

Guilford Center Local Business Plan

Quarterly Report

Second Quarter 2003-2004

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| <u>Submission Date:</u> | 2 nd Quarter 2003 – 2004 |

I. Planning

- The Guilford Center Community Partners continues to provide a forum for discussion and collaboration on implementation of mental health reform. For one example, as a follow-up from discussion at the October Partners meeting, a group met to discuss issues about Early Intervention Services. As a result, plans were made to move up the contracting date for these services in order to ensure better continuity of services.

The Partners group continues to expand. Recent additions include representatives from organizations providing resources for women's issues and other health service organizations. Through regular mailings and an established group e-mail address, Partners are informed about changes or important documents, such as the Child Mental Health Plan, Request for Proposal opportunities, and implementation updates. The Partners recently received information on changes in The Guilford Center Divestiture Plan and proposed changes in Service Definitions and Benefits Packages. A meeting is scheduled for February 13 to provide up-to-date information on these and other issues to assist with their program planning.

- The Guilford Center is participating in the State of Latino Health Coalition, a program sponsored by the NC Center for International Understanding at The University of North Carolina at Chapel Hill. This program provides the experiences and resources necessary for health and mental health professionals to integrate a better understanding of Latino cultures into healthcare delivery in North Carolina. One of the goals of this program is to develop a process for ongoing discussions that will lead to improvement of care and a better awareness of healthcare concerns with regards to the Latino community.
- Guilford Center staff continue active participation on numerous community wide planning groups, including Guilford Health Partnership, Guilford Access Partnership, the Latino Health Initiative, Guilford School Health Alliance, Guilford County Partnership for Children,

Guilford System of Care Community Collaborative, Guilford Mental Health and Aging Coalition, Guilford Multicultural Advisory Council, Human Relations Commission Committee of 100, and Guilford Community AIDS Partnership.

- The contract with UNC-Greensboro's Center for the Study of Social Issues to do research and analysis of Guilford's prevalence and penetration rates has been fully executed. CSSI has agreed to provide up to 270 hours of research and analysis to be completed by June 2004.
- Guilford Center staff participated in a Youth Risk Behavior Forum sponsored by the Guilford Health Partnership, Guilford County Schools, and the Community Health Foundation in December 2003. The forum presented the findings of a survey of 2000 County youth on health risk behaviors, including substance abuse and mental health issues. Findings from the survey will be used in planning services.

I.a. CFAC Involvement

- The Consumer and Family Advisory Committee met monthly (except December – regular meeting is not held as established in Standing Rules). Activities included:
 - Review of Psychosocial Program Request for Proposal Criteria developed by RFP committee (which included a CFAC member).
 - Review and approval of changes to Guilford Center Divestiture Plan.
 - Agreement on membership term rotations; assignment of terms for each member.
 - Completion and submission of CFAC/LME Relational Agreement.
 - Nomination of CFAC Chair to serve on State CFAC.
 - Presentation on CAP funding changes; nomination of three members to serve on committee to assess service needs and make recommendations for funding allocation.
 - Discussion of CFAC budget for FY 2004-2005; scheduling of presentation by Guilford Center Business Manager and further review of CFAC needs and priorities for January meeting.
 - Initial presentation of CFAC concerns/issues to Regional Consumer Advocate. Follow-up material provided on issues discussed included Ticket to Work Program and IDEAS. (Further discussion will continue in future meetings.)
 - Identification of priorities for CFAC training needs and submission to State.
 - Presentation on mental health issues in local jails, resulting in invitation of Guilford Jail Diversion Director to speak to group in January.
 - Presentation on WRAP, with plans made for committee training session Spring 2004.
- CFAC members continue to serve on the Quality Council, which plays a lead role in QI and monitoring activities, and the Guilford System of Care Community Collaborative. CFAC members and other consumers will be included on other QI and program planning activities that are currently under development. CFAC members served on CAP services evaluation committees.
- CFAC members continued to serve on committees to develop criteria and evaluate applications for contract providers (Substance Abuse, Psychosocial Program). One issue related to the RFP process that was identified this quarter was how to ensure there is no conflict of interest with specific CFAC members evaluating contract applications. As a result, a conflict of interest statement will be developed at the January meeting and added to the Standing Rules.

- CFAC members attended the November 2003 NC Council training on “Overview of Evidence Based Practices for Adult Mental Health with Severe Mental Illness and the Implementation Tool Kits” and a two-day training session in December 2003 on “Building Bridges – System of Care for Children’s Services.”

