

Guilford Center Local Business Plan

Quarterly Report

Third Quarter 2003-2004

Area Authority: Guilford

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I. Planning

- The Director and Deputy Director met with the Board of the Moses Cone-Wesley Long Community Health Foundation in January to discuss ways Foundation funding might support system reform in our community.
- The Guilford Center participated in “Achieving Cultural Competency in the State Mental Health, Developmental Disabilities and Substance Abuse Services Reform,” a forum sponsored by the NC Department of Health and Human Services. This forum brought together experts in the area of cultural competency to develop practical guidance for the Division, the LMEs and their contracted providers. The guidance will assist the public system to move forward in its reform by ensuring that the reform includes the culturally and linguistically competent management and delivery of services and supports.
- The Guilford Center Community Partners organization met in February for an update on implementation of the Local Business Plan and on new State requirements. Partners received information about upcoming changes in the Guilford Center Divestiture Plan and on proposed State changes to Service Standards, both of which may affect planning and service delivery for their programs. They received updates on current RFP and contracting processes, an overview of the Guilford Center budget process, and efforts planned to streamline provider communications. The next Partners meeting, which will be held in July, will provide more in-depth training on the Service Standards, as well as a year-end update on our first year of implementation.
- Guilford Center staff continued active participation on numerous community wide planning groups, including Guilford Health Partnership, Guilford Access Partnership, Guilford

Substance Abuse Coalition, 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, and the Guilford Community AIDS Partnership.

- The Guilford Health Partnership, which represents more than 50 community organizations, is undergoing an extensive strategic planning effort to determine future goals. A Guilford Center manager serves on the steering committee, representing mental health issues for that initiative.
- The Guilford Substance Abuse Coalition, initially formed to identify community substance abuse needs, is now forming as a nonprofit 501(c)(3) organization. Several Guilford Center staff have served on this coalition since its original formation, and a Guilford Center staff member will serve on the organization's governing board. A focus of the group is to identify funding and develop services to meet needs not met by public services.

I.a. CFAC Involvement

The Consumer and Family Advisory Committee met monthly (except January meeting cancelled because of severe weather conditions). Activities included:

- Presentation by Guilford Center Budget Manager on process required for submitting annual budget to the County in preparation for final vote by Commissioners in June 2004. The Guilford Center budget proposal was reviewed and approved by the CFAC.
- Presentation of proposed CFAC budget, comparing 2003-04 costs and 2004-05 projected expenses. This year the County Budget Office agreed to establish a separate CFAC cost code, which will allow the group to track expenses more effectively.
- Development of CFAC work plan for 2004-05, to identify specific goals and projects and projected expenses for these. Discussion also addressed how funds will be allocated for meeting expenses, dependent care, transportation, meals, training, etc. This must be completed by June 2004.
- Planning for a series of membership training sessions for 2004-05, with the focus on overviews of Best Practices, information about disability groups we serve, and training on how CFAC members can be effectively involved in Quality Monitoring of services.
- Discussion of funds built into the CFAC budget for 2004-05 for a Consumer Section on the Guilford Center web site. CFAC members will be involved in developing content for this section, which will provide education for both consumers and the public.
- Identification of topics for upcoming CFAC meetings:
 1. Explanation of new Service Standards
 2. Role and functions of Client Rights Committee and Consumer Advocate
 3. Guilford Center's new process for Quality Monitoring of Contract Providers and Accreditation Review Process.
 4. Presentation on Guilford County Jail Services.
- Worked to develop a Conflict of Interest statement to add to the Standing Rules to ensure appropriate CFAC representation on contract evaluation and selection committees.

- Established a Nominating Committee to develop a slate of officers for 2004-05; made plans to review officers' roles as defined in Standing Rules and voted to add Finance Coordinator to monitor CFAC budget.
- Provided feedback to Division Consumer Representative about their unsuccessful efforts with the Ticket to Work Program; decided they may have someone come from Vocational Rehabilitation Services or the Ticket to Work program to learn more.
- Requested development of a CFAC official badge, to identify members when they function in roles presenting CFAC such as visitations for program monitoring.
- Submitted a letter of support for Federal House Bill 2387, a Bill to Reduce Criminalization of People with Mental Illness. Discussed desire to be more involved in advocacy issues in the future.
- Received update from Division Consumer Representative on resignation of Dr. Visingardi as Division Director and appointment of Michael Moseley as new Director.
- CFAC members continue to serve on the Quality Council, which oversees 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 also served on CAP services evaluation committees.
- CFAC members continued to serve on committees to develop criteria and evaluate applications for contract providers. These include the ongoing Substance Abuse services process, the Psychosocial Program, and Peer Mentoring RFP process.
- The group discussed the need to identify additional consumers who would be willing to serve and provide input on RFP evaluation committees and other Guilford Center initiatives. The committee asked CFAC liaison to prepare letter to go to consumers who previously expressed interest in CFAC membership, to invite them to be "CFAC Associates" who would participate in such activities to ensure ongoing consumer input.
- Three CFAC members attended the CFAC Leadership Institute in Durham in March. Three CFAC members registered for the 2004 Best Practices Institute scheduled for April.
- An article about CFAC member participation in Guilford Center planning and evaluation activities was submitted to local NAMI newsletter. This will also be featured on the Guilford Center web site to recognize members and encourage participation by other consumers.

