The **current work** with the Agency of Human Services on the streamlining of, our members, the Designated and Specialized Service Agencies (DA/SSA) **Master Grant**.
- The creation of a System of Excellence through the **Centers of Excellence**.
- The **data quality work** at the member agencies, the DA/SSAs.
- The creation of a **data repository** and **data analytics**.
- VCP's DA/SSA **Outcomes Committee's focus** on:
  - Outcomes Report
  - Data definitions
  - Results Scorecard

## Why We Are Doing This Work

**This work is important to consumers, families, communities, taxpayers and the State because VCP is:**

- Developing the foundation and processes for **continuous quality improvement**.
- Increasing **accountability**.
- Positioning the DA/SSA provider network to **participate in value based payment and health reform**.
- **Maximizing the use** of limited resources to focus on the most **efficacious** and **cost efficient** practices.

# Agency of Human Services Master Grant

## Current issues:

- Over time the master grant has become **layered** with new expectations, data requests and outcomes.
- AHS's has attempted to streamline but **no resolution has been reached**.
- The scope of work, expectations, data reporting requirements and outcomes are **scattered throughout the contract**.
- Each DA/SSA member must **report excessive** amounts of information as required in the master grant (i.e. - 132 data elements in NCSS).
- AHS and the DA/SSA members acknowledge this vast amount of data **doesn't tell us what we want to know**.

# Agency of Human Services Master Grant

## Current efforts:

- AHS and VCP have agreed to **work together** to streamline and improved the grant and measurements.
- AHS and VCP have agreed to **add four broad categories** not tied to payment: housing, employment, connection to community, access to primary care.
- AHS asked “**is what you use to gauge if you are successful in the master grant?**” Our answer was no.

# Steps Taken to Date for Master Grant

## VCP's Initial Steps:

- Reviewed the grant and **identified only 26%** of the data points already collected support measuring the four new broad categories.
- Reviewing the master grant and **drafting a proposed structure** to create a grant that is more functional.
- Continuing to **define data points** so measures are **consistent** across the system.

## Next Steps for the Master Grant

### Next Steps:

- AHS is **meeting internally** with their subject matter experts.
- VCP Outcomes Committee is **identifying the important outcomes** related to is “anyone better off?”
- AHS and VCP will **bring both groups** of work together with a **goal of improving** either FY16 or FY17 master grant.

# Creating a System of Excellence through Centers of Excellence

- “A Behavioral Health Center of Excellence is **known by the entire community as a great place to get care and a great place to work**. A BHCOE offers **easy access to affordable, comprehensive care** for persons experiencing behavioral health issues (or developmental disabilities). Clients experience **respectful, self-directed, team-based, and holistic care** that addresses their problems and **achieves outcomes important to them**. Excellence is created by **each staff member who has a heartfelt connection** to their community and the people they serve, based on a **deep understanding of trauma, best clinical practices, and an unshakable commitment to resiliency and recovery.**”
- ~National Council for Behavioral Health
- Of course VT will put it’s own stamp on this to **fit our system of care and health care reform** in VT.

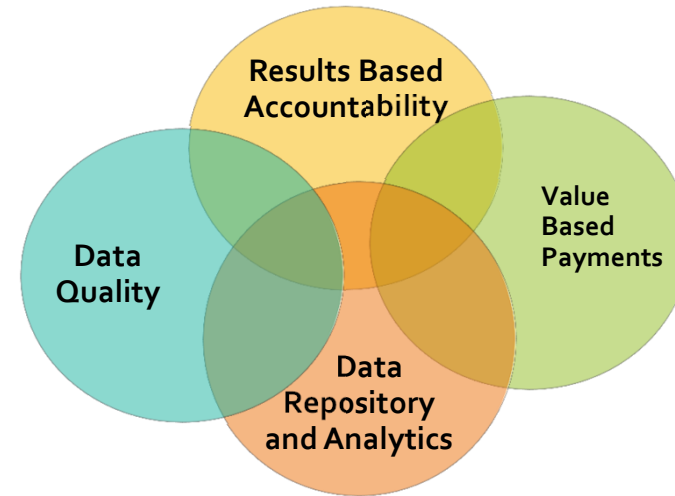


# System of Excellence

## SYSTEM OF EXCELLENCE

16 Centers of Excellence

Value Based  
Outcomes



- **Results Based Accountability** method to identify performance measures
- **Data Quality** ensures data is high quality, reliable and reported consistently across system
- **Data Repository/Analytics** stores identified data elements and allows use of that data
- **Valued Based Payments** pay in a way that provides flexibility and is based on outcomes