II. Governance, Management, and Administration

- Orientation was provided at the October and November Board meetings on the Guilford Center’s transition to an LME and implementation of the Local Business Plan.
- Full time Client Rights Coordinator was hired on 12/1/03. Full time Program Evaluator has been hired and will begin 2/2/04.
- Reduction-in-Force Plan is being implemented for employees affected by Year 1 Divestiture.

III. Qualified Provider Network Development

- Transferred two child case management positions to the Department of Social Services as a step toward divestiture of clinical case management for the child target populations.
- The Guilford Center sponsored a fair for all providers of child services as an opportunity for them to network with case managers from the Department of Social Services and the Guilford Center.
- Implementation of Year 1 of the Divestiture Plan continues as follows:

Substance Abuser Request for Proposal Update

1. The Guilford Center will contract with Paul Nagy from the Duke Addictions Program to serve as our Best Practices Consultant for Substance Abuse, effective July 1, 2004 through June 30, 2005.
2. Four RFP question and answer sessions have been held: 9/29/03, 10/22/03, 11/19/03, and 12/17/03. A fifth session is scheduled for 2/4/04. The purpose of these sessions is to answer questions about the proposal and collaborative contracting. Minutes of these meetings are taken and are mailed to all respondents. The proposal due date has been changed to March 18, 2004. This is in response to community request that respondents be given more time to develop their system of care partnerships and networks.
3. New Start up Dollars Available: Up to a total of \$120,000 has been made available for start up, cost reimbursement contracts. The funds do not need to be earned through units of service. The proposed term for the start up contracts is May 1, 2004. There is a space in the revised application where potential contractors may request and justify start up funding.
4. New Service Start Date: In order to give potential providers an opportunity to locate and build out appropriate space, there is a space in the revised application where potential contractors may request a service start date between July 1, 2004 and September 1, 2004.

Psychosocial Rehabilitation Program Request for Proposal Update

1. The RFP was advertised in the *Greensboro News and Record*, and *Que Pasa?* and *The Peacemaker*, local minority newspapers, on October 18, 2003. The representative from the Consumer and Family Advisory Committee, who participated in the development of the

RFP, presented the RFP to the CFAC on October 28, 2003, and the CFAC approved the psychosocial RFP process and evaluation criteria on that same date.

2. The RFP was mailed to interested parties on October 30, 2003. A question and answer session was conducted on November 17, 2003. Minutes of the question and answer session were mailed to all individuals and agencies on the mailing list.
3. The applications are due January 9, 2004. The highest ranking proposals will be invited for an interview on January 28, 2004.
4. Proposed program start date is March 15, 2004.

PACT Request for Proposal Update and Case Management Services for the Intensive Adult (SPMI) Population Request for Proposal Update

1. Interest letters were mailed to potential applicants on November 21, 2003.
2. Notice of the RFP was published in *Greensboro News & Record* on December 7, 2003.
3. RFP Applications were mailed to respondents on December 9, 2003.
4. Question and Answer Session was held on December 19, 2003, and minutes of the session were mailed to all respondents.
5. Applications are due January 15, 2004.
6. Interviews are scheduled for February 3, 2004.
7. Proposed program start date is April 1, 2004.

Additional Request for Proposals

In light of the Guilford Center's Divestiture Plan, many Guilford Center staff are seeking jobs elsewhere and the following RFPs have been conducted in order to contract out services to meet client needs: Early Intervention Specialized Therapies, CBS, and case management services and CAP case management.

IV. Service Management

- Transferred two positions to the Department of Social Services for the purpose of providing clinical case management to children in DSS custody who meet target population criteria. Recruitment has begun for the two positions.
- Added two positions to the Diversion Team. One position will focus on children and keeping difficult to manage children out of residential care. The other position will focus on individuals diagnosed as MR/MI.
- Formed a work group for the purpose of developing a job description for a Housing Resource Specialist. This position will serve as a liaison with community housing agencies and as a housing resource for internal and external providers related to housing needs.
- Completed transition of 64% of identified non-target population consumers served by the Guilford Center. A significant number of the remaining non-target population consumers are only receiving medication management from the Guilford Center. All viable alternatives are being explored for these consumers. The Guilford County area has very limited private psychiatric services available in the community.

- Contractors have been identified for the birth to three Early Intervention Services. Services will be transferred to these agencies by March 1, 2004.
- Made contact with all 292 consumers on the Community Alternatives Program waiting list for the purpose of identifying individual's needs related to CAP expansion dollars.
- Completed assessment on 265 consumers on CAP waiting list who expressed a continued interest in receiving CAP Services.
- Formed a Community Panel, including two parents of CAP recipients, to help review CAP waiting list and determine how to best distribute CAP expansion dollars.

