

JEFFERSON BEHAVIORAL HEALTH  
 QUALITY IMPROVEMENT WORKPLAN 2008

DOMAIN: ACCESS				
Goal: Increase access to care for specific populations.				
Objective	Interventions	Performance Indicators	Measurement	Timeline
1. Increase access to mental health services for JBH older adults.	<p>A. QI Coordinators will poll to determine the availability of mental health professionals with a minimum of 20 hours of training in geriatric mental health treatment.</p> <p>B. JBH will promote the availability of training opportunities in geriatric mental health to increase the # of available clinicians with skills in this area.</p>	<p>A. Increase .01% of older adults (ages 60+) served from baseline. Baseline is 1.9% MHO Utilization Report October 2003 through September 2004; 6.92% MHO UR Report Oct., 2005-Sept., 2006.</p> <p>B. Increase the number of geriatric specialists in the JBH region.</p>	<p>A. JBH will continue a trend analysis using encounter data submitted by providers and/or MHO Utilization Report data. JBH staff will compare the annual and quarterly penetrations rates over time.</p> <p>B. JBH will complete a Providers Report at the beginning and end of the year to measure the availability of specialists.</p>	QMC to review quarterly and make recommendations quarterly. Results will be shared with the QMC, JBH Administrators, and County Program Directors.
2. Increase access to mental health services for JBH Hispanic Members (JBH Non-	A. Recruit bilingual/bicultural community members to provide reactions	Increase 0.11% of Hispanic Members served from the baseline. Baseline is 2.0% MHO	JBH will continue a trend analysis using encounter data submitted by providers	QMC to review and make recommendations quarterly.

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<i>Clinical Performance Improvement Project)</i>	<p>of a site visit to local mental health organizations/programs and ensure that signage is appropriate, staff are able to communicate with, and that forms are available in Spanish.</p> <p>B. Promote Hispanic cultural training opportunities to mental health programs.</p> <p>C. Promote awareness of OHP/JBH services with bilingual materials at an ethnic community festival.</p> <p>D. Conduct a satisfaction survey to obtain information about services.</p> <p>E. Conduct a needs assessment for the Hispanic population to determine the most appropriate method of delivering</p>	<p>Utilization Report October 2003 through September 2004; MHO UR Report Oct., 2005-Sept., 2006 identified a state average of 1.8% compared to the JBH average of 2.45%. Lane Care has the highest penetration rate with 3.5%. Clackamas, Family Care, Washington County are tied with the lowest penetration rates of 1.3%.</p>	<p>and/or MHO Utilization Report data. JBH staff will compare the annual and quarterly penetrations rates over time.</p>	<p>Information will be shared with QMC, JBH administrators, and county program directors.</p>

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	mental health services.			
3. Increase and monitor ICTS services in each JBH county.	A. Maintain current ICTS components and add 1 more component prior to Oct., 2008. B. Complete a capacity study.	A. Maintenance or development of a ICTS component.  B. Submission of capacity study to the State and JBH stakeholders.	Documentation from providers demonstrating the implementation of one or more new ICTS service components and ongoing maintenance of existing components by report at six month intervals. JBH staff will analyze results.	QMC to review data at six month intervals. Information will be shared with QMC, JBH administrators and county program directors.
4. Track data to determine whether consumers discharged from hospital settings participated in a follow up outpatient appointment within 7 days of discharge.	Obtain data, aggregate and display in a graph format.	% of consumers who completed an outpatient follow-up appointment within 7 days of discharge from an inpatient hospital setting.	Review follow-up outcome data on a quarterly basis in QMC.	Track and review quarterly in QMC. Information will be shared with QMC, JBH administrators and county program directors.