# Centers of Excellence

## Centers of Excellence:

- Provides VCP DA/SSA members a **system-wide framework** to improve the services provided by the DAs/SSAs.
- Offers VCP DA/SSA members a **framework to demonstrate value**.
- Will help VCP DA/SSA members **excel** at addressing the **whole health of the populations** we serve.
- Will support VCP DA/SSA members in being viewed as the **preferred place of care**.
- Supports health care providers wanting to **refer to organizations** that have **positive outcomes**.
- There is unanimous **commitment** by VCP DA/SSA member Executive Directors that COE gives us a framework to demonstrate individual and system-wide value in Health Care Reform.
- To participate in **value based payment** mechanism we need to **demonstrate outcomes** in a standardized way across the system.

# Centers of Excellence

## The five key elements

- **Easy Access** - Known for ensuring new and existing clients can get the right care, at the right time, in the right setting and with the right provider.
- **World Class Customer Service Built on a Culture of Engagement and Wellness** - Known by the community, clients and staff for going the extra mile.
- **Comprehensive Care** - Known for offering a broad scope of mental health, substance use co-occurring disorder and developmental disabilities services that are integrated with medical care and other services and supports.

# Centers of Excellence

- **Excellent Outcomes** - Known for achieving results for clients. It can measure what is important to clients and achieves excellent outcomes on those measures.
- **Excellent Value** -Known for providing high value. This means the organization achieves improved health outcomes that matter to clients relative to the cost of achieving those outcomes.

Our focus will include Mental Health, Substance Abuse and Developmental Disabilities and will include the Vermont flavor!

# Data Quality

## Goals of data quality efforts:

- VCP has contracted with VITL to provide **data quality analysis** and **support to each** of the VCP DA/SSA member.
- VITL is meeting with each VCP DA/SSA member to **document the data input process** and provide an analysis to **achieve complete, consistent and accurate data**.
- VITL is developing **toolkits** for each VCP DA/SSA member to use for the initial data set and for additional data sets that will be disseminate and VCP DA/SSA members will be **trained on the toolkit**.
- **Data remediation** work with members is ongoing.
- **Communication Plan / Feedback** Loop is being developed.
- VCP is creating a **data dictionary** that will include Monthly Service Reports (MSR) data points and other data.

# Data Quality

## The Purpose of this work is to ensure:

- **High quality** data for all members.
- Ready data for **exchange**.
- Tools for VCP DA/SSA members to **build quality** in.
- **High quality analyses** for individual DA/SSA and system-wide.

# Data Repository

## Goals of a VCP data repository:

- Creates a **single location** for VCP DA/SSA member data.
- Talk about outcomes not just outputs.
- Creates **efficiency** by **decreasing the number of interfaces** required to connect with stakeholders.
- Provides the opportunity for **analytics** for individual agencies and the entire system.
- Demonstrates **coordination** and **cooperation** across the membership.
- Provides a 42 CFR Part 2 “**solution**”.
- Allows for **quality improvement** of system-wide services.

# Data Analytics

- **Goals for data analytics:**
- Creates **operational integrity**.
- Provides **real time information** for **enhanced care delivery**.
- Promotes **high level decision support** for programs, program managers and Executive Directors.
- **System-wide analysis**.
- Identifies areas for **improvement** and areas of **high quality to share expertise**.



# Data Governance

## VCP Data Governance Committee:

- Working to provide **consistent data definitions**
- **Standardize data collection** across all member agencies
- Create and communicate **data collection, storage and access rules** across VCP DA/SSA members.
- Support **data quality** and **analysis** for all VCP DA/SSA members.