V. Access to Care

- Access Call Center received over 5,000 calls during the 2nd quarter.
- Approximately 67% of the calls were requests for services and 23% of the calls were informational in nature.
- Revised authorization standards utilized by the Care Managers.
- Began the authorization of CBS services for Early Intervention Services consumers.
- Monitored high cost consumers through the Care Management system.
- Monitored services that have patterns of high utilization through the Care Management System.
- Fully integrated the Community Alternatives Program plan approval process into the Care Management system
- Changed the role of a vacant care manager position from a Child Mental Health focus to a Community Alternative Program focus.

VI. Service Monitoring and Oversight: Quality Management

- Continuing Implementation of 10A NCAC 27G.0600, Area Authority or County Program Monitoring of facilities and services:
 - Provided training on new Critical Incident reporting requirements to contract provider, Youth Focus, Inc.
 - Provided onsite monitoring to seven (7) providers.
 - Began monthly reporting to State DFS and DMH for onsite monitoring and for Critical Incidents.
 - Began to identify external providers in Guilford County who are impacted by new monitoring requirements so that we can begin developing relationships as a foundation for monitoring activities and for communication system to notify providers of Rules changes in the coming years.
 - Met with supervisors of Guilford Center Intake/Emergency Services and Child/Family Services to develop internal procedures for implementation of 10A NCAC 27G.506 Communication Procedures for Out of Home Community Placement.
 - Began redesign of client record audit system as part of the overall monitoring of contract providers.
- Hired and began orientation and preservice training for new Client Rights Coordinator.
- Developed information sheet on Client Rights and complaint process to be included in a client handbook being developed for new service enrollees.
- Finalized the design plan for a Contracts Database that will track critical incidents, accreditation, licensure, and insurance for all network providers.

- Organized a work group that is developing documentation monitoring procedures for network providers.

VII. Evaluation

- Recruited, interviewed and selected applicant for the Program Evaluator position to begin 2/2/04.
- The Guilford Center has contracted with UNC-Greensboro Center for the Study of Social Issues to do an analysis of our prevalence and penetration rates.

VIII. Financial Management and Accountability

- A severance package is being provided to all staff affected by Reduction-In-Force due to reorganization as an LME or divestiture.
- An analysis of support staff needs under the LME structure was conducted, and a Reduction-in-Force plan was developed based on this analysis.
- Cross-functional teams have been meeting regularly to manage the CAP virtual allocation and the bed day allocations by developing operating procedures and by creating and reviewing utilization reports.
- An analysis of the payment system for network providers was conducted and procedures implemented to assure compliance with the Prompt Pay provision.

IX. Information Systems and Data Management

- The Guilford Center and its vendor, the Creative Socio-Medics Corporation, have successfully completed the Beta testing of HIPAA compliant 837 and 835 transactions and are, in fact, the only entities to date to complete the development of electronic submission of voids and adjustments of claims.
- The Guilford Center has continued to evaluate several applications in preparation for the implementation of electronic transactions between contract providers and the LME.
- The Guilford Center has begun a review of electronic medical records systems and has installed for a trial implementation and evaluation the Clinical Workstation application.

X. Collaboration

- See “Planning” section regarding CFAC and Community Partners activities.
- As part of the Latino Health Coalition program, Guilford Center staff is developing a local action plan in partnership with the Guilford County Health Department, the Moses Cone Family Practice Center, and Guilford Adult and Child Health (a non-profit medical practice that serves Medicaid and indigent populations). The goal of the action plan is to improve services to the Latino Population in Guilford County through collaborative efforts.
- A notebook with cultural profiles of various immigrant and refugee populations in Guilford County was completed and distributed community wide through the Guilford System of Care Collaborative in December. The Guilford Center provided both financial and staff assistance in developing this booklet. Additional training on how this resource can best be used will be developed in collaboration with the System of Care Cultural Competency Committee.
- The Guilford Center Cultural Competency Committee is currently being reorganized to include representatives from contract providers, to ensure that their issues are addressed and to promote a mutual sharing of information.