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DOMAIN: QUALITY				
Goal: Identify priority areas and baselines for common problems and needs.				
Objective	Interventions	Performance Indicators	Measurement	Timeline
1. Adopt Clinical Practice Guidelines.	Continue working on the adoption of new clinical practice guidelines.	Adoption of a minimum of 2 clinical practice guidelines.	The QMC will approve at least 2 (1 aimed at the adult population and 1 aimed at the child population) additional guidelines.	Both practice guidelines identified and adopted by March 28, 2008.
2. Developing and Administering an Allied Professional Survey.	Solicit and utilize consumer, advocate and allied professional involvement to help enhance the quality of care for JBH/OHP Members	<ul style="list-style-type: none"> <li>A. Administer a survey of child welfare workers.</li> <li>B. Begin working with seniors and people with Disabilities to develop a satisfaction survey with allied geriatric professionals.</li> </ul>	JBH will analyze survey results and share report with JBH communities and Child Welfare.	All results to QMC by December 2008.
3. Standardize the regional reporting of PEO data.	JBH and Counties to gather all activities being performed by the Counties and other providers and standardize PEO definitions across the Region.	<ul style="list-style-type: none"> <li>A. Standardized PEO definitions shared with all counties.</li> <li>B. Quarterly gathering of standardized PEO data.</li> </ul>	JBH will report to QMC its findings & strategies for Implementation	Standardization of data demonstrated in county submissions by September 1, 2008.

JEFFERSON BEHAVIORAL HEALTH  
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DOMAIN: INTEGRATION AND COORDINATION				
Goal: Promote integration and coordination of care between chemical dependency, mental health and physical health services received by plan members				
Objective	Interventions	Performance Indicators	Measurement	Timeline
1. Improve coordination of care for OHP members with Chemically Dependent Co-occurring Disorders <i>(JBH Clinical Performance Improvement Project)</i>	Provide training to county staff on how to identify and refer chemically dependent persons with co-occurring disorders to treatment programs. JBH will distribute audit materials to programs and help as needed during the auditing process. Programs will be requested to audit charts approximately three months after trainings are provided.	Increase % of co-occurring disorders identified at assessment & referred to treatment over baseline.  Baseline for Question 1: 66.4% of the assessments were rated 1, 2 or 3; and 33.6% rated 4 or 5.	Respond to all questions on the Dartmouth Dual Diagnosis Fidelity Scale as an audit tool. JBH will compile the results.	Audit charts within a three to five month time frame after trainings are provided.  JBH will report results to QMC, JBH administrators, and county program directors by October 2008.
2. Improve treatment coordination with Primary Care Providers <i>(Collaborative Performance Improvement Project)</i>	a. JBH will convene at least two collaborative meetings with the Fully-Capitated Health Plans in the JBH region  b. JBH will work with the Fully-Capitated Health Plans in the JBH region to accomplish Steps 1 through 3 of the CMS "Conducting Performance	Develop standardized referral data and process. Submit a collaborative performance improvement plan to the state.	JBH will monitor all referrals from physicians in the region. JBH will conduct chart reviews on a sample of charts to determine whether information is being shared between primary care and mental health.	JBH will report results to QMC by August 2008.

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Objective	Interventions	Performance Indicators	Measurement	Timeline
	Improvement Projects" Protocol: <ul style="list-style-type: none"> <li>• Step 1: Select the study topic(s)</li> <li>• Step 2: Define the study question(s)</li> <li>• Step 3: Select the study indicator(s)</li> </ul> JBH will compile, and analyze the results.			