# Outcomes Committee

## History of the VCP DA/SSA Member Outcomes Committee:

- In 2013 each DA/SSA identified a **committee representative**.
- Identified **RBA** as the process to use **prior** to passage of Act 186.
- First task was to meet with each DA/SSA program group to **facilitate an RBA process** and **identify performance measures**.
- Began with outcomes using **existing data** and now expanding to include **outcomes that are important** and determining how to develop the data measure.
- In FY13 **developed the first ever** system-wide **outcomes report**.
- Created and systematized **4 survey questions** that each DA/SSA measures once a year.
- This has been **challenging work** but continues to **offer great opportunities**.

# Outcomes Committee

## Current focus:

- Continuous work to **build a common definition** so each outcome is measured consistently.
- Define each outcomes, the **methodology for collecting and reporting**.
- Focal point for **all outcomes efforts** including RBA, COE, FY Outcomes Report and Master Grant development so there is a **common thread with all efforts**.
- Focus on the measures of “**how well?**” and “**is anyone better off?**”.

# Outcomes Committee

## Current focus:

- Agreed to work with DMH on **Designation** and the **System of Care Plans**.
- Defining non-client contact and how to measure.
- Developing methodology to **measure quality of life measures**.
- **Technical support** to program groups as they identify measures.
- VCP has become the **central point of contact** for AHS and the departments and will be the **conduit** for the VCP DA/SSA program groups in order to **facilitate streamlined communication** and **expectations**.
- Identify **changes needed** in Electronic Health Records to ensure efficient collection of data.