- The LifeSpan Collaborative Forum continues to meet quarterly. This collaboration provides vocational services for individuals with developmental disabilities.
- Following the addition of a child mental health specialist to the Diversion Team, team members met with Guilford County School counselors and special education providers to discuss mental health reform and how that affects school referrals. Plans are under way to develop training for school personnel to help them deal more effectively with children with behavioral health problems, as well as make appropriate referrals to community resources.
- The Guilford Center participated in a series of planning meetings to develop a month-long schedule of public and professional educational programs for Mental Health Month in May 2004.
- Guilford Center staff developed educational materials and gave presentations for a number of community health fairs and other events. Some of these include the UNCG Children's Health Festival, a Latino Health Fair, the Women's Resource Center, UNCG social work classes, Guilford County Schools Department of Exceptional Children, Foster Grandparents, and depression screenings for Bennett College students.

Communication Bulletin #003

Management of State Plan Target and Non-Target Populations

- Referrals of non-target population consumers are 9% of requests for services made through Guilford Center's Call Center.
- Individuals who do not meet target population criteria are referred to a number of community providers for services.
- Of the 1017 non-target population consumers identified as being served by the Guilford Center, 64% have been transitioned to community services. An analysis of the remaining non-target population consumers will be conducted by mid-February 2004. The breakdown of these consumers is as follows: AMTNC = **332**, CMTNC = **209**, ADTNC = **1**, CDTNC = **1**.
- It appears that a significant number of the TNC population is only receiving medication services from the Guilford Center
- The Guilford Center is on track with the divestiture of services and the subsequent moving of consumers from Guilford Center services to community services.

Communication Bulletin #004

Housing

- Assigned staff member to work with the Greensboro and High Point Housing Coalitions.
- Assigned a work group to design a Housing Resource Specialist position. Identified a vacant, funded position to use for this role.
- Four Guilford Center staff attended Housing Summit 2004. Plans are in process for an article on housing issues related to mental illness in an upcoming Housing Coalition newsletter.
- Guilford Center staff made a presentation to the City of Greensboro Community Redevelopment Board during its annual development plan public comment session that described housing related needs for target populations.

Communication Bulletin #006

Community Hospitals

- The Guilford Center has a coordinated Access process, utilizing the Call Center and Crisis Emergency Services, which involves both High Point Regional and Moses Cone Health System.
- The Guilford Center has contracts with High Point Regional and Moses Cone Health Systems for inpatient beds.
- The Guilford Center has a contract with High Point Regional for Crisis Emergency functions after hours and on weekends.

Communication Bulletin #007

Best Practice – Adult Mental Health

- Guilford Center staff attended a two-day workshop on best practices in adult mental health that was sponsored by the NC Council of Community Programs: “Overview of Evidence Based Practices for Adults with Severe Mental Illness” and “The Implementation Tool Kits” in November 2003.
- An RFP for an evidence-based practice, the Program for Assertive Community Treatment (PACT), has been distributed to potential providers.
- Assigned the Manager of Adult Services as the Best Practice resource for the Guilford Center.
- Co-sponsored with AHEC, Motivational Enhancement Therapy training presented by the Duke Addictions Program and focused on adult mentally ill/substance-abusing consumers in December 2003 (will be offered again in February 2004).

Communication Bulletin #008

CFAC Relational Agreement

- The Guilford Center has had a fully functioning Consumer and Family Advisory Committee since June 2002.
- A Relational Agreement between the CFAC and the Guilford Center was approved in October 2003 and presented to the State in November 2003.
- The Guilford Center has met all other requirements of this bulletin with respect to the following directives:
 - Standing rules have been developed and adopted to define membership selection and terms, officers, subcommittees and other procedural issues.
 - A senior management level staff is assigned to committee as liaison and support.
 - Support has been provided to the CFAC as needed in the form of transportation, childcare, meals for evening meetings, education materials, and opportunities for training.
 - A review of the previously incurred costs of operation of the committee was prepared in December and will be presented to the CFAC in January. This will be used to develop a specific CFAC budget for FY 2004-2005, with priorities for spending to be determined by the Committee.

Communication Bulletin #011

Child Mental Health Plan

- Continue to operate Child Services based on System of Care model.
- Added a child specialist position to the Diversion team. This position will work to divert children from restrictive placements through the utilization of community supports and other community resources.

- Continue to provide child specific services in Crisis Emergency Services in an attempt to resolve crisis situations and support families.
- Offered “Building Systems of Care” training in December 2003.

Communication Bulletin #013

Systems Management

- The Guilford Center has a discrete Service Management Unit (called Care Management) that is responsible for authorization, utilization management and care coordination functions. Ten FTEs are assigned to this function.
- The Guilford Center has discrete Systems Management functions that include network management, customer services, quality improvement, provider relations and community coordination and collaboration through its Provider Relations Division.
- The Guilford Center supports contracting for case management functions.

Guilford Center Director

Date