I. Governance, Management, and Administration

- The Guilford Center Board approved a revised Divestiture Plan on January 13, 2004. The plan will be revised again in the fall to address new State Service Standards.
- Work has begun on a revised organizational structure to better support LME functions to be implemented July 1, 2004.
- Reduction-in-Force Plan continues to be implemented for all employees affected by Divestiture.

I. Qualified Provider Network Development

- On 2/17/04, the Guilford Center sponsored a Provider Fair for directly enrolled residential and periodic Medicaid providers. Thirty-five providers participated and over 60 staff from the Guilford Center and Department of Social Services attended.
- On 3/9/04, new CAP consumers and their caregivers were invited to a CAP Case Management Provider Fair, in order to promote client choice.
- The Guilford Center has invited CAP consumers and their caregivers to one of two sessions on “Making an Informed Decision When Selecting a CAP Provider.” These sessions are scheduled for early April.
- An RFP for a peer mentoring program was distributed to potential providers.
- Implementation of the Divestiture Plan continues as follows:

Substance Abuse RFP Update

Four proposals representing thirteen agencies were submitted by the Substance Abuse RFP deadline of April 5, 2004. The evaluation committee met on April 7, 2004 to receive copies of the proposals, review and sign conflict of interest affidavits, review evaluation criteria and rating procedure. The committee will meet May 5, 2004 to rank proposals. Interviews are scheduled for May 21, 2004.

Psychosocial Rehabilitation Program RFP Update

A provider was selected to assume operation of the Greensboro Psychosocial Rehabilitation Program, with a start date of May 15, 2004.

PACT RFP Update

The evaluation committee rated proposals and conducted interviews with two respondents to the PACT RFP. One provider was selected and program start date is August 1, 2004. In the interim, the new provider has met with Guilford Center PACT staff to discuss employment options with the new agency. In addition, a team has been established to address and ease the transition of the program to the new provider.

I. 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. Positions have been filled and cases are being transferred to the DSS workers.
- Added a Housing Resource Specialist position to the Diversion Team. Recruitment has begun for position.
- Completed transition of 68% 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.

- Early Intervention Services transferred to contract agencies as of March 1, 2004. Transition was without family complaints.
- Identified 60 consumers on the CAP waiting list to be funded with expansion dollars. Target number from the State was 52 consumers.

I. Access to Care

- Access Call Center received over 4,449 calls during the 3rd quarter.
- Approximately 52% of the calls were request for services and 48% of the calls were informational in nature.
- Continue to revise authorization standards utilized by the Care Managers.
- Continue to monitor high cost consumers through the Care Management system.
- Continue to monitor services that have patterns of high utilization through the Care Management System.
- Began process of reviewing MR/MI consumer cost.
- Recruiting an additional CAP care manager for plan approvals.
- Negotiating with the local 211 information system for our call center to cover their after hours calls.

VI. Service Monitoring and Oversight: Quality Management

- Continued implementation of State Rules for the monitoring of facilities and services:
- Provided training on the various components of the Guilford Center monitoring system to the Board and Human Rights Committee.
- Began planning for an electronic database of Guilford County providers to use in monitoring, communicating and assuring that providers have access to information and materials related to State and Guilford Center requirements.
- Provided ongoing technical assistance to providers regarding changes in Critical Incident reporting.
- Continued work on plans for audits of client records maintained by contract providers.
- Updated information on Critical Incident Reporting and compliance with Client Rights Statutes and Rules in next year's draft contract for providers of services funded by Medicaid.
- Participated in several N.C. Council and State workgroups revising the temporary monitoring rules for SB163.
- Worked with Contracts Manager on contract with DSS to provide TANF Work First services including monthly reporting required by our State Performance Agreement.
- Worked with Family Services of the Piedmont, Inc. to help them develop their own Human

Rights Committee.

- Contractor Orientations have been planned and scheduled for April 27 and April 29, 2004. The purpose of these sessions is to review contract revisions for next fiscal year with providers.
- The Quality Improvement Contracts Committee (QICC) continues to meet monthly to address and monitor concerns about providers.

VII. Evaluation

- Hired Program Evaluator who began reviewing our present data collection to compare with data needed for LME functions in order to develop an efficient system for providing appropriate data for program planning and utilization management.
- Began researching information nationwide on utilization rates and management of provider networks.
- A cross-functional task force developed a hospitalization data report to analyze and monitor the utilization of State and local bed days.