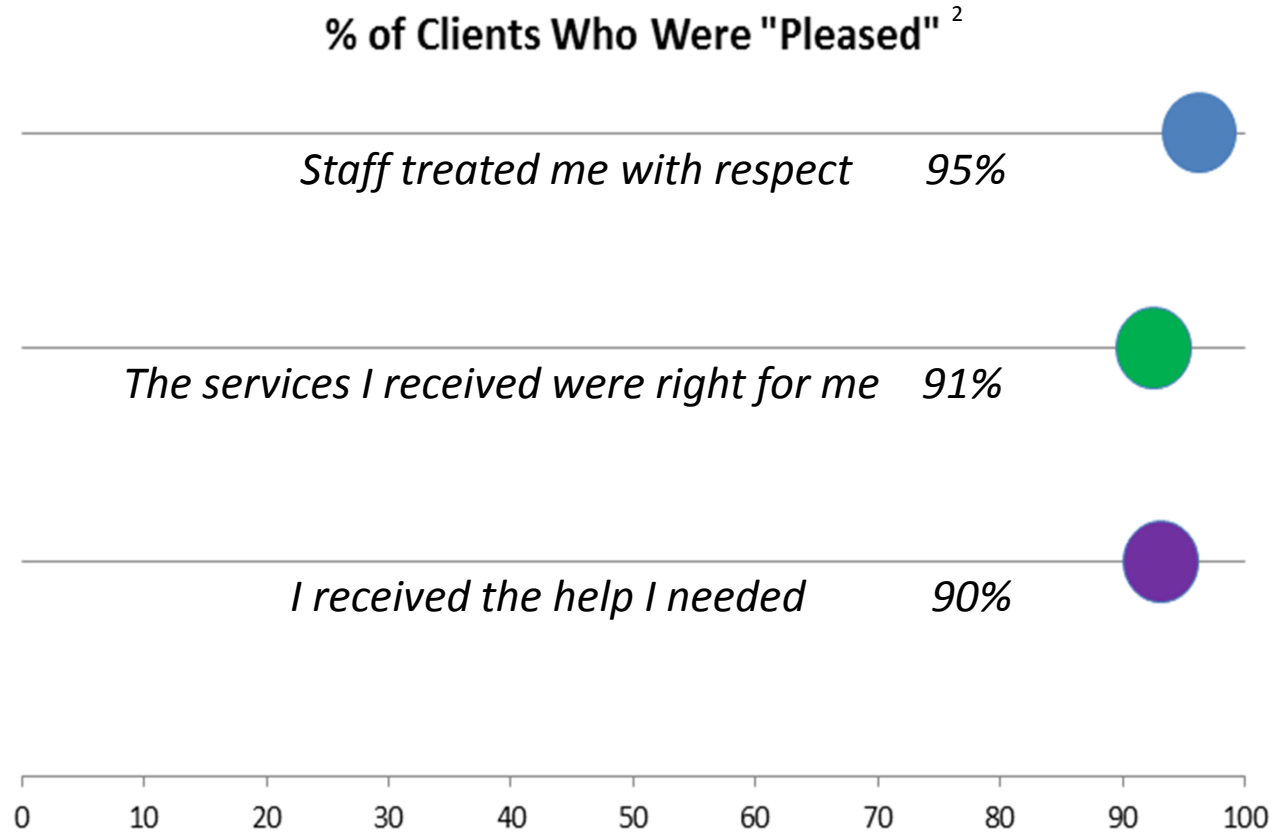
# Results Based Accountability

## Results Based Accountability (RBA) work to date:

- **Outcomes Committee** using RBA to **create system-wide consistency**.
- Outcomes Committee, program managers and staff working together to **develop and fine-tune RBA measures**.
- Five members volunteered to **test the use of the Results Scorecard** and we are working on inputting data.
- This is **all in conjunction** with the data repository and data quality work.