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Objective	Interventions	Performance Indicators	Measurement	Timeline
<b>DOMAIN: PREVENTION, EDUCATION and OUTREACH (PEO)</b> Goal: Improve education and outreach efforts to our communities regarding prevention and treatment options; Standarize the regional reporting of PEO data.				
Objective	Interventions	Performance Indicators	Measurement	Timeline
1. Educate community partners and potential consumers about available OHP/JBH services.	a. JBH Newsletter- Distribution will be maintained. b. JBH Website- Improve the content and user friendliness of the website. c. Distribution of educational brochures on mental illness and chemical dependency in all six JBH counties.	a. Distribution of semi-annual newsletter b. JBH website redesign and deployment meets consumer and stakeholder needs for easy access to information. c. Ordering and distributing educational brochures on mental illness, chemical dependency, physical issues related to mental disfunction and stigma.	a. Semi-annual distribution of the newsletter. b. JBH will update and maintain the website on an ongoing basis and evalutate it's effectiveness annually. c. JBH will distribute mental health educational brochures to community mental health organizations, primary care provider offices, dentists, physical health plan sites in the 6 county region.	a.Oct, 2008 b.Sept, 2008 c.Nov., 2008
2. Develop and implement a plan for	a. Develop a formal plan for volunteer	a. Plan development	Plan approved by the JBH Operations	Task completion expected by July

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Objective	Interventions	Performance Indicators	Measurement	Timeline
recruitment and retention for consumer and family representatives on the JBH Board and Committees.	recruitment, orientation and retention. b. Complete an orientation process for all new volunteers in 2008. c. Provide ongoing mentorship.	b. Completion of orientation for all new volunteers in 2008. c. Provide at least two mentorship sessions with volunteers.	Manager. All new volunteers in 2008 will earn a Certificate of Participation for the completion of a JBH orientation.	31, 2008.

<b>DOMAIN: OUTCOMES</b> Goal: Develop outcome measures for selected treatment populations				
Objective	Interventions	Performance Indicators	Measurement	Timeline

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DOMAIN: OUTCOMES				
Goal: Develop outcome measures for selected treatment populations				
Objective	Interventions	Performance Indicators	Measurement	Timeline
1. Improve the functional level of adult consumers to deal more effectively with day-to-day living.	<p>Look into effective options to improve the functional level of adult consumers by</p> <ul style="list-style-type: none"> <li>a) The JBH Members Services Specialist hosting a focus group of consumers to provide feedback on the outcomes of the adult survey and list ways the functional level could be improved.</li> <li>b) Ideas from the focus group will be reported back to the QMC.</li> <li>c) Track changes in the GAF scores at enrollment and termination to determine if the consumer level of functioning improved, remained the same, or worsened.</li> <li>d) Disperse information to clinicians on the availability of web</li> </ul>	<ul style="list-style-type: none"> <li>a) Consumer's self report on annual survey</li> </ul> <p>Baseline:            2004 – 56.8%            2005 – 63.1%</p> <p>Adult Survey responses with ratings of 4 (Somewhat Agree) or 5 (Strongly Agree) have been used to calculate the baseline.</p> <ul style="list-style-type: none"> <li>b) Presentation at QMC</li> <li>c) Increase, decrease or no change in GAF score</li> </ul>	<ul style="list-style-type: none"> <li>a) JBH will provide and analyze annual survey materials to the programs. % of Annual surveys returned that indicate positive improvement in ability to deal more effectively with daily problems. (Questions 17 through 26 of the Adult Survey)</li> <li>b) Evidence of presentation will be documented in the QMC minutes.</li> <li>c) % of random sample that indicates functional improvement.</li> </ul>	Prior to December 1, 2008

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2. Capture all appropriate encounter data	a. Develop a JBH Code Book.  b. Provide training on the use and implementation of the Code Book.  c. Standardize the regional reporting of PEO data. JBH and Counties to gather all activities being performed by the Counties and other providers and standardize the PEO definitions across the Region.	a. Data Integrity: Review a 1% sample quarterly of the encounter coding of outpatient services by County to look at the accuracy of the bill from the consumer perspective. Review a 1% sample quarterly of fee-for-service coding in the ITS/ICTS services by County to look at the bill accuracy from the perspective of the consumer.  b. Quarterly gathering of information.	a. % of charts sampled that reflect accurate coding by the directives of the codebook.  b. JBH will report to QMC its findings & strategy for implementation	a. Final review by QMC prior to December 28, 2008.  b. August 30, 2008