I. 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 adjustments were made in the FY 04-05 budget based on the Reduction-in-Force plan that was developed based on this analysis.
- Cross-functional teams have been meeting regularly and reviewing utilization and fiscal reports to manage the CAP virtual allocation and the bed day allocations.
- A budget for the LME functions was developed based on the LME cost model created by a consultant for the Division.

I. Information Systems and Data Management

- The Guilford Center has continued to evaluate several applications in preparation for the implementation of electronic transactions between contract providers and the LME and has chosen a vendor, the Creative Socio-Medics Corporation, to implement a comprehensive LME solution.
- The Guilford Center has continued a review of electronic medical records systems and has installed for a trial implementation and evaluation the Creative Socio-Medics Corporation Clinical Workstation application.

I. Collaboration

- A major initiative was conducted this quarter to develop a systematic way to identify and monitor staff participation in community collaborative activities, to meet requirements of

both the State Plan and local Strategic Plan. An agency-wide survey was conducted to identify coalition memberships and other community activities of all staff. The purposes of these activities are being reviewed to determine whether they meet, or can be used to meet, strategic goals and State requirements. The outcome will be to ensure that the most appropriate staff persons are representing the Guilford Center, that the coalitions are meeting the appropriate needs and that activities are reported back on a regular basis. This will be used as the basis for future reporting on collaborative activities.

- The LifeSpan Collaborative Forum continues to meet quarterly. This collaboration provides vocational services for individuals with developmental disabilities. Membership in the Collaborative Forum is being expanded to include residential providers who serve individuals with development disabilities.
- Many collaborative activities were listed under the Planning Section I. of this report, including the Community Partners activities and numerous coalitions that staff participate in throughout the community. These are ongoing groups that involve Guilford Center staff, often in leadership roles. Some other activities include the following:

Immigrant/Refugee Health Issues

The Guilford Center Cultural Competency Committee (CCC) is planning a joint effort with the Center for New North Carolinians and University of North Carolina at Greensboro to offer training on how to be a professional interpreter. Guilford Center bilingual staff who serve as interpreters will be required to receive this training. We will also offer available spaces in the training to our Community Partner organizations. In addition, the CCC had presentations by representatives from Accion de Centro Latino, the Multicultural Advisory Committee and the Center for New North Carolinians to discuss community resources for our immigrant and refugee consumers.

Housing Coalition Activities

The Guilford Center participated in a Greensboro Housing Coalition community awareness media initiative in February, with inclusion of an article on housing challenges and needs for the mentally ill.

Collaboration with advocacy agencies and other community groups for public education

- Guilford Center staff gave presentations and distributed educational materials for community health fairs and other events, including the ARC Disability Fair, the Guilford Technical Community College Health Fair and a health promotion event for children and families at an elementary school.
- The Guilford Center, along with ARCs of Greensboro and High Point, was presented with a proclamation recognizing Mental Disabilities Month from the County Board of Commissioners. Guilford staff also continued to work with community representatives

to plan Mental Health Month activities. Some activities already scheduled include an Anxiety Disorders Screening Day (in collaboration with a local hospital), training programs for childcare professionals, and a day-long program for clergy and others working with the faith community on “Spirituality and Mental Health: Responding to the Needs.”

Communication Bulletin #003

Management of State Plan Target and Non-Target Populations

- Referrals of non-target population consumers are 11% 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, 68% have been transitioned to community services. The breakdown of these consumers is as follows: AMTNC = **332**, CMTNC = **183**, ADTNC = **1**, CDTNC = **0**.
- 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

- Four Guilford Center staff attended "Housing Summit 2004: Completing the Picture of Safe Affordable Housing" sponsored by the Greensboro Housing Coalition on January 15, 2004.
- The Guilford Center provided an article for the News and Record on housing needs for the mentally ill as part of a community awareness initiative on February 22, 2004.
- Assigned a staff member to work with the Greensboro and High Point Housing Coalitions.
- Identified a funded position to use as a Housing Resource Specialist. Recruitment for the position is in process.

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 Systems.
- 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 for the High Point community.

Communication Bulletin #007

Best Practice – Adult Mental Health

- Completed RFP process for PACT services. New provider has been selected with a start date of August 1, 2004.
- RFP for a peer mentoring program was distributed to potential providers.
- Assigned Adult Services Manager to be Adult MI Best Practice resource for the Guilford Center.
- Purchased the 6 “Best Practice Tool Kits” and have begun process of identifying time line for implementation.

Communication Bulletin #011

Child Mental Health Plan

- The Guilford Center and the Guilford County Community Collaborative provided “Building Systems of Care” training on March 2 and 9, 2004.
- Continue to operate Child Services based on System of Care model.
- Continue to provide child specific services in Crisis Emergency Services in an attempt to resolve crisis situation and support families.

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.
- The Guilford Center supports contracting for case management functions.

Billy M. Pierce

Guilford Center Director

April 23, 2004

Date