# Example of Outcomes

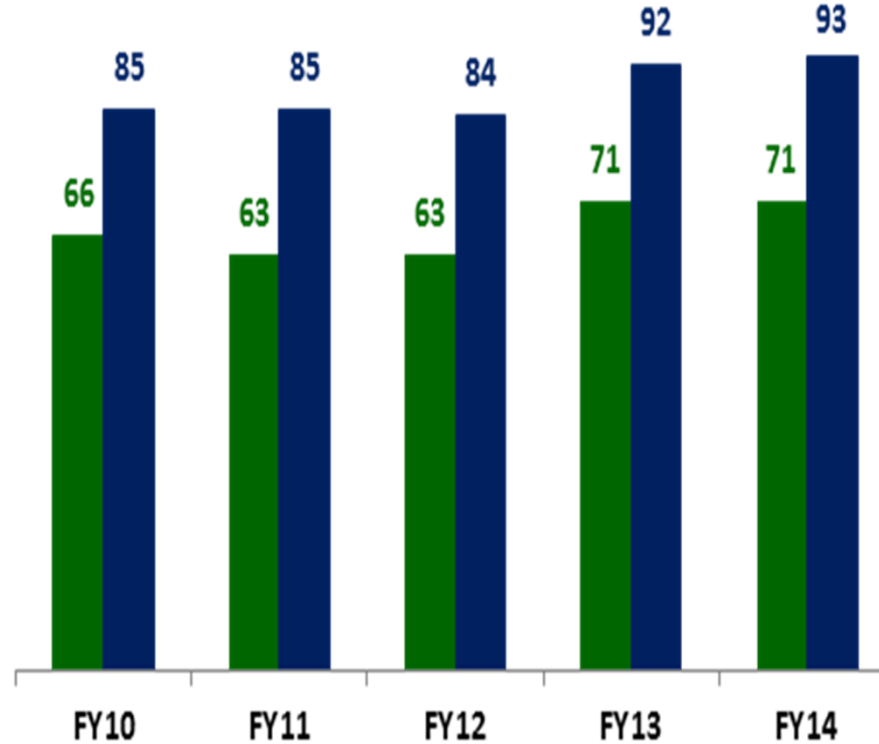
# Overall



# Example of Outcomes

CRT

## *We See People Quickly* % Seen Post-Psychiatric Discharge



Green = same day of discharge; Blue = within one week of discharge

Example of  
Outcomes

Substance Use

**51%**

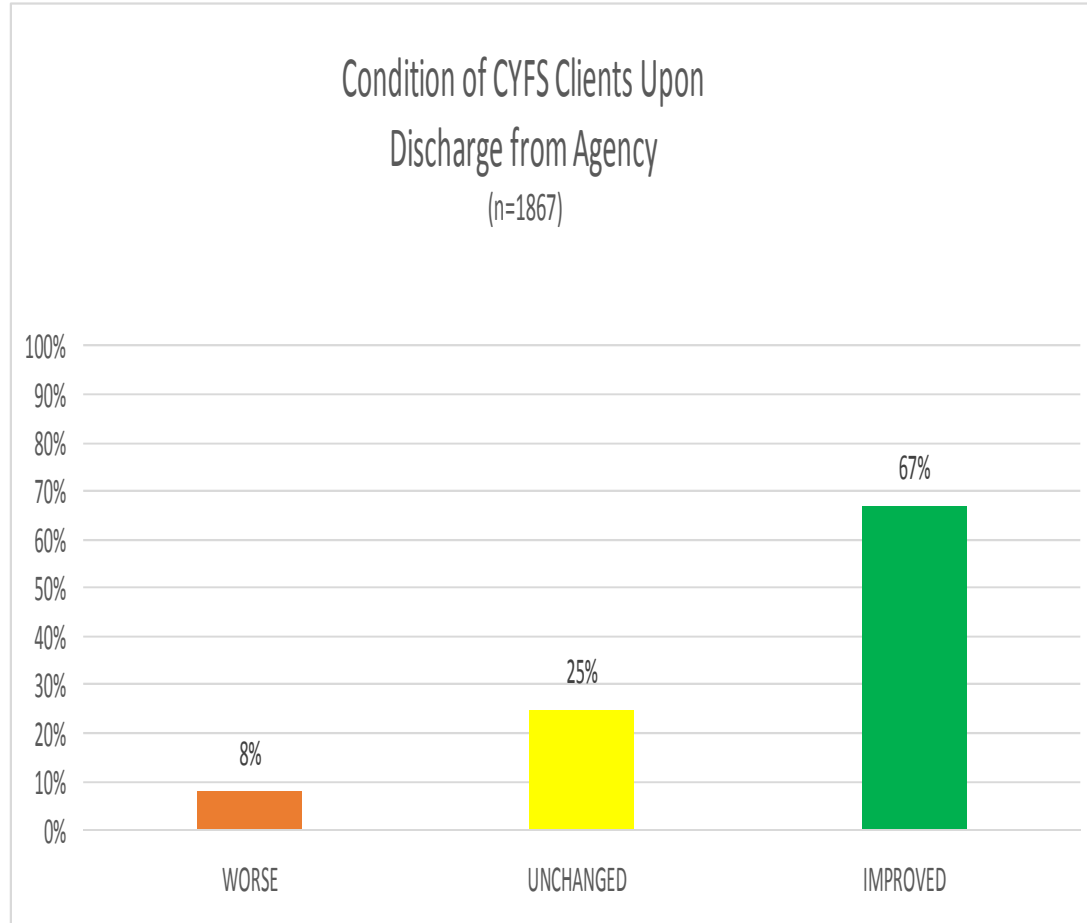
Of the 3,129 people screened  
by Public Inebriate Program  
Staff at 8 agencies,

1,593 were  
**DIVERTED FROM  
JAIL**



## Example of Outcomes

## Child, Youth and Families

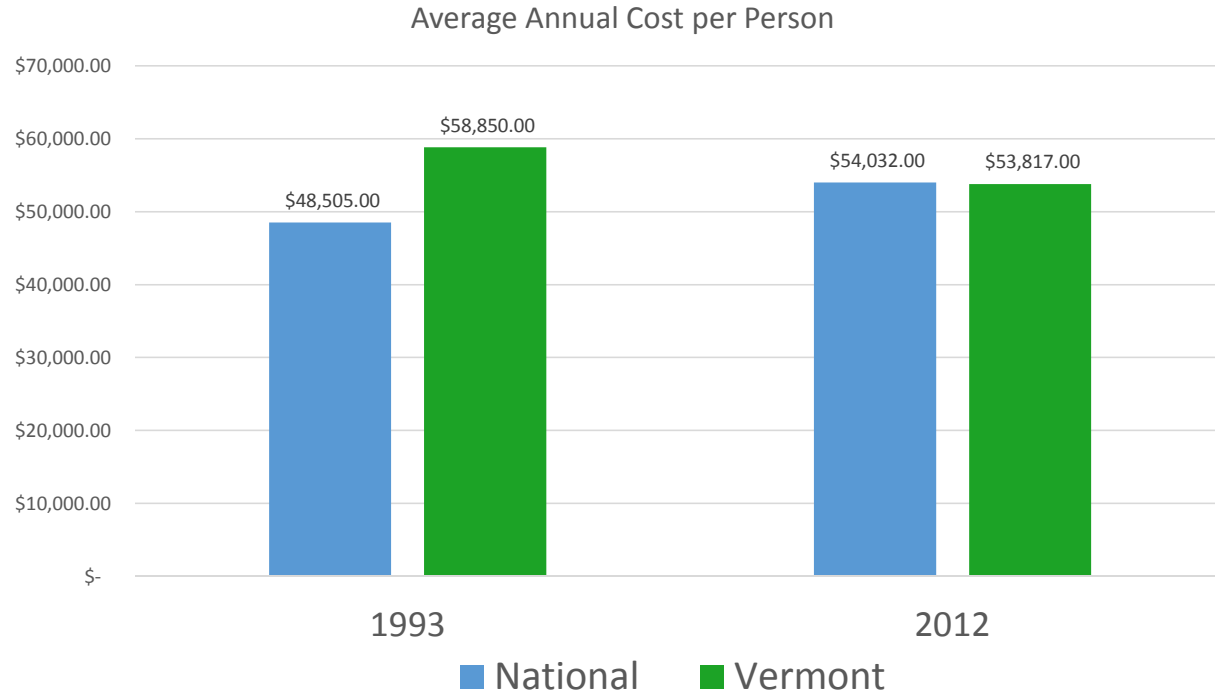


Condition Upon Discharge – Based on staff and client’s perception

Example of  
Outcomes

Developmental  
Services

***Average Annual cost per person per year has been reduced over time and is now less than the national average.***

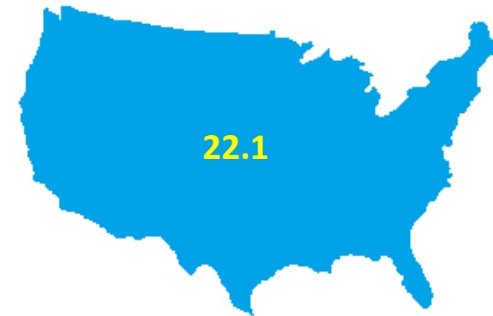
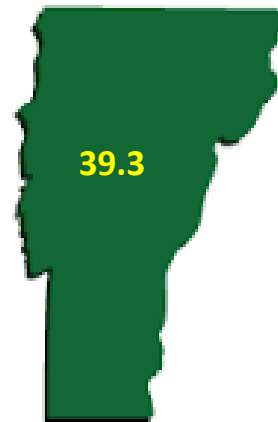


Example of  
Outcomes

Adult  
Outpatient

*We Reach People Who Need Us*

**% of Eligible MH Population Served  
(#/1000 people)**



## Next Steps

### Continue to:

- Work with AHS on the Master Grant with the **goal of creating a grant that clearly outlines expectations and measures** that fit the RBA process.
- Define the data points so **we are all measuring in the same way** with complete, accurate and consistent data.
- Analysis **data quality** and develop and train on **toolkits**.
- Develop the **contract for the data repository** that will work with the other data repositories and data sources.
- Continue the work of the **Outcomes Committee**.
- Continue the development of the **Centers of Excellence**.
- Meet with **Program Standing Committees** to get input from the **individuals and families who use the DA/SSA services** regarding outcomes and areas of focus.

## Next Steps

- **Continue to:**
  - Work with DMH on re-vamping the **System of Care plans** so they align with all the other outcome, quality and accountability efforts.
  - Work with DMH and DAIL on the **Designation process** to ensure we are focused on continuous quality improvement and use the information available to us.
  - Use **VCP** as a **central point of contact** for AHS and the departments in order to ensure **consistent communication** to the VCP DA/SSA members and for an **effective feedback loop** back to AHS and the departments in order to streamline and manage communication and expectations.
  - Continue to **align the efforts** of accountability, outcomes, quality, COE, RBA, data quality, data repository, data analytics and data governance **to create a System of Excellence** so that the services provided help achieve the **goals of the Triple Aim**.
  - **Continue to partner** with the Accountable Care Organizations, the Blueprint and the Unified Community Collaboratives .